

PART ONE PARTNERSHIP PROGRAM

I. Applicant Information

A. Name of Non-profit:

Must have a tax exemption ruling from the Internal Revenue Service under section 501 (c) (3) or (4) of the Internal Revenue Code of 1986. Include the confirmation letter. (Label as Exhibit 1).

Address:

Telephone:

Cell:

E-mail:

B. Designated contact person: Person with decision making authority that the Office of Housing and Community Development will contact regarding the Application and Development.

Who is the Designated Contact Person:

Title:

Address:

Telephone:

Cell:

E-mail:

- C. Individual(s) authorized by resolution to sign the application and all other documents associated with any proposed development project.

Name:

Title:

Address:

Telephone:

Cell:

E-mail:

Attach a signed copy of the Corporate Resolution authorizing the person(s) above to sign the application and all other documents associated with any proposed development. (Label as Exhibit 2).

- D. Attach the names and the addresses of the Officers and Members of the Non-profit's Board of Directors (Label as Exhibit 3).
- E. Attach Articles of Incorporation and By-laws labeled. (Label as Exhibit 4).
- F. Attach a copy of the Non-Profit's insurance certificate with the City of Sarasota, 1565 First St. Sarasota, FL 34236 as the certificate holder. (Label as Exhibit 5).
- G. Attach the Non-Profit's written applicant/beneficiary selection and outreach criteria assuring that applicants are treated fairly with equal opportunity. (Label as Exhibit 6).
- H. Non-Profit's Federal Taxpayer Identification Number: _____
- I. Non-Profit's Unique Entity Identity (UEI) Number: _____
- J. Describe the experience of the non-profit and / or employees who will be assigned to any proposed projects. (Label as Exhibit 7).
- K. Attach the following financial documents. (Label as Exhibit 8).
1. Current Balance Sheet
 2. Income and Expense Statement
 3. Most recent audit and management letter

- L. Attach a copy of the non-profit agency's procurement policy. (Label as Exhibit 9).
- M. Complete the Agency Accountability Questionnaire. (Label as Exhibit 10).

EXHIBIT 1

IRS TAX EXEMPTION LETTER

EXHIBIT 2

SIGNED CORPORATE RESOLUTION
AUTHORIZING A PERSON(S) TO SIGN THE
APPLICATION AND
ALL OTHER DOCUMENTS ASSOCIATED WITH THE
DEVELOPMENT

EXHIBIT 3

OFFICERS AND MEMBERS OF THE BOARD OF DIRECTORS

Position	Name	Address
Attach additional pages if necessary		

Non-Profit may attach their own list as Exhibit 3.

EXHIBIT 4

ARTICLES OF INCORPORATION AND BY-LAWS

EXHIBIT 5

INSURANCE
CERTIFICATE WITH THE CITY OF SARASOTA NAMED AS A
CERTIFICATE HOLDER

EXHIBIT 6

APPLICANT SELECTION CRITERIA

EXHIBIT 7

EXPERIENCE OF THE NON-PROFIT AND / OR EMPLOYEES

EXHIBIT 8

FINANCIAL STATEMENTS

1. CURRENT BALANCE SHEET
2. CURRENT INCOME AND EXPENSE STATEMENTS
3. MOST RECENT AUDIT AND MANAGEMENT LETTER
AND LABEL DOCUMENTS

EXHIBIT 8

EXHIBIT 9

AGENCY PROCUREMENT POLICY

EXHIBIT 10

AGENCY ACCOUNTABILITY QUESTIONNAIRE

A. Budgets

YES NO

- | | | | |
|-------|-------|----|--|
| _____ | _____ | 1. | Formal budgets adopted by the governing board and recorded in the minutes. |
| _____ | _____ | 2. | Budgets are prepared in sufficient detail to provide a meaningful tool with which to monitor subsequent performance. |
| _____ | _____ | 3. | Budgets periodically compared to actual revenues and expenditures and significant differences investigated. |
| _____ | _____ | 4. | The results of the budget comparison (budget to actual) are communicated to the Board of Directors on a regular basis. |

B. Cash

YES NO

- | | | | |
|-------|-------|----|--|
| _____ | _____ | 1. | The governing body authorizes all bank accounts and check Signatories. |
| _____ | _____ | 2. | Cash receipts are entered in books of original entry by persons independent of the collection and deposit preparation functions. |
| _____ | _____ | 3. | All disbursements, except petty cash disbursements, are made by check. |
| | | 4. | Check Preparation |
| _____ | _____ | a. | Checks are prepared by specific employees who are independent of voucher/invoice approval. |
| _____ | _____ | b. | There is a clearly defined approval process and all supporting documentation accompanies checks presented for a signature. |
| _____ | _____ | c. | All supporting documents are properly canceled at time of signature to prevent duplicate payment. |

- | | | | |
|-------|-------|----|---|
| _____ | _____ | d. | All checks are pre-numbered, blank stock controlled, used in numerical sequence, accounted for in numerical sequence, and reconciled to the check register. |
| _____ | _____ | e. | Checks are either required to be countersigned or have dollar limits established for single signature checks. |
| _____ | _____ | f. | Authorized check signers, and the custody of checks after signature, are independent of all payable, disbursement, cash, receiving and general ledger functions. |
| _____ | _____ | 5. | If check-signing machines are used, facsimile signature plates are adequately safeguarded, used in the presence of the custodian, and controlled by using numbering devices. |
| _____ | _____ | 6. | A responsible individual (e.g., the Executive Director, CEO, etc.) receives the bank statements unopened from the banks. |
| _____ | _____ | 7. | Bank accounts are reconciled within a specified period after the end of each month, and reconciliations are completed by someone other than persons who participate in the receipt or disbursement of cash. Reconciliations are reviewed by a responsible official. |

C. Revenues and Expenditures

YES NO

- | | | | |
|-------|-------|----|---|
| _____ | _____ | 1. | Individual(s) has/have been designated the responsible party for assuring compliance with the terms and conditions of all grants, restricted contributions, endowments, etc., received by the agency. |
| _____ | _____ | 2. | An adequate system exists to allow for the allocation of costs applicable to various programs and other functions. |
| _____ | _____ | 3. | Purchases are made in accordance with established requirements of the governing board and of funding sources. |
| _____ | _____ | 4. | The organization has a written procurement policy. |
| _____ | _____ | 5. | Is the purchasing function performed by personnel independent of receiving and shipping functions, payables and disbursing functions, and governing board members? |
| _____ | _____ | 6. | Purchase orders require independent approval that the expenditure is within budget of funding source restrictions. |

____ 7. Adequate procedures exist to ensure that goods for which payment is made have been received, and the goods are verified by someone other than the individual approving payment.

D. Payroll

YES NO

____ 1. Employees complete and sign attendance and time records.

____ 2. Persons preparing the payroll are independent of other payroll duties (e.g., timekeeping, distribution of checks, etc.), and their access to other payroll data or cash restricted.

____ 3. Payroll is subject to final approval by a responsible agency official before payment is made.

____ 4. Payroll checks are drawn on a separate clearing account and the account is reconciled by someone independent of all payroll transaction processing activities.

____ 5. Employee time records are maintained in sufficient detail, and an adequate system exists to allow for allocations of payroll costs to the proper accounts, programs, and other functions.

E. Financial Reporting

YES NO

____ 1. The final review and approval of financial reports is segregated from the responsibility for preparation of the reports.

____ 2. The principal accounting, treasury, and custody functions are segregated.

____ 3. There are necessary record keeping procedures in place to ensure that financial reports are accurate and filed in a timely manner.

____ 4. The accounting system provides for accumulating and recording expenditures by award or grant and by cost category as shown in the budget.

5. Audits

- _____ _____ a. The agency has been audited during the past two years.
- _____ _____ b. If the agency was audited in the past two years, the reports
were reviewed.
- _____ _____ c. A Management Letter was issued.
- _____ _____ 6. Procedures exist to monitor compliance with financial reporting
requirements, use of funds and other conditions in accordance with
grant terms, and timely billing of amounts due under grants.
- _____ _____ 7. Grant activity is accounted for so that it can be separated from the
accounting for activities funded by other sources.
- _____ _____ 8. Reconciliations of the grant financial reports with supporting
accounting records are prepared, reviewed, and approved by a
responsible agency official before filing.
- _____ _____ 9. Procedures are in place to identify and preclude charging
expenditures which are disallowed by the grant.
- _____ _____ 10. For an agency providing social services under governmental
programs, a responsible member of management reviews and
approves the provision of services to ensure that recipients are
eligible under specific program requirements.

Explain any 'no' responses. Attach additional sheets, if necessary.

COMPLETED BY: NAME: _____

TITLE: _____

PART TWO
PARTNERSHIP PROGRAM
SITE SPECIFIC INFORMATION

Project Information

- A. Development/Property Address: _____

- B. For existing housing stock, the date home was constructed. _____
- C. Provide Census Tract, Block Group _____
- D. Attach a site map with shopping and transportation locations near the site. (Label as Exhibit 11).
- E. Provide a brief description of the project, including the population intended to be served by the project. (Label as Exhibit 12).
- F. Provide the information below for reporting purposes:

1. Household Information

- a. Income level:
- b. Race:
- c. Ethnicity:
- d. Household size:
- e. Female head of household:
- f. If there are household members aged 62 or older
- g. Whether the household previously utilize subsidized housing (Housing Choice Voucher or project-based housing).
- h. Whether the household previously homeless at any point.

2. Special Needs Household: If the project serves a household which includes a special needs person, describe how the special needs person will be served. Special needs populations include persons who are elderly, physically disabled, at risk of being homeless, and/or have extremely low incomes. These special needs populations may include more specifically defined subgroups such as youth aging out of foster

care, survivors of domestic violence, persons with severe and persistent mental illness, or persons with intellectual or developmental disabilities.

3. Home Construction: if the project involves construction or rehabilitation, indicate whether the home has the following items:

- a. Energy Star appliances
- b. Smoke detectors
- c. Carbon monoxide detectors

G. In the case of homes constructed or rehabilitated for sale, define the affordability period, and explain any mechanism for enforcing this affordability period.

Evidence of Site Control

The applicant must have a purchase contract for the acquisition of the property if they do not own it at the time of funding. If there is a contract it must be subject to an appraisal that is not older than 60 days. An exception to this requirement may be made if the property is being sold for a price equal to or less than the value listed on the Sarasota County Property Appraiser's website. If the property is already owned by the applicant, then the applicant will provide a copy of the deed. (Label as Exhibit 13).

Construction Including Rehabilitation

If the proposed project involves construction activities such as construction of a new home or renovation of an existing structure, the following information is required:

- A. For renovation, provide a list of repairs to be made for the dwelling unit. For new construction, provide plans and specifications. (Label as Exhibit 14).
- B. Attach the plan for completing the repairs or new construction, which includes, but is not limited to, details such as whether the non-profit organization will partner with another non-profit, work with donated labor or obtain bids from licensed contractors. If a licensed contractor will be used to complete the project, list the procedure for selecting the contractor, considering all necessary affirmative steps to assure that small firms, minority owned firms, women owned firms and labor surplus area firms are used when possible. (Label as Exhibit 15).
- C. Provide a copy of contract proposal from licensed contractor for new construction or repairs. If the non-profit organization will serve as the contractor, attach a cost estimate. (Label as Exhibit 16).

Project Schedule

Complete the following proposed schedule for the development:

- A. Date of Acquisition (if applicable)
- B. Building Permit issued
- C. Construction Begins
- D. Construction Complete
- E. Sale of property to Income Eligible Homebuyer
- F. If this is a rental project, list the expected occupancy date

Project Budget

Attach the budget for the entire project, including all sources and uses of funds, including all donations of materials and services. (Label as Exhibit 17).

SARASOTA

Office of Housing & Community Development Partnership Program Project Leveraging Worksheet

This worksheet is intended to capture other funds that were leveraged along with the Office of Housing and Community Development's (OHCD) funding for the project. OHCD reports on other funding that goes into these projects, and these reports are available for public review and comment. Please provide the amount(s) of other funding used for the project. Do not include the funding provided by OHCD.

I. Other Federal Funds:

Source	Amount
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
Total:	<hr/>

II. Other State Funds:

Source	Amount
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
Total:	<hr/>

III: Other Local Government Funds:

Source	Amount
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
Total:	<hr/>

IV. Other Private Funds (Organizations, Foundations, Individuals):

Source	Amount
Total:	

EXHIBIT 11

PROXIMITY TO SHOPPING, TRANSPORTATION, SCHOOLS

EXHIBIT 12

PROJECT DESCRIPTION

EXHIBIT 13

EVIDENCE OF SITE CONTROL

EXHIBIT 14

CONSTRUCTION, INCLUDING REHABILITATION

EXHIBIT 15

STRATEGY FOR COMPLETING THE PROJECT

EXHIBIT 16

CONTRACTOR'S PROPOSAL

EXHIBIT 17

PROJECT BUDGET

EXHIBIT 18

INCOME LIMITS

HUD release: 4/2/2024
Effective: 4/1/2024

**2024 Income Limits and Rent Limits
Florida Housing Finance Corporation
SHIP and HHRP Programs**

County (Metro)	Percentage Category	Income Limit by Number of Persons in Household										Rent Limit by Number of Bedrooms in Unit					
		1	2	3	4	5	6	7	8	9	10	0	1	2	3	4	5
Sarasota County (North Port-Sarasota-Bradenton MSA) Median: 97,000	30%	21,150	24,150	27,150	31,200	36,580	41,960	47,340	52,720	Refer to HUD		528	566	678	847	1,049	1,250
	50%	35,200	40,200	45,250	50,250	54,300	58,300	62,350	66,350	70,350	74,370	880	942	1,131	1,306	1,457	1,608
	80%	56,300	64,350	72,350	80,400	86,800	93,250	99,700	106,150	112,560	118,992	1,407	1,508	1,808	2,090	2,331	2,573
	120%	84,480	96,480	108,600	120,600	130,320	139,920	149,640	159,240	168,840	178,488	2,112	2,262	2,715	3,136	3,498	3,861
	140%	98,560	112,560	126,700	140,700	152,040	163,240	174,580	185,780	196,980	208,236	2,464	2,639	3,167	3,659	4,081	4,504

Florida Housing Finance Corporation (FHFC) income and rent limits are based upon figures provided by the United States Department of Housing and Urban Development (HUD) and are subject to change. Updated schedules will be provided when changes occur.