

WestMetro HOME Consortium

HOME Project Comprehensive Scoping, Set up and Completion Checklist

For New Projects or Major Amendments to Existing Projects

Instructions:

1. Complete this cover page
2. Notify Consortium Administrator / Hold Scoping Session w/ Consortium Staff
3. When prompted in checklist, submit completed Cover Page, Signed Project Checklist, IDIS Set up Form, underwriting review, and copy of executed HOME Funding Agreement to Consortium Administrator
4. Continue to use Project Checklist until project completion
5. Record completed checklist and appropriate documentation in project file(s) as the project proceeds

Community:	
Project Name:	
Address:	

Project Type:	Rental Housing <input type="checkbox"/>	Ownership Housing <input type="checkbox"/>	Homebuyer Assistance <input type="checkbox"/>	Homeowner Rehab <input type="checkbox"/>
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HOME Project Number:		HOME Funding Yr:	
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Property Owner(s) / Developer:	
Local Project Manager:	

Contact Numbers:		
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Total Budget:		HOME Budget:	
Revision 1 (___/___/___)			
Revision 2 (___/___/___)			
Revision 3 (___/___/___)			
Revision 4 (___/___/___)			

Total # of Units:		Total HOME Assisted (HA) Units:	
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CHDO Set-Aside?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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25% Required Match Amount:		Match Type:	
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Project Description:

RENTAL HOUSING - Project Scoping / Pre-Setup					
Step	Task	Person Responsible	Initials / Date	Documentation Required (as project proceeds)	
				Consortium Files	Member Community Files
1.	Project/Amendment Scoping Meeting (Notify Consortium Administrator)	Local Project Manager			
2.	Environmental Review Consult and Approval <i>(as soon as site identified & prior to any commitment of funds)</i> <input type="checkbox"/> Site Statutory Checklist & Historic Clear. (Consortium Approval) <input type="checkbox"/> General clearance by HUD (If necessary) <input type="checkbox"/> Environmental conditions to be remedied as part of project: See attached	Local Project Manager w/ Consortium Staff		<input type="checkbox"/> Clearance correspondence from HUD	<input type="checkbox"/> Environmental Checklists
3.	Activity (Check all that apply): <input type="checkbox"/> Pre-development Soft costs (CHDO Only) <input type="checkbox"/> Acquisition Costs <input type="checkbox"/> New Construction / Development Hard Costs <input type="checkbox"/> Rehab. / Hard Costs <input type="checkbox"/> Development Soft Costs <input type="checkbox"/> Relocation Costs <input type="checkbox"/> Initial Operating Deficit Reserve <input type="checkbox"/> PJ Staff/Overhead Costs for Project Delivery	Local Project Manager		<input type="checkbox"/> Detailed Project Description	<input type="checkbox"/> Detailed Project Description <input type="checkbox"/> Specify activity type in HOME Funding Agreement <input type="checkbox"/> Sources and Uses statement / operating budget Other documentation depends on activity type
4.	URA Acquisition (Select one) <input type="checkbox"/> <u>Not triggered:</u> Per CFR 49 Part 24.101(a)(2) <input type="checkbox"/> <u>Triggered:</u> URA procedures taken and documented.	Local Project Manager w/ Consortium Staff			If Triggered: <input type="checkbox"/> Tenant roster at time of funding (name household size, income, unit size, rent) <input type="checkbox"/> Notices: 1 Initial notice, 2. Notice of non-displacement <input type="checkbox"/> Document offer of comparable unit(s) to all displaced HH <input type="checkbox"/> Calculation of reimbursement of housing expenses <input type="checkbox"/> Evidence of Payment <input type="checkbox"/> Document that tenants were informed of their rights under the Fair Housing Act [24 CFR 42.350(a)]

RENTAL HOUSING Comprehensive Checklist 29June12

5.	URA Displacement/Relocation (Select one) <input type="checkbox"/> <u>Not triggered</u> : CFR 49 Part 24 .2(a)(2)(iv) <input type="checkbox"/> <u>Triggered</u> : See attached (URA procedures documented)	Local Project Manager w/ Consortium Staff			If Triggered: Same as above
6.	Site & Neighborhoods Standards Review (If New Construction)	Local Project Manager			<input type="checkbox"/> Site & Neighborhood Standards Checklist
7.	Income Targeting All HA Units <80% of AMI 90% of HA Units <60% of AMI at initial occupancy 20% of HA Units <50% of AMI (If >4 HA units)	Local Project Manager			<input type="checkbox"/> Specify in HOME Funding Agreement <input type="checkbox"/> Income calculations and source documentation and/or 3 rd party verifications in tenant files
8.	Income Determination Method: Part 5 Annual Income Certifying agency: _____	Local Project Manager			<input type="checkbox"/> Specify in HOME Funding Agreement <input type="checkbox"/> Income determinations: calculations and source documentation and/or 3 rd party verifications in tenant files
9.	Determination of Subsidy and Number of HA Units <i>(Attach HOME Project Worksheet)</i> Fair Share Test (Indicate Which) <input type="checkbox"/> Comparable Units: (HA Units/Tot. Units Test) <input type="checkbox"/> Non-Comp. Units: (Sq. Ft. HA units/Tot. Sq. Ft. Test) Max. HOME Subsidy Limit Test: Under Limit of \$_____ / unit	Local Project Manager w/ Consortium Staff		<input type="checkbox"/> HOME Project Worksheet <input type="checkbox"/> Cost allocation method: proration or unit-by-unit	<input type="checkbox"/> Copy of Max HOME Subsidy Limits <input type="checkbox"/> Sources and uses statement <input type="checkbox"/> Detailed project description including unit sizes <input type="checkbox"/> Specify in HOME Funding Agreement
10.	Subsidy Layering Analysis (If other public subsidy)	Local Project Manager w/TA Cons.		<input type="checkbox"/> Subsidy Layering Analysis	<input type="checkbox"/> Subsidy Layering Analysis
11.	Underwriting, Capacity, Market Need Assessment and CHDO Development Capacity Certification (if using CHDO set-aside funds)	Local Project Manager w/ TA Cons.		<input type="checkbox"/> Completed Assessment <input type="checkbox"/> CHDO Capacity Certification	<input type="checkbox"/> Completed Assessment <input type="checkbox"/> CHDO Capacity Certification
12.	HOME Rent Limits determined <i>(inc. utility allowances)</i> <input type="checkbox"/> High HOME <input type="checkbox"/> Low HOME (20% of HA units if >4 HA units) <input type="checkbox"/> Project Based Subsidy <input type="checkbox"/> Tax Credit	Local Project Manager		HOME Project Worksheet	<input type="checkbox"/> Copy of HOME Rent Limits <input type="checkbox"/> Specify in HOME Funding Agreement

RENTAL HOUSING Comprehensive Checklist 29June12

13.	<p>Fixed or Floating Units? (Fixed req. if 100% units HA)</p> <p><input type="checkbox"/> Comparable Units: <u>Floating</u></p> <p><input type="checkbox"/> Non-Comp. Units: <u>Fixed</u></p>	Local Project Manager			<input type="checkbox"/> Specify in HOME Funding Agreement
14.	<p>HOME Affordability Period:</p> <p><input type="checkbox"/> 5 years: <\$15,000/HA Unit</p> <p><input type="checkbox"/> 10 years: \$15,000-\$40,000/HA Unit</p> <p><input type="checkbox"/> 15 years: >\$40,000</p> <p><input type="checkbox"/> 20 Years: New Construction or Acquisition of newly constructed housing (any amount/HA Unit)</p>	Local Project Manager			<input type="checkbox"/> Specify in HOME Funding Agreement
15.	<p>Affirmative Fair Housing Marketing Plan (>4 units) and Tenant and Participant Protections</p>	Local Project Manager			<input type="checkbox"/> Specify in HOME Funding Agreement <input type="checkbox"/> AFHM Plan with copies of ads and notifications <input type="checkbox"/> Copy of leases/selection plan. Note: All leases must comply with tenant and participant protections (§92.253)
16.	<p>Accessibility Standards</p> <p>New Construction: (>5 Units at site - 5% of all units or at least one unit for physical disability & <u>additional</u> 2% or a minimum of 1 unit for sensory disability)</p> <p>Rehabilitation: 5%/2% triggered at >15 units and if cost of rehab is 75% of replacement costs. Section 504 “Other alterations” may apply if changes to bathroom, kitchen or entry door jambs. Single elements must be made accessible if project does not otherwise already meet 5% mandate</p>	Local Project Manager w/ Consortium Staff			<input type="checkbox"/> Documentation of accessible unit scoping / compliance (both mobility and sensory) from architect, building inspector and/or consultant
17.	<p>Property Standards – Certificate of Occupancy (New Construction) or Section 8 HQS. Rehab must have HQS</p>	Local Project Manager			<input type="checkbox"/> Work write-up reports <input type="checkbox"/> HQS if rehab, CO if new construction
18.	<p>Other Special Requirements</p> <ul style="list-style-type: none"> - Davis-Bacon labor compliance {12 or more HA units}; - Energy Star Certification and Model Energy Code (if new construction); - Section 3 and MWBE; - Contractor eligibility verifications (excluded party list); - FFATA applicability (first-tier contract(s) ≥ \$25,000) - Retainage - 1% 	Local Project Manager			<input type="checkbox"/> Davis Bacon – payroll and rates attached to GC Contract <input type="checkbox"/> Section 3 – Plan attached to GC Contract, Section 3 report <input type="checkbox"/> Energy Star – Specify in HOME Funding Agreement <input type="checkbox"/> Excluded Party List System search <input type="checkbox"/> FFATA Form (contact Admin.) <input type="checkbox"/> 1% Retainage – Specify in HOME Funding Agreement

Next: Final Approvals & Project Set-up in IDIS					
Step	Task	Person Responsible	Initials / Date	Documentation Required (as project proceeds)	
				Consortium Files	Member Community Files
19.	Project HOME Eligible based on above? <input type="checkbox"/> Yes <input type="checkbox"/> No	Local Project Manager			
20.	Citizen Participation required? (For amendments - change in project scope, location or budget >25%)	Local Project Manager			<input type="checkbox"/> Meeting notices, agendas, ads, etc.
21.	Local Review & Approval	Local Project Manager			<input type="checkbox"/> Meeting minutes, official orders, etc.
22.	Local Public Hearing (if necessary)	Local Project Manager			
23.	Notice to Newton Senior Planner (for Newton P&D Board hearing notice – if necessary)	Local Project Manager			
24.	Consortium Public Hearing - Newton P&D Board Recommendation	Local Project Manager			
25.	Budget and HUD Action Plan Amendment submitted to Consortium Administrator; (if necessary)	Local Project Manager/ Consortium Admin		<input type="checkbox"/> Copy of Budget and AAP Amendments	<input type="checkbox"/> Copy of Budget and AAP Amendment
26.	Amendment Notice Mailed to HUD by Consortium	Consortium Staff		<input type="checkbox"/> Copy of correspondence to HUD	
27.	Copy of draft HOME Funding Agreement or Amendment sent to Consortium Administrator for approval prior to execution.	Local Project Manager			
28.	Submit to Consortium Administrator: 1. IDIS Set-up Form 2. Executed HOME Loan Funding Agreement 3. Completed and initialed Project Scoping and Project Approval Checklists, and Cover Page 4. Underwriting Review (<i>and CHDO capacity cert., if applicable</i>)	Local Project Manager		<input type="checkbox"/> IDIS Set-up Form <input type="checkbox"/> Copy of HOME Funding Agreement <input type="checkbox"/> Original	<input type="checkbox"/> Copy of IDIS Set-up Form <input type="checkbox"/> Original HOME Funding Agreement <input type="checkbox"/> Copy of this checklist <input type="checkbox"/> Subsidy layering, underwriting, market need and capacity assessments
29.	Project Budget & IDIS Numbers Assigned	Consortium Administrator			

Next: Project Completion					
Step	Task	Person Responsible	Initials / Date	Documentation Required (as project proceeds)	
				Consortium Files	Member Community Files
30.	Ceremonies (Groundbreaking & Dedication) – Credit Consortium on signs and documents; Invite Congressperson, HUD Regional Administrator & Consortium Administrator)	Local Project Manager			
31.	Occupancy and Project Completion: Within 120 Days of Final Draw and after <u>all HOME units occupied</u> submit <u>completed</u> IDIS Completion Form(s) to Consortium Administrator	Local Project Manager		<input type="checkbox"/> IDIS Completion Form <input type="checkbox"/> IDIS screen print-out of Completion Date <input type="checkbox"/> Copy of Section 3 report	<input type="checkbox"/> Copy of IDIS Completion Form <input type="checkbox"/> HQS/CO (if new construction) standards met at completion <input type="checkbox"/> Energy Star – copy of certification <input type="checkbox"/> Deed restriction/covenants recorded <input type="checkbox"/> Section 3 report (if applicable)
32.	Monitoring – Provide Appropriate Monitoring Forms/Exhibits	Consortium Administrator		<input type="checkbox"/> Monitoring Records	<input type="checkbox"/> Monitoring Records <input type="checkbox"/> Annual income recertification with: Source documentation; or Written family statement; or Statement from government program administrator Note: Source documentation required every 6 th year for projects with 10+ years of affordability <input type="checkbox"/> Rent limits and lease provisions <input type="checkbox"/> HQS inspection required: Every 3 years for 1 – 4 total units; (sample 15% – 20% units) Every 2 years for 5 – 25 total units; (sample 10-20% units) Every 1 year for 26+ units; (sample 10-15% units)