# APPLICATION AND GENERAL INSTRUCTIONS FOR THE HOME INVESTMENT PARTNERSHIP – AMERICAN RESCUE PLAN (HOME-ARP) PROGRAM

Congress appropriated \$5 billion in funds under the American Rescue Plan Act of 2021 (ARP) to be administered through the federal HOME program, to be used to assist the homeless and persons and families who are at risk of becoming homeless. The U.S. Department of Housing and Urban Development (HUD) is administering this program, and the City of Pittsburgh was allocated \$8,342,028 in HOME-ARP funds.

The City of Pittsburgh, in conjunction with the Urban Redevelopment Authority of Pittsburgh (URA), prepared a HOME-ARP Allocation Plan to address local needs and establish priorities for the use of HOME-ARP funds. The City sub-granted to the URA HOME-ARP funds for the following activity:

• Development of Affordable Rental Housing - \$5,507,825

Funds to be used for the acquisition, construction, rehabilitation, development, relocation, and/or operating costs/reserves for affordable rental housing.

HOME-ARP funds may be used for eligible costs associated with the acquisition, construction, and rehabilitation of affordable housing for the following four (4) qualifying populations, and low-income households as defined in 24 CFR 92.2. No less than 70% of HOME-ARP assisted units must be restricted for occupancy by qualifying households, and no more than 30% of HOME-ARP assisted units may be restricted to low-income households. The Qualifying Populations are defined as:

#### 1. Homeless

- a. An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
  - i. An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
  - ii. An individual or family living in a supervised public or private operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or
  - iii. An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

- b. An individual or family who will imminently lose their primary nighttime residence, provided that:
  - i. The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;
  - ii. No subsequent residence has been identified; and
  - iii. The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks needed to obtain other permanent housing.
- c. Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:
  - i. Are defined as homeless under Section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), Section 637 of the Head Start Act (42 U.S.C. 9832), Section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2), Section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), Section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), Section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)), or Section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a);
  - ii. Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;
  - iii. Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and
  - iv. Can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse (including neglect), the presence of a child or youth with a disability, or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment

#### 2. At Risk of Homelessness

- a. An individual or family who is extremely low income (<30% AMI), does not have sufficient resources or support networks, and meets at least one of the conditions for homelessness (24 CFR 91.5)
- 3. Fleeing, or Attempting to Flee Domestic Violence, Dating Violence, Sexual Assault, Stalking, or Human Trafficking
- 4. Other populations who do not qualify under any of the populations above but meet one of the following criteria:

- a. Those who are currently housed due to temporary or emergency assistance or need additional assistance or services to avoid a return to homelessness
- b. Populations at Greatest Risk of Housing Instability
  - Households whose income is <30% AMI and are experiencing severe cost burden
  - Households whose income is <50% AMI and meet one of the criteria for being At Risk of Homelessness

Please Note: The use of the HOME-ARP funds must benefit <u>only</u> City of Pittsburgh residents who fall into one of the four (4) Qualifying Populations.

## I. APPLICATION GENERAL INFORMATION

## ORGANIZATION INFORMATION

Name of Organization:

Name of Executive Director/CEO:

Address of Organization:

Telephone:

Fax:

E-mail:

Website:

Federal I.D. Number:

Unique Entity Identifier (UEI) Number:

[Unique Entity Identifier (UEI) is a number issued by the System for Award Management (SAM) to identify businesses and other entities that do business with the federal government. The UEI has replaced the DUNS number as the authorized identifier for the federal government.]

Organizations must have successfully registered with Grants.gov and received a UEI number prior to applying for and receiving financial assistance awards.

Is the Organization  $\Box$  An approved nonprofit or a  $\Box$  for profit business.

Download a copy of 501(c)3 designation, if applicable: □

# PROJECT CONTACT INFORMATION

Name/Title of Project Contact:

Telephone:

Fax:			

E-mail:

PROJECT INFORMATION		
Project Name:		
Project Address:		
Brief Description of Project:		
Projected number of units and bedrooms to be assisted with HOME-ARP:		
How does this proposed project meet the HOME-ARP criteria and in what capacity will the		
organization act?		
Check all of the eligible types of activities you are requesting funding for:		
□ Acquisition of Real Property		
Clearance and Demolition		
<ul> <li>Clearance and Demolition</li> <li>Relocation</li> </ul>		
□ Relocation		
<ul> <li>Relocation</li> <li>New Construction</li> </ul>		
<ul> <li>Relocation</li> <li>New Construction</li> <li>Rehabilitation</li> </ul>		

# PROJECT FUNDING REQUEST

HOME-ARP Funds Requested: \$

Funding Leveraged from Other Sources: \$

Total Project Budget: \$

### **PROJECT DESCRIPTION**

A. Describe, in detail, the proposed project requesting HOME-ARP funds. The narrative should include the need or problem to be addressed in relation to the City HOME-ARP Allocation Plan, as well as the qualifying populations to be served. Describe the project goals and objectives. Please include the performance measures that demonstrate services provided will lead to self-sufficiency.

- B. What qualifying population (QP) will this project serve? (Check all that apply.)
  - $\Box$  Homeless
  - □ At Risk of Homelessness
  - □ Fleeing, or Attempting to Flee Domestic Violence, Dating Violence, Sexual Assault, Stalking, or Human Trafficking
  - Other populations who do not qualify under any of the populations above but meet one of the following criteria
    - Those who are currently housed due to temporary or emergency assistance or need additional assistance or services to avoid a return to homelessness
    - Populations at Greatest Risk of Housing Instability
      - Households whose income is <30% AMI and are experiencing severe cost burden
      - Households whose income is <50% AMI and meet one of the criteria for being At Risk of Homelessness
- C. Is the organization a member of the Continuum of Care (CoC) Program? Yes □ No □
- D. Does the organization accept referrals from the Coordinated Entry System (CES)?

Yes □ No□

- E. What other referral method will be used for this project?
- F. Number of units being developed? How many are HOME-ARP funded? How many are non-HOME-ARP units? What percentage of HOME-ARP units will be restricted to qualifying households and low-income households? Please note that no less than 70% of HOME-ARP assisted units must be restricted for occupancy by qualifying households, and no more than 30% of HOME-ARP assisted units may be restricted to low-income households.

### III. PROJECT PERFORMANCE MEASURES

- A. How will this project serve individuals or households experiencing homelessness?
- B. Describe the anticipated outcomes of this proposed service/program/project (number of clients served, number of units, etc.)?
- C. How will those outcomes be measured?

### IV. PROJECT BUDGET SUMMARY

The City and the URA encourage all applicants to utilize HOME-ARP funds as gap funding. A gap is defined as the amount of funding necessary to run a program after all other funding sources have been identified, thus leveraging is very important in the application process. Leveraging signifies that the program is not dependent on one source of income. Identify all funding sources, including HOME- ARP funds anticipated, other federal, state, county, local and private grants or loans, committed or applied. If funds are committed by other funding sources, a letter must be submitted verifying this commitment.

Costs should be based on the best information available at the time of the request. When providing the information, consider the following: (a) a project must be complete in a single phase, if possible; (b) Federal wage rates apply to construction projects that include 12 units or more units assisted with HOME-ARP funds; (c) projects may not begin construction until a subrecipient agreement is executed and the Environmental Review Record (ERR) has been completed.

Α.	Total Estimated Cost of Project:	\$
B.	Amount of HOME-ARP Funds Requested:	\$

C. Please complete thebelow chart showing sources and uses of the total project funds. If more space is needed, please include a chart as an attachment.

Sources of Funds	Amount
Total Project Financing	
Uses of Funds	Amount
Total Project Costs	

# CERTIFICATIONS

In order for your application to be accepted, in addition to the initial URA or RGP application itself, your organization must submit the following items as part of the initial application submission. If not submitted as part of the initial application submission, please include with this submission.

	Application submitted with <u>all questions</u> completed. <i>If an area does not apply, state N/A, do not leave a question blank.</i>
$\square$	Articles of Incorporation and Bylaws
П	Current List of Board of Directors
	Certified Organization Audit/Financial Statements of most recent year
	<ul> <li>Copy of Single Audit pursuant to 2 CFR Part 200, Subpart F Audit Requirements (required if \$750,000 in aggregate federal funds expended), or</li> </ul>
	<ul> <li>Financial statements audited by a CPA (only if not qualified for 2 CFR Part 200, Subpart F Audit Requirements)</li> </ul>
	Valid IRS 501(c)(3) Designation Letter (pending letters will not be accepted)
	Copy of IRS Form 990 filed for most recent year
	Proof of active SAM.gov registration and UEI Identifying Number
	Form W-9 (can be obtained at <u>www.irs.gov</u> )
	Current Fiscal Year Agency Budget, including all funding sources
	Job Descriptions and resumes for this activity/project
	Organizational Chart
	An Executed Statement of Applicant Form
	An Executed Signature Authorization Form

#### I hereby confirm that this packet contains all materials requested.

Printed Name of person completing this application

Signature of person completing this application

Date

### STATEMENT OF APPLICANT

The undersigned acknowledges the following:

- 1. To the best of its knowledge and belief, all factual information provided is true and correct and all estimates are reasonable.
- 2. No revised proposals/applications may be made in connection with this application once the deadline for applications has passed.
- 3. The Urban Redevelopment Authority of Pittsburgh (URA) may request or require changes in the information submitted, and may substitute its own figures, which it deems reasonable for any or all figures provided. The applicant will participate in required interview(s) for project assessment and cooperatively assist in the review process.
- 4. If the project(s) is recommended and approved by the selection committee, the URA reserves the right to reduce and/or cancel the allocation if federal entitlements are canceled, reduced, or rescinded.
- 5. The URA reserves the right not to fund any submittals received.
- 6. By submission of this application, the applicant agrees to abide by the federal regulations applicable to this program.
- 7. By submission of this application, the applicant agrees to abide by the URA's locally established policies and guidelines.
- 8. Past program and financial performance will be considered in reviewing this application.
- 9. Services are to be provided at no cost to citizens during the grant period. All program income (i.e., fees, repayments, foreclosures, etc.) must be remitted to the URA.
- 10. If the project is funded, the URA, or a designated agency may conduct an accounting system inspection to review internal controls, including procurement and uniform administrative procedures, prior to issuance of payments for projected expenditures.
- 11. If the project is funded, the URA will perform an environmental review prior to the obligation of funds.

- 12. If a project is funded, a written agreement that includes a statement of work, records retention and reporting, program income procedures, local and federal requirements, circumstances that would trigger grant suspensions and terminations, and reversions of assets would be required between the applicant and the URA.
- 13. A project's funding does not guarantee its continuation in subsequent action plans.
- 14. Provide written signatory authority from the organization's governing body indicating who can execute contracts and amendments on its behalf.
- 15. Disclosure by attached memo of matters that may give the appearance of a conflict of interest. (i.e., City of Pittsburgh and URA staff members/employees, elected officials, staff members' families, elected officials' families, etc.)

By signature below, the applicant acknowledges the above in its name on this \_\_\_\_\_ day of, \_\_\_\_\_, 20\_\_\_\_.

Authorized Signature/Title:	Date:	
<b>.</b> .		

#### PENALTY FOR FALSE OR FRAUDULENT STATEMENT

U.S. Code Title 18, Section 1001, provides that a fine of up to \$10,000 or imprisonment for a period not to exceed five years, or both, shall be the penalty for willful misrepresentation and the making of false, fictitious statements, knowing same to be false.

#### SIGNATURE AUTHORIZATION FORM

The Board of Directors of \_\_\_\_\_\_ (the "Applicant") hereby applies to the Urban Redevelopment Authority of Pittsburgh ("URA") for consideration for the receipt of HOME-ARP funds (the "Application") and in a proper motion and vote approved the Application for submission.

The Board of Directors further certifies that the Applicant has complied with all applicable laws and regulations pertaining to the Application and is a non-profit organization, taxexempt and incorporated in the Commonwealth of Pennsylvania.

(the "Applicant") hereby proposes to provide the services of project identified in the Application. If the Application is approved and the Applicant receives HOME-ARP funding from the URA, the Applicant agrees to adhere to all relevant federal, state and local regulations and other conditions and assurances as required by the URA. Furthermore, as the duly authorized representative of the Applicant, I certify that the Applicant is fully capable of fulfilling its obligation under this Application as stated herein.

I further certify that this Application and the information contained herein are true, correct and complete. I also authorize the following person(s) to have signatory authority regarding this grant:

Printed Name:	Title:
Printed Name:	Title:
President/Board of Directors:	
Printed Name:	Title:
Signature:	Date:

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