FY 2019 HOME INVESTMENT PARTNERSHIP GRANT APPLICATION KIT



City of Harrisburg Department of Building & Housing Development MLK City Government Center, Room 206 Harrisburg, PA 17101

Phone: (717) 255 - 6419

Mayor Eric Papenfuse

Harrisburg City Council

HOME INVESTMENT PARTNERSHIP PROGRAM (HOME) CONSOLIDATED REQUEST FOR PROPOSALS (RFP)

I. TIMELINE OF EVENTS

| EVENT Request for Proposals available <u>Pre-Proposal Worksho</u> | <u>qc</u> | DATE March 15, 2019 |
|---|--------------------------|--|
| Public Safety Auditorium Room 213 Harrisburg Police Harrisburg, PA (Please arrive through City) | | March 14, 2019 2:00 p.m. |
| Public Meeting Date March 20, 2019 | <u>Time</u> 5:30 p.m. | <u>Location</u> Latino Hispanic American Community Center 1319 Derry Street Harrisburg, PA 17104 |
| March 27, 2019 | 5:30 p.m. | The Rev. Martin L. King, Jr City Government Center City Council Chambers 10 North Second Street Harrisburg, PA 17101 |

A Spanish translator will be available at all meetings. All facilities are handicap-accessible.

Due Date of Proposals

Proposals for funding are due by 12:00 noon, Thursday, April 11, 2019

Two (2) complete copies with attached supporting organization information (as listed on page 14) and one (1) electronic copy of just this RFP application due by 12:00 p.m. to: Rumulus Brown Project Manager Department of Building and Housing Development Rev. Dr. Martin Luther King, Jr., City Government Center 10 North Second Street - Suite 206 Harrisburg, PA 17101 717.255.6402 Rwbrown@harrisburgpa.gov

- (To be scheduled) City Council Committee Public Hearing on proposed Consolidated Annual Action Plan
- October 1, 2019 Funds available (subject to Contract negotiations)

APPLICANT INSTRUCTIONS

APPLICATION DEADLINE:

Applications must be received in the Department of Building & Housing Development <u>no later than</u> <u>12:00 noon, April 11, 2019</u>

Complete all forms and narratives included in this application package. Attach supporting documentation as required.

<u>Please submit Two (2) complete copies with supporting applicant organizational information (listed on page 13)</u> <u>and one (1) electronic copy of just this RFP application</u>. Please do not submit any more than the requested information; brevity and clarity are appreciated. Incomplete applications may delay consideration of your request.

All applicants are encouraged to call or email Rumulus Brown at 717-255-6402 or rwbrown@cityofhbg.com for assistance with questions regarding the preparation of your application.

- STAFF MAY REQUIRE ADDITIONAL INFORMATION to consider application request and/or require applicant to perform work not specifically stated in this application.
- PREMATURE COMMITTING OR EXPENDING FUNDS. Project costs are not eligible for HOME reimbursement if they have been committed or spent prior to Environmental Clearance and execution of the subrecipient agreement.
- AN ENVIRONMENTAL REVIEW IS REQUIRED FOR EACH PROJECT RECEIVING HOME FUNDING. Depending on the type of project, this process takes 120 days or more to complete and can be a significant impact on the time required to implement a project.
- CONSTRUCTION OR REHABILITATION PROJECTS MAY REQUIRE THAT CONSTRUCTION WORKERS BE PAID IN ACCORDANCE WITH DAVIS-BACON WAGE REGULATIONS (D/B). A determination of the D/B applicability will be made prior to entering into a contract and the start of work. If D/B applies to the project, labor costs for the project may increase. Include Form HUD-4010 and applicable wage decision in bid and contract documents
- THE CITY OF HARRISBURG MAY PLACE A MORTGAGE ON ACQUISITION AND/OR REHAB CONSTRUCTION PROJECTS FUNDED BY THE HOME PROGRAM. The type and duration of liens will depend on the type and amount of the project being funded.
- A SITE VISIT MAY BE CONDUCTED. The Proposal Review Committee may request a site visit of proposed project. Notification will be given to the applicant prior to the site visit.
- ALL HOME-FUNDED PROJECTS MUST BE ACCESSIBLE TO PERSONS WITH DISABILITIES. Information, participation, communications, and services regarding your project must be accessible to persons with disabilities in compliance with the Americans with Disabilities Act (ADA).

I have read and understand the above information:

AGENCY NAME:

AUTHORIZED AGENCY SIGNATURE: ______

TYPED NAME AND TITLE:

HARRISBURG'S COMMUNITY DEVELOPMENT GOALS

The purpose of the Consolidated Plan (CP) is to guide funding decisions in the city of Harrisburg over the next three years of specific federal funds. The CP is guided by three overarching goals that are applied according to the City of Harrisburg's needs. The goals are:

- To provide decent housing by preserving the affordable housing stock, increasing the availability of affordable housing, reducing discriminatory barriers, increasing the supply of supportive housing for those with special needs, and transitioning homeless persons and families into housing.
- To provide a suitable living environment through safer, more livable neighborhoods, greater integration of low and moderate income residents throughout the City, increased housing opportunities, and reinvestment in deteriorating neighborhoods.
- To expand economic opportunities through more jobs paying self-sufficient wages, homeownership opportunities, development activities that promote long-term community viability, and the empowerment of low and moderate income persons to achieve self-sufficiency.

HOME GENERAL POLICIES (24 CFR PART 92)

In general, under the HOME Investment Partnership Program, HUD allocates funds by formula among eligible State and local governments to strengthen public-private partnerships and to expand the supply of decent, safe, sanitary, and affordable housing, with primary attention to rental housing, for very low-income families.

HOME funds must be matched at 50% by nonfederal resources.

HOME funds may be used to develop and support affordable rental housing and homeownership affordability through the acquisition (including assistance to homebuyers), new construction, reconstruction, or rehabilitation of non-luxury housing with suitable amenities, including real property acquisition, site improvements, conversion, demolition, and other expenses, including financing costs, relocation expenses of any displaced persons, families, businesses, or organizations; to provide tenant-based rental assistance, including security deposits; to provide payment of reasonable administrative and planning costs; and to provide for the payment of operating expenses of community housing development organizations.

PROJECT SELECTION CRITERIA

Completeness of application

Detailed project description

Adequacy of project eligibility documentation

Adequacy of national objective justification (i.e., low/mod benefit rationale)

Project fits into the community priorities set out by the Consolidated Plan

Project can be completed within a reasonable time frame

Performance in carrying out previously awarded HOME funds

Prior experience with HOME related activities, and/or

Prior experience with other grant programs, and proven record carrying out similar projects in the community

Financial capacity as indicated by audited financial statements and banking/credit references

Financial stability (not total dependence on HOME funds) as indicated by other funding sources and amounts, over time

Adequate staffing (number of staff and qualifications)

Organizational strength, including:

- Recordkeeping methods
- Filing system
- Financial system
- Existence of a written procedures manual for financial management and personnel

| | APPLICANT INFORMATION | N AND | PROJECT ABSTRACT | |
|---------|---|-------|---------------------------------|--|
| 1. | Project Name: | | | |
| 2. | Eligible HOME Activity: (See Exhibit A) | | | |
| 3. | HOME Funding Year: FY 2019 | | | |
| 4. | Legal Name of Applicant Organizatio | n: | | |
| 5. | Address: | | | |
| 6. | Telephone: | 7. | Fax: | |
| 8. | Federal Tax ID No. | 9. | Applicant's hours of operation: | |
| 10. | D. Type of Organization: | | | |
| | Non-profit | F | or-profit | |
| | Other: | | | |
| 11. | Name of Principal Contact Person: | | | |
| 12. | Title: | 13. | Email address: | |
| 14. | Amount of HOME funds requested: | \$ | | |
| 15. | Funds committed from other source | s: \$ | | |
| 16. | . Total project cost (Line 14 + Line 15): \$ | | | |
| 17. | 7. Location of proposed project: (street address) | | | |
| applica | The applicant certifies that to the best of its knowledge and belief, the information included in this application is true and correct, and that the applicant will comply with all federal requirements should this application be approved for funding. | | | |
| | Signature Dat | e | Typed Name and Title | |

PROJECT DESCRIPTION

Briefly describe the proposed project. The narrative should include the need or problem to be addressed in relation to the Consolidated Plan or other community development priorities, as well as the population to be served or the area to benefit. Describe the work to be performed, including the activities to be undertaken or the services to be provided, the goals and objectives, method of approach, and the implementation schedule. Attach additional sheets if necessary.

Be very specific about who will carry out the activities, the location in which they will be carried out, the period over which the activities will be carried out, and the frequency with which the activities will be carried.

Describe the site where the project will be implemented. Are you able to demonstrate site control?

PERFORMANCE MEASUREMENT

Describe what you expect to accomplish with your service in terms of:

1. OUTPUT (e.g., "2 units of affordable housing for homeownership")

2. OUTCOME (e.g., "Two households will have access to affordable homeownership")

HOME STATUTORY OBJECTIVE JUSTIFICATION – LOW AND MODERATE INCOME BENEFIT

Area Benefit – All HOME activities must benefit household persons meeting the 80% LMI guidelines and generate affordable housing units.

Family size and income – check this box if you intend to utilize household income surveys to document the size and annual income of each person receiving the benefit.

LINE ITEM BUDGET FORM – CONSTRUCTION PROJECTS

| Name c | of App | licant: |
|--------|--------|---------|
|--------|--------|---------|

Project Name:

Instructions: Please use the following format to present your proposed line item budget. In column A, list the items for which you anticipate the need for HOME funds. In Column B, provide the calculation explaining how you arrived at the estimated cost of the line item. In Column C, provide the projected request for HOME funds. On Attachment C, provide description of other funds and volunteer and donated services/resources to be used in the project.

| A Budget Item | B Calculation | C HOME Request |
|---------------------------------|--|-------------------|
| PERSONNEL | | |
| Salaried Positions – Job Titles | Provide rate of pay (hourly/salary) and percentage of time spent on project (Full-Time Equivalent) or hours per week | |
| | | |
| Salaries Total | | |
| Fringe Benefits | | |
| PERSONNEL TOTAL | Total of Personnel & Fringe Benefits | |
| OPERATING COSTS | Provide description of how you arrive at total for each line item | |
| Supplies | | |
| Equipment | | |
| Rent/Lease | | |
| Insurance | | |
| Printing | | |
| Telephone | | |
| Travel | | |
| Audit*** | | |
| Other | | |
| TOTAL OPERATING | | |
| CONTRACT SERVICES | | |
| | | |
| | | |
| | | |
| TOTAL CONTRACT SERVICES | | |
| | | |
| BUDGET TOTAL | ed per OMB Circular A-133, however, agency must fund a | <u> </u> |

| | BUDGET NARRATIVE ATTACHMENT |
|----|--|
| 1. | Describe your plans to use other funds on this project. In this section, only describe funds that are secured. Provide the source of funds, amounts, and how these funds will be used. |
| 2. | Describe your plans to seek new funding to supplement HOME funding. Describe the sources to which you will apply, the amounts sought, and the proposed use of those funds. |
| 3. | Describe your use of donated goods and services. Estimate the value of these services and describe how you arrive at these amounts. |
| 4. | Please provide an explanation for any unusual budget expenditures listed in the line item budget on the previous page. |

| | BUDGET NARRATIVE ATTACHMENT |
|----|---|
| 5. | Explain why you consider your program costs to be reasonable. |
| 6. | Will program income be generated by this activity? If so, describe how program income will be used. |
| 7. | Provide an explanation of any unspent HOME funds previously awarded. |

APPLICANT ORGANIZATIONAL INFORMATION

Financial Capacity

Describe the agency's current operating budget, itemizing revenues, and expenses. Identify commitments for ongoing funding. Describe the agency's fiscal management, including financial reporting, record keeping, accounting systems, payment procedures, and audit requirements.

Monitoring

Briefly describe how you will monitor progress in implementing the project. Attach copies of all data collection tools that will be used to verify achievement of project goals and objectives. Describe who will be responsible for monitoring progress.

Insurance/Bonding/Worker's Compensation

State whether or not the agency has liability insurance coverage, in what amount, and with what insuring agency. State whether or not the agency pays all payroll taxes and worker's compensation as required by federal and state laws. State whether or not the agency has fidelity bond coverage for principal staff who handle the agency's accounts, in what amount, and with what insuring agency.

APPLICANT ORGANIZATIONAL INFORMATION

Please attach the following information to your application:

- Demonstration of site control (if applicable)
- The Federal IRS 501(c)(3) designation
- Articles of Incorporation / Bylaws
- Non-profit determinations (tax exempt letter from IRS and/or state)
- List of Board of Directors
- Board of Director's authorization to Request Funds
- Organizational chart
- Resumes of chief program administrator and chief fiscal officer
- Financial statement and audit
- Banking reference
- Insurance/Bond/Worker's Compensation
- Conflict of Interest Statement (form attached)

EXHIBIT "A" - HOME BASIC ELIGIBLE ACTIVITIES

The HOME program was created under the National Affordable Housing Act of 1990 to support efforts to increase the supply of decent safe and affordable housing for low and very low income persons. The HOME program encourages partnerships between participating jurisdictions (PJ's) and private and non-profit organizations to accomplish this objective. Participating jurisdictions are required to provide a match to the federal HOME allocation. This match responsibility is shared with the developer receiving HOME funds.

NATIONAL OBJECTIVES

- 1. To expand the supply of decent, safe, sanitary, and affordable housing for low and very low income persons.
- 2. Strengthen the abilities of state and local governments to provide housing.

LOCAL OBJECTIVES

The City of Harrisburg will use its HOME funds to expand its capacity to improve housing conditions along Harrisburg's major streets identified as the Mulberry Street Neighborhood Revitalization including, Derry, South 13th, Sylvan Terrace, Crescent St., Kittatinny St., Nectarine St., Hummel St., Evergreen St., Fishel Alley, Haehnlen St., Christian St., and Wert Place. HOME funds will also be utilized to assist low income owner occupants throughout the City in the completion of basic home repairs. Activities must be consistent with and supportive of the Consolidated Plan and neighborhood plans.



EXHIBIT "B" - RECORDKEEPING RESPONSIBILITIES

Successful applicants will be required to sign a contract with the City which will state all the requirements to be placed on the applicant. In general, the following will apply to all applicants:

- 1. Written records to justify all expenditures must be maintained for a period not less than three (3) years after the full amount of the grant is expended. Your records will be subject to review by the City and HUD.
- 2. You will be required to maintain the City's minimum insurance standards, to be evidenced by a copy of the policy provided to the City within 10 days of execution of the contract.
- 3. You must agree to administer the HOME program in accordance with 2 CFR Part 200, Subpart E, "Cost Principles for Non-Federal Entity, and Subpart F Audit Requirements
- 4. In accordance with the 2 CFR Part 200 Subpart F, the federal government requires that organizations expending \$750,000 or more in federal financial assistance in a fiscal year must secure an audit. Agencies requesting \$750,000 or more must choose one of the three ways of meeting this requirement and state which method they choose:
 - a. If your agency already conducts audits of all its funding sources including HOME, the agency must submit a copy of its most recent audit, and may, at its discretion, include the HOME portion of the audit cost in its HOME project budget.
 - b. If your agency already conducts audits of its other funding sources but has neither received nor included HOME in the past, the scope of the audit would be modified to incorporate HOME audit requirements. The associated cost of the augmentation could then be included in the HOME project budget, accompanied by the auditor's written cost estimate.
 - c. If your agency does not have a current audit process in place, your agency will be required to include a 10 percent set-aside in the HOME project for the provision of an audit.
- 5. You will be required to provide semi-annual reports stating the total number of persons served, including their ethnic origin, and whether they are female heads of household. These figures are required to be reported by HUD.
- 6. You will be required to obtain written proof of income of each person or household which you assist, unless your clients are abused children, battered spouses, elderly persons, handicapped persons, homeless persons, illiterate persons, or migrant farm workers.
- 7. You must have a written policy designed to ensure your facilities are free from the illegal use, possession, or distribution of drugs or alcohol.
- 8. If any income is derived from the activities funded by HOME, that income must be returned to the City *as program income.*
- 9. In the event that HUD should determine that HOME funds were improperly spent, and that money should be reimbursed to the U.S. Treasury, your organization will be responsible for this reimbursement.



City of Harrisburg



Department of Building and Housing

Development

Bureau of Housing Phone: 255-6419

Conflict of Interest

All contractors and vendors for the City of Harrisburg's Department of Building and Housing Development contracts are required to comply with Federal Regulations prohibiting conflicts of interest. The regulation concerns the following groups of people:

- a) Employees, program participants, consultants, officers, elected or appointed officials of the City of Harrisburg, or;
- b) Employees, consultants or officers of any firm or agency receiving funds for, or participating in City activities.

Please answer the following questions so that it may be determined if a conflict of interest exists:

 Are you now, or have you been in the preceding year, in either category (a or b) described above?

No____

Yes_____

- Is any member of your household or family now, or have you been in the preceding year, in either category (a or b) described above? Yes_____ No____
- 3. Is any person with who you have a business relationship, or have had in the preceding year, in either category (a or b) described above? (A person with whom you have a business relationship includes your employees, partners, shareholders, officers or directors, persons in joint ventures, landlords, lenders, sellers of real estate, consultants, clients, co-workers, major equipment lessors or suppliers.)

Yes_____ No____

Please disclose any person(s) names with whom you may have determined that a potential conflict exists.

I hereby certify, under penalty of law, that all information provided is complete and true to the best of my ability, and further understand that the City of Harrisburg shall use this information, in confidence, to make its determination of my eligibility for federally-assisted contracts.

 Name______Date____

 List below all persons who you feel may be relevant to the preceding statements:

| Name | Address | Relationship | City Department |
|------|---------|--------------|-----------------|
| | | | |
| | | | |

EXHIBIT "C" - COMMUNITY HOUSING DEVELOPMENT ORGANIZATIONS (CHDO)

ELIGIBILITY REQUIREMENTS (CHDO GUIDELINES ARE AVAILABLE)

The information contained in this checklist refers to the definition of CHDO Subpart A, Section 92.2 of the HOME Final Rule.

| <u>Legal Status</u> | |
|---------------------|--|
| (1) | The nonprofit organization is organized under State and local laws, as evidenced by: a Charter, <u>or</u> |
| | Articles of Incorporation. |
| (2) | No part of its net earnings inuring to the benefit of any member, founder contributor, or individual, as evidenced by: A Charter, <u>or</u> |
| | A charter, <u>or</u> Articles of Incorporation. |
| (2) | Use a tay exemption ruling from the Internal Devenue Service under Section 501 (c) of the Internal |
| (3) | Has a tax exemption ruling from the Internal Revenue Service under Section 501 (c) of the Internal Revenue Code of 1986, as evidenced by: |
| | a 501 (c) Certificate from the IRS. |
| (4) | Has among its purposes the provision of decent housing that is affordable to low-income and moderate-income persons, as evidenced by: |
| | a Charter, <u>or</u> Articles of Incorporation. |
| | By-laws, <u>or</u> |
| | Resolutions. |
| <u>Capacity</u> | |
| (1) | Conforms to 24 C.F.R. 84.21 "Standards for Financial Management Systems", as evidenced a notarized statement by the president, financial officer of the organization; a certification from a Certified Public Accountant, <u>or</u> a HUD approved audit summary. |
| (2) | Has a demonstrated capacity for carrying out activities assisted with HOME funds, as |
| | evidenced by: |
| | resumes and/or statements that describe the experience of accomplished staff members who have successfully completed projects similar to those to be assisted with HOME funds, <u>or</u> |
| | contract(s) with a consultant firm(s) or individual(s), who have housing experience similar to projects to be assisted with HOME funds, to train appropriate key staff members of the organization. |

(3) Has a history of serving the community within which housing to be assisted with HOME funds is to be located, as evidenced by:

A statement that documents at least one year of experience in serving the community, or

for a newly created organization formed by local churches, service, or community organizations, a statement that documents that its parent organization has at least one year of experience in serving the community.

(4) The CHDO, or its parent organization must be able to show one year of serving the community from the date the participating jurisdiction provides HOME funds o the organization. In the statement, the organization must describe its history (or its parent organization's history) of serving the community by describing activities which it provided (or its parent organization provided), such as, but not limited to: (1) developing new housing, rehabilitating existing stock or managing housing stock and; (2) developing delivery mechanisms for essential services that have lasting benefits for the community, such as housing counseling services, or childcare facilities. The statement must be signed by the president of the organization or by a HUD approved representative.

Organizational Structure

- (1) Maintains at least one-third of its governing membership for residents or low-income neighborhoods, other low-income community residents, or elected representatives of low-income neighborhood organizations, as evidenced by the organization's:
 - _____ By-laws,
 - _____ Charter, <u>or</u>
 - _____ Articles of Incorporation.

Under the HOME program, for urban areas, the term "community" is defined as one or several neighborhoods, a city, county, or metropolitan are. For rural areas "community" is defined as one or several neighborhoods, a town, village, county, or multi-county area (but not the entire state), provided that the governing board contains low-income residents from each county of the multi-county area. Also see "neighborhood "definition at 24 CFR 92.2

(2) Provides a formal process for low-income, program beneficiaries to advise the organization in all of its decisions regarding the design, sitting, development and management of affordable housing projects as evidenced by the organization's:

| By-laws, |
|---|
| Resolutions, <u>or</u> |
| a written statement of operating procedures approved by the governing body. |

(3) A CHDO can be chartered by a State or local government; however, the State or local government may not appoint more than one-third of the membership of the organization's governing body and no more than one-third of the governing body board members are public officials, as evidenced by the organization's:

 By-laws,

 Charter, or

 Articles of Incorporation.

(4) If the CHDO is sponsored or created by a for-profit entity, the for profit entity may not appoint more than one-third of the membership of the CHDO's governing body, and the board members appointed by the for-profit entity may not appoint the remaining two-thirds of the CHDO board members, is evidenced by the CHDO's:

 By-laws,

 Charter, or

 Articles of Incorporation.

Relationship With For-Profit Entities - Not Applicable

(1) Is not controlled by, nor under the direction of individual or entities seeking to serve profit or gain from the organization, as evidenced by:

_____ the organization's By-laws, <u>or</u>

_____ Memorandum of Understanding (MOU).

- (2) A CHDO may be sponsored or created by a for-profit entity, however:
 - (A) the for-profit entity's primary purpose does not include the development of management of housing, such as a builder, developer, or real estate management firm, as evidenced:

_____ in its By-laws

AND;

(B) the CHDO must be free to contract for goods and services from vendors of its own choosing, as evidenced in the CHDO's:

LOGIC MODEL – PLEASE COMPLETE LOGIC MODEL (SAMPLE ON FOLLOWING PAGE)

| OUTCOMES Benefits that result from the program | | |
|---|---|--|
| OUTPUTS Direct products of program activities | | |
| ACTIVITIES What the program does with the input to fulfill its mission | t one outcome.) | |
| INPUTS Resources to be utilized to meet proposed goals | eed to measure at least | |
| GOAL Proposed goals to reduce problems or needs | MEASURING OUTCOME: (You n | |
| NEED STATEMENT Description of Need to be Addressed | DESCRIBE METHODOLOGY FOR MEASURING OUTCOME: (You need to measure at least one outcome.) | |

| NEED STATEMENT Description of Need to be Addressed | GOAL Proposed goals to reduce problems or needs | INPUTS Resources to be utilized to meet proposed goals | ACTIVITIES What the program does with the input to fulfill its mission | OUTPUTS Direct products of program activities | OUTCOMES Benefits that result from the program |
|--|--|---|--|---|--|
| EXAMPLE Homeless facility for 25 women and children. Facility is designed to move women toward self sufficiency Many have substance abuse and mental health issues. Women are helped to identify their problems through extended case management and guided direction. | The purpose of the program is to help homeless women and their children achieve permanent housing and self- sufficiency. | Staff Director Case Managers Housing Manager Overnight Coordinators Shelter Building Referrals Referrals and supplies and supplies Funding Resources | Provide beds/clothing and meals Maintain relationships with community agencies. Provide case management, encouragement and direction to women and their children. Continuous fund development. | 25 women and children supplied with beds, meals and clothing. 25 women and children and children and children provided with unlimited staff time and personal developmen t strategies. | All beds were filled. All individuals were clothed and feed. All individuals were placed with case workers and directed to referral agencies for direction and guidance. Received 2 new funding sources. |
| DESCRIBE METHODOLOGY FOR MEASURING OUTCOME: (You need to measure at least one outcome.) | AEASURING OUTCOME: (You need | l to measure at least | one outcome.) | | |
| Indicator 1 – Number of women who were placed with caseworkers and referral agencies became self-sufficient. Method: The number of women who were placed with case workers and referral agencies will e monitored by staff to see how many actually followed through with the direction that was provided to them. | vho were placed with caseworker ers and referral agencies will e m | s and referral agen onitored by staff tc | cies became self-suffi o see how many actu | icient. Method: ally followed thr | laced with caseworkers and referral agencies became self-sufficient. Method: The number of women erral agencies will e monitored by staff to see how many actually followed through with the direction |

PROJECT DATA SHEET

| Name of Project: | | |
|--|--------------------------|-------------------|
| Name of Agency: | | |
| Target Population: Identify the Number of persons to be Served | Currently | Anticipated to be |
| Annually by the Project | Served | Served |
| Low Income Households (50% or less MFI) | | |
| Moderate Income Households (50 to 80% of MFI) | | |
| Elderly Persons | | |
| Persons with Disabilities | | |
| Homeless Families and Individuals | | |
| Special Population Groups: (identify below) | | |
| Racial Characteristics of Target Population | Show as Percent of Above | |
| White | | |
| African American | | |
| Native Hawaiian/Pacific Islander | | |
| Native American | | |
| Ethnicity of Target Population | Show as Percent of Above | |
| Hispanic | | |
| Non-Hispanic | | |
| Total unduplicated number of persons participating in or served by the er program last year | ntire applicants | |
| Identify the geographic area to be served by the project. List the census space below (see target area map) | tracts or street b | oundaries in the |
| Will this project result in the permanent or temporary displacement of any person or business | Yes | No |
| For facility projects only. Has a survey for asbestos containing material been conducted for the structure(s) to be assisted? | Yes | No |
| | Yes | No |
| Will children under the age of 6 be expected to reside in the facility for which assistance is requested? | | |

EXHIBIT "D" – PERFORMANCE AND OUTCOME MEASURES

The U.S. Department of Housing and Urban Development (HUD) requires recipients of federal funds to assess the productivity and impact of their programs. In response, the City of Harrisburg, Department of Building and Housing Development has implemented a Performance and Outcome Measurement System. The System will help quantify the effectiveness of the programs and establish clearly defined outcomes.

Per HUD's requirements, all proposals must demonstrate how they would perform using this system should they receive funding.

** Note the following definitions are specific to this system as you prepare your application.

Performance & Outcome Measurement System Definitions

Inputs: Resources dedicated to or consumed by the program, such as money, staff, equipment, and supplies.

Outcomes: Benefits to participants during or after participating in the program; the *results* of that program. What will be the benefits for the client? Why is this project being done? Outcomes typically relate to a change in conditions, status, attitudes, knowledge, or behavior. Examples of outcomes include number of families receiving free or subsidized childcare, number of homeless families receiving shelter, achieving a higher grade due to a tutorial program, etc. Include only the major project outcomes supported by the requested City funds.

<u>Major Activities</u>: Major activities to be conducted by this project (e.g., client outreach/assessment, job training, affordable childcare, information/referral, counseling/case-management).

<u>**Outputs:**</u> The direct and quantifiable products of program activities (e.g., number of clients assisted, number of clients who received a referral *and* were helped, number of persons trained, number of children in program).

Outcome Measurement: The reportable extent to which benefits to participants were received. How will you measure outcomes? What follow-up/tracking will be provided to ensure outcomes are met? How will the project's impact on participants be evaluated?

Performance Outcome Measurement

The three program performance categories listed below are required under the CDBG program by the U.S. Department of Housing and Urban Development (HUD). Please check one or more boxes under the following program performance categories that apply to your proposal.

1. Availability/Accessibility

This category applies to proposals that make services, infrastructure, housing, shelter or jobs available or accessible to low and moderate income people, including persons with disabilities.

- □ Enhances the living Environment through New/Improved Accessibility
- □ Creates Decent Housing with New/Improved Availability
- Promotes Economic Opportunity through New/Improved Accessibility
- 2. Affordability

This category applies to proposals which provide affordability in a variety of ways in the lies of lowand moderate-income people.

- □ Enhances the living Environment through New/Improved Accessibility
- □ Creates Decent Housing with New/Improved Availability
- Promotes Economic Opportunity through New/Improved Accessibility
- 3. Sustainability

This category applies to proposals that are aimed at improving a community or neighborhood by helping to make it more livable or viable by providing a benefit to principally low-and moderate-income people or by removing or eliminating slums or blighted areas.

- □ Enhances the living Environment through New/Improved Accessibility
- □ Creates Decent Housing with New/Improved Availability
- Promotes Economic Opportunity through New/Improved Accessibility

Please provide a brief explanation on how your proposal will address the selected program performance category. Describe the anticipated quantifiable results of your proposal for the selected category.