

**APPLICATION FOR
STATE CAPITAL APPROPRIATION PROJECT**

Applicant Information

Applicant Name(s): _____
Address: _____
City/State/Zip Code _____
Federal Tax ID #: _____
City of SF Business Reg #: _____
State of NM CRS#: _____
Project Contact: _____
Telephone: _____
Email Address: _____

Amount of Allocation Requested: \$ _____

Type of Applicant (check one):

Partnership Corporation Non-Profit* Other

* Non-profit must provide proof of non-profit status. This proof includes submittal of current registration as charitable organization with the NM Attorney General's Office, covering the most recent Fiscal Year, or proof of exemption. Information can be obtained online at <https://secure.nmag.gov/coros/>. Verification should be in the form of the first page of the "NM Charitable Organization Statement."

Project Name: _____

Project Address: _____

City/State/Zip Code: _____

1. Funding

How will the funding be used for this project? What additional funding sources are secured or will be secured upon receipt of allocation?

Leveraging/Matching Requirement. For every \$1 allocated through this appropriation, the City encourages that at least \$1 from other sources is committed to the project (leveraged funds can include long term mortgages, other sources of grants, owner equity, proceeds from Low Income Housing Tax Credits, or the current value of land); organizational resources (in-kind staffing, donated materials, discounted labor) may also be used as match.

Briefly describe and/or summarize leveraging/match ratio:

Project Budget and/or Development Pro-Forma: demonstrate use of leveraged and matching funds as well as evidence that operating budget is sufficient to administer the proposed program/project once the capital improvements are made.

Briefly describe budgetary estimates and cost calculations:

2. Need/Benefit & Project Feasibility

Demonstrate that the proposed project/program effectively meets identified current and future housing needs, using data-based analysis. Provide narrative and evidence that connects the proposed project with adopted City priority(s).

What is the timeline for the project? Applicant must describe proposed timeline for expending funds, either in terms of steps required to deploy funds or schedules for capital project completion.

Sustainability. The challenges of climate change and urban resiliency are addressed in the City of Santa Fe 25 Year Sustainability Plan, which lists main areas of focus for the City of Santa Fe over the course of the next 25 years. Describe how the proposed project will contribute toward the provision of more sustainable and resilient neighborhood development (use additional sheets as necessary), including energy efficiency improvements, mobility upgrades and connections to the surrounding urban environment:

2a. Site Information

The proposed project must meet the description in the appropriations language and is restricted to conversion, preservation and new construction of a permanent supportive housing facility serving those experiencing homelessness or very low income renters experiencing housing instability. Please provide the following information.

i. **Site Control.** If proposed project is recommended for funding, proof of site control must be provided before funds are disbursed. Site control is or will be in the form of:

Deed Option Lease (Term ____ Years) Purchase Contract

Other (explain): _____

Expiration Date of Contract, Option, or Lease _____ (month/year)

ii. **Site Description/Land Use Status**

Area of Site: _____ acres or _____ square feet

Is site zoned appropriately for your proposed project? Yes No

If no, is site currently in the process of re-zoning? Yes No

What zoning category is required? _____

When is zoning issue to be resolved? _____ (month/year)

Has the City approved the site plan, plat, or other required entitlements?
 Yes No

If yes, provide a copy of the site plan/plat or other necessary entitlements.

Are there any other development reviews and approvals required? Yes No

If Yes, please explain: _____

List any required reports or studies underway or completed (such as soils report, environmental assessment, traffic study):

Has the City issued required permits? Yes No

Are all utilities presently available to the site? Yes No

If no, which utilities need to be brought to the site? _____

Who has responsibility of bringing utilities to site? _____

3. Affordability

As per the State of NM Department of Finance and Administration Fund 89200 Capital Appropriation Project, these funds are to be used to plan, design, construct and renovate a facility for homeless and below-market renters. Individuals occupying this facility should earn no more than 80% of HUD's Area Median Income (AMI) for Santa Fe with the majority earning less than 30% AMI, as adjusted by family size (see table below). *As of the release of this application, 2023 data is not available. Applicant is required to use updated data for the implementation of the project if funded.*

2022 AMI	Family Size					
	1	2	3	4	5	6
30%	16,950	19,400	23,030	27,750	32,470	37,190
50%	28,250	32,250	36,300	40,300	43,300	46,750
60%	33,850	38,700	43,550	48,350	52,300	56,150
65%	36,700	41,950	47,150	52,400	56,650	60,800
80%	45,150	51,600	58,050	64,500	69,700	74,850

Fill out table, indicating which AMI percentiles will be served by the proposed project and how many **beneficiaries** per tier are expected to receive assistance. (Note: if project is funded, this proposed number will be used to draft the scope of work in the professional services agreement with the City.)

AMI	# of Households	# of Individuals
65% - 80%		
50% - 65%		
30% - 50%		
Less than 30%AMI		
TOTAL		

The minimum affordability restriction for the amount of available funding is a minimum of 20 years. Describe how equity will be secured:

How will the affordability period be enforced and monitored over time for compliance? If applicable, describe how equity will be secured, using deed restrictions or other mechanisms to ensure that performance benchmarks are met and affordability targets are achieved.

Given the target population for these funds, please describe the longer term means of ensuring that the housing stability of higher needs residents will be supported. Also describe how housing outcomes will be tracked for those leaving the project: _____

4. Demonstrated Capability/Organizational Capacity/Partnerships

Describe the expertise of your organization and past projects to provide the type of project proposed for funding. Use attached page if necessary:

Describe your staffing and attach resumes of key personnel (use additional pages as needed):

Describe community partnerships and collaborations that will be achieved as direct result of this project and how they will strengthen community networking ties and expand and deepen access to the housing/services offered through the project.

REQUIRED ATTACHMENTS to APPLICATION

In addition to the submittal requirements described in the body of the RFA, the following attachments may apply to your application:

- _____ Project Budget or Development ProForma (required)
- _____ Leverage Calculations (required, see Exhibit 1)
- _____ Copy of site plan or plat if project is currently approved by City or in the process of being entitled
- _____ Work samples, illustrations of past projects, other documentation of community projects and partnerships (optional)

Leverage/Match Requirement. The City requires that funds are matched or leveraged at a \$1:\$1 ratio. This means that for every dollar provided by the City, \$1 of either organizational resources (including in-kind services) or funds leveraged from an additional resource are provided. To calculate this ratio, please fill out the sources of funding budget below.

Sources of funding		Source/ Amount	Source/ Amount	Source/ Amount	Totals
Amount Applied for:					\$844,470
1	Grantee Match (includes cash or in-kind value)				\$
2	Other private resources (includes in-kind services from other orgs), philanthropic support				\$
3	HUD funds (i.e. CDBG, HOME, ESG, CoC, Sect 8)				\$
4	Other Federal Subsidy (LIHTC, etc.), Relief Funds				\$
5	City Funding (i.e. Youth and Family, Human Services Divisions)				\$
6	State funds (i.e. MFA, DFA)				\$
7	Private funds (includes out of pocket costs of beneficiary)				\$
Total of all funding sources (not including State Capital Outlay Award)					\$

Table 1-A: Sources of Funding

Leverage/Match Ratio. On the table below, indicate how this ratio is met by dividing the “Amount Applied For” by the Match, Leverage and Total (Leverage + Match). The amount in Row B must be 3X greater than the amount in Row A.

A:	Amount Applied for: \$844,470	Ratio
	Subrecipient Match (enter total amount in Row 1)	\$
	Total Leveraged (Sum of Total for Rows 2+3+4+5+6+7)	\$
B:	Total Match + Leverage	\$

Table 1-B: Leverage/Match Ratio