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### Applicability

HOME Program

### General Information

- IHFA awards the CHDO Operating Assistance Grant based on an application scoring & NOFA process. The timing of each year's NOFA is dependent on when the annual HOME allocation is received.
- Grants do not exceed \$50,000.
- IHFA is not obligated to award the amount requested
- Applications not containing required documentation or are otherwise ineligible (see minimum threshold requirements), may not be scored.
- Individual grant amounts are determined by (1) The total amount of grant funds available divided by total of all points scored by all CHDOs (monetary point value), (2) Individual CHDO score is multiplied by the monetary point value.

### Application Requirements

- When submitting the CHDO Operating Assistance Grant application **and** the CHDO Certification application, **all necessary supporting documents for both the CHDO Certification and the Operating Grant Application (except the actual application for the CHDO Operating Grant) must be uploaded to the CHDO Certification folder. Only the Operating Assistance Application document itself should be uploaded to the grant application folder.** CHDO Certification application and CHDO Operating Assistance Grant application must be submitted through the assigned Procorem work center into the designated folders. **NO HARD COPIES.** All packages are required to be complete by the submission due date. IHFA will contact a nonprofit one time via a post in Procorem for any missing items or additional clarifications. The nonprofit will have five (5) business days to submit requested documents or information. If not received within five business days, and no acceptable request for extension is received by IHFA before the deadline, the certification and application will be declined without further notice. Clearly label documents to correspond with the checklist
- **All items on the checklist must indicate where they can be found on the specified document. Any application that does not include the location of the specific requirements as requested, will not be**

**reviewed.**

- All items on the checklist must be submitted every year, even if they have been submitted in previous years (i.e. Articles of Incorporation, By-laws, etc.). This is the nonprofit's certification that IHFA has the newest version of the document(s). IHFA will not go back and pull docs from previous years; however, the nonprofit may pull items from the previous year's work center if they are still valid and the previous year's work center is still open.
- Please use the Scoring criteria sheet for the Operating Grant Application and provide your own scores based on the nonprofits activities for the last 12-24 months. IHFA will score as well.
- Direct Deposit Authorizations must be submitted with the first draw every year. If any info has changed, a voided check must be attached Salary/Wage Billing Rate Calculations (Attachment D) and new pay stubs for each individual must accompany the first draw on which those costs requested.
- ~~Hard copy of application and supporting documentation mailed to: IHFA, HOME Programs Department, P.O. Box 7899, Boise ID 83707-1899~~
- ~~Table of Contents~~
- ~~Tabbed sections~~

**Minimum Threshold Requirements**

1. Training Certificate of Completion/Attendance for development/organization staff for the previous 12 months
2. Resume(s)/Statement of Experience for all key development staff that will be involved with CHDO activities
3. Board resolution authorizing application for this CHDO Operating Assistance Grant
4. Organizational Plan that outlines goals and objectives relative to the development of CHDO-eligible housing
5. Notarized statement from the a Certified Public Accountant indicating the organization's financial management systems conform to 24 CFR 84.21 Standards for Financial Management Systems
6. CPA-Reviewed Financial Statements submitted with CHDO Certification. IHFA will ensure developer has adequate financial management systems and practices in place as well as sufficient financial resources to carry out the project to completion
7. Proposed operating budget for the year in which the funding is requested. The budget must include anticipated sources of revenue, including funds provided by other intermediaries for organizational support and/or housing education.

<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: 0 – 29% (10) 30 – 49% (5) Over 50% (0)	Up to 10 points		
CHDO will <u>not</u> receive operating assistance or any other operational support from other sources (SHOP, USDA-RD, HUD, NeighborWorks, etc.) this year.	10 Points		
Has organizational staff capacity to own, develop, and/or sponsor affordable housing  Has professional staff who have successfully completed similar project(s) as those proposed by the CHDO- Provide resume(s) (15 pts) and/or 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 pts)	Up to 15 Points		
Has received CHDO Operating Assistance Grant funds for past 0 to 2 years (15) 3 to 5 years (5) 5+ years (0)	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. Greater than 15% of units (20) 10 – 15% of units (15) 5 – 10% of units (3) Less than 5% of units (2) 0 Units (0)	Up to 20 points		
<b>TOTAL MAXIMUM POINTS</b>	<b>140 points</b>		

**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 STOP HERE. 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. # DUNS #
9. N/A	
10. Geographic Area Served:	
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 years? <input type="checkbox"/> no; <input type="checkbox"/> 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:

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

Sources	Amount of Funds	Number of Units	Type of Housing

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

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

**INDIVIDUAL BOARD MEMBER CERTIFICATION FORM**

**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 at least one of the definitions 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

\*For CHDO purposes, a board member who is defined as “public sector” but also meets the definition of “low-income community representative” is defined only as a “public sector” board member.

**LOW-INCOME COMMUNITY REPRESENTATION CERTIFICATION**

*A low-income community representative board member is a person who meets 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

Name of the Low-income neighborhood organization that elected me: \_\_\_\_\_

**Check one of the following:**

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

\_\_\_\_\_  
**Board Member Signature**

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

\_\_\_\_\_  
**Printed 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.

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

**FULL 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 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 referenced below must be **uploaded separately to the assigned work center** as part of the full certification process.

**Location of Requirement references the exact location in the document (i.e. page and paragraph) the specific requirement is located.**

**I. LEGAL STATUS**

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

<input type="checkbox"/> Charter	_____	Location of Requirement
<input type="checkbox"/> Articles of Incorporation	_____	Location of Requirement

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

<input type="checkbox"/> Charter	_____	Location of Requirement
<input type="checkbox"/> Articles of Incorporation	_____	Location of Requirement

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

<input type="checkbox"/> Charter	_____	Location of Requirement
<input type="checkbox"/> Articles of Incorporation	_____	Location of Requirement
<input type="checkbox"/> By-laws	_____	Location of Requirement

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

<input type="checkbox"/> By-Laws	_____	Location of Requirement
<input type="checkbox"/> Articles of Incorporation	_____	Location of Requirement

**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, evidenced by



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

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 assisted with HOME funds**

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

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** \_\_\_\_\_ **Location of Requirement**  
 **Adopted Board Resolution** \_\_\_\_\_ **Location of Requirement**

C. Previously certified CHDO must submit evidence their Formal Process was followed during the past year, notices, flyers, advertisements, survey results, etc. as described in the Formal Process.

### IV. RELATIONSHIP WITH SPONSORING ENTITIES

A. A CHDO can be chartered or sponsored by a unit of government, however (1) the unit of government cannot appoint more than one-third of the of the governing board; (2) these board members (appointed by the unit of government) may not, appoint any of the remaining two-thirds of the board. No more than one-third of the entire governing board members can be defined as “public sector”. These requirements must be evidenced in:

- Not Applicable (CHDO is not chartered or sponsored)**  
 **By-laws** \_\_\_\_\_ **Location of Requirement**

\_\_\_\_\_ **Articles of Incorporation** \_\_\_\_\_ **Location of Requirement**

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

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

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, in turn, may not appoint any of the remaining board members. Evidenced by

\_\_\_\_\_ **Not Applicable**

\_\_\_\_\_ **By-Laws** \_\_\_\_\_ **Location of Requirement**

\_\_\_\_\_ **Articles of Incorporation** \_\_\_\_\_ **Location of Requirement**

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

\_\_\_\_\_ **By-Laws** \_\_\_\_\_ **Location of Requirement**

\_\_\_\_\_ **Articles of Incorporation** \_\_\_\_\_ **Location of Requirement**

**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"

Board member name	Most recent appointment date	Public Official yes/no	Low-Income Community Representative yes/no
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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

**UPDATED CHDO CERTIFICATION CHECKLIST**

The definition of Community Housing Development Organization (CHDO) is found at Subpart A, Section 92.2 of The HOME Rule. This checklist verifies the legal, organizational, and financial documentation on file is up to date since the last full certification review.

Indicate current status in each section below by checking the most appropriate response. If there are any changes, you are required to submit updated documentation with the checklist, and indicate the exact location where the information can be found in the specified document (if applicable). All documents must be uploaded to the appropriate project work center.

**A CHDO must be re-certified prior to the commitment of CHDO Set-Aside to a new CHDO activity**

**I. LEGAL STATUS**

A. The nonprofit organization is organized under State law as evidenced by one of following:

- Charter \_\_\_\_\_ Location of Requirement
- Articles of Incorporation \_\_\_\_\_ Location of Requirement
- No Change

B. No part of its net earnings inure to the benefit of any member, founder, contributor, or individual as evidenced by one of the following:

- Charter \_\_\_\_\_ Location of Requirement
- Articles of Incorporation \_\_\_\_\_ Location of Requirement
- No Change

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 \_\_\_\_\_ Location of Requirement
- No Change

D. "The provision of *decent housing that is affordable to low and moderate-income individuals and/or families*" is identified as one of the purposes of the organization as evidenced by one of the following:

- Articles of Incorporation \_\_\_\_\_ Location of Requirement
- By-laws \_\_\_\_\_ Location of Requirement
- No Change

**II. ORGANIZATIONAL CAPACITY**

- A. Conforms to requirements at 24 CFR 84.21, including financial management systems (A-110), as well as property standards, procurement standards, reporting, and record keeping as evidenced by one of the following:

\_\_\_\_\_ **Notarized statement from the Board President or Chief Financial Officer**

\_\_\_\_\_ **Certification from Certified Public Accountant**

\_\_\_\_\_ **HUD approved Audit Summary**

\_\_\_\_\_ **No Change**

- B. 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, as evidenced by

\_\_\_\_\_ **Resume(s) and/or Statement of Experience of development staff**

- C. An Organization with limited or no development capacity/experience may use an experienced development 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 identifies the training and development milestones to be completed within 12 months. As evidenced by

\_\_\_\_\_ **IHFA- Approved Written Agreement**

\_\_\_\_\_ **No Change**

**III. ORGANIZATIONAL STRUCTURE**

- A. CHDO must maintain at least one-third of the governing board membership for at least one of the following: (1) residents of low- income neighborhoods 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** \_\_\_\_\_ **Location of Requirement**

\_\_\_\_\_ **Articles of Incorporation** \_\_\_\_\_ **Location of Requirement**

\_\_\_\_\_ **No Change**

- B. No more than 1/3 of the governing board members may be defined a Public Sector as evidenced by one of the following:

\_\_\_\_\_ **By-Laws** \_\_\_\_\_ **Location of Requirement**

\_\_\_\_\_ **Articles of Incorporation** \_\_\_\_\_ **Location of Requirement**

\_\_\_\_\_ **No Change**

C. CHDO has adopted a written formal process that outlines how low-income beneficiaries can advise the organization regarding the design, siting, development, and management of HOME-assisted housing activities. This Process is identified in one of the following:

- By-laws** \_\_\_\_\_ **Location of Requirement**
- Adopted Board Resolution** \_\_\_\_\_ **Location of Requirement**
- No Change**

D. A previously certified CHDOs must submit evidence the CHDO’s followed it Formal Process during the past year (see Chapter V in the Annual Administrative Plan for requirements)

\_\_\_\_\_ Submit evidence the CHDO's Formal Process was followed for this project if not submitted previously (*i.e. with the HOME application or most recent annual CHDO certification, etc.*)

**IV. RELATIONSHIP WITH SPONSORING ENTITIES (This section ONLY applies if nonprofit is a sponsored CHDO)**

\_\_\_\_\_ **Not Applicable – skip to section V**

A. CHDO can be chartered by a State or local government, however the unit of government may not appoint: (1) more than one-third of the membership of the organization's governing body; and (2) the board members appointed by a unit of 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 can be public officials. Evidenced by of the following:

- By-laws** \_\_\_\_\_ **Location of Requirement**
- Articles of Incorporation** \_\_\_\_\_ **Location of Requirement**
- No Change**

B. If the CHDO is sponsored or created by a for-profit entity, (1) the for-profit cannot appoint more than one-third of the membership of the CHDO's governing body and (2) the board members appointed by the for-profit entity may not appoint any of the remaining two-thirds board members. Evidenced in one of the following:

- By-Laws** \_\_\_\_\_ **Location of Requirement**
- Articles of Incorporation** \_\_\_\_\_ **Location of Requirement**
- No Change**

C. CHDO is neither controlled by, or receives direction from, individuals or entities seeking to profit from the organization, as evidenced in one of the following:

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

\_\_\_\_\_ **No Change**

D. A CHDO can be sponsored or created by a for-profit entity. However: (1) The for-profit’s primary purpose cannot be the development or management of housing, as evidenced by:

\_\_\_\_\_ **For-Profit’s By-laws** \_\_\_\_\_ **Location of Requirement**

E. The CHDO is free to contract for goods and services from vendor(s) of its own choosing, as evidenced by the CHDO's:

\_\_\_\_\_ **By-Laws** \_\_\_\_\_ **Location of Requirement**

\_\_\_\_\_ **Articles of Incorporation** \_\_\_\_\_ **Location of Requirement**

\_\_\_\_\_ **No Change**

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

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

**VI. Board of Directors**

\*No more than 1/3 of a CHDO board can be defined as “public official”

\* No less than 1/3 of a CHDO board must be defined as a low-income community representative

See HOME Administrative Plan, Chapter 5 for definitions and additional guidance

\_\_\_\_\_ **No Change**

<b>Board member name</b>	<b>Most recent appointment date</b>	<b>Public Official yes/no</b>	<b>Low-Income Representative yes/no</b>

**Authorized CHDO Organization Signature Date**

**For IHFA Use Only**

This organization continues to meet CHDO regulatory thresholds

\_\_\_\_\_

IHFA Signature

\_\_\_\_\_

Date