



Illinois Affordable Housing Trust Fund
Single Family Rehabilitation (SFR), Round 2
with Roof Only Option (SFR-R)
Grant Application

Due on October 24, 2018
3:00p.m. CST

For questions and comments, please
contact TFSFRinfo@ihda.org

Illinois Affordable Housing Trust Fund
Single Family Rehabilitation Program
(SFR), Round 2
with Roof Only Option (SFR-R)
Grant Application

Applicant Information

County/Municipality/Not-for-Profit Name:

Main Office Street Address

City

State

Zip Code

Website

Primary Contact Name

Title

Phone Number

E-Mail Address

Secondary Contact Name

Title

Phone Number

E-Mail Address

Organization Type:

Non-profit Local Government Other (explain)

Target Area (Geography to be covered by this grant):

Requested Grant Amount:

Application Guide

Applicants must submit electronically the original application to the Illinois Housing Development Authority (IHDA)'s Community Affairs Department per the instructions provided below. For further information on this program announcement, contact TFSFRinfo@ihda.org.

Program Overview

IHDA will make funds available through its Affordable Housing Trust Fund to applicant organizations that demonstrate a plan to assist income-qualified homeowners to rehabilitate homes throughout the state that are currently not served through another U.S. Department of Housing Participating Jurisdiction. **Therefore, this excludes the following geographic areas: Aurora, Chicago, Decatur, Evanston, Peoria, Rockford, Springfield, McHenry County, and the Consortia of Cook County, DuPage County, Kane County, Lake County, Madison County, St. Clair County, Urbana, and Will County.** The applicant must either have direct rehabilitation experience or have partnerships with local agencies that possess the necessary experience. Successful applicant organizations must demonstrate familiarity with income verification procedures as well as the capacity for construction management including lead-based paint requirements.

Purpose of Grant

The **Single Family Rehab (SFR) Program - Round 2** will assist low-income and very low-income homeowners with repairs to their homes and remove health and safety hazards by repairing or replacing costly maintenance items.

The **Single Family Rehab with Roof Only Option (SFR-R)** component will assist low-income and very low-income homeowners with roof replacement and repair only. This includes rafters, soffits, fascia, and downspouts. Assisted homes must not have other apparent health and safety issues.

Trust Fund Programs must be compliant with all applicable local, state and federal laws.

Program Funding and Expenditure Deadlines

A total of \$6,000,000 has been set aside for this program. The program will run for two years from the date of closing with the approved applicant. All requests will be processed through IHDA's electronic loan processing software.

Eligible Applicants

Units of local government and non-profit organizations are eligible to apply, provided the applicant either meets all the qualifications listed below and/or agrees to partner with appropriate, identified entities that meet all of the following qualifications:

- Experience in administering programs for low-income and/or very low-income households, including intake and income verifications;
- Experience in administering housing rehabilitation, including grant and financial management;
- Experience in construction project management and assessment, including housing

inspections, work write-ups, cost estimating, building permits, code enforcement, and related local government procedures;

- Familiarity with federal and state fair housing and accessibility laws and regulations; and
- Familiarity with and ability to research other available/possible funding sources for housing repair activities.

Please note that third party administrators are limited to a maximum of three applications per round.

Eligible Properties

All properties must be an existing residential one unit single-family property that is independent, privately owned, and non-institutional to be used as owner's **primary residence** and not an income property. While the assistance to the homeowner and improving the condition of the home is of primary importance, adding to the stability of the surrounding neighborhood is also a goal of IHDA.

Eligible Geographic Areas

IHDA will accept applications from eligible applicant organizations representing any communities or geographic areas **excluding the following US Department of Housing Participating Jurisdictions: Aurora, Chicago, Decatur, Evanston, Peoria, Rockford, Springfield, McHenry County, and the Consortia of Cook County, DuPage County, Lake County, Kane County, Madison County, St. Clair County, Urbana, and Will County.**

Eligible Households Served

All program participants must have household incomes not exceeding 80% of the area median income, based on family size. See IHDA's [website](#) for income requirements.

Liens and Affordability Period for SFR

- The maximum amount per home is \$45,000, which includes hard costs, eligible soft costs, and project delivery of up to 15% of hard and soft costs combined.
- Funds will be secured to the property as a forgivable loan with a 5-year Mortgage and Promissory Note. The loan will be based on hard costs only. Additional soft costs and project delivery funds will be part of the \$45,000 per home maximum.
- Funds to the homeowner will be forgiven at 1/60th per month. However, the balance will be due out of net proceeds upon sale or transfer of the property if such an event occurs during the 5-year recapture period. Cash out will not be permitted during the recapture period unless the unforgiven loan balance is paid in full.

Liens and Affordability Period for SFR-R

- The maximum amount per home is \$16,500, of which up to 15% of hard and soft costs may be used for project delivery costs.
- Eligible homes must not need significant repairs and must not have other apparent health and safety issues in order to qualify for this component. Homes needing extensive repairs

should be considered for full SFR funding.

- Funds will be secured to the property with a forgivable 3-year Mortgage and Promissory Note based on hard costs only.
- Funds to the homeowner will be forgiven at 1/36th per month. However, the balance will be due out of net proceeds upon sale or transfer of the property if such an event occurs during the 3-year recapture period. Cash out will not be permitted during the recapture period unless the unforgiven loan balance is paid.

Other Requirements

- Rehabilitation work funded and performed under this program must comply with all local code, permitting, and inspection requirements. All properties must also be reviewed and approved by the State Historical Preservation Office (SHPO) prior to work beginning as evidenced by a letter on the DNR letterhead submitted to IHDA.
- Any immediate risks to the health and safety of the occupants must be prioritized under the rehabilitation work. These repairs must meet [IHDA Property Standards](#). Smoke alarms and carbon monoxide detectors must be installed and functioning in all funded properties as called for by Public Act 094-0741.
- Project delivery costs, including work write-ups and cost estimates, inspections, and permits (the latter only when not included in the contractor's overhead costs) may not exceed 15% of the hard and soft costs for each property receiving funds under the full SFR program limits.
- Funds may also be used for the grantee's general administration costs, but such costs may not exceed 5% of the grantee's total award amount. Per unit cost limits do not include administrative funding which is provided separately to the grantee. All applicants will be required to provide a detailed administrative budget as part of the program application.

Capacity Requirements of Applicants

Rehabilitation expenses under the program are paid following the review and approval of all construction improvements completed.

Applications must include the following elements:

- Be able to assure cost reasonableness by the utilization of a computerized cost estimating system.
- Provide a description of your established pool of eligible contractors including their contact information.
- Have experienced rehabilitation specialists and lead assessors on staff or must demonstrate by partnership or contractual agreements to provide those services by individuals who have the capacity in these areas.
- Description of the client selection process including marketing and outreach, education, intake and processing, and closing procedures.
- Rehabilitation work must be performed according to [IHDA Property Standards](#).

- Proposals must target assistance to persons or families at or below 80% of the area median income, adjusted for family size.
- Description of the agency’s plan to include participation of minority- and women-owned (MBE/WBE) contractors in this program (include a list of MBE/WBE contractors from the agency’s area).
- Description of the agency’s process for preparing the work write-up and cost estimate. Include a sample from the agency’s computerized specification program showing electronically derived costs. Note: If your agency does not have a computerized specification program, you may charge the cost to your administrative costs budget.
- Description of the agency’s process for inspection and approval of work.
- Description of the agency’s disbursement process.

Review Process

- IHDA will be responsible for reviewing all applications to ensure compliance with program guidelines and the requirements of the Illinois Affordable Housing Act and IHDA’s administrative rules under that Act.
- IHDA will work to achieve an equitable geographic distribution of funds among qualified applicants.
- The review period will begin after the application due date. IHDA staff will present a funding recommendation to the Members of the IHDA Board. The Members of the IHDA Board have final approval authority over all funding awards.

Scoring Criteria

The following is the scoring criteria that will be used to rank your application:

	Maximum Points
1. Organization and Applicant Capacity	20
2. Team Capacity and Experience	30
3. Program Impact	10
4. Program Need and Demand	10
5. Budget and Cost Reasonableness	10
6. Readiness to Proceed	20
Total	100

1. Organization and Applicant Capacity – (max 20 points)

Up to twenty (20) points may be awarded to applications that demonstrate successful previous management of a housing grant/program within the jurisdiction. Housing grants/programs will be interpreted to include any public or private program that improves the condition of housing within the jurisdiction.

2. Team Capacity and Experience – (max 30 points)

Up to thirty (30) points may be awarded to applicants that clearly show that staff is in place to administer and oversee the program. The team members specified in this section

of the application are involved in rehabilitation programs to various degrees. Attach resumes and licenses, if applicable, for team members. Note: a team member may be responsible for more than one title in Scoring Category 2 below.

3. Program Impact – (max 10 points)

Up to ten (10) points may be awarded to applications that provide a narrative detailing how the grant will impact low-income households and the community being targeted.

4. Program Need and Demand – (max 10 points)

Up to ten (10) points may be awarded to applicants who evidence both need and demand for the program. Attach the certification of compliance with the local consolidated plan, if applicable. Attach letters of support, evidence of community input and evidence of third party study, if applicable. Please include your waiting list for the program.

5. Budget and Cost Reasonableness – (max 10 points)

Up to ten (10) points may be awarded to applications that include a cost-effective, reasonable budget in the application, including a detailed explanation of the process for ensuring the reasonableness of all costs associated with the proposed or reimbursable activities, and documentation of the process used to procure all third party vendors. Points will be given to applications that demonstrate a systematic, thorough, well-documented approach to ensuring reasonable costs.

6. Readiness to Proceed – (max 20 points)

Up to twenty (20) points may be awarded to applications that have systems in place to administer the following:

- a. Market the program and select income-eligible applicants to participate in the program. If you have a waiting list for rehabilitation programs, please include the list for maximum points.
- b. Prequalify contractors to participate in the program, including lead-based paint contractors and licensed roof contractors.
- c. Provide construction management to bid, oversee, and inspect rehabilitation projects.

Application Fee

IHDA will not charge a fee for processing applications under this Program.

Application

A completed application, with all required exhibits, must be received by October 24, 2018 by 3:00 p.m. CST. Applications and instructions will be available on IHDA's [website](#). Please submit your complete application electronically to TFSFRinfo@ihda.org. All applications must be digital, no hard copies will be accepted. Kindly confirm delivery of your application by checking the appropriate notifications in your email. Be sure to attach all necessary exhibits and attachments. If you do not receive confirmation, please e-mail TFSFRinfo@ihda.org.

The Illinois Housing Development Authority will be hosting an application/technical assistance webinar. Please visit our website and look for emails from TFSFRinfo@ihda.org for future information regarding the time and date of webinar.

Additional Resources

[Program Rules](#)

[SFR Program Manual](#)

[FAQs](#)

[2018 Income Limits](#)

Application Checklist

In order for an application to be considered complete, the application package must include the following (as applicable): All attachments should be clearly numbered and labeled.

1. Applicant Information Section
2. Project Information Section
3. Organization and Capacity Section/Audit
 - a. Organization Overview and Housing Experience
 - b. Most Current Annual Audit (submit for applicant and partner organizations)
 - c. Team Experience Narratives and Resumes
 - d. Other Program Team Members
4. Program Impact
 - a. Narratives/Studies
 - b. Revitalization Plan, if applicable
 - c. Consolidated Plan Certification, if applicable
5. Program Need and Demand
 - a. Program Demand Narrative
 - b. Community Support Narrative and Letters of Support
 - c. Local Elected Officials Information Section
6. Budget and Cost Reasonableness
 - a. Program Financing Form
 - b. Administrative Budget
 - c. Disbursement Process
7. Readiness to Proceed
 - a. Participant Selection Plan to include Marketing and Selection Process
 - b. Intake and Selection Procedures
 - c. Community Impact Assessment
 - d. Pre-Qualifying & Selecting Contractors
8. Certification

Grant Application

1. What is the US Census 2017 population estimate of your service area?
2. What is the US Census 2017 population of your proposed target area? (This may be equal to #1 above.)
3. Approximately, how many properties owned by low-income households are in need of repair in your proposed service area?
4. Approximately how many properties do you expect to assist under the full SFR program?
5. Approximately how many properties do you expect to assist under the SFR-R component?
6. Total number of properties to be assisted.

7. Provide a brief description of your program. This description may be included in the public notice published by IHDA. If you have a special target area, please include a map along with your description.

8. Please complete the chart below showing the number of homes you plan to address under each of the following priorities:

	Priority (please rank)	Number of Homes
51% - 80% Area Median Income		
31% - 50% Area Median Income		
0% - 30% Area Median Income		
Elderly Households		
Special Needs/Disabled		
Preservation		
Live Near Work		
Large Family, Single Parent Households, or Other		
Total Number of Activities (sum from above):		
Total Number of Individual Properties Addressed (removing duplicates):		

Scoring Category 1: Organization and Applicant Capacity (max 20 points)

9. Please provide a copy of your most recent independent financial audit. If a Management Letter was issued, attach a copy of the Letter. **NOTE: Management Response and/or Corrective Action Plan MUST be on Applicant's letterhead and be signed by the Chief Executive Officer, President, or Executive Director.** IHDA reserves the right to use lack of corrective action or findings to determine funding. Please summarize all findings included in the audit and their respective solutions (list page numbers for reference).

10. Please write and attach a narrative giving an overview of your organization and its experience relevant to the administration of a housing rehabilitation program. Include the following in your narrative.

- a. Is there a partner agency that will participate in the operation of your program?

- b. What additional services do you provide for your clientele?

11. List any staff turnover in the past year or anticipated staff changes in the next six months.

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12. Complete the following housing experience chart below summarizing your agency’s past housing experience during the last 5 years in chronological order (*attach additional sheets if necessary*). If you have partner agencies involved in your program, please provide a housing experience chart for those entities as well.

Funding Source/ Program Name (Incl. IHDA Program No., if applicable)	Total Funding Amount Per Year	Dates Participated (Date Started and Date Completed)	Average # of Clients Assisted Per Year	Average Cost Per Unit	Dollars Granted/ Dollars Expended

13. Provide brief narrative descriptions of the specific housing programs referred to in #12 above.

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Scoring Category 2: Team Capacity and Experience (max 30 points)

Please provide a detailed description of each team member's experience in performing their assigned role (identified below) for the proposed program and include resumes for the individuals who will be performing each of the following functions:

- 14. **Program Manager:** Describe their experience in developing and administering a rehabilitation program of a similar scope or in operating service programs for the target population. Include information on type of activities, number of units, total program cost, year started, year completed and current status.

- 15. **Grant Manager:** Describe their experience with fund management.

- 16. **Intake Specialist:** Describe their experience with assisting participants in preparing applications, verifying financial information, certifying incomes and conducting eligibility screening.

17. **Rehabilitation/Construction Specialist:** Describe their experience providing construction rehabilitation assessments, work write-ups, bidding procedures and review, coordination of the construction schedule, and supervision of rehabilitation/construction progress. Demonstrate experience and familiarity with federal and state fair housing laws and regulations, (the standards established by the Environmental Barriers Act, 410 ILCS 25/1 *et se q.*, as amended, and the Illinois Accessibility Code, 71 Ill. Adm. Code 400 *et seq.*, as amended and other applicable federal, state, and local laws and regulations.) *Please attach copies of special licenses they hold to perform their duties.*

18. **Property/Construction Inspector:** Describe their experience in housing, local building codes and standards, and lead-based paint requirements. Include a brief summary detailing job activities, number of units inspected, number of years licensed, and any other relevant information. *Please attach copies of special licenses they hold to perform their duties.*

19. **Environmental Specialist:** Describe their experience in preparing environmental reviews to be submitted to IHDA for Trust Fund projects. Trust Fund projects must include approval from the State Historical Preservation Office (SHPO), determination of Flood Plain Management Insurance requirements, and other environmental hazards, such as location within a mine proximity area.

Scoring Category 3: Program Impact (max 10 points)

- 20. Provide an assessment of how the rehabilitation of properties in your project will improve the condition of the local area. Reference community need for repair, affordable homes, local housing studies, number of area foreclosures, community opinion of the project, etc. Include an additional discussion of the potential impact of the SFR-R component. Evidence of a revitalization plan or strategic approaches should be provided, if applicable. If you are in an entitlement area, please provide a copy of the Con Plan Certificate.

Scoring Category 4: Program Need and Demand (max 10 points)

Provide a narrative about your proposal addressing each of the following issues:

- 21. Describe the **need** for homeowner rehabilitation, including the need for a roof only option, if applicable, for low-income households in the communities included in your application. Include current documentation that evidences this. Relevant studies may include market studies, case studies, third party studies, etc. Consider availability and condition of housing stock, average costs, income and special needs of participants.

Note: Do not include only raw census numbers as evidence of need. Successful applicants will demonstrate **verifiable** need for this program.

- 22. Describe the **demand** for homeowner rehabilitation for low-income households in the community.
 - a. Describe any community input solicited by your agency for the proposed program, including public hearings, meetings, etc. Attach copies of letters of support from government officials, neighborhood groups, public agencies, and private individuals who are familiar with and supportive of your proposal. Letters of support should be no more than three months old.

- b. Provide a narrative describing the housing rehabilitation requests fielded from your constituency. Include your current waiting list information, as well as documentation regarding roof only requests.

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Scoring Category 5: Budget and Cost Reasonableness (max 10 points)

23. Please give an estimated budget amount for each of the following eligible Trust Fund expenses.

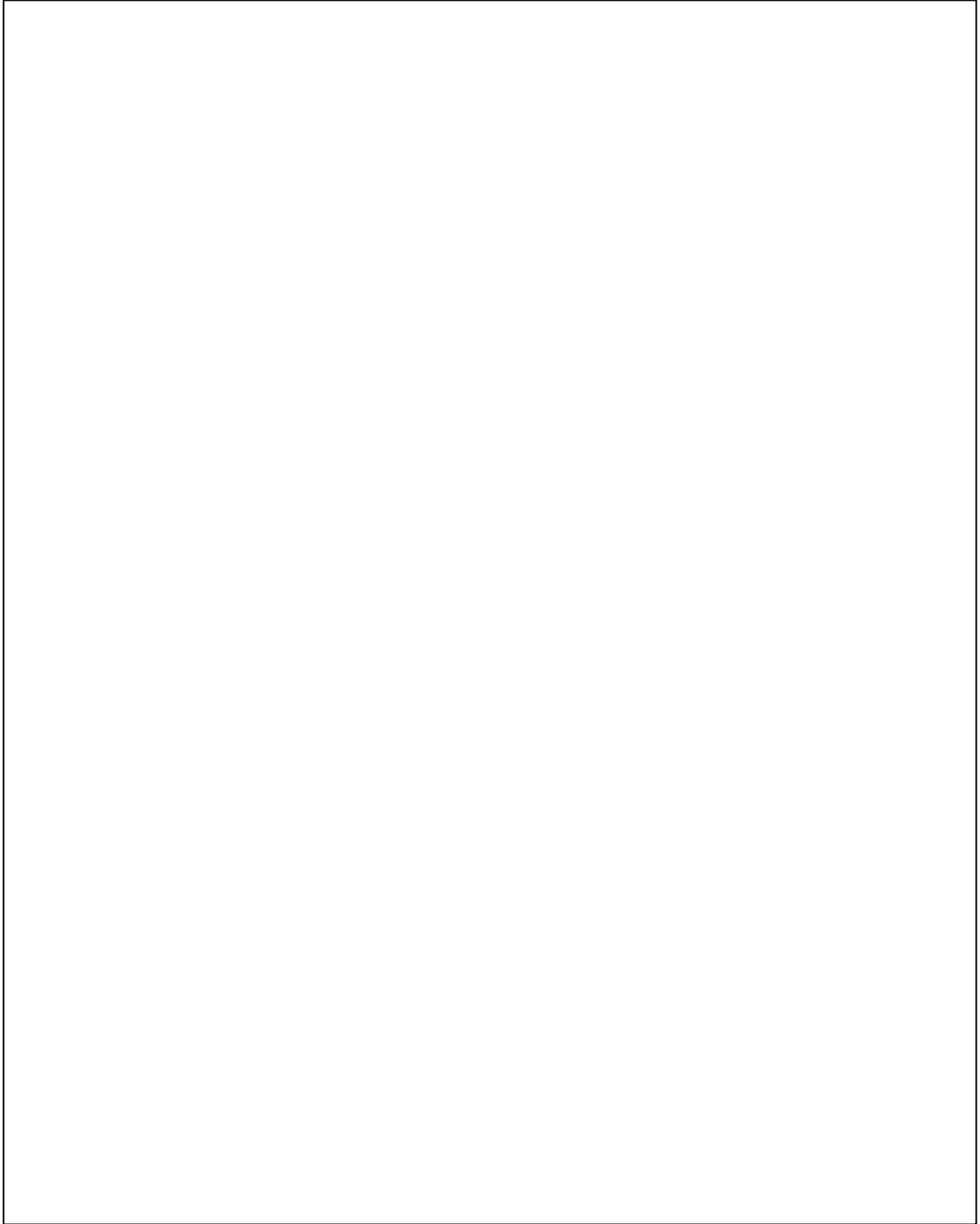
Proposed Program Financing Plan for SFR:			
1. Complete the chart for the average cost per home for the following:	Trust Fund	Other Sources	Total
a. Rehabilitation	\$	\$	\$
b. Lead-based paint	\$	\$	\$
c. Construction contingency	\$	\$	\$
d. Construction Total (a + b + c)	\$	\$	\$
e. Title search	\$	\$	\$
f. Third party Inspection Fees	\$	\$	\$
g. Recording Fees	\$	\$	\$
h. Lead wipes and lab fees	\$	\$	\$
i. Relocation	\$	\$	\$
j. Termite inspection/treatment	\$	\$	\$
k. Other	\$	\$	\$
l. Soft Cost Total (e + f + g + h + i + j + k)	\$	\$	\$
m. Project Delivery per home (max 15% of hard and soft costs)	\$	\$	\$
n. Total Cost per Home *(d + l + m)	\$	\$	\$
o. Projected number of homes			
p. Total cost rehabilitation (n x o)	\$		
q. Administrative Fee (5%)	\$		
r. Total Program Cost--SFR (p + q)	\$		
2. If other Sources are listed in the chart above, describe and attach evidence of commitment:			

* Total cost per home may not exceed \$45,000.


Proposed Program Financing Plan for SFR-R:			
1. Complete the chart for the average cost per home for the following:	Trust Fund	Other Sources	Total
a. Rehabilitation or Replacement	\$	\$	\$
b. Soffits, downspouts, fascia	\$	\$	\$
c. Construction contingency	\$	\$	\$
d. Construction Total (a + b + c)	\$	\$	\$
e. Title search	\$	\$	\$
f. Recording Fees	\$	\$	\$
g. Other	\$	\$	\$
h. Soft Cost Total (e + f + g)	\$	\$	\$
i. Project Delivery per home (max 15% of hard and soft costs)	\$	\$	\$
j. Total Cost per Home *(d + h + i)	\$	\$	\$
k. Projected number of homes			
l. Total cost of project (j x k)	\$		
m. Administrative Fee (5%)	\$		
n. Total amount – Roof Only Option (l + m)	\$		
2. If other Sources are listed in the chart above, describe and attach evidence of commitment:			

***Total cost per home may not exceed \$16,500.**

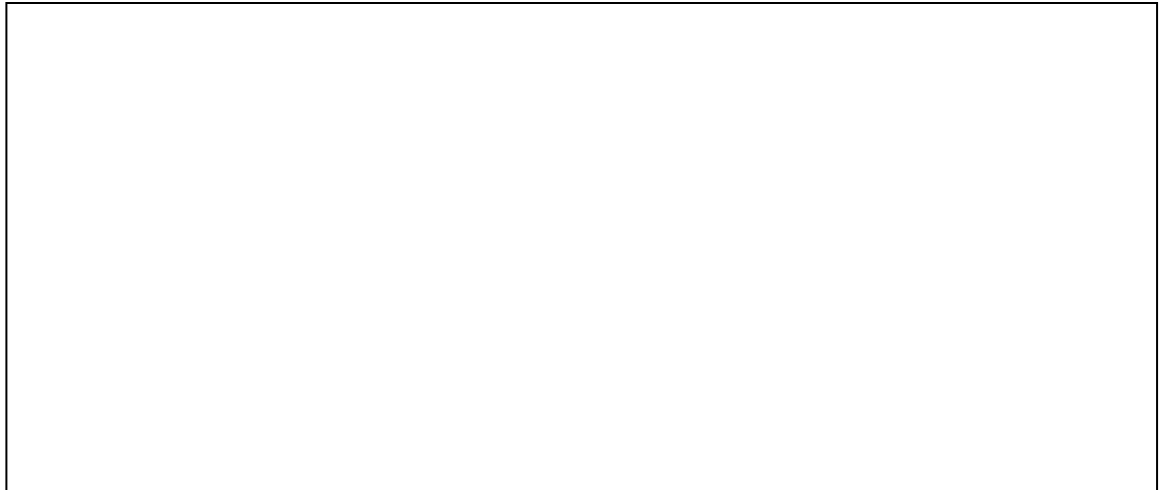
24. Provide a detailed administrative budget for the program. Show all costs associated with implementing this program. IHDA will provide up to 5% of the grant amount for your administrative costs. Disbursement will be based on actual expenditures of funds for project costs. Please provide your cost allocation plan for indirect costs.



25. Please describe the specific steps the applicant takes to ensure that rehabilitation costs are competitive and reasonable.



26. Please describe the specific steps the applicant takes to ensure that third party vendor costs are reasonable.



Scoring Category 6: Readiness to Proceed (max 20 points)

- 27. Complete the [Participant Selection Plan](#) outlining your marketing and selection process.

- 28. Describe your procedures and mechanisms for **intake and selection**, including how your organization will prioritize eligible participants in your program. Common techniques include accepting applications only from the target area; taking people on a first-come first-served basis; holding a lottery; having a specific allocation plan; ranking requests on preset criteria; or, some combination of these. If selected for funding, a full Participant Selection Plan will be required of each funded agency.

- 29. Describe the agency's process for **selecting and pre-qualifying contractors** and subcontractors, including contractors who are certified in lead-based paint treatment and removal.

- a. Provide a list of pre-qualified contractors. In addition, please provide a list of pre-qualified contractors with Illinois roof licenses.

- b. Describe the agency's plan to include participation of MBE/WBE contractors in this program. Include a list of MBE/WBE contractors from the agency's area.

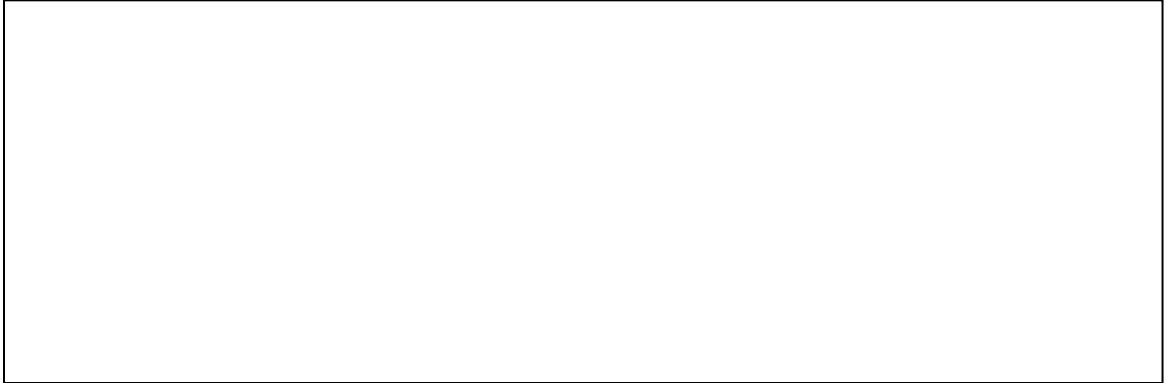
- 30. Describe the agency's construction management procedures in detail specifically regarding the following items:

- a. Describe the agency's lead-based paint procedures. Who will do the initial evaluation?

- b. Describe the agency's plan for coordinating and monitoring the rehabilitation process.

- c. Describe the agency's process for inspection and approval of work.

31. Describe the agency's **disbursement process**. Specifically outline the process flow and responsibility for processing payment requests and payment of contractors. State who is responsible for each function, their title, and what backup they require to perform their function. Trust Fund monies will be paid on a reimbursement basis for completed work only.



Local Elected Officials Information

Provide the following information for the areas in which you intend to operate the program (attach additional sheets, if necessary). Officials will be notified about the application request.

<u>U.S. Congressperson</u>	<u>District</u>
Address:	
City, State:	Zip Code:
Email:	Phone:
<u>State Senator</u>	<u>District</u>
Address:	
City, State:	Zip Code:
Email:	Phone:
<u>State Representative</u>	<u>District</u>
Address:	
City, State:	Zip Code:
Email:	Phone:
<u>Chairperson of County Board</u>	<u>County</u>
Address:	
City, State:	Zip Code:
Email:	Phone:
<u>Mayor</u>	<u>City</u>
Address:	
City, State:	Zip Code:
Email:	Phone:

Standard Requirements and Certifications

Every grantee under the program will be required to comply with these certifications and requirements as well as any additional certifications or requirements covered in the grant documents:

1. Applicant certifies that all statements herein are true, accurate, and complete;
2. Applicant will comply with the Illinois Affordable Housing Act (310 ILCS 65/) as may be amended from time to time;
3. Applicant is an eligible recipient of grant funds based on Section 360.103 of the [Program Rules](#);
4. Applicant will not permit any discrimination on the basis of gender, race, religion, national origin, ancestry, creed, pregnancy, marital or parental status, sexual orientation, or physical, mental, emotional or learning disability in connection with its participation in the Program;
5. Applicant will ensure expenditures of grant funds are for eligible uses under the Program;
6. Applicant will maintain records in connection with administration of the Program for five years after the date of termination of the grant agreement;
7. Applicant will comply with the terms and conditions of the Program;
8. Applicant will comply with monitoring and evaluation of the Program through the full term of the grant or as further specified in the grant documents;
9. Applicant will comply with all federal/state/local laws and regulations, including, but not limited to historical preservation, environmental, and lead based paint laws; Applicant agrees and acknowledges that it is its responsibility to determine which laws and regulations apply;
10. Applicant certifies that all procurements/vendor contracts comply and will continue to comply with all applicable laws and regulations, including applicable municipal procurement policies and procedures; and
11. Applicant certifies all households assisted with this grant will be Low-Income as defined byto Section 360.01 of the Illinois Administrative Code/Trust Fund Program Rules.
12. Neither the applicant nor its affiliates or related entities are delinquent in the payment of any debt to the State of Illinois (or if delinquent, has entered into a deferred payment plan to pay the debt) and applicant and its affiliates.

On behalf of _____, I certify that the information contained herein accurately reflects my organization's commitment and ability to participate fully in the Single Family Rehabilitation Program.

Name

Title

Date (MM/DD/YYYY)

Signature of Authorized Official