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 |  |  |  |  |