

## **Exhibit N CHDO Certification Checklist & Operating Assistance Grant Application**

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### **This Exhibit Includes:**

- 1. Operating Assistance Grant- Instruction and Application**
- 2. Individual Board Member Certification form**
- 3. CHDO Certification Checklist**

*Note: When submitting the CHDO Operating Assistance Grant application **and** the CHDO Certification application at the same time, please submit each application separately (different folder/binder)*

Application and supporting documentation should be mailed to:  
CHDO Technical Assistance , HOME Program, P.O. Box 7899, Boise ID 83707-1899.

### **CHDO Operating Assistance Grant Instructions**

#### **Minimum Application Requirements**

1. Table of Contents
2. Complete and legible application
3. Training Certificate of Completion/Attendance for development/organization staff for the previous 12 months
4. Resume(s)/Statement of Experience for all key development staff that will be involved with CHDO activities
5. Board resolution authorizing application for this CHDO Operating Assistance Grant
6. Organizational Plan that outlines goals and objectives relative to the development of CHDO-eligible housing
7. Written plan that illustrates how the CHDO will minimize or eliminate the need for this operational assistance
8. Certification the organization is/is not in good standing with IHFA, i.e. no outstanding/ongoing HOME compliance findings, issues or concerns
9. Notarized statement from the current Board President, Chief Financial Officer, or Certified Public Accountant to indicate the organization's financial management conforms to 24 CFR 84.21 *Standards for Financial Management Systems*
10. Most recent financial audit (if required) or the most recent audited financial statement.
11. Proposed operating budget for the year in which the funding is requested. The budget must identify all anticipated sources of revenue, including funds provided by other intermediaries for organizational support and housing education.

**Applications not containing the required documentation or are otherwise ineligible, may not be scored.** To determine individual funding awards after scoring all applications: (1) Total all CHDO applications scores together then divide by the total amount of grant funds available. This number determines what each point is worth (monetary point). Each individual CHDO's total score is then multiplied by the "monetary point.

No individual grant will exceed \$50,000.

IHFA is not obligated to award CHDO Operating Assistance in the amount requested.

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<b>CHDO Operating Assistance Grant Scoring Criteria</b>			
	Yes	No	
Received its first CHDO designation within the past 24 months (20 Pts)			
Received IHFA approval for a CHDO-eligible project activity within the past 24 months (a CHDO predevelopment loan is not considered IHFA approval) (30 Pts)			
Received and/or expended CHDO Predevelopment loan funds within the past 12 month (20 Pts)			
<p>If you answered “No” to all the questions above, STOP HERE.                      This Organization is not eligible to apply for the CHDO Operating Assistance Grant. Contact the HOME Technical Assistance Coordinator for additional information.</p>			
Request as a % of organization’s total operating budget: <ul style="list-style-type: none"> <li>• 0 – 29% (10)</li> <li>• 30 – 49% (5)</li> <li>• Over 50% (Not Permissible)</li> </ul>	Up to 10 points		
CHDO will <u>not</u> receive operating assistance or any other operational support from any other federal sources (SHOP, USDA-RD, HUD, NeighborWorks, etc.) this year.	10 Points		
Has organizational staff capacity to own, develop, and/or sponsor affordable housing  (1) Has professional staff who have successfully completed similar project(s) as those proposed by the CHDO- Provide resume(s) (15 pts) and/or  (2) Has an IHFA-approved executed agreement with an experienced development consultant to train CHDO staff (IHFA must approved plan/contract in place to train key staff within the past 24 months) (8)	Possible 23 Points		
Has received CHDO Operating Assistance Grant funds for past <ul style="list-style-type: none"> <li>• 0 to 2 years (15)</li> <li>• 3 to 5 years (5)</li> <li>• 5+ years (0)</li> </ul>	Up to 15 Points		
For IHFA use only:  Percentage of the number of CHDO-eligible housing unit’s this CHDO provided in Idaho compared to the total number of CHDO-eligible housing units provided by all CHDOs in Idaho in the previous 12 months. <ul style="list-style-type: none"> <li>• Greater than 15% of units (20)</li> <li>• 10 – 15% of units (15)</li> <li>• 5 – 10% of units (3)</li> <li>• Less than 5% of units (2)</li> <li>• 0 Units (0)</li> </ul>	Up to 15 points		
<b>TOTAL MAXIMUM POINTS</b>	<b>143 points</b>		

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**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 “No” **STOP HERE**. This organization is not eligible to apply for this year’s 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. #		
			DUNS #		
9. Geographic Area Served:					
10. Number of consecutive year’s organization has been certified as a CHDO _____					
First year certified as a CHDO _____					
		Previous year	Current year	Next year	
11. Total Operating Budget:		\$	\$	\$	

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12. Has your organization received any operating assistance funds from any other source during the past two 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 set-aside funds within the next 24-months? \_\_\_\_\_  
 If you answered “no”, has your organization received CHDO set-aside funds within the previous 24 months? \_\_\_\_\_  
 Explain:


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:

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18. List all sources of funds used to provide affordable housing during the past 24 month (USDA-RD, CDBG, SHOP, ICRC, LITC, Private, etc.)

Sources	Amount of Funds	Number of Units	Type of Housing

\_\_\_\_\_  
 Authorized Signature

\_\_\_\_\_  
 Date

**INDIVIDUAL BOARD MEMBER CERTIFICATION**

**PUBLIC SECTOR CERTIFICATION\***

*A public sector board member is defined as a person who meets one or more of the following definitions:*

**Check all that apply:**

- Elected Official- Any elected position, i.e. state legislator, city council, county commissioner, school board, etc.
- Appointed Public Official –A member of a planning/zoning commission, or a regulatory or advisory board/ commission, or a member of a regulatory and/or advisory board or commission who is appointed by an elected official
- Public Employee - An employee of Idaho State government (agency or department)

**Must check one of the following:**

- I certify I **DO** meet the definition of a public sector board member as defined above\*
- I certify I **DO NOT** meet any of the definitions of a public sector board member as defined above

\*A board member who is defined as public sector, but also meets the definition of a low-income community representative (below) will be counted as a public sector board member only.

**LOW-INCOME COMMUNITY REPRESENTATION CERTIFICATION**

*A low-income community representative board member is a person who meets at least one of the following definitions:*

**Check all that apply:**

- I live in a low-income neighborhood (defined as 51% or more of the households in my census tract have an income at or below 80% of the area median income
- My household income is at or below 80% of the area median income for the area in which I live
- I have been elected by a Low-Income Neighborhood Organization to serve on this CHDO Board

7Name of the organization is: \_\_\_\_\_

**Must check one of the following:**

- I certify I **DO** meet at least one of the low-income community representative definitions above
- I certify I **DO NOT** meet the low-income community representative definitions above

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Print Name**

**CONFLICT OF INTEREST CERTIFICATION**

In the procurement of property and services, the applicant will adhere to the following Conflict of interest provision:

No person(s) who exercises, or has exercised, any function or responsibility with respect to activities assisted with HOME funds, or who are in a position to participate in a decision-making process or gain inside information with regard to these activities, may obtain a financial interest or benefit from a HOME-assisted activity, or have an interest in any contract, subcontract or agreement with respect thereto, or the proceeds thereunder, either for themselves or those with whom they have family or business ties, during their tenure or for one year thereafter.

Persons covered: this section applies to any person who is an employee, agent, consultant, officer, or elected official or appointed official of the organization receiving HOME funds.

No owner, developer or sponsor of a project assisted with HOME funds (or officer, employee, agent, or consultant of the owner, developer, or sponsor) whether private, for-profit, or non-profit (including CHDO) when acting as an owner, developer or sponsor) may occupy a HOME assisted affordable housing unit in a project. This provision does not apply to an individual who received HOME funds to acquire or rehabilitate his or her principal residence, or to an employee or agent of the owner or developer of a rental housing project who occupies a housing unit as the project manager or maintenance worker.

Upon written request, IHFA may grant an exception to the above provision on a case-by-case basis when it determines that the exception will serve to further the purposes of the home program and the effective and efficient administration of the owner's or developer's HOME-assisted project.

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Authorized Signatory

Title

Date

**CHDO Certification Checklist**

The information contained in this checklist pertains to the definition of Community Housing Development Organization (CHDO)§92.2 Subpart A of the HOME Final Rule.

This checklist is provided as a guide to help identify the requirements and documents needed when seeking CHDO Certification. Additional information available on CHDO is available in Chapter 5 of the current HOME Administrative Plan. [Current HOME Administrative Plan Chapter 5](#)

All documentation identified below must be submitted with application
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**I. LEGAL STATUS**

A. The nonprofit organization is organized under State or local laws, as evidenced by one of following:

- Charter**
- Articles of Incorporation**

B. No part of organization's net earnings inure to the benefit of any member, founder, contributor, or individual, as evidenced by:

- Charter**
- Articles of Incorporation**

C. Has a tax exemption ruling from the Internal Revenue Service (IRS) under Section 501(c) of the Internal Revenue Code of 1986, as evidenced by:

- IRS Certificate**

D. The provision of decent housing that is affordable to low and moderate-income individuals and/or households is one of the purposes of this organization as evidenced in:

- Charter**
- Articles of Incorporation**
- By-laws**

E. The CHDO is neither controlled by, nor receives direction from individuals or entities seeking to derive profit or gain from the organization as evidenced by

- By-Laws**
- Articles of Incorporation**

**II. ORGANIZATIONAL CAPACITY**

A. Conforms to requirements found at 24 CFR 84.21, including financial management systems (A-110), procurement standards, reporting and record-keeping standards as evidenced by

- Notarized statement from the Board President or Chief Financial Officer**
- Certification from Certified Public Accountant**
- HUD approved Audit Summary**

B. Demonstrated capacity to carry out CHDO-activities evidenced by one of the following:

\_\_\_\_\_ **Resumes and/or Statement of Experience that describe capacity of key staff who have successfully completed projects similar to those to be assisted with HOME funds**

\_\_\_\_\_ **An Organization that has limited or no development capacity/experience may use an experienced consultant for the first year of as a CHDO to train Key Staff. However, there must be an IHFA- approved written agreement in place that outlines the training and development milestones to be completed within the first year**

C. If this is the initial CHDO certification, the organization must have a history of serving the community where housing assisted with CHDO set-aside funds will be developed, as evidenced by

\_\_\_\_\_ **Statement that documents at least one year of experience in serving the community** (For newly created organizations formed by local churches, service or community organizations, a statement that documents the parent organization has at least one year of experience serving the community is allowed)

### III. ORGANIZATIONAL STRUCTURE

A. CHDO must maintain at least one-third (1/3) of the governing board membership with one of the following: (1) residents of low- income neighborhoods(census tract) or; (2) other low-income community residents or; (3) elected representatives of low-income neighborhood organization as evidenced in one of the following:

- \_\_\_\_\_ **By-Laws**
- \_\_\_\_\_ **Charter**
- \_\_\_\_\_ **Articles of Incorporation**

B. CHDO must have an adopted (written and approved) formal process that outlines how low-income program beneficiaries can advise the organization regarding the design, siting, development, and management of HOME-assisted housing activities. This process is evidenced by:

- \_\_\_\_\_ **By-laws**
- \_\_\_\_\_ **Adopted Board Resolution**

C. A previously certified CHDO must submit evidence their Formal Process was followed during the past year, i. e. notices, advertisement, flyers, surveys, as defined in the Formal Process.

### IV. RELATIONSHIP WITH SPONSORING ENTITIES

A. A CHDO may be chartered/sponsored by a unit of government, however, the unit of government may not appoint more than one-third of the membership of the organization's governing body; (2) the board members appointed by the State or local government may not, in turn, appoint the remaining two-thirds of the board members; and (3) no more than one-third of the governing board members are public officials, as evidenced in one of the following:

- \_\_\_\_\_ **Not Applicable**
- \_\_\_\_\_ **By-laws**
- \_\_\_\_\_ **Articles of Incorporation**

B. A CHDO may be sponsored or created by a for-profit entity, however, the for-profit cannot be a developer or manager of housing, as evidenced by:



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\_\_\_\_\_ **For-profit's Articles of Incorporation**

C. If a CHDO is sponsored or created by a for-profit, it cannot appoint more than one-third of the membership of the CHDO's governing body; those board members may not, in turn, appoint any of the remaining board members. Evidenced by

- \_\_\_\_\_ **Not Applicable**  
 \_\_\_\_\_ **By-Laws**  
 \_\_\_\_\_ **Articles of Incorporation**

D. The CHDO must be free to contract for goods and services from vendor(s) of its own choosing, as evidenced by

- \_\_\_\_\_ **By-Laws**  
 \_\_\_\_\_ **Articles of Incorporation**

**V. Organization's Service Area** \_\_\_\_\_

A. Has the Service Area Changed? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please provide supporting documentation that describes why the governing body adopted this change.

**VI. Board of Directors**

- \* No more than 1/3 of a CHDO board is defined as "Public Official"
- \* No less than 1/3 of a CHDO board is defined as a "Low-income Community Representative"

<b>Board member name</b>	<b>Most recent appointment date</b>	<b>Public Official yes/no</b>	<b>Low-Income Community Representative yes/no</b>
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

I certify the information provided herein is true and accurate.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date