

Attachment A Live Near Your Work Application Form

Application Information

Applicant Organization's Legal Name: Click here to ente	er text.		
Address: Click here to enter text.	Ward Number: Click here to enter text.		
Telephone: Click here to enter text.	Website: Click here to enter text.		
Contact Name: Click here to enter text.	Contact email: Click here to enter text.		
Executive Director: Click here to enter text.	Board Chair: Click here to enter text.		
Federal Tax ID Number (TIN) or Employer ID Number (EIN): Click here to enter text.			
DC Tax Exempt No: Click here to enter text.			
Date founded: Click here to enter text. Date Incorporated: Click here to enter text.			
Program Summary			
Please summarize your proposed LNYW program in less than 45 words in the space below:			
List items included in the appendices, if any (appendices not to total more than 10 pages)			
Amount of grant request: Click here to enter text.			
Total program budget: Click here to enter text.			



Attachment B

Live Near Your Work Program Narrative

In a separate document, not to exceed five (5) single sided pages, submit a narrative that addresses the following points. The narrative should be typed in a 12-point font with sub-titles. All pages must be numbered and labeled with the Applicant name.

Part 1: Minimum Standards

- 1. **Staff:** Describe organizational staff that possess skills and experience to implement the LNYW pilot program. (This may include any partner institutions identified to provide homebuyer education, for example.)
- 2. **Board/Leadership:** Demonstrate that your board:
 - Supports the implementation of a LNYW pilot program
 - Has allocated sufficient funding for the matching grants/loans and administration
 - Is committed to marketing the incentive to all employees

3. Management:

- Evidence the financial stability of the organization
- Describe organizational systems already in place that could help to manage LNYW pilot program
- Demonstrate the organization's ability to carry out all tasks associated with the LNYW pilot program, including, but not limited to:
 - Outreach and marketing of program to employees
 - Employee verification
 - Application processing
 - Homebuyer counseling
 - Tracking and accounting for expenditure of funds¹
 - Reporting
- Demonstrate commitment to fund a minimum of 10 employees at \$3,000 each during the pilot program
- Describes employee selection mechanism² and requirements of participating employees
- Provide a timeline or work plan schedule that outlines key milestone dates for implementing the LNYW pilot program

Part 2: Competitive Evaluation Criteria

- 1. Identify an estimate of the number of employees that the program might attract (minimum of 10 employees), including targets for the number of employee participants and homebuyer education services/hours.
- 2. Describe maximum dollar commitment per employee
- 3. Discuss overlap with District revitalization areas³, if applicable (See attached Map 2)

 $^{^{1}}$ Employer must agree not to co-mingle District funds with their own for the purposes of the pilot program; separate accounts must be maintained to track expenditure funds.

² OP recommends selection of employees on a first come, first served basis.

³ As defined by Department of Housing and Community Development's Neighborhood Stabilization Program 3 (NSP3).

Attachment C Project Budget

TOTAL PROJECT BUDGET: Click here to enter text.

Expenses:

Matching down payment/closing cost funds: Click here to enter text.

Administrative costs: Click here to enter text.

Homebuyer education: <u>Click here to enter text.</u>

Other: Click here to enter text.

Please attach a line-item budget narrative on a separate page.

Include a detailed explanation of all items listed under expenses. Maximum of two pages. Also, if the project costs will exceed the total grant amount available, please explain how much of the grant will go to fund each budget item and where additional resources are derived from.

Statement of Certification

Must be signed by an individual grant recipient or by the duly authorized officer of the applicant organization, the truth of which is sworn or attested to by the applicant.

Contact Name: Click here to enter text. Title: Click here to enter text.

Organization: Click here to enter text.

Address: Click here to enter text. Phone Number: Click here to enter text.

I/We hereby attest that: I /We am/are able to maintain adequate files and records and can and will meet all reporting requirements;

My/Our fiscal records are kept in accordance with Generally Accepted Accounting Principles (GAAP) and account for all funds, tangible assets, revenue, and expenditures whatsoever; that all fiscal records are accurate, complete and current at all times; and that these records will be made available for audit and inspection as required;

I/We is/are current on payment of all federal and District taxes, including Unemployment Insurance taxes and Workers' Compensation premiums. This statement of certification shall be accompanied by a certificate from the District of Columbia OTR stating that the entity has complied with the filing requirements of District of Columbia tax laws and has paid taxes due to the District of Columbia, or is in compliance with any payment agreement with OTR;

I/We have demonstrated administrative and financial capability to provide and manage the proposed services and ensure an adequate administrative, performance and audit trail;

If required by the grantmaking Agency, I/We is/are is able to secure a bond, in an amount not less than the total amount of the funds awarded, against losses of money and other property caused by fraudulent or dishonest acts committed by any employee, board member, officer, partner, shareholder, or trainee;

I/We is/are not proposed for debarment or presently debarred, suspended, or declared ineligible, as required by Executive Order 12549, "Debarment and Suspension," and implemented by 2 CFR 180, for prospective participants in primary covered transactions and is/are not proposed for debarment or presently debarred as a result of any actions by the District of Columbia Contract Appeals Board, the Office of Contracting and Procurement, or any other District contract regulating Agency;

I/We have the financial resources and technical expertise necessary for the production, construction, equipment and facilities adequate to perform the grant or subgrant, or the ability to obtain them;

I/We have the ability to comply with the required or proposed delivery or performance schedule, taking into consideration all existing and reasonably expected commercial and governmental business commitments;

I/We have a satisfactory record performing similar activities as detailed in the award or, if the grant award is intended to encourage the development and support of organizations without significant previous experience, that the applicant has otherwise established that it has the skills and resources necessary to perform the grant. In this connection, Agencies may report their experience with an applicant's performance to OPGS which shall collect such reports and make the same available on its intranet website. I/We have a satisfactory record of integrity and business ethics;

I/We have the necessary organization, experience, accounting and operational controls, and technical skills to implement the grant, or the ability to obtain them;

I/We is/are in compliance with the applicable District licensing and tax laws and regulations;

I/We comply with provisions of the Drug-Free Workplace Act; and

I/We meet all other qualifications and eligibility criteria necessary to receive an award under applicable laws and regulations.

I/We agree to indemnify, defend and hold harmless the Government of the District of Columbia and its authorized officers, employees, agents and volunteers from any and all claims, actions, losses, damages, and/or liability arising out of this grant or subgrant from any cause whatsoever, including the acts, errors or omissions of any person and for any costs or expenses incurred by the District on account of any claim therefore, except where such indemnification is prohibited by law.

Signature:	Date:	
Signed by:		



Application Check-List

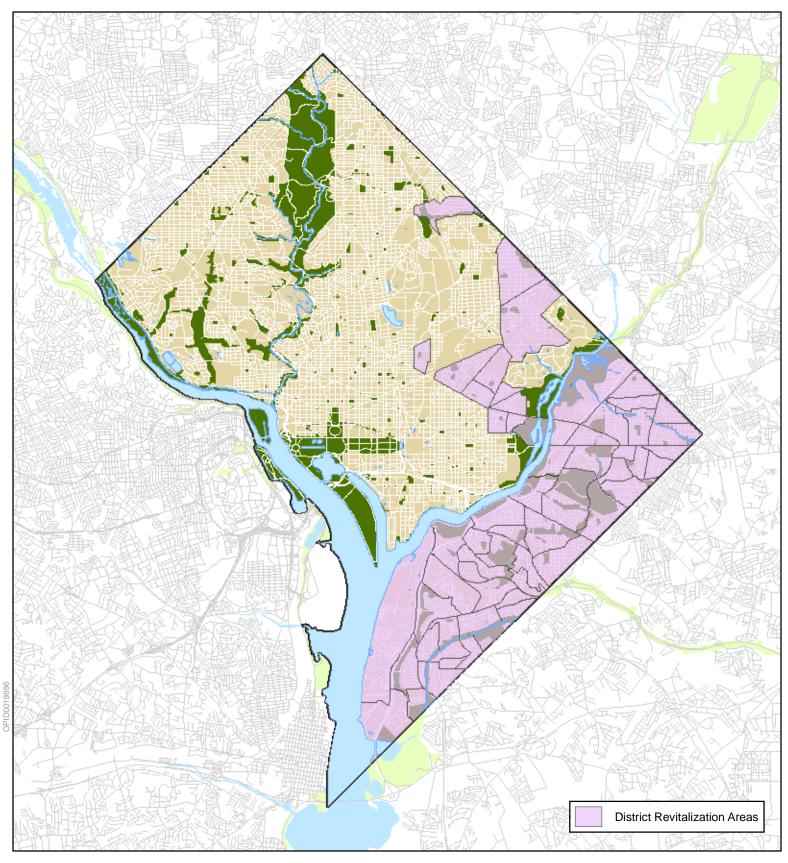
Ensure the following required documents are included in the application. Please organize the application in sections in the following order:

- 1. Attachment A Live Near Your Work Application Form
- 2. Attachment B Live Near Your Work Program Narrative
- 3. Attachment C Project Budget, including a line-item budget narrative for the proposed program
- 4. Resumes of key staff (up to three resumes)
- 5. Financial statements including the Executive Summary of the most recent year end annual report and the most recent completed audited financial statement
- 6. Certificates of Good Standing from the District of Columbia Office of Tax and Revenue (OTR) and the Department of Consumer and Regulatory Affairs (DCRA)
- 7. Signed Statement of Certification

Supplemental Appendices: Applicants may choose to include supplemental application appendices to be used as supporting documentation. Appendices may not total more than ten (10) additional pages.

Applications for consideration in the First Round are due June 17, 2011. Applications received after this deadline will be considered in the Second Round, with an October 7, 2011 deadline, if three partners are not selected in the First Round.

Four (4) copies of the proposal must be delivered to: DC Office of Planning, Attn: Kimberly Driggins, 1100 4th Street, SW, Suite E650, Washington, DC 20024





This map was created for planning purposes from a variety of sources. It is neither a survey nor a legal document. Information provided by other agencies should be verified with them where appropriate.

Map 2 Live Near Your Work Revitalization Areas (NSP3)

