

CHDO Operating Assistance Grant Application

New CHDO – Organization received its first CHDO designation within the past 24 months? YES ___ NO ___
Organization expended HOME funds for a CHDO-eligible homebuyer project within the past 24 months? YES ___ NO ___
Organization has received a CHDO Reservation or Conditional Commitment of HOME funds (executed Loan and Regulatory Agreement) within the past 12 months? YES ___ NO ___

If all three questions were answered with “No”, then **STOP HERE**. This organization is not eligible to apply for a CHDO Operating Assistance Grant. Contact HOMESF@IHFA.ORG 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.# 9. UEI#
10. Defined Service Area (must be City, Count, Neighborhood, Census Tract(s), or other specific identifying criteria): <i>The defined service area cannot be state-wide.</i>	
11. Number of years organization has been certified as a CHDO _____ First year certified as a CHDO _____	

12. Has organization received any operating assistance funds from any other source during the past two (2) years? YES ___ NO ___; If yes, describe:

13. Describe organizational capacity to own, develop, and sponsor affordable housing. Please include key staff and their development experience/ability.

14. Do you anticipate receiving CHDO set-aside funds within the next 24 months? YES ___ NO ___
 If you answered “no”, has your organization received CHDO set-aside funds within the previous 24 months? YES ___ NO ___ Explain:

15. What is the organization’s plan to eliminate the need for CHDO operating assistance grant funds in the future?

16. Has the CHDO received HUD Technical Assistance in the past 24 months? YES ___ NO ___ If yes, explain:

17. List all sources of funds used to provide affordable housing during the past 24 months. (USDA-RD, CDBG, SHOP, ICRC, LIHTC, Grants, Private Funding, etc.)

Sources	Amount of Funds	Number of Units	Type of Housing

Authorized Signature

Date