1. **CDBG PUBLIC FACILITIES**

**NOFA APPLICATION CHECKLIST**

|  |  |
| --- | --- |
| Applicant |  |
| Project Name |  |
| Project Address |  |
| Amount of Funds Requested |  |

|  |
| --- |
| **For City Use Only** |
| Required Application Content*(in separately tabbed sections)* |  Enclosed | Date Received | Complete | Not Complete |
| 1. CDBG Public Facilities NOFA Application Checklist
 |  |  |  |  |
| 1. CDBG Public Facilities NOFA Application Workbook
 |  |  |  |  |
| 1. Application Content and Project Narrative
 |  |  |  |  |
| 1. Community Benefit Narrative
 |  |  |  |  |
| 1. Project Feasibility
 |  |  |  |  |
| 1. Management Capacity
 |  |  |  |  |
| 1. Project Administration
 |  |  |  |  |
| 1. Workforce Development
 |  |  |  |  |
| 1. Resilient Development
 |  |  |  |  |
| 1. Complete Communities
 |  |  |  |  |
| 1. Certification Regarding Location of Facilities and Shelters
 |  |  |  |  |
| 1. Certification Regarding Debarment, Suspension, and Other Responsibility Matters
 |  |  |  |  |
| 1. Certification for Contracts, Grants, Loan, and Cooperative Agreements
 |  |  |  |  |
| 1. Sam.gov Unique Entity ID and registration
 |  |  |  |  |
| 1. Conflict of Interest Questionnaire Form, if applicable
 |  |  |  |  |
| 1. Anti-Collusion Statement
 |  |  |  |  |
| 1. Affidavit of Ownership Form
 |  |  |  |  |
| 1. HCDD Conflict of Interest Form
 |  |  |  |  |
| 1. List of Board of Directors, Owners, Officers
 |  |  |  |  |
| 1. Articles of Incorporation or Charter Documents
 |  |  |  |  |
| 1. Bylaws or rules
 |  |  |  |  |
| 1. Organization chart
 |  |  |  |  |
| 1. Organization chart supplement
 |  |  |  |  |
| 1. Community Support letters
 |  |  |  |  |
| 1. Purchase Contract, if applicable
 |  |  |  |  |
| 1. Certificate of Occupancy, if applicable
 |  |  |  |  |
| 1. Appraisal
 |  |  |  |  |
| 1. Project Site Survey
 |  |  |  |  |
| 1. Map of Site
 |  |  |  |  |
| 1. Phase I ESA
 |  |  |  |  |
| 1. Copy of deed restrictions or Land Use Restrictions that apply to the property, if any
 |  |  |  |  |
| 1. Letter of Notification to District Council Member
 |  |  |  |  |
| 1. Most recent two years financial audit
 |  |  |  |  |
| 1. IRS 990
 |  |  |  |  |
| 1. Two fiscal years financial statements
 |  |  |  |  |
| 1. Proof of Income/Revenue for operation of proposed project
 |  |  |  |  |
| 1. Bank Statements, six months of most recent
 |  |  |  |  |
| 1. Balance sheet and income statements
 |  |  |  |  |
| 1. Current year's Operating Budget
 |  |  |  |  |
| 1. Board Member Resumes
 |  |  |  |  |
| 1. Resumes for Executive Director and Program Manager
 |  |  |  |  |