



Neighborhood Services Division
Housing Section

November 9, 2009

To: Interested Community Housing Development Organizations (CHDO's)

Re: 16th Year HOME CHDO – Program Year 2010-2011

Attached is the application for agencies seeking funds for the 16th Year HOME -Community Housing Development Organization (CHDO).

The HOME program year begins on June 1, 2010 and ends on May 31, 2011. HOME eligible activities must be located within the Lakeland city limits and must meet all applicable U.S. Department of Housing and Urban Development (HUD) grant requirements. The beneficiaries of the service must be very low to low income persons.

To confirm your eligibility for the CHDO funds, please submit the attached list of documentation along with your application and CHDO checklist. A hard copy of the application may be obtained by contacting Annie Gibson at 863/834-3360. Upon the submission of all documentation, City staff shall certify eligibility as a CHDO developer and determine if your agency will receive funding for the program year of 2010-2011.

The complete package should be returned to Annie Gibson, Housing Programs Coordinator, at: City of Lakeland, Community Development Department, Neighborhood Services Division, Housing Section, 1104 Martin L. King, Jr. Avenue, Lakeland, Florida, 33805. **Note: The deadline for submission is Friday, December 18, 2009 at 4:00 p.m.**

If you have any questions, please contact Annie Gibson at 834-3360.

Sincerely,

R. Brian Rewis
Neighborhood Services Manager

Enclosed: checklist, calendar and application

z:\Housing\HOME\CHDO 2010-15\ApplicationCoverletter11.09.2009.doc

2010 - 2011 CHDO Annual Certification and Checklist

Please provide the following information:

1. A completed CHDO checklist with copies of all supporting documentation, a form is enclosed.
2. A list of all board members (name, addresses, and phone numbers.)
3. Designation of how the board complies with the requirements that a minimum of one-third of the board must consist of representatives of the community being served by the CHDO and a maximum of one-third of the board may consist of representatives of the public sector;
4. Resumes of the board members;
5. List of corporate officers (names, addresses, and phone numbers.)
6. Resume of all the officers.
7. List of consortium banks (names, contact person, addresses and phone numbers); and
8. A transmittal letter forwarding the above documentation to my office signed by an appropriate officer of your corporation verifying that your organization continues to qualify as a CHDO and the documentation provided is certified to be true and correct.

CITY OF LAKELAND
CDBG/HOME CALENDAR 36th YEAR
June 1, 2010 – May 31, 2011

- | | |
|--------------------------|---|
| Monday, January 25, 2010 | Public meeting to obtain citizen input on the Five Year Consolidated Plan and One Year Action Plan and Projected Use of Funds (“Action Plan”). Larry R. Jackson Branch Library at 7:00 p.m. |
| Monday, February 1, 2010 | Regular meeting of the Citizens Advisory Committee. Obtain input from CAC members and the general public on the Five Year Consolidated Plan and One Year Action Plan. City Hall, 3rd Floor, City Commission Conference Room, at 6:00 p.m. |
| Monday, March 1, 2010 | Public hearing before the City Commission on the Five Year Consolidated Plan and One Action Plan. City Hall, Commission Chambers, at time of regular City Commission meeting. |
| Monday, April 5, 2010 | Public hearing before the City Commission to finalize the Consolidated Plan and Action Plan. City Hall, Commission Chambers, at time of regular City Commission meeting. |
| Friday, April 15, 2010 | 2010-2015 Five Year Consolidated Plan and 36 th Year CDBG and 16 th HOME Programs One Year Action Plan due at HUD area office in Jacksonville. |

**HOME CHDO 2010-2011
CHDO CHECKLIST**

The information contained in this checklist refers to the definition of Community Housing Development Organization (CHDO) in Subpart A, Section 92.2 of the HOME Final Rule. This checklist should be used as a tool to educate participating jurisdictions about the documents they must receive from a nonprofit before it may be certified as a CHDO.

I. LEGAL STATUS

A. The nonprofit organization is organized under State or local laws, as evidenced by:

- A Charter, OR**
 Articles of Incorporation.

B. No part of its net earnings inure to the benefit of any member, founder, contributor, or individual, as evidenced by:

- A Charter, OR**
 Articles of Incorporation.

C. Has a tax exemption ruling from the Internal Revenue Service (IRS) under Section 501(c) of the Internal Revenue Code of 1986, as evidenced by:

- A 501(c) Certificate from the IRS.**

D. Has among its purposes the provision of decent housing that is affordable to low-and moderate-income people, as evidenced by a statement in the organization's:

- Charter,**
 Articles of Incorporation,
 By-laws, OR
 Resolutions.
 A HUD approved audit summary

II. CAPACITY

A. Conforms to the financial accountability standards of Attachment F of OMB Circular A-110, "Standards for Financial Management Systems," as evidenced by:

- A notarized statement by the president or chief financial officer of the organization;**

- A certification from a Certified Public Accountant; OR**

- A HUD approved audit summary.**

B. Has a demonstrated capacity for carrying out activities assisted with HOME funds, as evidenced by:

_____ **Resumes and/ or statements that describe the experience of key staff members who have successfully completed projects similar to those to be assisted with HOME funds, OR**

_____ **Contract(s) with consulting firms or individuals who have housing experience similar to projects to be assisted with HOME funds to train appropriate key staff of the organization.**

C. Has a history of serving the community where housing to be assisted with HOME funds will be used, as evidenced by:

_____ **Statement that documents at least one year of experience in serving the community, OR**

_____ **For newly created organizations formed by local churches, service, or community organizations, a statement that documents that its parent organization has at least one year of experience in serving the community.**

NOTE: The CHDO or its parent organization must be able to show one year of serving the community from the date the participating jurisdiction provides HOME funds to the organization. In the statement, the organization must describe its history (or its parent organization's history) of serving the community by describing activities which it provided (or its parent organization provided), such as developing new housing, rehabilitating existing stock, and managing housing stock, or delivering non-housing services that have had lasting benefits for the community, such as counseling, food relief, or childcare facilities. The statement must be signed by the president of the organization or by a HUD-approved representative.

III. ORGANIZATIONAL STRUCTURE

A. Maintains at least one-third of its governing board's membership for residents of low-income neighborhoods, other low-income community residents, or elected representatives of low-income neighborhood organizations, as evidenced by the organization's:

_____ **By-Laws,**
_____ **Charter, OR**
_____ **Articles of Incorporation.**

Under the HOME Program, for urban areas, the term "community" is defined as one or several neighborhoods, a city, county, or metropolitan area. For rural areas, "community" is defined as one or several neighborhoods, a town, village, county, or multi-county area (but not the whole state).

B. Provides a formal process for low-income, program beneficiaries to advise the organization in all of its decisions regarding the design, siting, development, and management of all HOME-assisted affordable housing projects, as evidenced by:

- _____ **The organization's By-laws,**
- _____ **Resolutions, OR**
- _____ **A written statement of operating procedures approved by the governing body.**

C. A CHDO may be chartered by a State or local government, however, the State or local government may not appoint: (1) more than one-third of the membership of the organization's governing body; (2) the board members appointed by the State or local government may not, in turn, appoint the remaining two-thirds of the board members; and (3) no more than one-third of the governing board members are public officials, as evidenced by the organization's:

- _____ **By-Laws,**
- _____ **Charter, OR**
- _____ **Articles of Incorporation.**

D. If the CHDO is sponsored or created by a for-profit entity, the for-profit entity may not appoint more than one-third of the membership of the CHDO's governing body and the board members appointed by the for-profit entity may not, in turn, appoint the remaining two-thirds of the board members, as evidenced by the CHDO's:

- _____ **By-Laws,**
- _____ **Charter, OR**
- _____ **Articles of Incorporation.**

IV. RELATIONSHIP WITH FOR-PROFIT ENTITIES

A. CHDO is not controlled, nor receives directions from individuals or entities seeking profit from the organization, as evidenced by:

- _____ **The organization's By-laws, OR**
- _____ **A Memorandum of Understanding (MOU).**

B. A CHDO may be sponsored or created by a for-profit entity, however:

(1) The for-profit entity's primary purpose does not include the development or management of housing, as evidenced by:

- _____ **The for-profit organization's By-laws**
- AND;**

(2) The CHDO is free to contract for goods and services from vendor(s) of its own choosing, as evidenced by the CHDO's:

EXCERPTS FROM AN IRS LETTER

A sample of typical requests from the IRS to organizations seeking 501(c)(3) status is provided below. Although all situations are unique, this sample can help an organization more effectively plan and prepare for the process. For additional information, contact your local IRS office.

(1) Submit a detailed description of all the activities of the organization --past, present, and planned --showing how you operate or will operate to achieve your purposes. Each activity should be separately described and the description should include as a minimum, the following:

- (a) Its purpose and nature.
- (b) Frequency and duration.
- (c) How, when, where, and by whom it was, is, or will be conducted.
- (d) The requirements a person or organization must meet in order to participate in or receive benefit from the activity.
- (e) The amounts of any charges or fees and the basis for them.
- (f) What the activity has accomplished or will accomplish.
- (g) State what percentage of the total time and effort of the organization is devoted to carrying out each activity.

(2) If the organization pays, has paid, or will pay compensation to or on behalf of persons who are officers, directors, or trustees or members of their families, or any other compensation, submit the following:

- (a) The name and title or relationship of such person to whom payment has been, is being, or will be paid.
- (b) The nature and/ or purpose of payments (i. e., salary, wage, housing allotment, car allowance, etc.) and the amount of payment made or to be made on behalf of such person. If payments are to be made in more than one category, state each separately.
- (c) A detailed description of the positions filled by and the duties and services for which compensation will be paid.
- (d) The amount of time each person devotes to the position (if prospective, how the payment will be affected by an upward or downward adjustment in time based on need of the organization).
- (e) The qualifications (training, background, experience) of such person for the position, duties, and services.
- (f) If any such person is employed outside the organization, the hours per week and weeks per year devoted to such outside employment.

(g) Who determines compensation to be paid? What criteria is used to determine compensation?

(h) How do you or will you insure that all compensation paid is "reasonable" and in return for service rendered?

(i) Does the organization pay or plan to pay any of the personal living expenses of employees, directors, officers, founders, members, etc.? If so, explain in detail. Be specific.

(3) Submit copies of any brochures, pamphlets, newsletters, advertisements, or other literature regarding your organization.

(4) Providing housing for individuals who earn a certain percentage of an area's median income is not sufficient to establish that you are operated exclusively for charitable purposes, a prerequisite for exemption under Section 501(c)(3). Basing a determination of exempt status on a strict percentage test is generally not sufficient to confer tax-exempt status under Section 501(c)(3).

If it appears that the organization may be engaged in assisting the poor and distressed, the organization must be able to show how it qualifies under 501(c)(3).

If you claim to be eliminating prejudice and discrimination, submit descriptions of the existing prejudicial and discriminatory conditions that exist in the areas you are targeting for assistance and an explanation of how your activities will seek to alleviate such conditions. Be specific in your descriptions. Describe any educational or other programs you will provide to eliminate prejudice and/ or discrimination.

(5) If you claim to combat community deterioration, submit descriptions of the areas you will be targeting for relief. Provide evidence of the deterioration of the community. State whether any of the areas you will be targeting for assistance have been recognized as depressed by a governmental agency.

(a) Submit a copy of such determination as to the condition of the area served.

(b) Submit a description from the authorizing agency as to how that agency defines "blight."

(6) State whether any of your housing recipients will earn more than 80% of the area's median income.

(7) Why do you include moderate income families in your housing activities? How will this serve a charitable purpose? Discuss in detail.

(8) Have you been issued an employer identification number? If so, please let us know the number that has been assigned to you.

(9) Please submit any additional information you feel will help us better understand your organization.

CITY OF LAKELAND
16th Year HOME CHDO Application
June 1, 2010 – May 31, 2011

I. APPLICANT INFORMATION
AGENCIES MAY SUBMIT ONLY ONE APPLICATION PER FUNDING CYCLE

AGENCY NAME: _____

STREET ADDRESS: _____

MAILING ADDRESS: _____

TELEPHONE: _____

DIRECTOR: _____

PRESIDENT OR
CHAIRPERSON: _____

TYPE OF AGENCY:

Private/Public, Non-Profit

Public Agency

Other: _____

Mo./Yr. of Incorporation/Creation: _____

CLASSIFICATIONS OF AGENCY:

Community Housing Development Organization (CHDO)

CERTIFICATION BY AUTHORIZED AGENCY OFFICIALS:

I have examined the information included in this application for funding and hereby certify that, to the best of my knowledge and belief, the contents are true, accurate and complete. The agency's Board of Directors approved this application for submission.

Executive Director Date: _____

Board President/Chairperson Date: _____

II. APPLICATION CHECKLIST

The following documents must be included with this application:

- [] Agency financial statement for previous two year period.
- [] A copy of current Agency Service Statistics report.
- [] A copy of the IRS 501(C)3 non-profit approval letter.
- [] Submit one (1) **typed** original with two (2) copies.
- [] Certificate of Incorporation.
- [] Articles of Incorporation.

III. CERTIFICATION OF AVAILABILITY OF DOCUMENTS

The undersigned hereby certifies that the following documents are on file in the administrative offices of the Applicant and will be available for inspection by the City of Lakeland and its authorized representatives at any time during the term of this project. The City of Lakeland reserves the right to audit the financial records applicable to the project and/or agency.

1. Certificate of Incorporation
2. Evidence of 501 (c) (3) taxable status or approval letter
3. Articles of Incorporation and Bylaws
4. List of Board of Directors and Officers of the Agency
5. Personnel Policies and Procedures Manual
6. Organization/Staffing Plan and Position Descriptions
7. Pay Plan for all Positions
8. Financial Procedural Manual
9. Current Health & Safety Inspection Certificates, if applicable
10. Interagency Agreements Pertinent to this Project, if applicable
11. Financial Records of Agency and/or Project.
12. Audit Financial Report if federal funding is \$500,000 or more
13. Board Minutes and Attendance Records.
14. A copy of appropriate Florida Department of Revenue Consumer's Certificate of Exception.
15. Homeless Management Information System (HMIS) Reports for funding.
HMIS participation is mandatory for homeless service providers.

IV. PROJECT INFORMATION

A. Purpose of Agency: (Mission Statement)

B. Amount of funds requested: \$ _____

C. Type of Program: _____ Existing _____ Proposed or New

D. Describe the project/program for which funding is being requested and indicate how funds will be used. Include estimates of the number of persons or households who will benefit from the project. Discuss program objectives (include program activity and measurable objectives to be met if funding is received).

NOTE: Monthly status reports and grant invoices/billings are mandatory. An evaluation report on the program/project must be provided to the City of Lakeland at the end of the fiscal year. Failure to comply may result in loss of funding and/or jeopardize possible future funding.

****Please do not write on reverse of pages, insert additional pages as needed.***

E. Describe the need for the project/program and how this project will complement those provided by the City of Lakeland or other local agencies.

F. Indicate target areas where the proposed project will be undertaken and how the project will primarily benefit low and moderate income persons. (Please provide an estimate of the number of low and moderate income persons who will benefit and census tract numbers.)

G. Indicate the sources and status of funds requested from other agencies for this project. Include “in-kind” services. Attach copies of any letters of commitment.

H. Describe the impact of the requested funding on the program, such as a change in level of service, character of service, or the program itself.

I. Is the organization currently receiving cash or in-kind services from the City of Lakeland? If so, describe the services and provide the actual or estimated value of the cash/service.

V. PROJECT BUDGET

**Agencies requesting monies for specific projects should complete this section.
FY 2010-2011 Proposed Project/Program Budget:**

REVENUES	CURRENT FISCAL YEAR (FY 09- 10)	PROPOSED FISCAL YEAR (FY 10- 11)
1. Donations	_____	_____
2. Allocations from United Way	_____	_____
3. Funds requested from City of Lakeland	_____	_____
4. Funds from other Government Agencies	_____	_____
5. Membership Dues - Individuals	_____	_____
6. Program Fees and Incidental Revenue	_____	_____
7. Sales to Public (Fund Raising Events)	_____	_____
8. Investment Income	_____	_____
9. Miscellaneous	_____	_____
10. Total Revenue	_____	_____

EXPENSES		
1. Salaries	_____	_____
2. Employee Benefits	_____	_____
3. Payroll Taxes	_____	_____
4. Professional Fees	_____	_____
5. Supplies	_____	_____
6. Telephone	_____	_____
7. Postage & Shipping	_____	_____
8. Building Rental	_____	_____
9. Equipment Rental & Maintenance	_____	_____
10. Printing and Publications	_____	_____
11. Travel: Local and Other	_____	_____
12. Other Program Costs	_____	_____
13. Miscellaneous	_____	_____
14. Total Expenditures	_____	_____

ADDITIONAL DISCUSSION (IF NECESSARY):

VI. AGENCY SERVICE STATISTICS

Estimate the following statistics for the current year 2009-2010 and the previous year 2008-2009. If the agency's service area is larger than the City, provide the information only for the Lakeland service area and by specific areas within the City. List all sources for the data.

1. Number of Persons/Families Served by Location (Please specify)

LOCATION	FY 10-11 Est.	2009-2010	2008-2009
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. Number of Persons/Families Served by Program/Service (Please specify)

SERVICE/ PROGRAM	FY 10-11 Est.	2009-2010	2008-2009
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

z:\HOME\16thCHDOApplication.doc