CHDO Operating Assistance Grant Application

New CHDO- Organization received its first CHDO designat	ion within the past 24 months? YES NO	
Organization expended HOME funds for a CHDO-eligible h	nomebuyer project within the past 24 months?	
Organization has received a CHDO Reservation or Conditio	nal Commitment of HOME funds for a NEW homebuyer	
development project (executed Loan and Regulatory Agreem	nent) within the past 12 months? YES NO	
If all three questions were answered with "No" then STOP HI Operating Assistance Grant. Contact the HOME Single Family		
1. CHDO Name:	2. Contact Person:	
3. CHDO Address:	4. Contact Person's Title:	
5. CHDO Telephone #:	6. Contact Person's Telephone # (if different than CHDO):	
Office: ()	Office: ()	
Email	Email	
7. Amount Requested: \$	8. Federal Tax I.D. #	
	UEI#	
9. N/A		
10. Defined Service Area (must be City, County, Neighbor <i>The defined service area cannot be state-wide.</i>	hood, Census Tract(s) or other specific identifying criteria):	
Number of years organization has been certified as a C First year certified as a CHDO	HDO	
12. Has organization received <u>any</u> operating assistance functions in the property of the prop	ds from any other source during the past two (2) years?	

CHDO CERTIFICATION & OPERATING ASSISTANCE

14. Do you anticipate a receiving CHDO s If you answered "no", has your organization Explain:	on received CHDO set-aside	e funds within the previous?	24 months?
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Explain:	CHDO operating assistance.		
		What prevents the organiz	ation from operating
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15. Describe the organization's need for C without outside additional financial assistan			
16. Describe in detail the organization's per next 12-24 months?	lan to eliminate the need for	· CHDO operating assistance	ce grant funds over the
17. Has the CHDO received HUD Technic	cal Assistance in the past 24	months? If yes, explain:	
18. List all sources of funds used to provid ICRC, LIHTC, Grants, Private funding		g the past 24 months. (USD	OA-RD, CDBG, SHOP,
Sources	Amount of Funds	Number of Units	Type of Housing
		1	
Authorized Signature		Date	