INSTRUCTIONS
for
Housing Rehabilitation

Note: Housing Acquisition/Housing Rehabilitation Combination Program. New to this year's funding cycle is the option to apply for a Housing Acquisition/Housing Rehabilitation Combination Program. This **separate** category:

- allows the grantee to use **one combined** CDBG budget amount to be used for both housing rehabilitation and/or housing acquisition; and
- Can only be used for jurisdiction wide programs (no target areas are allowed).

When using this option, grantees must also complete the Housing Acquisition Activity Forms.

A. NEED FOR THE ACTIVITY

Depending on local indicators and census data, jurisdictions may be able to strengthen their application by proposing the activity in a target area that has high poverty indicators. If you check target area, you will be held to performing in that area. If you check target area, please read the following two paragraphs:

Scoring for need. If you are proposing housing rehabilitation in a target area, you may use survey data showing the percentage of units in need of rehabilitation or dilapidated in place of the community-wide data stated in the jurisdiction's housing element. **The survey must be completed using the survey form contained in Chapter 16 of the 2003 CDBG Grant Management Manual. The survey data must be more recent than the data in the housing element and jurisdiction wide data must be amended into the housing element.**

Census data. You may also use Census data showing the age of housing stock and overcrowding for target area applications. **You must attach the proper census table for each block group identified as the target area.**

1. Check only one of the options listed to describe how the requested CDBG funds will be used.

2. Provide a brief narrative description of the proposed project. Your narrative should include either jurisdiction wide or target area program, information on the number of units to be rehabilitated and how many units are owner or renter occupied, how many families on your interest list and rehabilitation should be based on urgent need of health and safety repairs.

3. State Objectives. The state objective for housing rehabilitation is worst case housing. Up to 25 points will be awarded to proposals that facilitate rehabilitation of permanent housing projects.

4. Choose either Target Area or Jurisdiction-wide housing conditions and complete the chart.

For applicants with a jurisdiction-wide housing rehabilitation program, or a target area program where current survey data are not available, complete this section and attach 2 copies of your Housing Element page showing this information.

For grantees proposing a target area rehabilitation program and are using the survey form contained in the 2003 CDBG Grant Management Manual, complete this section. Surveys will only be accepted for target areas, jurisdiction-wide data must be amended into the current housing element.

Sound Units. List the percentage of sound units. The percent entered must be from the latest adopted Housing Element submitted to the HCD's Housing Policy Development Division. If the applicant does not have a Housing Element, contact a CDBG field representative for guidance.

Units suitable for rehabilitation. The percentages entered must be from the latest adopted Housing Element submitted to the HCD's Housing Policy Development Division. **If data are available, break the percentage amounts down by the categories "minor," "moderate," "major" rehabilitation**. If the applicant does not have a Housing Element, contact a CDBG field representative for guidance.

Dilapidated units. The percent entered must be from the latest adopted Housing Element submitted to the HCD's Housing Policy Development Division. If the applicant does not have a Housing Element, contact a CDBG field representative for guidance.

Note: The total percentage of the target area or jurisdiction wide chart, the city or county has chosen to do housing rehabilitation in, should add up to 100%.

5. Age of Housing Stock & Overcrowding.

Age of housing stock. You must use 2000 Census data for this number. Age of housing stock data is available in the 2000 Census Summary File 3, Table DP-4 (see sample in Appendix H). If you are unable to find this Table, please ask your CDBG Representative for a copy.

Overcrowding. Overcrowding means 1.01 or more persons per room. You must use 2000 Census data for this number. Overcrowding data are available in the 2000 Census Summary File 3, Table DP-4 (see sample in Appendix H). If you are unable to obtain this Table, please ask your CDBG Representative for a copy.

6. Supplemental information. If the Census data for Age of Housing Stock and Overcrowding do not accurately depict your community's need in those categories, please attach third-party documentation, if available, showing your community's worsened needs in either of these two categories and tell us the page numbers. Such supplemental information shall not be older than five years from this year's application filing date and must be specific to the community.

Note: Unless it occurs within the last year, data for condition of housing stock **cannot** be supplemented since the source data are either a housing element or recent survey as noted above.

B. TARGETED INCOME GROUP BENEFIT

Projects that are not 100 percent TIG will not receive full points in this scoring category.

If the applicant does not provide information, the Department will assign points based on the percentage of households in the jurisdiction that are TIG.

1. Check the appropriate check. under a. or b.

a. 1. If your application is for a single family rehabilitation program for owner occupants that are income restricted and 100% TIG benefit as determined by the CDBG Eligibility and Income Limits check the yes box and skip question #2.

2. If your application is for a single family rehabilitation program for owner investors who will rent to tenants that are income restricted and 100% TIG benefit as determined by the CDBG Eligibility and Income Limits, check the yes box and skip question #2.

b. If your application is for a mixed income multifamily project check the yes box and answer question #2 and complete the chart.

2. If you're mixed income multi-family project will limited to tenants who are TIG check the income restricted box. If you have completed a survey check the income survey box.

a. Enter the date the survey was completed, the total number of tenants in the project, number of units in the project and number of tenants who responded to the survey.
b. Enter the number of tenants who are TIG and Non-TIG.
c. Attach a copy of the survey form and results of the survey.

Income restriction: Applicants should demonstrate there is an explicit limitation, based on income, for who is eligible to benefit from the project. (Note: Charging a fee to non-TIG project beneficiaries does not exclude them from being considered CDBG beneficiaries.)

Income survey: Applicants should conduct a survey of existing and/or potential beneficiaries. Please refer to Appendix B for guidance on survey methodology.

Other: Explain any other source that was used.

C. PROGRAM READINESS

Of the 150 points available for capacity, your application may be awarded up to 50 points if you complete and document actions that make the proposed project ready to proceed. These actions must be directly related to the activity. They may include the completion of the special condition and environmental review requirements, securing site control, securing financing for the entire project, or anything that would enable the applicant to be ready to proceed.

Program Operator/Administrator--Check the appropriate box, submit the documentation required
and write in the page number in the application where the documentation can be found.

Environmental Clearance--Check the appropriate box, submit the documentation required and write in the page number in the application where the documentation can be found.

Special Conditions--Check the appropriate box, submit the documentation required and write in the page number in the application where the documentation can be found.

Project Readiness-- Check the appropriate box, submit the documentation required and write in the page number in the application where the documentation can be found.

A list of acceptable readiness items are listed Readiness Chart.

D. REQUIRED MAPS.

Please provide the requested maps with your application. If you are proposing multiple activities, please provide maps for each activity.

- **Ethnic/TIG Concentration Map**
  Based on the applicant's knowledge of the area and available data provide a legible map of the jurisdiction that shows:

  - ❒ The location of concentrations of non-white persons **and** Hispanic persons within the entire jurisdiction, and
  - ❒ The location of concentrations of targeted income group families within the entire jurisdiction.

  Note: Targeted income group data is **different** than poverty data. Most targeted income group data can be obtained by visiting the American Factfinder website at: www.factfinder.census.gov/

  Or

  http://www.hud.gov/offices/cpd/systems/census/lowmod/ca/index.cfm

- **Location Map**
  The location map must be legible and must include:

  - ❒ The census tract number(s) and the boundaries within which CDBG funds will be spent for the proposed activity , and
  - ❒ The census block group number(s) and the boundaries within which CDBG funds will be spent for the proposed activity , and
  - ❒ The general location of the proposed activities, including geographic boundaries of the targeted or service areas covered by the proposed activity.

  Note: Most maps can be obtained by visiting the American Factfinder website at: www.factfinder.census.gov/

A. NEED FOR ACTIVITY

1. How will be requested CDBG funds be used?

Check only one of the following:

☐ *Target Area(s) - Housing Rehab. Program

Or

☐ Jurisdiction-wide - Housing Rehab. Program

Or
New option-

☐ Housing Acquisition/Housing Rehabilitation Combination Program (MUST be jurisdiction-wide)

***Note:** **When using target areas for rehabilitation activities, rehabilitation work must be completed in all designated target areas.**

2. **Project Description *(see instructions)*:**

3. **State Objective:**

Worst Case Housing -

Eligibility Requirements:

☐ The proposal must facilitate the construction, acquisition, or rehabilitation of permanent housing projects, and

☐ Project must include rental housing, and

☐ (of the rental housing), must target at least 25 percent of the program beneficiaries to be LTIG households who do not receive Federal housing

☐ must reduce these beneficiaries' rent and utility costs to below 50 percent of their gross incomes OR benefit persons who live in severely substandard

Do you meet the requirements and want to apply for Worst Case Housing State Objective points?

☐ NO

☐ YES. (complete below)

of **total** units in the project:_____

of **LTIG** units in the project: _____

Percentage of LTIG units: _____%

Note: For the purposes of this State Objective, permanent means that residents' tenure in the housing will not be limited to a certain time period.

4. Complete the required information on the chart that is applicable to your program.

For **TARGET AREA** programs *with* current survey data.		
Enter the percent of housing units <u>within the target area</u> that are:	**Category**	**List %**
Sound and not in need of Rehabilitation	**Sound**	%
Suitable for **Minor** Rehabilitation	**Minor**	%
Suitable for **Moderate** Rehabilitation	**Moderate**	%
Suitable for **Major** Rehabilitation	**Major**	%
Dilapidated. Not suitable for Rehabilitation.	**Dilapidated**	%
	TOTAL:	**100%**

Be sure to attach a copy of the survey form used and a summary of the survey to this application.

OR

For **JURISDICTION-WIDE** programs.		
Enter the percent of housing units <u>within the jurisdiction</u> that are:	**Category**	**List %**
Sound and not in need of Rehabilitation	**Sound**	%
Suitable for **Minor** Rehabilitation	**Minor**	%
Suitable for **Moderate** Rehabilitation	**Moderate**	%
Suitable for **Major** Rehabilitation	**Major**	%
Dilapidated. Not suitable for Rehabilitation.	**Dilapidated**	%
	TOTAL:	**100%**

Be sure to attach 2 copies of the page from your Housing Element where these percentages are documented.

5. **Age of Housing Stock & Overcrowding.** Provide the requested information for each category.

Enter the percentage of housing stock over 30 years of age (pre-1970) as shown in the 2000 Census Summary File 3, Table DP-4	**Age of Housing Stock**	**%**
Enter the percentage of households who are overcrowded as shown in the 2000 Census Summary File 3, Table DP-4	**Overcrowding**	**%**

Be sure to attach the Housing Stock and Overcrowding Census tables to this application. Also, show your calculations on each table.

6. **Supplemental Information**. This section is used to provide information being rebutted and/or not captured in the 2000 Census in regards to your community's worsened age/condition of housing and/or worsened overcrowding needs. Provide all information that is requested.

Check if you are providing supplemental information for:

☐ Worsened Age/Condition of Housing ☐ Worsened Housing Overcrowding

Describe the worsened Housing Element conditions and/or worsened overcrowding issue that is not reflected in the 2000 Census data:

How is this issue specific to your community?:

List:

- third-party documentation (must be less than 5 years old) that is being submitted to support the issue, and
- the date of the documentation submitted, and
- the page numbers, in this application, where it can be found.

Description of Documentation:	Date of Doc.	Page #
1.		
2.		
3.		
4.		

B. TARGETED INCOME GROUP (TIG) BENEFIT

1. Check the appropriate box under a. or b. below.

   a. Is this a single-family program that will be **income restricted** and benefit **100% TIG**?

   ☐ YES. Skip question #2. ☐ NO. Complete question #2.

   Note: All single-family rehabilitation programs must be income restricted and benefit 100% TIG.

   OR

   b. Is this program a mixed income **multi-family** project?

   ☐ YES. Complete question #2.

2. How will **TIG benefit** be established for the mixed income **multi-family** project?

   ☐ Income Restriction ☐ Income Survey. Complete chart

   a. If TIG benefit is determined by an income survey, complete the following survey information:

Survey Date:	
Total # of anticipated beneficiaries:	
Households or persons?	
How many were surveyed?	
Total number of responses:	
Number of TIG responses:	
Number of Non-TIG responses:	

   b. Based on the survey results, the percentage of **TIG households** that will benefit from this proposed activity is:

   _____%

   c. ***Attach a copy of the survey form and a summary of the results.***

C. PROGRAM READINESS – Housing Rehabilitation

Please refer to instructions for guidance on completing this chart.

Program Operator/Administrator *(Check all that apply)*	**Documentation Required** ***(in order to receive any points)***	**Page #**
☐ In-house staff	Resumes and Duty Statements of key staff (which show that the staff are qualified to implement the project)	
☐ Program Consultant (must be conditioned upon receipt of CDBG award)	Executed contract from prior year (still in force); or New executed contract; or Completed contract that is ready to sign upon award of CDBG funds.	
☐ Sub-recipient Agreement (must be conditioned upon receipt of CDBG award)	Existing Sub-recipient Agreement; or A completed sub-recipient agreement that is ready to sign upon award of CDBG funds	

Environmental Clearance *(Check the one that applies)*	**Documentation Required** ***(in order to receive any points)***	**Page #**
☐ **Categorically Excluded, but subject to 58.5..... (single-family Housing Rehabilitation)**	A completed ***Environmental Finding Form***, indicating a "Finding of Categorical Exclusion"	
	A completed ***Form 58.6***	
	A completed and documented ***Minor Rehabilitation Environmental Review (MRER)*** form	
NOTE: As each unit of housing is identified, the following will be required to be kept on fi • A site-specific **Appendix A** form for each minor rehabilitation project. OR • A **Statutory Worksheet** for each major rehabilitation or reconstruction project.	A copy of supporting documentation, including the ***SHPO Programmatic Agreement and correspondence***, where applicable.	
	Copy of ready-to-publish ***publication*** of the ***Notice of Intent to Request Release of Funds (NOI/RROF)*** notice.	
	A copy of the completed ***Request for Release of Funds and Certification*** (not signed and not dated)	
	A **description** of the project	

Environmental Clearance (cont.) *(Check the one that applies)*	**Documentation Required** ***(in order to receive any points)***	**Page #**
☐ **Categorically Excluded, but subject to 58.5..... (site-specific projects)**	A completed ***Environmental Finding Form***, indicating a "Finding of Categorical Exclusion, per Section 58.35(a) and a conversion to *Exempt*."	
	A completed ***Form 58.6***	
	A completed and documented ***Statutory Worksheet*** with no secondary findings.	
	A copy of supporting documentation, including the ***SHPO Programmatic Agreement and correspondence***, where applicable.	
	A **description** of the project	
☐ **Categorically Excluded, but subject to 58.5..... (site-specific projects with secondary findings identified on Statutory Worksheet)**	A completed ***Environmental Finding Form***, indicating a "Finding of Categorical Exclusion"	
	A completed ***Form 58.6***	
	A completed and documented ***Statutory Worksheet identifying secondary findings.***	
	A copy of supporting documentation, including the ***SHPO Programmatic Agreement and correspondence***, where applicable.	
	Copy of ready-to-publish ***publication*** of the ***Notice of Intent to Request Release of Funds (NOI/RROF)*** notice.	
	A copy of the completed ***Request for Release of Funds and Certification*** (not signed and not dated)	
	A **description** of the project	

PROGRAM READINESS
Housing Rehabilitation *(continued)*

Special Conditions	Documentation Required *(in order to receive any points)*	Page #
Housing Rehabilitation Program Guidelines	Housing Rehabilitation Program Guidelines	
Program Income Re-Use Plan	Program Income Re-Use Plan	
Anti-Displacement Plan	Anti-Displacement Plan	

Project Readiness *(check all that apply)*	List Documentation submitted to evidence compliance with checked items. *(In order to receive any points)*	Page #
☐ List of pre-approved Qualified Homeowners		
☐ Eligible Contractors/Bidders List		
☐ Marketing Program Materials		
☐ Lump Sum Drawdown Agreement	☐ Letter of Intent from the ☐ Draft Lump Sum Drawdown Agreement with all pertinent information included.	
☐ Title/Escrow Company Agreement		
☐ Waiting List - Interested		

D. REQUIRED MAPS

The following maps are required to be submitted with your application. **(If you are proposing multiple activities, you are required to submit separate maps for each activity.)**

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  or

  http://www.hud.gov/offices/cpd/systems/census/lowmod/ca/index.cfm

- **Location Map**
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