**City of Burlington Housing Trust Fund (HTF)**

|  |
| --- |
| APPLICANT ORGANIZATION |
| CONTACT NAME |
| DAYTIME PHONE & E-MAIL |
| NAME OF PROJECT |
| AMOUNT REQUESTED |
| ESTIMATED CONSTRUCTION START DATE (FOR FEASIBILITY/PREDEVELOPMENT GRANTS) |
| ESTIMATED COMPLETION DATE |
| TOTAL ESTIMATED PROJECT COST |

**Capacity Grant Application**

Is the applicant a 501(c)(3) tax-exempt, nonprofit corporation organized and operated for the purpose of creating or preserving housing for very low, low and moderate income households?  Yes

 No

Would the requested grant support the staffing, training, planning, fundraising or on-going operations of a nonprofit corporation, thereby increasing that corporation’s capacity to create or preserve housing for very low, low and moderate income households?

 Yes

 No

Is the applicant a corporation, partnership or individual who is delinquent, at the time of application, in the payment of property taxes or impact fees to the City of Burlington, who have been convicted of arson, who have been convicted of discrimination in the sale or lease of housing under article IV of this chapter or under the fair housing laws of the State of Vermont, or who have pending violations of current city electrical, plumbing, building or housing codes or zoning ordinances?

 Yes

 No

Project Narrative

Funding priority goes to projects which respond to requirements of the Housing Trust Fund and the City of Burlington’s affordable housing priorities. The Housing Trust Fund Administrative Committee (HTFAC) uses the attached criteria to score projects. Scores are tallied and ranked high to low. The HTFAC funds projects at its discretion.

Please provide the information below in the space provided. It is important to complete all fields. If you need additional space, attach separate pages to your application and title them as indicated below.

**Project description** (Please briefly describe your project. Specifically describe how Housing Trust Funds would: a) support your organization’s ongoing operation and/or b) support the assessment of structural and financial feasibility of new affordable housing.):

**Please describe how the organization is currently involved in the construction of new affordable housing:**

**Please describe how the application supports one or more of the priorities listed in the City's Housing Action Plan:**

**Please describe how the application supports one or more of the priorities listed in the City's Consolidated Plan:**

**Please describe the financial need of the requested activity (include a project budget with all sources and uses):**

**Please describe the negative impact to the community if the request is not funded:**

**Please describe how the proposed project supports an underserved and vulnerable population:**

Signature Page

Please check each box that applies:

 **Good Standing:** I certify that I am in “good standing” with respect to, or in full compliance with a plan to pay any and all taxes due to the City of Burlington.

 **Certification:** Under penalties of perjury, I declare that the information I have provided, to the best of my knowledge and belief, is true, correct, and complete.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Print Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Applicant Signature Date