



GCRA

HOME-American Rescue Plan (ARP) Non-Congregate Shelter (NCS) Application

Funding Available \$415,153

APPLICATION SUBMISSION REQUIREMENTS

Complete responses to this application should include one (1) full electronic version with all required attachments, submitted via OneDrive. Email to Jose Reynoso jreynoso@gcra-sc.org to receive an upload link. Applications will be accepted continuously, and awards will be ongoing until all funding is awarded. Contact Francisco Arnaiz farnaiz@gcra-sc.org to request a meeting to discuss your application prior to submitting (optional). For questions regarding the application contact:

**Greenville County Redevelopment Authority
Attention: Imma Nwobodu, Program Director
301 University Ridge, S-4300
Greenville, SC 29607
Telephone: 864-242-9801
www.gcra-sc.org**

HOME-ARP Program Overview

The American Rescue Plan (ARP) provides \$5 billion to assist individuals or households who are homeless, at risk of homelessness, and other vulnerable populations, by providing housing, rental assistance, supportive services, and non-congregate shelter, to reduce homelessness and increase housing stability across the country. These grant funds will be administered through HUD's HOME Investment Partnerships Program (HOME). Greenville County has been allocated **\$4,151,357** in total FY2021 HOME-ARP funding.

Qualifying Populations

HOME-ARP funds must be used to primarily benefit individuals or families from the following qualifying populations:

- Homeless -as defined at 24 CFR 91.5 (1), (2), (3), and (4)
- At Risk of Homelessness -as defined at [24 CFR 91.5](#)
- Fleeing/Attempting to Flee Domestic Violence, Dating Violence, Sexual Assault, Stalking, or Human Trafficking, Domestic Violence, Dating Violence, Sexual Assault, and Stalking from VAWA regulation at 24 CFR 5.2003 Human Trafficking from Trafficking Victims Protection Act of 2000
- Other Populations: 1) Families Requiring Services or Housing Assistance to Prevent Homelessness OR 2) Those at Greatest Risk of Housing Instability

Veterans and families that include a veteran family member that meet one of the preceding criteria. (For full description of Qualifying Populations see [HOME-ARP Notice](#))

Acquisition and Development of Non-Congregate Shelter

A non-congregate shelter (NCS) is one or more buildings that provide private units or rooms as temporary shelter to individuals and families and does not require occupants to sign a lease or occupancy agreement. HOME-ARP funds may be used to acquire and develop HOME-ARP NCS for individuals and families in qualifying populations. This activity may include but is not limited to the acquisition of land and construction of HOME-ARP NCS or acquisition and/or rehabilitation of existing structures such as motels, hotels, or other facilities to be used for HOME-ARP NCS. HOME-ARP funds may not be used to pay the operating costs of HOME-ARP NCS.

Eligible Costs

Acquisition, Demolition, Development Hard Costs, Site Improvements, Related Soft Costs, Replacement Reserve.

Ineligible Costs

Operating costs of HOME-ARP NCS, Rehab, and construction to turn HOME-ARP developed NCS units into permanent housing.

Commitment Requirements -Acquisition

NCS can be operated within 6 months of the date of acquisition.

Units acquired will not require rehabilitation to meet the property standards in Section VI.E.7 of the Notice.

Commitment Requirements -Rehabilitation & New Construction

Development can begin within 12 months of the commitment date.

APPLICATIONS SCORING (100 maximum points)

Application Completeness, Project Eligibility and Site Control (25 points)

Maximum points will be awarded for those applications that are complete, are eligible projects, and show site control.

Consistency with The County's Homelessness Goals and Project Summary (25 points)

Maximum points will be awarded for those applications that describe the need for the project with reference to the County's homelessness needs, gaps, and goals as referenced in the [FY 2020-2024 Consolidated Plan](#) and [Greenville County HOME-ARP Allocation Plan](#). Use this section to describe your project in detail.

Financial Feasibility and Funding Commitment (25 points)

Maximum points will be awarded for those applications that contain a realistic set of sources and uses development budget, a pro forma operating budget for 15 or 10 years (New Construction- 15yrs., Rehab or Acquisition 10 yrs.), long-term financial sustainability of the project is highly likely, and other funding source commitments.

Development team experience, capacity, project readiness and timeframe for completion. (25 points)

Maximum points will be awarded for those applications that demonstrate a development team with a successful track record in projects of similar size, scale, type and complexity to the proposed project and capacity to fulfill their responsibilities and the readiness of the project to proceed. Developer to submit evidence of appropriate shelter development skills and experience. Owner to submit evidence of prior experience operating shelters.

| Additional Required Documentation | Exhibit Name |
|---|--------------|
| Legal name of organization and executive director, type of organization (corporation, limited liability corporation, general partner, etc.), and list of board members including name, position, address, and phone number. Articles of Incorporation, current by-laws, IRS 501 c(3) determination letter, most recent financial statement (independent audit, 990 form, and auditor's management letter) | |
| Evidence of site control and Location Map of subject property, Site plan, building elevations, & photos of building, if applicable | |
| Evidence of financial commitments | |
| A brief development team summary, including list of all members of the development team, their role in the project, relevant skills/education, and relevant experience from other projects. List and describe projects completed by the organization similar to the proposed project in size, type of development, and complexity. | |
| Sources and uses statement, operating budget showing cash flow for-New Construction- 15yrs., Rehab or Acquisition 10 yrs. (See Excel Spreadsheet) | |



Greenville County Redevelopment Authority
HOME-ARP Non-Congregate Shelter (NCS) Funding Application

| | | | | | |
|---------------------------|--|----------------|--|-------------|--|
| Date: | | | | | |
| Applicant/Sponsor: | | | | | |
| Executive Officer: | | | | | |
| Project Officer: | | | | | |
| Address: | | | | | |
| City: | | State: | | Zip: | |
| Email: | | | | | |
| Phone# | | Tax ID# | | | |
| DUNS# | | | | | |

| Applicant/Sponsor Type (x) | | | | | |
|----------------------------|--|--------------------------------------|--|------------|--|
| CHDO | | Nonprofit Corporation | | | |
| Municipality | | Corporation | | | |
| General Partnership | | Limited Liability Corporation | | | |
| Joint Venture | | Other: | | | |
| Developer Name: | | | | | |
| Executive Officer: | | | | | |
| Primary Contact: | | | | | |
| Address: | | | | | |
| City: | | State | | Zip | |
| Email: | | | | | |
| Phone | | Fax: | | | |

Application Type (x):

| | | |
|--|---|---|
| Acquisition • Rehab is not required because structure is in standard condition | Rehab of existing structures • Ex. Motels, hotels, nursing homes • With or without acquisition | Total NCS Units _____ Studio Units _____ 1-Bedroom _____ 2-Bedroom _____ 3+ Bedroom _____ Individual: ____ Families: ____ |
| | New Construction • With or without land acquisition | |

Are there plans to convert the shelter to housing after the minimum HOME-ARP use period? _____



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Development Description

Project Name:

Project Address:

Parcel#

Neighborhood:

Census Tract:

For scattered site projects list addresses and parcels below:

Parcel No.

Address:

Census Tract:

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Funding Request:

Total Development Cost:

Total HOME-ARP Funds Requested:

% of Total Development Cost:

Total Funds Per Unit:

Loan Term will be a 15-year forgivable loan at 0% interest.

Does the applicant have site control of property for proposed project?

☐ Yes ☐ No ☐ n/a

☐ Deed

☐ Purchase contract

☐ Option

☐ Other: _____

Expiration date of contract or option:
(month, date & year) _____

Total Cost of land: _____

Parcel (acres) or Building Size
(square feet): _____

Parcel Number (s):

Proposed Property Address:

City:

State:

Zip Code:

Present zoning classification: _____

Is a conditional use permit required? _____

When is approval for it expected? _____

Are all utilities presently available to the site?

☐

Yes

☐

No

If No, which utilities need to be brought to the site?

Site currently used for:

Prior site uses:

Consistency with The County's Homelessness Goals and Project Summary (25 points)

Maximum points will be awarded for those applications that describe the need for the project with reference to the County's homelessness needs, gaps, and goals. Clearly and objectively describe, in narrative form, the project being undertaken and why it is needed in Greenville County. What are the goals of the project? How will clients be admitted into the project? How many clients will the project serve? Describe the supportive services that will be offered to clients as well other features of the project which you would like to highlight. Provide examples of shelter policy and procedures in effect at other shelters operated by the applicant or provide explanation of plans to develop policy and procedure for NCS project. Provide supporting documentation if available.

Financial Feasibility and Funding Commitment (25 points)

Maximum points will be awarded for those applications that contain a realistic set of sources and uses development budget, a pro forma operating budget for 15 or 10 years (New Construction- 15yrs., Rehab or Acquisition 10 yrs.), long-term financial sustainability of the project is highly likely, and other funding source commitments.

Provide a narrative of the funding sources, commitments received or planned to be received, partnerships, and how the project will cover operating costs over the next 10 -15 years. Provide supplemental excel workbook for pro forma.

Development team experience, capacity, project readiness and timeframe for completion. (25 points)

Briefly describe your development team. Be sure to list all members of the development team including any consultants, their specific role in the project, relevant skills/education, and experience from other projects. List and describe projects completed by the organization similar to the proposed project in size, type of development, and complexity. Applicant to provide example of shelter policy and procedures in effect at other shelters operated by the applicant or provide explanation of plans to develop policy and procedure for NCS project.

Project Timeline

| | Proposed Activities | Completion Date |
|----|-----------------------------------|-----------------|
| A. | Site Control: | |
| | Option | |
| | Site acquisition/Purchase | |
| B. | Financing: | |
| | 1. Construction/Rehab loan | |
| | Conditional commitment | |
| | Loan closing | |
| | 2. Permanent loan | |
| | Conditional commitment | |
| | Loan closing | |
| C. | Plans and Specifications: | |
| | Preliminary drawings | |
| | Initial working drawings | |
| | Working drawings & specifications | |
| D. | Closing and Transfer of Property | |
| E. | Construction/Rehab Starts | |
| F. | Completion of Construction/Rehab | |
| G. | Shelter Occupancy | |

Other Federal Requirements

The HOME-ARP funding is federal financial assistance therefore subject to requirements applicable to such funds. The requirements may include, but are not limited to:

- Fair Housing
- Affirmative marketing; minority outreach program
- Environmental Review
- Displacement, relocation, and acquisition
- Labor Standards
- Lead-based paint
- Conflict of interest
- Section 3

For details of these requirements see [24 CFR Part 92 Subpart H- Other Federal Requirements](#) and the [HOME-ARP Notice](#) Part VII. Other Federal Requirements.

Project Name: _____ Applicant Name: _____

CONFLICT OF INTEREST ACKNOWLEDGEMENT

Do any family relationships (by blood or marriage) exist between staff in your organization and/or Agency Board members? ☐ Yes ☐ No

If yes, please explain in detail and document the staff person's involvement with these grant funds in the section below.

The applicant agrees to abide by all policies, regulations, ordinances, or statutes as required by HUD, Greenville County, and Greenville County Redevelopment Authority. Please review the [HOME-ARP Notice](#) and HOME regulations at, [24 CFR Part 92](#).

I (Chief Executive Officer) _____

Name and title

Hereby certify that the information set forth in this application/proposal is, to the best of my knowledge, true and correct. I realize that Greenville County Redevelopment Authority will be relying upon this information and the representations herein as part of their decision-making process in the awarding of funds. Should any information change from that originally submitted, I agree to promptly advise GCRA. I understand that erroneous, misleading, or false information can adversely impact funding decisions.

Signature

Date