



**COUNTY OF BUCKS
DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
2023 HTF AFFORDABLE HOUSING EFFORTS APPLICATION**

APPLICATION INSTRUCTIONS

Prior to responding to this application, each organization is urged to review package for completion of all forms and sections. All proposals will become part of the Bucks County official files.

Complete all parts applicable to the proposed project.

Incomplete, insufficient, or missing information will cause applications to be eliminated from consideration. Only applications that are complete and submitted on or before the due date will be considered for funding.

Completed applications must be submitted by email to hcd@buckscounty.org with a subject matter of HCD 2023 Housing Application, no later than 4:00 P.M. on March 1, 2023.

HCD department staff will confirm receipt of your application by email. If you do not receive a confirmation within 48 hours, please contact our office at the phone number below.

Please direct all questions to Nikki Verwoerd at 215-345-3841 or by email to nverwoerd@buckscounty.org.

SECTION 1 - APPLICANT INFORMATION

Applicant Name:	
Applicant EIN #:	
Applicant UEI #:	
Applicant Address:	
Project Contact Person:	
Title:	
Phone:	
Email:	

Check any that apply

- Women Owned Business
 Minority Owned Business
 Non-profit
 Management Agent

SECTION 2 - PROJECT IDENTIFICATION

Project Name:	
Project Address:	
City:	

SECTION 3 - FUNDING AND BUDGET

A) Funding Amount Requested: _____

B) Attach a budget excel sheet for the program. Identify how the funds will offset the cost of running the program. Identify other funds contributed to the project. Attach documentation verifying commitment of other funds for any project financing.

Source	Amount	Status
Federal Government Funds		<input type="checkbox"/> Intend to Apply <input type="checkbox"/> Applied <input type="checkbox"/> Awarded/Secured
State Government Funds		<input type="checkbox"/> Intend to Apply <input type="checkbox"/> Applied <input type="checkbox"/> Awarded/Secured
Local Government Funds		<input type="checkbox"/> Intend to Apply <input type="checkbox"/> Applied <input type="checkbox"/> Awarded/Secured
Private Grants		<input type="checkbox"/> Intend to Apply <input type="checkbox"/> Applied <input type="checkbox"/> Awarded/Secured
Private Loans		<input type="checkbox"/> Intend to Apply <input type="checkbox"/> Applied <input type="checkbox"/> Awarded/Secured
Applicant Funds		<input type="checkbox"/> Intend to Apply <input type="checkbox"/> Applied <input type="checkbox"/> Awarded/Secured
Other: _____		<input type="checkbox"/> Intend to Apply <input type="checkbox"/> Applied <input type="checkbox"/> Awarded/Secured
Other: _____		<input type="checkbox"/> Intend to Apply <input type="checkbox"/> Applied <input type="checkbox"/> Awarded/Secured
TOTALS	\$ _____	

SECTION 4 – PROJECT DESIGN

Describe all components of the project. Include specifically: Staffing Plan to achieve project objectives including reporting structure (proposed org. chart) and FTE necessary. If a third party will be involved in management or service provision, describe its role.

Describe methods of achieving objectives and deliverables and anticipated Community Outcomes (Measurable)

Describe any potential barriers for project implementation and deliverables.

SECTION 5 – PROJECT NEED

Provide a detailed assessment of the current need for the project.

Does the project directly prevent, prepare for, and respond to the coronavirus? Yes No

If yes, please describe below. The below COVID Impact statement should be a description of how the project/program prevents, prepares for, and is in response to COVID. A key for COVID tieback is to focus on documented coronavirus effects or risks to overall economic, service, housing and infrastructure serving LMI neighborhoods and communities, and to consider both backward-looking and potential forward-looking risks and vulnerabilities to coronavirus. How do the services within this project application relate to the effects of the pandemic, or enable resilience to the effects of coronavirus in the future?

SECTION 6 – PROJECT TIMELINE

A) Provide a project timeline with the assumption the project is funded immediately.

Activity	Anticipated Completion Dates

- B) What are your project benchmarks and goals for the first 6 months?
What are your project benchmarks and goals for year 1?
What are your project benchmarks, goals, and outcomes for year 2?

SECTION 7 – SERVICES PROVIDED

Describe training and/or services that will be provided. Explain how access to services will be provided (i.e. referral, marketing, etc.), who will provide the services, how often and/or how long these services will be offered and how many people are expected to benefit.

SECTION 8 – COMMUNITY INVOLVEMENT

Explain how and in what manner the project proposes to involve the community in the project.

Describe how and in what manner the project will serve the community?

SECTION 9 – APPLICANT ABILITY

Describe the objective, management structure, and staffing of your organization. Explain your organization's past experience as a provider of the services identified including projects completed of a similar nature.

SECTION 10 – ADDITIONAL INFORMATION

Please attach the following to the completed application:

- Budget for the project
- Most current list of Board of Directors or Officers
- Applicable partnership agreements

SECTION 11 – CERTIFICATION

I do hereby certify that the information contained in this application for is complete and accurate to the best of my knowledge. I do also certify that is the information contained herein should change at any time; I will notify the HCD of such change.

I further certify that the governing body of the applicant organization has passed a resolution or has taken similar authorizing action to approve the submission of this application. Adequate documentation to demonstrate this action is attached or will be provided within one month of the submission date of this document.

Organization:

Name: _____
(Please Print)

Name: _____
(Signature)

Title: _____
(Please Print)

Date: _____