

**HOWARD COUNTY DEPARTMENT OF HOUSING AND COMMUNITY
DEVELOPMENT**

**Requests for Proposals for FY2022 Application for
Funding for MIHU Fee-in-Lieu Program Funds**

Acquisition/Rehabilitation/Program Administration/Public Services

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MIHU Fee- in- Lieu Program Description

Pursuant to Sec.13.402C (e), Alternatives to moderate income housing unit obligation in certain zones; of the Howard County Code, MIHU Fee-in-lieu is generated when the developer pays the Department for each unit in the development or portion of the development that is not providing moderate income housing units (MIHUs) onsite.

Pursuant to Section 13.402(e)(7) MIHU fee-in-lieu funds can be used for the following activities:

1. Settlement Down Payment Loan Program;
2. The Rehabilitation Loan Program;
3. Grants to other County entities for rental housing subsidies, the purchase and rehabilitation of existing properties for sale or rent low or moderate-income households, emergency eviction support or *other housing opportunities* for low and moderate income households; and
4. In accordance with Sec. 13.402 (e)(9), in census tract block group where the poverty level is ten percent or greater according to the most recent census, the fee-in-lieu collected by the Department shall be used only for the Settlement Down Payment Loan Program and the Rehabilitation Loan Program.

Local goals and objectives as identified in the *updated* 2020-2024 Five-Year Consolidated Plan and FFY 2020 Annual Action Plan will be given priority; however, needs that can be directed towards both housing and non-housing community development activities which address one or more of the following objectives will be given consideration:

1. Benefit low- and moderate-income persons**;
2. Aid in the prevention or elimination of slums or blight;

3. Carry out activities that meet other community development needs having a particular urgency because existing conditions pose a serious and immediate threat to the health or welfare of the community and where other financial resources are not available to meet such needs.

****Note: Income classifications will be based on Howard County’s area median income. See the chart below effective January 4, 2021.**

Howard County Area Median Income Limits	
Household Size	Amount
One Person	65,929
Two Persons	75,347
Three Persons	84,766
Four Persons	94,184
Five Persons	101,719
Six Persons	109,253
Seven Persons	116,788
8+ Persons	124,323

Eligible Activities for MIHU Fee-in-Lieu Program Funds

For Howard County’s FY2022, MIHU Fee-in-lieu funds can provide funding for the following eligible activities:

- Acquisition and/or rehabilitation of residential units to provide decent, safe and affordable housing opportunities for low- and moderate-income households;
- Capital improvements related to housing development;
- Emergency eviction prevention
- Housing Services- Financial literacy;
- Programs that benefit the disabled;
- Program support costs (no more than 20%);
- Rental Housing Subsidies; and
- Other Housing Opportunities.

ATTACHMENT CHECKLIST

- Articles of Incorporation and Bylaws
- Federal Tax-Exempt Determination Letter For 501 (c)3 or 501 (c) 4 Organizations
- Current List of Board of Directors with occupation and addresses
- Board of Directors - Authorization to request funds
- Board of Directors - Designation of authorized official
- Current Organization Chart
- Resume of key staff members
- Current Year Approved Salary Schedule
- Current Year Approved Agency Budget
- Most recent Audit or Financial Statements
- Certificate of Good Standing from the Maryland Department of Taxation

APPLICATION SUBMISSION

FORMAT

- Use the checklist to ensure that you are submitting a complete package as Howard County's Department of Housing and Community Development reserves the right to reject an incomplete application package;
- Submit **ONE (1)** digital copy –with e-signatures of the completed application to the email address noted below. ***Please use Adobe PDF or Microsoft Word for application submittal.***
- Submit **ONLY** one (1) set of the required attachments, and save as “***Required Attachments_Your Entity Name FY2022***”.
Email digital applications to emeadows@howardcountymd.gov and use subject line “***FY 2022 Fee in Lieu Grant Application***”
- Review of applications will be based on a 100-point scoring system; if threshold items are not met, the remainder of the application will not be scored.

DEADLINE

Application packages must be submitted on or before **February 01, 2021, by 3:30 p.m.**

MIHU Fee -in- Lieu Program (FY 2022) Application for Funding

Name of Organization: _____

Mailing Address: _____

City: _____ **Zip Code:** _____

Organization DUNS: _____

Tax ID#: _____

Person Completing Application: _____

Phone: _____ **Fax:** _____ **Email:** _____

Type of Organization: **Non-Profit** **For-Profit** **Government**

Other, please state: _____

Funding is for, (Please check all that apply):

- Acquisition and/or Rehabilitation of Existing Residential Units;
- Capital improvements related to housing development;
- Emergency Eviction prevention;
- Housing Services -Financial literacy;

- Programs that benefit the disabled;
- Program Support Costs (up to 20% of total project costs);
- Rental Housing subsidies; and
- Other Housing Opportunities.

Project Name/Title: _____

Project Location: _____

Amount of This Request: \$ _____

Administrative Restrictions

Has the applicant organization or partner/member received an unsatisfactory rating on publicly funded project or been debarred for any period of time?

- YES NO

Has the applicant organization or partner/member been involved in any lawsuits?

- YES NO

Are there any outstanding judgments against the Applicant organization or partner/member?

- YES NO

Has the Applicant organization or partner/member been involved in mortgage default within the last 5 years on any federally or state funded project?

- YES NO

If any of the above responses was “Yes”, provide a brief explanation

Insert your response here.

Acknowledgement and Certification

“I acknowledge that funds are to be used in such a manner as to ensure the principal benefit to low and moderate income persons. I certify that I have reviewed this application in its entirety and that, to the best of my knowledge and belief, all of the information provided in this application is true and accurate. I further certify that I am officially authorized to sign for and represent the organization in the submission of this application.”

Signature of Authorized Representative

Printed Name / Title: _____

Date: _____

Section A: Organization History/Qualifications (25 pts)

A.1 Provide a brief summary

Provide a brief summary of the organization’s history, mission and goals, followed by organizational strengths and recent accomplishments.

Please attach a copy of each of the following listed below as **Exhibit 1**,

Insert your response to A.1 here.

A.2 Staffing Structure and Capacity

Staffing Structure and Capacity – Describe the organizations current staffing structure (identifying key staff and expertise) and provide detailed information demonstrating the organization’s and staff’s ability to successfully implement the proposed project. Identify all staff who maintains professional licenses, certifications or other credentials that are necessary to ensure the successful implementation of the project. Please provide a copy of key staff members’ resumes with the application, as part of **Exhibit 1**.

Insert your response to A.2 here.

A.3 Board Involvement and Volunteers

Board Involvement and Volunteers – Briefly describe the role of the Board of Directors and any volunteers in the implementation of the proposed project.

Insert your response to A.3 here.

A.4 Experience

Please describe all related experience of the applicant or any partners within the last three (3) years. For projects that only include public and human service activities, briefly provide the qualifications of any organizations that the applicant has worked with and their experience in this activity.

For projects that will include the development of affordable units, please describe the qualifications of partners in the development process. For each previous project include the name of the project, number of units, type of financing, and indicate whether financed with any public funds. All roles and responsibilities in the development process should be outlined and assigned to qualified development team members.

Insert your response to A.4 here. Attach additional sheets as necessary.

SECTION B: Project Information (25 pts)

Submit one completed copy of Section B, with all required documentation, for each activity for which you are requesting program funds.

- Acquisition and/or Rehabilitation of Existing Residential Units;
- Capital improvements related to housing development;
- Emergency Eviction prevention;
- Housing Services -Financial literacy;
- Programs that benefit the disabled;
- Program Support Costs (up to 20% of total project costs);
- Rental Housing subsidies; and
- Other Housing Opportunities.

B.1 Provide a clear and concise overview

Provide a clear and concise overview of the proposed project, highlighting the specific community need(s) that the project will address and how the project will benefit low- and moderate income persons in Howard County. Please consider including information on the following if applicable to the project:

- Project narrative and location map;
- Address and Census block group;
- Total number and type of proposed units;
- Total number of households and individuals being served;
- Total project costs (land/property acquisition costs and development hard/soft costs); and
- Project amenities if applicable.

Enter your response to B.1 here.

B.2 Population/s to be served

Population to be served: Identify the exact populations that will benefit from the project (e.g. persons with physical disabilities, children, persons with mental illnesses etc.). If relevant, please identify number or percentage of units reserved for each population type in the project and the projected number of persons/households to be served during each quarter of FY2022.

Enter your response to B.2 here.

B.3 Priority Objective

Priority Objective: Please choose the objective and outcome that most clearly represents the project's priorities.

OBJECTIVES

- Suitable Living Environment** - In general, this objective relates to activities that are designed to benefit communities, families, or individuals by addressing issues in their living environment.

- Decent Affordable Housing** - This objective focuses on housing programs where the purpose of the program is to meet individual family or community needs and not programs where housing is an element of a larger effort (such as would be captured under Suitable Living Environment).

- Creating Economic Opportunity** - This objective applies to the types of activities related to economic development, commercial revitalization, or job creation.

OUTCOMES

- Availability/Accessibility** - This outcome category applies to activities that make services, infrastructure, housing, or shelter available or accessible to low-and moderate-income people, including persons with disabilities. In this category, accessibility does not refer only to physical barriers, but also to making the affordable basics of daily living available and accessible to low- and moderate-income people.

- Affordability** - This outcome category applies to activities that provide affordability in a variety of ways in the lives of low-and moderate-income people.

It can include the creation or maintenance of affordable housing, basic infrastructure hook-ups, or services such as transportation or day care.

- Sustainability - Promoting Livable or Viable Communities. This outcome applies to projects where the activity or activities are aimed at improving communities or neighborhoods, helping to make them livable or viable by providing benefit to persons of low-and moderate-income people or by removing or eliminating slums or blighted areas, through multiple activities or services that sustain communities or neighborhoods.

B.4 Coordination within the Community

Coordination within the Community: Describe how your organization will coordinate the activities of the proposed project with existing services/programs within the community. Outline any relationships with existing community groups, and how the partnership will support this project. For housing with supportive services projects, identify how this project will be an enhancement to the exiting community members.

Enter your response to B.4 here.

B.5 Income Targets

Please choose the chart that best relates to your project, either Chart #1 or Chart #2. In Chart #2, please identify if the project will record results as individuals or households; it should not be both.

*****The area median income is that of **Howard County** and is determined by the Department of Housing and Community Development and is subject to change periodically. Data will be based on the median income for Howard County as established by the American Community Survey.***

Chart #1

Income Range	No. of Affordable Units
<i>0-30 % area median income</i>	<i>2</i>
<i>31-50% area median income</i>	<i>2</i>
<i>51-80% area median income</i>	<i>2</i>
<i>Total number of units in project</i>	<i>6</i>

Chart #2

Income Range	No. of Individuals/Households
<i>0-30 % area median income</i>	<i>10</i>
<i>31-50% area median income</i>	<i>17</i>
<i>51-80% area median income</i>	<i>10</i>
<i>Total number of individuals/households in project</i>	<i>37</i>

B.6 Site Control and Value

Site Control and Value - Check the box that best describes the form of site control held at time of application. Include a copy of the appropriate document as **Exhibit 6**.

- Deed or other proof of ownership**
- Long-term lease**
- Executed Option to Purchase**
- Other, please state**_____

No site control to date

Does a direct or indirect conflict of interest exist between the applicant and the seller of the property?

YES **NO**

If yes, specify the relationship: _____

****NOTE****

A copy of an appraisal of the land for new development or land and building(s) for acquisition and rehabilitation projects is required. Howard County Housing strongly recommends that the Applicant obtain an appraisal prior to securing site control to ensure a fair price.

SECTION C: Performance and Evaluation (25 pts)

C.1 Project Implementation

Project Implementation- Describe in detail how the project will be implemented, identifying specific activities in chronological sequence and the projected timeframe for completing the project. If there are other organizations that will act as partners during the implementation, describe their roles.

Enter your response to C.1 here.

C.2 Population/Services Outcome

Population/Services Outcome- Identify the specific populations(s) (children, seniors, homeless, etc.) and the projected number of persons/households to be served during each quarter of FY2022. Describe in detail the types of service(s) and or programs that will be provided and briefly discuss the qualitative outcomes that are expected and impact on the identified population. (See Section B)

Enter your response to C.2 here.

C.3- Data Collection and Performance Measurement

Data Collection and Performance Measurement – Describe the method(s) that will be used to collect demographic and financial data, measure performance (both quantifiable and qualitative) and provide documentation that demonstrates that the project beneficiaries are low- and moderate income persons.

Enter your response to C.3 here.

C.4 Staff responsible for Data Management and Grant Deliverables

Please provide the name, email and phone number for the following staff persons;

- 1) Person responsible for overall program management
- 2) Person responsible for submitting requests for reimbursements; and
- 3) Person responsible for submitting quarterly reports.

***If Applicable, for new construction please provide the following;**

- A copy of preliminary site plans, building elevations, floor plans, preliminary work write-ups, specifications; photos of similar projects (include address for subject photos). After project approval, final site plans elevations; floor plans, work write-ups and specifications as well as detailed cost information will be required. It is expected that the rest of the information provided in this part will generally remain the same.

Proposals which involve adaptive re-use of a structure for residential use should include a scope of planned renovation work including major systems being replaced and major alterations in building design.

Renovation proposals of residential structures should include a hazard inspection, structural inspections, and a termite report. The hazard inspection should include at a minimum, the identification of lead-based paint and asbestos in the building with a plan and budget for remediation. A physical needs assessment (PNA) should be submitted to summarize the existing condition of all major systems in the building as well as fixtures, appliances, cabinetry, floor coverings, and paint. Recommendations on replacement and repair should be provided.

- Provide a description of your procurement process for the architect, contractor, construction manager, etc., for the construction of this project. Include requirements for qualification- company statements of qualification or resumes of key personnel.
- Provide a development timetable for the project.
- **Energy Efficiency** - All new and gut rehab residential buildings up to three stories shall be designed to meet the standard for Energy Star Qualified New Homes (≤ 80 [85 for South] on the HERS Rating Scale).

All procedures used for this rating shall comply with National **Home Energy Rating System (HERS)** guidelines.

Provide a brief description of how the proposed project will meet the above standards and how the project will promote any innovative construction methods or technologies that increase the structure's durability, security, and/or that promote efficient construction above Code requirements

SECTION D: Project Budget & Financial Information (25 pts)

D.1 Use of Funds

Use of Funds

Provide a narrative description of the proposed budget line items for MIHU Fee-in-lieu funds.

Enter your response to D.1 here.

D.2 Sources and Uses

As **Exhibit 9**, provide details on the following:

- Proposed project budget;
- Sources and uses, including proposed uses for MIHU Fee-in-lieu program funds;
- One-year operating budget,
- Provide information of proposed sources of funding for the fiscal year in which you are applying; and
- Letters of commitment from partners for the project/program development funding.

Sources	Amount
e.g Cash- List by source and provide terms	
Private Debt- List by source and provide terms	
Other Grant- List Funders /amount	
Overhead	
Other:	
Total Sources:	
Uses- Including but not limited to all applicable listed below	Amount
Acquisition	
New Construction- Specify if Soft costs, hard costs, developer fees	
Rehabilitation	
Administration	
Program Operation	
Direct Assistance	
Public Service eg. Rental Assistance	
Total Uses:	

D.3 In-kind Contributions

Please list all in-kind contributions for this project.

Enter your response to D.3 here.

D.4 Funding Strategy and Supplemental Funding

Funding Strategy- What is your organization's strategy for addressing potential funding shortfalls? Are there any other funding applications pending or anticipated to be submitted that if rejected, would prevent the proposed project from being implanted? If so, please explain.

Enter your response to D.4

D.5 Line Item Budget

D.5 Line Item Budget- Attach as Exhibit 10. See below.

D.6 Audit

D.6 Audit - Attach as Exhibit 11, the Applicant's three most recent annual audited financial statements with management letters, or certified statement of Revenues and Expenses, or Partners/Members statements if there are none available for the applicant organization. For nonprofits, attach proof of financial statements from the Board of Directors.

Proposed Project Budget FY 2022

Note: Where MIHU Fee-in-lieu Program funds are not applicable to a specific line item, enter a value of zero.

Line Item Description	MIHU Fee-in-lieu	All Other Sources	Total	MIHU Fee-in-lieu Percentage
(1)Salaries - (Position/Title)				%
Fringe (benefits/FICA/Unemployment/Workers Comp)				%
(2)Salaries - (Position/Title)				%
Fringe (benefits/FICA/Unemployment/Workers Comp)				%
(3)Salaries - (Position/Title)				%
Fringe (benefits/FICA/Unemployment/Workers Comp)				%
(4)Salaries - (Position/Title)				%
Fringe (benefits/FICA/Unemployment/Workers Comp)				%
Utilities				%
Equipment Lease/Purchase				%
Supplies				%
Insurance (Liability)				%
Furniture				%
Leasing				%
Training/Professional Development				%
Travel Expense				%
Professional Services (Contractors/Consultants, etc.)				%

Other Program Costs (Specify)					0
Other Program Costs (Specify)					0
Other Program Costs (Specify)					0
TOTAL					0