

Amy Young Barrier Removal Program RESERVATION SYSTEM ACCESS APPLICATION

The purpose of this application is to identify organizations that have the capacity to provide grant assistance from the Texas Department of Housing and Community Affairs (Department) under the Housing Trust Fund's Amy Young Barrier Removal Program (Program).

The undersigned hereby makes application to the Department for certification to participate as an Administrator and has read and understands the application instructions, and certifies that all information herein is true and correct to the best of their knowledge and belief. **Application must have the original signature from a representative with authority to execute documents on the Applicant's behalf.**

Applicant's Authorized Representative's Signature *Representative's Printed Name, Title* *Date*

1. APPLICANT CONTACT INFORMATION

A. APPLICANT CONTACT INFORMATION

| | | | |
|---|--|--------|--|
| Applicant's Legal Name: (as it appears with the Texas Secretary of State Office) | | Phone: | |
| Applicant's Contact Name: | | Fax: | |
| Applicant's Mailing Address: | | | |
| City, State, ZIP: | | | |
| Email Address: | | | |
| <i>If Applicant's "Physical Address" is different from the "Mailing Address," provide the physical address below:</i> | | | |
| Applicant's Physical Address: | | | |
| City, State, ZIP: | | | |

B. APPLICANT LEGAL DESCRIPTION

Legal Form of Applicant (*check only one*):

| | | |
|--|---|--|
| <input type="checkbox"/> Unit of Local Government (including public housing authorities, councils of government and regional planning commissions) | <input type="checkbox"/> Nonprofit Organization | <input type="checkbox"/> Public Agency |
|--|---|--|

Is Applicant in good standing with the Texas Secretary of State? No Yes Filing # _____

Is Applicant in good standing with the Texas Comptroller's Office? No Yes Filing # _____

Organizations that are currently approved to participate in the Department's Amy Young Barrier Removal Program, Homebuyer Assistance Program, Veterans Rental Assistance Program and the Texas Bootstrap Loan Program may stop at this point. Please attach a current roster of all Board of Directors, Council, Commissioners, including names, mailing addresses and phone numbers. If additional information is required the Department staff will contact you by email.

All other applicants please refer to attached Checklist to ensure that all other necessary information is submitted for review.

Applicants who have received an award from the Department in the past must be in compliance with all contracts currently in place with the Department. Approval of any applicant is subject to Chapter 2306 of the Texas Government Code and the Texas Administrative Code, Title 10, Part 1, Chapter 51 (Housing Trust Fund Rule).

A nonprofit organization's pending application for §501(c)(3) or §501(c)(4) status cannot be used to comply with the tax status requirement.

Reservation System Access Applications, along with required attachments, may be submitted electronically to HTF@tdhca.state.tx.us

WARNING: Title 18, Section 1001 of the U.S. Code makes it a criminal offence to make willful, false statements or misrepresentations to any department or agency in the United States as to any matter within its jurisdiction.

CHECKLIST

The information contained in the following checklist refers to the Department's enabling legislation Section 2306 of the Texas Government Code, Housing Trust Fund (HTF) Rule adopted by the Department's Governing Board and/or the Notice of Funding Availability (NOFA). Please include this documentation with your application for certification:

LEGAL STATUS

- A. Charter;
- B. Articles of Incorporation or Certificate of Formation
- C. By-Laws
- D. Nonprofit applicants, as defined in HTF Rule, must submit:
 - A current tax exemption ruling from the Internal Revenue Service (IRS) under §501(c)(3), a charitable, nonprofit corporation, of the Internal Revenue Code of 1986, or §501(c)(4), a community or civic organization, of the Internal Revenue Code of 1986, as evidenced by a determination letter from the IRS that is dated 1986 or later. The exemption ruling must be effective on the date of the application and must continue to be effective while certified to administer the Program; or
 - Classification as a subordinate of a central organization non-profit under the Internal Revenue Code §501(c)(3), or §501(c)(4), as evidenced by a current group determination letter, that is dated 1986 or later, from the IRS that includes the Applicant. The group exemption letter must specifically list the Applicant.
 - A copy of the applicant's most recent IRS 990.

FINANCIAL CAPACITY

Provide the following information:

- Nonprofit Organizations must submit audited financial statements for the most recent fiscal year completed, no older than 2009.

ORGANIZATIONAL STRUCTURE

- A. Governing Board of Directors, Council, or Commission:
 - Provide current roster of all Board of Directors, Council, Commissioners, including names, mailing addresses and phone numbers.
- B. Resolution:
 - All applications must include an original resolution that is signed by the applicant's direct governing body (Board, Council or Commission) and:
 - Is dated within the six (6) months preceding the application submission date;
 - Authorizes the submission of the application;
 - Lists the name and title of the person authorized to execute agreements on behalf of the applicant;
- C. Experience Providing Services to Households with Low-Incomes and Persons with Disabilities:
 - Applicants must have at least one (1) year of experience providing services to low-income households or Persons with Disabilities, as evidenced by current or previous contracts with the Department or with other funding entities. To satisfy this requirement, applicants may provide evidence of a partnership with an entity or organization that meets the requirement, such as a contract or memorandum of understanding (MOU). A letter of support or intent to partner does not satisfy this requirement.
 - Submit resumes of current staff members who will implement the Program activities, or job descriptions for unfilled positions.

*Texas Department of Housing & Community Affairs
Amy Young Barrier Removal Program
Attention: Will Gudeman, Program Coordinator
P.O. Box 13941
Austin, TX 78711-3941*

If you require further information or clarification, please contact Will Gudeman at (512) 475-4828.