

Pittsburgh Housing Opportunity Fund (HOF)

Housing Stabilization Program

EXHIBIT C: Application Narrative

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I. Eligibility Check List

Check if statement is true.

- The proposing Program Administrator is a non-profit organization.
- Has financial capacity to bridge at least \$10,000 prior to URA reimbursement (typically within 15 days of URA's certification of work completion/invoice received by URA)
- Has been in existence as a certified non-profit for at least two years

II. HSP Organizational Information

	Organization Name	Mailing Address	Website Address	Federal Tax ID #
Program Administrator				
Partner Organization 1 (if applicable)				
Partner Organization 2 (if applicable)				

1. Total HOF Funding Request

Reminder: Max assistance per household is \$3,000. Also, admin cost should be included in the total funding request.

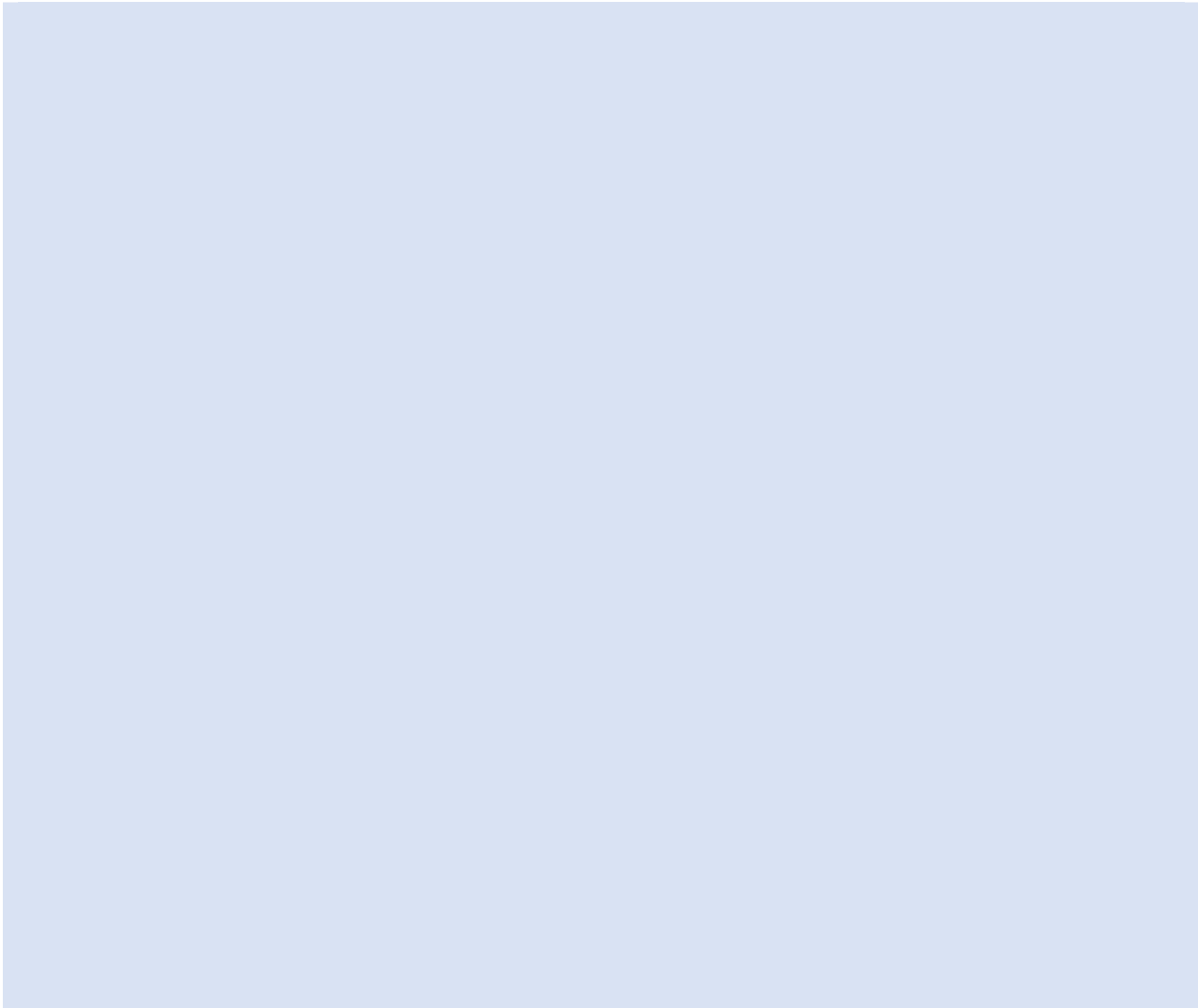
2. Number of households to receive assistance

a. Number of households at or below 30% AMI to be served

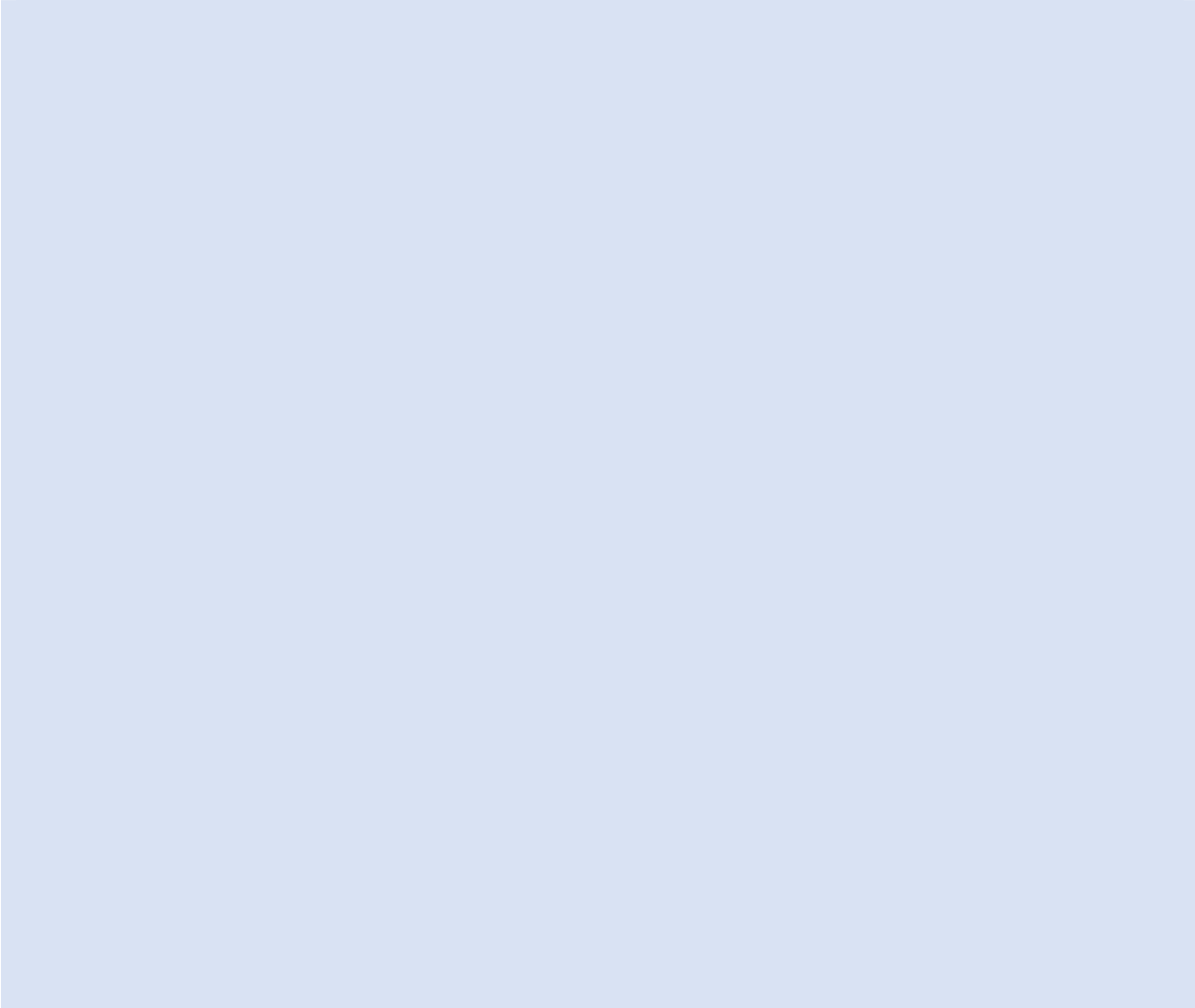
b. Number of households between 30%-50% AMI to be served

iii. **Organizational Experience**

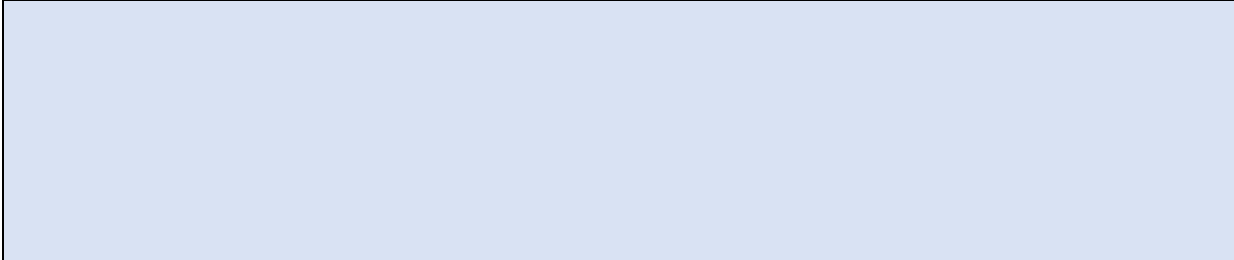
Describe the proposing Program Administrator. Include history of the organization, its mission, and current business operations. If responding organization(s) are forming a team, explain the relationship among the proposing team-members. Proposing Program Administrators must attach most recent financial audit (Attachment 1) and copy of not-for-profit certification (Attachment 2).



Describe what prior experience the proposing Program Administrator implementing programs similar to HOF HSP- stabilizing households, preventing homelessness, and/or decreasing time spent homeless. Please provide as much detail as possible about working with partners and funders to deliver such programs. What volume of households has the proposing Program Administrator previously served? How much funding was deployed for these efforts?



Describe the proposing Program Administrator’s experience providing cultural competency trainings to ensure staff is responsive to diverse populations.



Does the proposing Program Administrator have experience collaborating with community partners? Please explain.

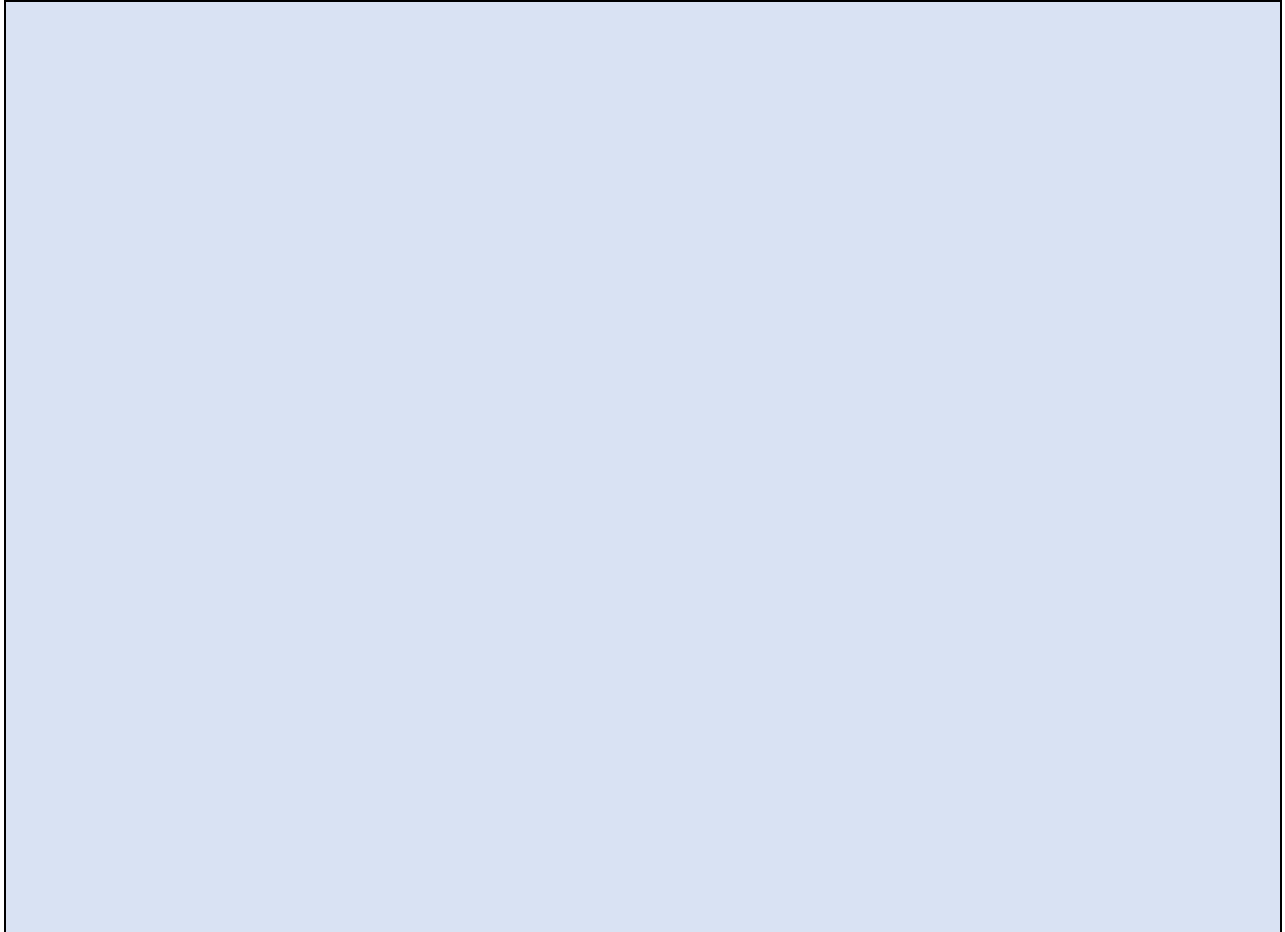
Describe proposing Program Administrator's Coordinated Entry System.

Does proposing Program Administrator have experience using DHS's HMIS system?

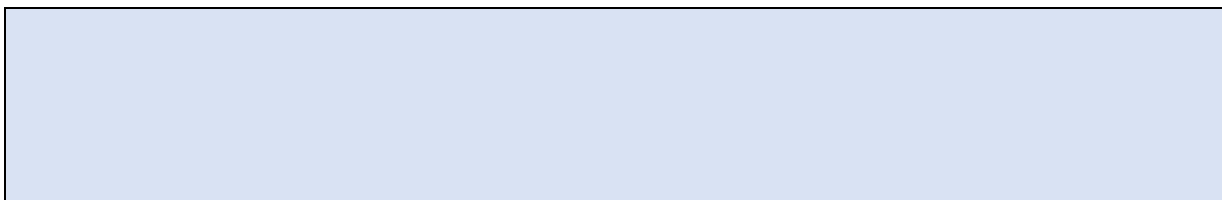
Is proposing Program Administrator's organization listed in the United Way 211 information and referral system?

iv. Readiness to Proceed

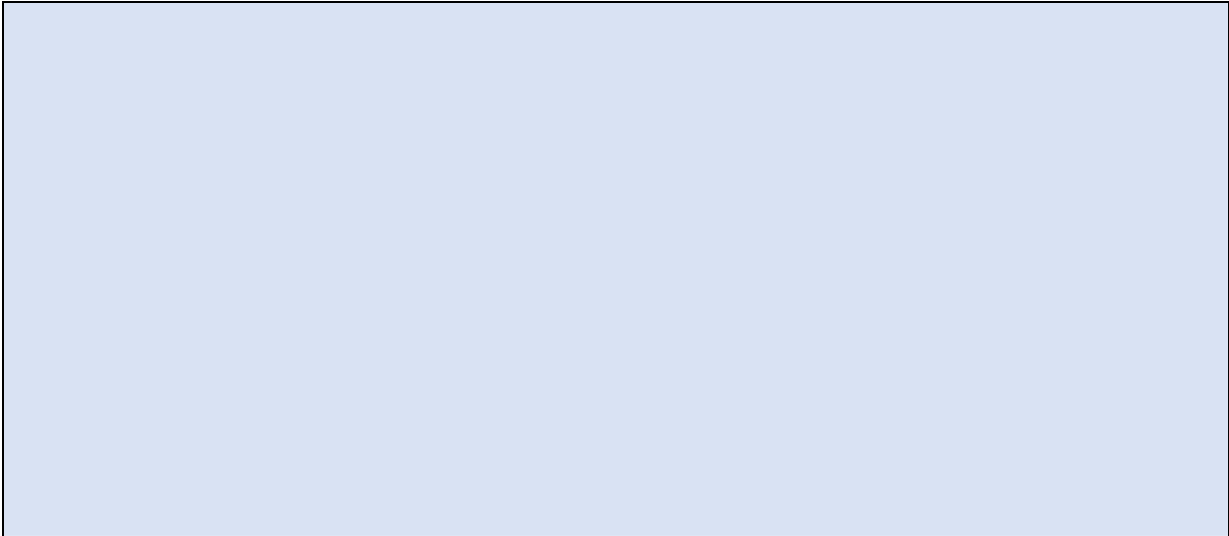
What will be the proposing Program Administrator’s approach to staffing, should they be awarded HSP funds? As **Attachment 3**, please provide an organizational chart indicating staff responsible for administering the HSP funds and provide resumes for those staff.

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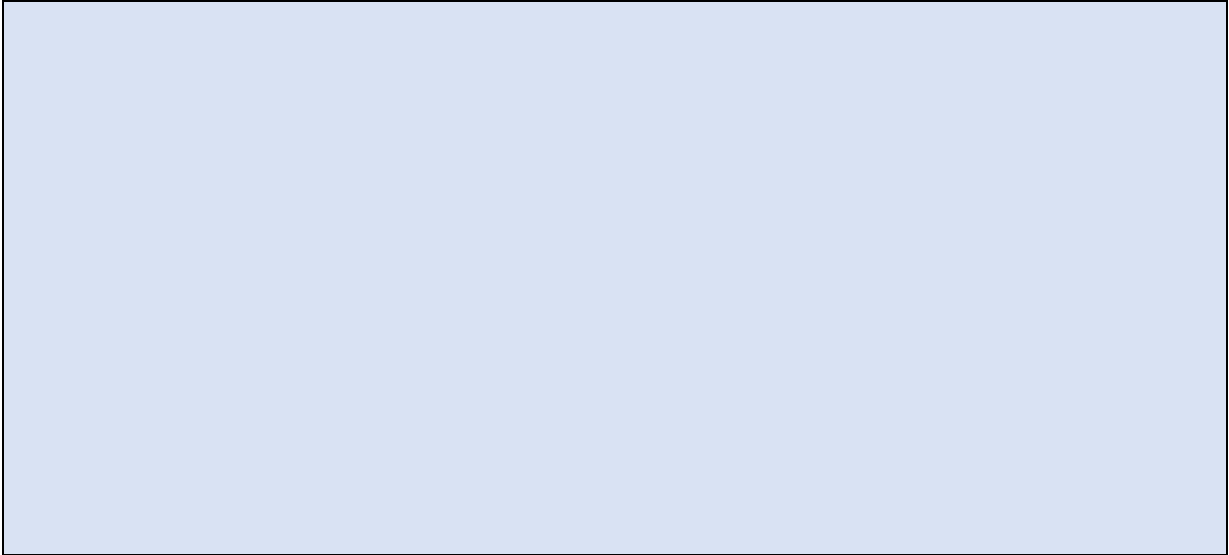
What geography will the proposing Program Administrator service? Is the organization willing to service households City-wide? **Reminder:** HSP funds can only be used within the City of Pittsburgh.

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Describe how the proposing Program Administrator will ensure that household applications are processed within 30 days of receipt. Be as detailed as possible given the necessary steps: income eligibility determination, coordinating dwelling unit inspection, and fund disbursement.



Detail what the proposing Program Administrator’s outreach plan will be for the target population.



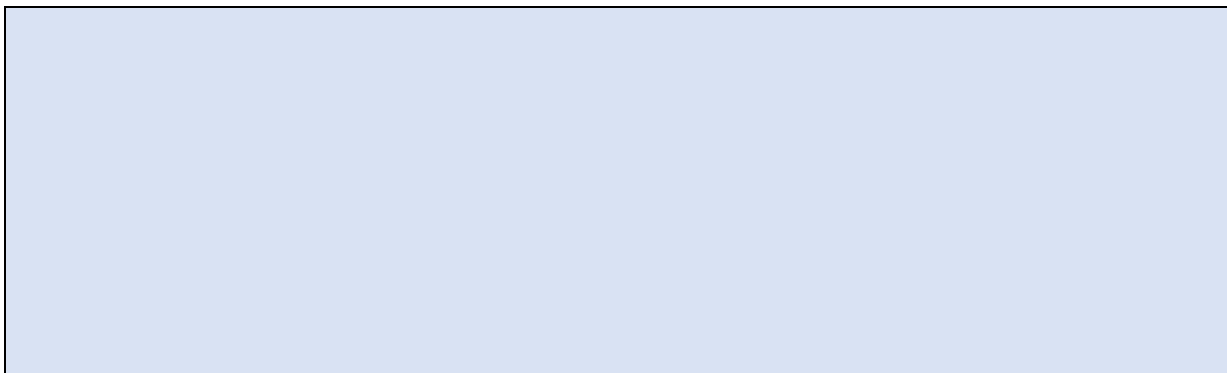
V. Financial Capacity

What is the proposing Program Administrator's current monthly revenue into the organization? What is the annual operating budget for the organization?



Attached are the proposing Program Administrator's last two Annual Audited Financial Statements **Attachment 1**

Has the proposing Program Administrator ever received funding from the Department of Human Services? Is the organization listed in any of the following: the DHS Continuum Care system, the Allegheny Link System, and/or Emergency Food and Shelter Program?



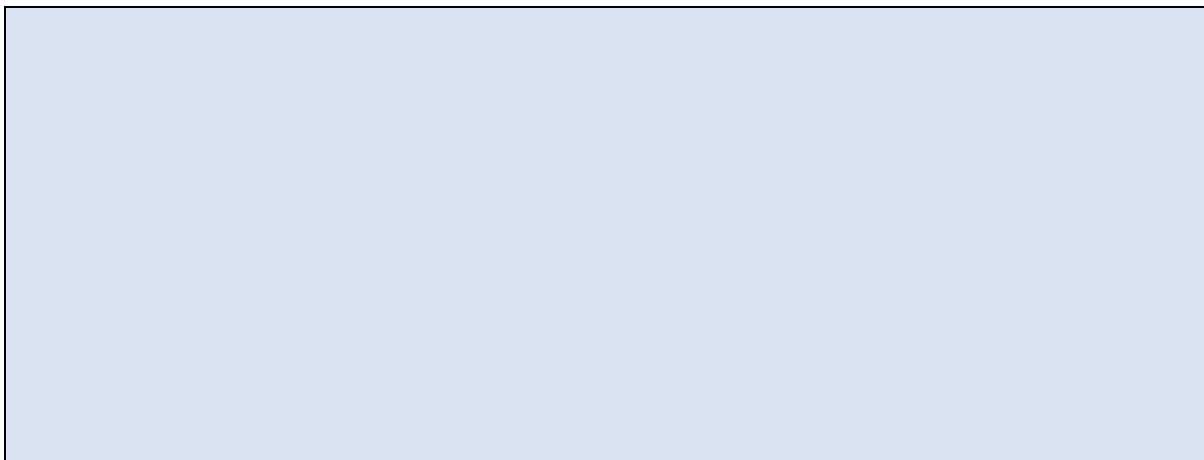
Describe the proposing Program Administrator's systems in place and their adequacy for meeting the requirements laid out in the RFP related to financial management, invoicing, monitoring, and reporting.



Recognizing that HOF will issue checks on a reimbursable basis, how quickly can the proposing Program Administrator issue checks to landlords?

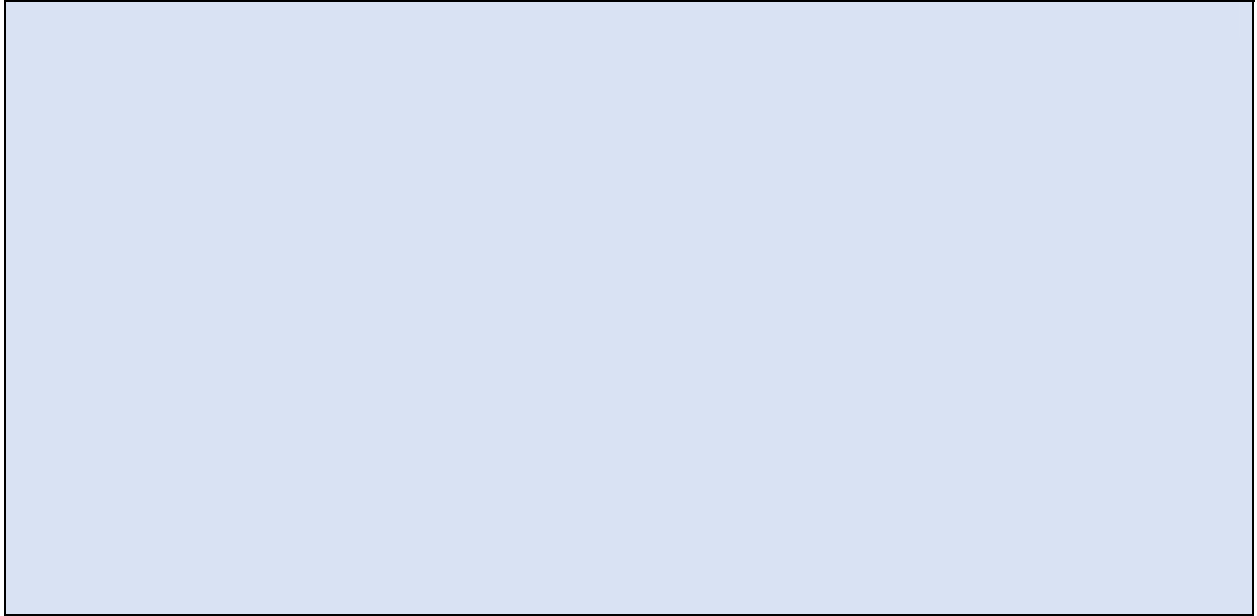


For law clinics only: Describe the anticipated staff time necessary to administer the program and list hourly rates.



VI. Approach to Providing Social Services and Financial Planning

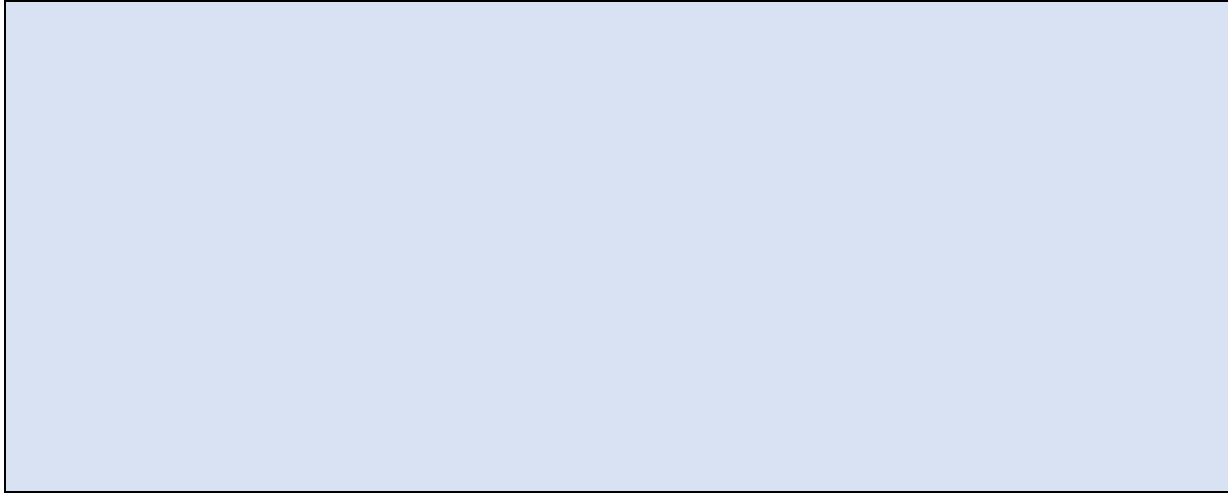
Program Administrators will need to create housing plans for certain households. What will the proposing Program Administrator do in the situation where the monthly rent for the unit is more than the household will be able to reasonably afford without the program? How will this household be helped?



What does the proposing Program Administrator consider to be the core social services necessary to provide in conjunction with rental assistance in order for the HSP program to be successful?



How would the proposing Program Administrator determine that HSP funds will be a one-time only need and that these funds will help stabilize the household?



VII. Additional Information (Optional)

This section does not count for any additional points, however if there is any additional information about the proposing Program Administrator that is believed to be significant to this application, please use the section below to provide such information, and/or supply additional attachments if necessary.

