## **CHDO Operating Assistance Grant Application**

New CHDO- Organization received its first CHDO designation within the past 24 months? YES NO				
Organization received HOME funds for a CHDO-eligible project within the past 24 months? YES NO				
Organization has received a CHDO Reservation or Conditional Commitment of HOME funds within the past 12 months? YES NO				
If all three questions were answered with "No" than <u>STOP HERE.</u> This organization is not eligible to apply for a CHDO Operating Assistance Grant. Contact the HOME Technical Assistance Coordinator for additional information				
1. CHDO Name:	2. Contact Person:			
3. CHDO Address:	4. Contact Person's Title:			
5. CHDO Telephone No:	6. Contact Person's Telephone No:			
Office: ( )	Office: ( )			
Fax: ( )	Fax: ( )			
Email	Email			
7. Amount Requested: \$	8. Federal Tax I.D. # UEI #			
9. N/A				
10. Defined Service Area and/or Census Tract(s):				
11. Number of consecutive year's organization has been certified as a CHDO  First year certified as a CHDO				
12. Has organization received <u>any</u> operating assistance funds from any other source during the past two (2) years?  no; yes; If yes, describe:				

13. Describe organizational capacity to own, develop, and sponsor affordable housing. Please include key staff, their development experience/ability.				
14. Do you anticipate a receiving CHDO If you answered "no", has your organize Explain:			s 24 months?	
15. What is the organization's plan to eliminate the need for CHDO operating assistance grant funds in the future?				
16. How many years has the organization received a CHDO Operating Assistance Grant?				
17. Has received HUD Technical Assistance in the past 24 months? If yes, explain:				
18. List all sources of funds used to provide affordable housing during the past 24 months. (USDA-RD, CDBG, SHOP, ICRC, LIHTC, Private, etc.)				
Sources	Amount of Funds	Number of Units	Type of Housing	
Authorized Signature Date				