



# NORTH HEMPSTEAD HOUSING AUTHORITY

*Managing Agent and Owner of North Hempstead Housing Development Incorporated*

899 Broadway, Suite 121, Westbury, NY 11590

TEL: (516) 627-6433 FAX: (516) 627-8476

## Section I – Applicant Information

1) **Applicant name:** \_\_\_\_\_

Applicant must be either the building’s current or future owner or legal entity acting on behalf of that owner.

2) **Sponsor name (if different from applicant name):** \_\_\_\_\_

3) **Applicant address:** \_\_\_\_\_

**City, State, ZIP:** \_\_\_\_\_

4) **Applicant’s contact name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email address:** \_\_\_\_\_

## Section II –Project Information

1) **Project type.** NHHHA accepts applications for Project-Based Vouchers for three types of projects. Please read all instructions carefully throughout. Definitions of each project type are provided below in accordance with 24 CFR § 983.3. Read these definitions carefully and indicate which type is appropriate for your application.<sup>1</sup>

**New Construction projects:** Housing units that do not exist on the proposal selection date and are developed after the date of selection pursuant to an Agreement between the PHA and owner for use under the PBV program.

**Substantial Rehabilitation projects:** Housing units that exist on the proposal selection date, but do not substantially comply with Housing Quality Standards (HQS) on that date (defined as at least 75% of PBV units passing HQS). Units are developed, renovated, or rehabilitated after the date of selection, pursuant to an Agreement between the PHA and owner, for use under the PBV program. \* If you check this box, you **must** complete Appendix A of this application in order to be considered.

**Existing projects:** Housing units that already exist on the proposal selection date and that substantially comply with Housing Quality Standards (HQS) on that date (defined as

<sup>1</sup> New Construction and Substantial Rehabilitation projects must execute an Agreement to Enter into HAP contract (AHAP). AHAPs are signed after selection, once the project has met subsidy layering requirements. These projects may not begin construction until **after** an AHAP has been executed. If construction has already begun, the project cannot be selected.

at least 75% of PBV units passing HQS). The units must fully comply with the HQS before execution of the Housing Assistance Payment (HAP) contract. If you check this box, you **must** complete Appendix A of this application in order to be considered.

2) **Proposed PBV project name:** \_\_\_\_\_

3) **Name of proposed developer:** \_\_\_\_\_

4) **Proposed management company/agent:** \_\_\_\_\_

5) **Proposed social service provider (if applicable):** \_\_\_\_\_

6) **Number of buildings in project:**<sup>2</sup> \_\_\_\_\_

7) **Proposed PBV project address(es):**

8) **City, State, ZIP:** \_\_\_\_\_

9) **Block and lot number(s):** \_\_\_\_\_

10) **Total proposed units in project (if multiple buildings, indicate number in each building):**

11) **Total units proposed for PBV assistance:** \_\_\_\_\_

12) **Check one and sign below:**

My application is for eight (8) or less PBV-assisted units.

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<sup>2</sup> A "project" is defined by HUD for the purpose of PBV assistance in 24 CFR §983.3: "A project is a single building, multiple contiguous buildings, or multiple buildings on contiguous parcels of land. Contiguous in this definition includes 'adjacent to,' as well as touching along a boundary or a point." Developments that do not meet this definition, i.e. are scattered across non-contiguous parcels, must submit multiple applications and will be considered as multiple, separate projects.

- My application is for nine (9) or more PBV-assisted units. I understand that Davis-Bacon prevailing wage rules apply to projects with nine or more PBV-assisted units, and I agree to comply with all Davis-Bacon requirements, as interpreted by NHHA.

**13) Complete the bedroom distribution chart below.**

Federal PBV regulations (24 CFR § 983.56) limit the number of approved PBV units to the greater of 25 units or 25% of the total units in a project. Projects in census tracts with a poverty rate of 20% or lower may be approved to have up to the greater of 25 units or 40% of the total units in the project awarded PBV assistance.

Requests for additional PBVs in excess of these requirements must be for units designated to serve residents who are elderly or for residents who are offered social service assistance (as defined in 24 CFR § 983.56). These units are considered “excepted” units. Indicate how many units will be excepted and for which reason in the table.

	<b>0-BR</b>	<b>1BR</b>	<b>2BR</b>	<b>3BR</b>	<b>4BR</b>	<b>5BR</b>	<b>Total</b>
<b>Total # units in project</b> (PBV + non-PBV)							
<b>Total # of proposed PBV contract units</b>							
<b>Proposed contract rent</b> (per month) <sup>3</sup>							
<b>Total # excepted units</b> <sup>4</sup> (if applicable)							
<b>Reason for exception (check all applicable based on actual or intended target resident population)</b>							
<b>Elderly</b> (head of household or spouse is 62 or older)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Household is offered social services</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<sup>3</sup> NHHA cannot approve rents for PVB assisted units that are higher than 110% of FMR.

<sup>4</sup> In the chart, the number of “excepted units” is the difference between the greater of 25 units or 25% of units in the project (40% for projects in low-poverty census tracts) and the number of requested PBV units.

**14) Describe need for PBV assistance:**

Please describe how PBV assistance will contribute to the financial health of the project. For example, explain added ability to support debt, mitigate rent burden for existing tenants, provide housing to certain affordability tiers, serve targeted populations, and/or any other circumstances that are applicable to the project.

Explain how the project will be impacted if PBV assistance is **not** awarded. Include description of any financing gaps or indicators of adverse financial health.

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Signature of Applicant (required)

### Section III – Project Narrative

**1) Provide a project narrative with the following components:**

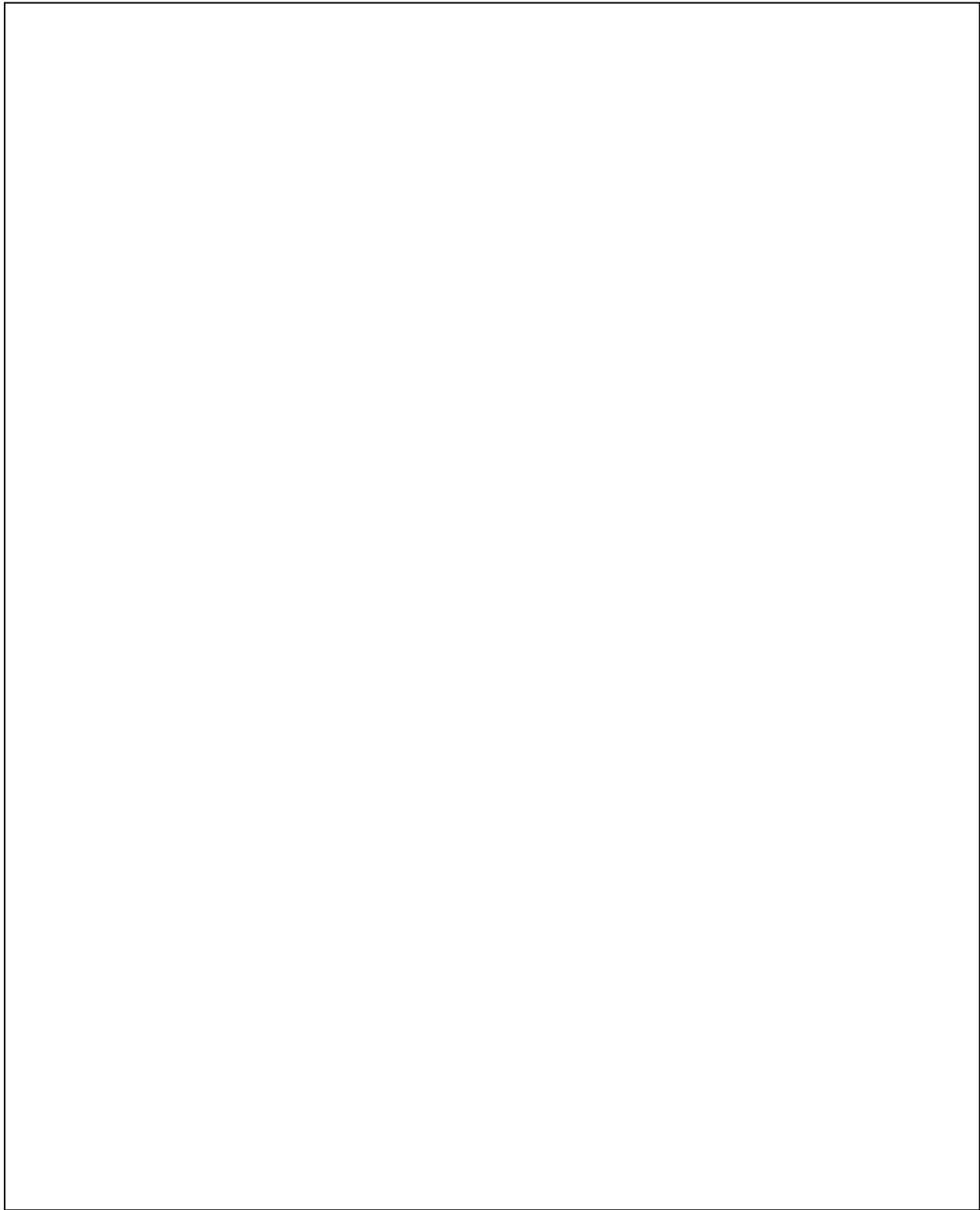
- a) **Project Description** (e.g., location, financing plan, involvement of government agencies and/or private lenders, project timeline, etc.)
- b) **Site and Ownership Description** (public or privately owned site; if applicant is not current owner, explain if under contract to purchase, acquisition plan/date, etc.; include name of current and/or future legal and beneficial owner[s])
- c) **Population to be served** (information about prospective residents including Area Mean Incomes (“AMIs”), services to be provided, and any vulnerable populations to be served<sup>5</sup>)
- d) ***New Construction and Substantial Rehabilitation projects (Existing projects must submit a full tenant selection plan in Appendix A):***

**Include an acknowledgement** that a tenant selection plan consistent with HUD regulations listed below will be submitted six months prior to construction completion.

- o Tenant screening procedures as per 24 CFR §983.255
- o Leasing of contract units procedures and tenant rejection notification as per 24 CFR § 983.253
- o Preferential tenant selection and criteria for the proposed project as per 24 CFR § 982.207. NHHA’s preference criteria is set forth in its Section 8 Administrative Plan, available at <http://northhempsteadhousingauthority.com>.

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<sup>5</sup>Vulnerable populations include, but not limited to: elderly households, defined as those where at least one household member is aged 62 or older; households including at least one disabled adults aged 18-61; and family requiring 3 or more bedrooms.



## Section IV – De-concentration of Poverty & Expanding Opportunity

### 1) Neighborhood Information

Census tract, poverty rate, and minority population rate (a, b, and c below) can be found by entering complete address and zip code at the following website: [FFEIC Geocode Map](#) and clicking *Search*.

- a) **Census Tract of Proposed PBV Project:** \_\_\_\_\_  
Census tract identifier will appear broken down into State Code, County Code, and Tract Code. Enter the four-to-six digit *Tract code* above.
- b) **Poverty Rate:** \_\_\_\_\_  
Poverty rate can be found by clicking the *Census Demographic Data* button, and navigating to the *Income* tab. Enter the amount in *% below Poverty Line* above.
- c) **Minority Population Rate:** \_\_\_\_\_  
Minority population rate can be found by clicking the *Census Demographic Data* button, and navigating to the *Census* tab. Enter the amount in *Tract Minority %* above.

### 2) Is the proposed project located in a census tract with a poverty rate higher than 20%?

Yes  No

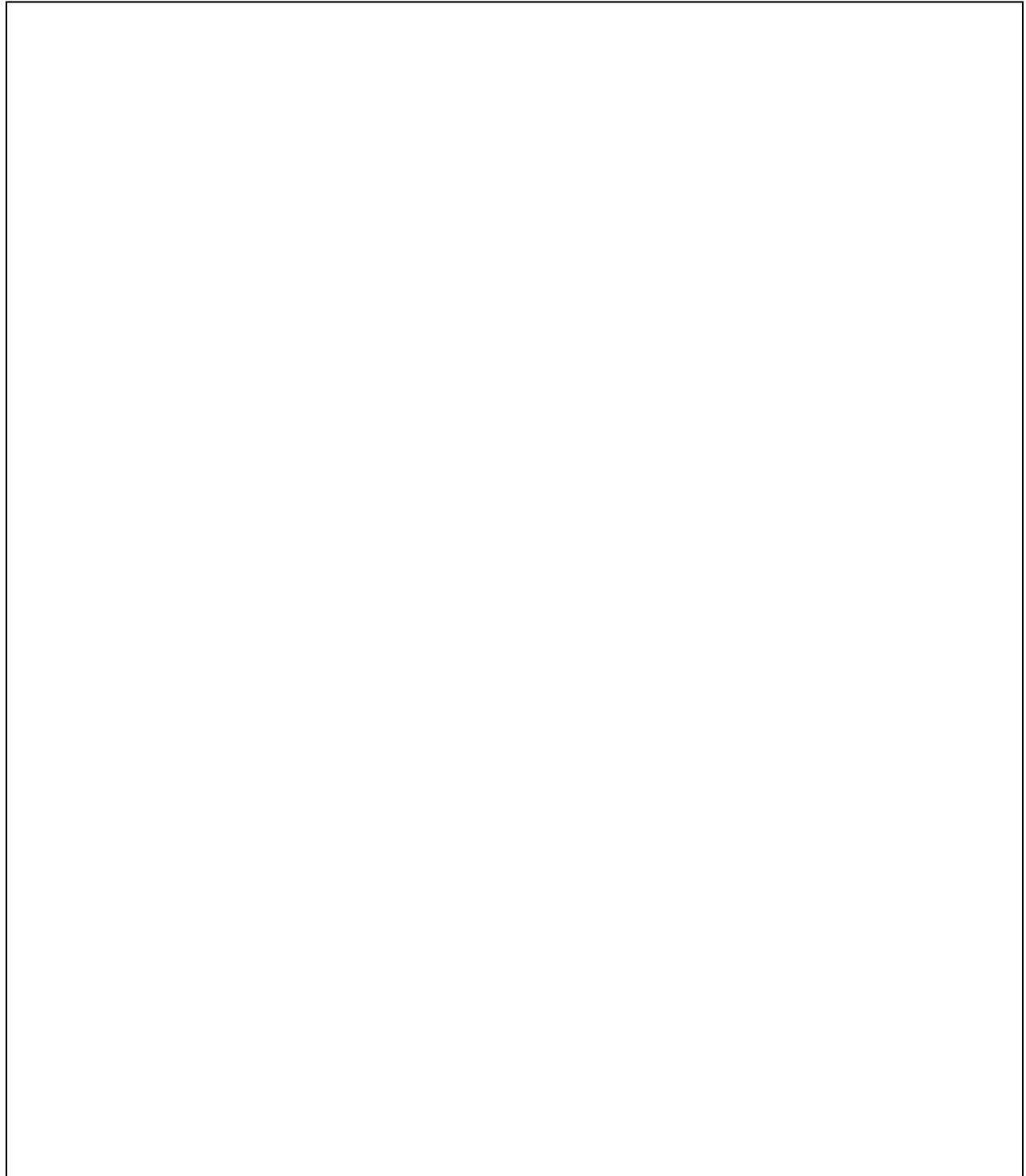
If **yes**, on the following page, provide a brief response to address HUD requirements on how the location of the proposed PBV project promotes the de-concentration of poverty and expands housing and economic opportunities.<sup>6</sup> If necessary, attach additional documentation. Your response should address if any of the following apply and include any other relevant information:

- Significant revitalization occurring in the census tract where the project is located, and in the surrounding neighborhood;
- Any local, state, and/or federal dollars invested in the neighborhood assisting in de- concentrating poverty and expanding opportunity;
- Development of new market-rate housing in the census tract where the project is located, and in the surrounding neighborhood; and

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<sup>6</sup> 24 CFR § 983.57 (b)(1)

- Access to opportunities for educational and economic advancement in the census tract where the project is located, and in the surrounding neighborhood.





**3) Proximity of social, recreation, commercial, employment and health facilities.**

- a) Check one box per each row below.
- b) Attach screenshots or printouts of maps showing examples of each item within a 1-mile radius of the project.

<b>Distance To:</b>	<b>Less than 0.5 mile</b>	<b>Approx. 1 mile</b>	<b>More than 1 mile</b>
Shopping, groceries, pharmacy, access to other daily necessities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public schools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parks, civic facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**4) *New Construction projects only:* Is the proposed project located in a census tract with a concentration of minority residents?**

Yes  No

If **yes**, provide a brief response to address HUD requirements stated in 24CFR § 983.57 (b). For example, how the proposed PBV project will help revitalize the neighborhood economically and assist in meeting affordable housing needs. If necessary, submit additional documentation with your application.

**Section V – Developer and Partner Information**

**1) Previous assisted housing experience**

Please provide the following information about developer and its partners' respective experience with assisted housing, including development financing and rental subsidy assistance. Note that NHHA may consult internal resources for more information.

- a) List any assisted housing projects in NYS with which the **developer and/or sponsor** (and parent company, if applicable) of this project has been affiliated in the past five years.

- b) List any assisted housing projects in NYS with which the **property manager** of this project has been affiliated in the past five years.

- c) List any assisted housing projects in NYS with which the **service provider** for this project has been affiliated in the past five years.

**2) Is the developer, sponsor, owner, service provider, or property manager currently involved in litigation, regulatory noncompliance, or investigation related to their business or affiliated property?**

Yes  No

If **yes**, please provide an explanation below. Responding yes does not automatically disqualify the application from consideration.

**3) Developer/sponsor/owner experience**

Please provide a description of your experience developing rental housing, including:

- Number of years of experience in developing rental housing, including the amount of that time devoted to affordable rental housing. **If you have five years of experience or less in developing affordable rental housing**, please provide additional information explaining your qualifications;
- Number of units developed, specifying separately number of affordable and other rental units; and
- Attach any additional materials as needed.

**4) Property/subsidy management experience**

Please provide a description of your experience, directly or through partners, as a property manager and rental subsidy manager, including:

- Number of years of experience in managing and maintaining rental housing, including the amount of that time devoted to affordable rental housing. **If you have five years of experience or less managing affordable rental housing**, please provide additional information explaining your qualifications;
- Number and type(s) of units under management; and
- Number of years of experience managing assisted rental housing, including Section 8 (through NHHA or other housing agencies; please specify) and other programs. Specify your role in assisting tenants in managing and maintaining their subsidy.

Attach any additional materials as needed.

## Section VI – Social/Supportive Services Description

### 1) Describe proposed social/supportive services at this project, if applicable.

Please provide a narrative detailing the services plan for the project, if any. This should include:

- A description of what types of services will be offered (examples of social and supportive services include, but are not limited to, employment skills development and job training; family support services; parenting skills, childcare skills, family budgeting and similar related services; housekeeping and homemaking activities; and treatment for drug or alcohol addiction)
  
- A description of the service provider’s experience working with vulnerable populations, especially with the target population(s) for the project, and with residents of assisted affordable housing; and
- Any funding or contracts for social services that the project has been awarded, has applied for, or is planning to apply for. Include the date or anticipated date of award and attach any award letters.

The services plan described above should be appropriately targeted to the population(s) to be served in the project. Attach additional materials as needed to demonstrate quality of service delivery.

**Appendix A – Additional information for Existing and Substantial Rehabilitation projects**

***If you indicated on page 1 of this application that your project qualifies as Substantial Rehabilitation or Existing Housing, you must complete Appendix A for your application to be considered.***

**1) Attach a rent roll for the project, identifying units by apartment number, proposed for PBV assistance.**

**2) If known, how many current tenants in the project have a rent burden, defined as paying more than 30% of their monthly income toward the rent?**

**3) Existing projects only: Provide a Tenant Selection Plan for the proposed project.**

Consistent with HUD requirements, NHHA is ultimately responsible for determining family eligibility, but the owner is responsible for adopting written tenant selection procedures that are consistent with the purpose of improving housing opportunities for very low-income families and reasonably related to program eligibility and an applicant's ability to perform the lease obligations.

**The project's Tenant Selection Plan should reflect the target populations indicated in this application.** If the Plan does not reflect this information, you may be required to update it if your project is conditionally selected for PBV assistance through this RFP. The tenant selection plan must include:

- a) Tenant screening procedures as per 24 CFR § 983.255.
- b) Procedures for contract unit leasing and tenant rejection notification as per 24 CFR § 982.253.
- c) Preferential tenant selection categories and criteria as per 24 CFR § 982.207.
- d) Compliance with the Uniform Relocation Act as per 24 CFR § 983.7 and 49 CFR Part 24
- e) Projects selected for PBV rental assistance must outline expected protection of tenants from experiencing rent burden with or without PBV rental assistance (i.e., rent restructuring that will minimize rent burden increases for existing tenants with or without PBV rental assistance).

**4) Does the property have any State or Local Code violations?**

Yes  No

If there are any open violations submit a violation summary report that evidences a clearance plan, corrective action plans, summaries of corrective actions taken and/or dismissal inspection requests.

**5) Attach a projected Maintenance and Operations Expense Budget for the project.**

**6) Attach the most recent financials of the applicant entity that have been audited or reviewed by a CPA.**

**Certification Statements**

**I, \_\_\_\_\_, understand that the site must prevent discrimination against persons seeking to rent, lease, secure financing for or purchase of PBV units on the basis of race, color, national origin, religion, sex, disability and the presence of children. I understand and agree to abide by all applicable federal Section 8 requirements found at 24 CFR Part 983 and NHHA’s PBV requirements found in its Administrative Plan, available at <http://www.NHHA.org>.**

**I, \_\_\_\_\_, attest and certify that all of the information herein contained is true and accurate to the best of my knowledge. I understand that by submitting this application for project-based assistance there is no commitment from the North Hempstead Housing Authority that my proposal will be selected.**

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Signature of Owner

Title

Date