

City of New Bedford
Office of Housing & Community Development



# CDBG SUBRECIPIENT RFP Application Workshop

City of New Bedford
Office of Housing &
Community Development

#### **AGENDA**

- Understanding the Request for Proposal (RFP) Application
- CDBG Program Basics
  - Goals
  - National Objective
  - Eligible *vs* Ineligible Activities / Costs
- Goals, Outputs & Performance Evaluation
  - Setting Goals / Outputs
  - Performance Evaluation
  - Evaluation Criteria
  - Budgets
- Construction Projects
- Application Requirements
- Ranking Process
- Program Year Requirements
- Common RFP Mistakes
- Contacts



# UNDERSTANDING the REQUEST FOR PROPOSAL APPLICATION PROCESS



#### **UNDERSTANDING the RFP APPLICATION PROCESS**

# What is the Request for Proposal (RFP) Application Process?

- ✓ The city is the recipient of federal CDBG funding.
- ✓ The RFP process is the first phase of the application process for agencies interested in applying for CDBG funding for projects during fiscal year FY20 which runs July 1, 2020 – June 30, 2021.
- ✓ All applicants must complete and submit an RFP in order to be considered for funding.



#### UNDERSTANDING the RFP APPLICATION PROCESS

#### What is the RFP and Action Plan Timeline?

- ✓ Applications are available in a fillable WORD format on city's web site at: www.newbedford-ma.gov/community-development/
- ✓ February 14, 2020 at 12pm: All Applications are due @ OHCD; Late applications will *not* be accepted.
- ✓ February 17 April 24, 2020: City review period.
- ✓ <u>April 27 May 27, 2020:</u> Draft Action Plan 30 Day Public Comment Period.
- ✓ May 28, 2020: Submit to City Council for Approval.
- ✓ June 1, 2020: Submission of Final Action Plan 2020 to HUD.
- ✓ June 2020: Award Announcements.





#### **CDBG 101**

- Administered by the US Department of Housing and Urban Development.
- ✓ Cities, states and some counties are eligible to receive CDBG funds from HUD.
- ✓ This is New Bedford's 46<sup>th</sup> year of receiving funds!



#### **CDBG GOALS**

- ✓ Provide decent, safe and sanitary housing.
- ✓ Provide a suitable living environment.
- ✓ Expand economic opportunities.



#### **MEETING A CDBG NATIONAL OBJECTIVE...**

- ✓ Provide benefits to low and moderate income persons.
- ✓ Prevent or eliminate slum and blight.
- ✓ Meet an urgent need that threatens the health and welfare of residents.



## CDBG PROGRAM ELIGIBILITY vs INELIGIBILITY... WHO IS ELIGIBLE FOR FUNDING?

- ✓ Private non-profits that are corporations, associations, agencies or with non-profit status under the Internal Revenue Code 501 c3.
- ✓ City Departments.



#### WHAT IS AN ELIGIBLE ACTIVITY?

- ✓ ALL PROGRAMS MUST BENEFIT LOW AND MODERATE INCOME INDIVIDUALS AND FAMILIES.
  - Homeless Services
  - Crime Prevention
  - Youth Services including child care
  - Job Training and Education Programs
  - Fair Housing Activities
  - Senior Services
  - Transportation
  - Health Care

These are some examples; this is not the entire list of eligible activities.



#### WHAT IS AN ELIGIBLE ACTIVITY?

- ✓ Only programs that serve primarily low and moderate income individuals and families will be eligible for funding! The definition of a moderate income family is no more than 80% percent of the areas median income, adjusted for household size.
- ✓ <u>Special Groups</u>: Some groups are assumed to be low moderate income. These include – abused children, battered spouses, elderly persons, disabled persons, homeless persons, illiterate adults, migrant farm workers, and persons living with AIDS.



#### WHAT ARE SOME ELIGIBLE COSTS?

- ✓ Personnel / staff (salary and benefits).
- ✓ Office / facility rental or lease costs.
- ✓ Materials and supplies.
- ✓ Communications.

These are some examples; they are not representative of all eligible costs.



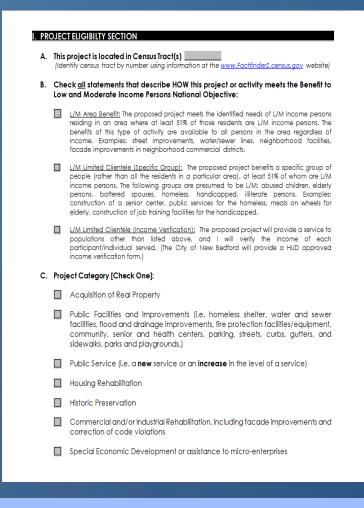
#### WHAT ARE SOME INELIGIBLE COSTS?

- ✓ Fundraising.
- ✓ Political Activities.
- Expenses required to carry out regular responsibilities or functions of local government.
- ✓ Income Payments.
- ✓ Building or portion thereof, used for general conduct of government.
- ✓ Purchase of equipment, fixtures, motors, vehicles, furnishings or other personal property.

These are some examples; they are not representative of all ineligible costs.



#### **RFP - PROJECT ELIGIBILITY SECTION**





#### WHAT IS AN INCOME CERTIFICATION FORM?

- ✓ VERY IMPORTANT! (Each recipient receiving programs and services must complete a OHCD approved Income Certification form).
- ✓ Must be maintained by the subrecipient and subject to review by the OHCD Staff.
- √ 51% of clients served must be income eligible (80% of the Areas Median Household income, adjusted for household size).



#### WHAT ARE THE MAXIMUM INCOME LEVELS?

Maximum Income Levels					
(Based on 80% of Median Family Income)					
Household Size Annual Income					
1 Person \$43,200					
2 Persons	\$49,400				
3 Persons	\$55,550				
4 Persons	\$61,700				
5 Persons	\$66,650				
6 Persons	\$71,600				
7 Persons	\$76,550				
8 or more Persons \$81,450					



#### WHAT IS AN INCOME CERTIFICATION FORM?



CITY OF NEW BEDFORD
Office of Housing and Community Development

#### INCOME CERTIFICATION FORM FISCAL YEAR 2019

Income Limits set by the U.S. Department of Housing & Urban Development (Please circle one):

INCOME LEVEL	1 PERSON	2 PERSON	3 PERSON	4 PERSON	5 PERSON	6 PERSON	7 PERSON	8 PERSON
Extremely Low Income (30%)	0 – 16,250	0 – 18,550	0 – 20,850	0 – 23,150	0 – 25,050	0 – 26,900	0 – 28,750	0 – 30,600
Very Low Income (50%)	16,251 - 27,050	18,551 - 30,900	20,851 - 34,750	23,151 - 38,600	25,051 - 41,700	26,901 – 44,800	28,751 - 47,900	30,601 - 51,000
Low Income (80%)	27,051 - 32,460	30,901 - 37080	34,751 - 41,700	38,601 - 46,320	41,701 - 50,040	44,801 - 53,760	47,901 – 57,480	51,001 - 61,200
Over Income	32,461 - 43,200	37,081 – 49,400	41,701 – 55,550	46,321 - 61,700	50,041 - 66,650	53,761 - 71,600	57,481 – 76,550	61,201 - 81,450

Ethnicity: (select only one)		
Hispanic or Latino	Not Hispanic or Latino	
Race: (select only one)		
White	Native Hawaiian/Other Pacific Islander	Am. Indian/Alaskan Native & Black/African Am.
Black/African American	Asian and White	Asian/Pacific Islander
American Indian/Alaskan Native	Black/African American and White	Other Multi-Racial
Other: (select all that apply)		
Seniors (62 years or older)	Female Head of Household	Handicapped or Disabled
Minors (up to age 18) NOTE: If	client is below 18 years of age, parent or legal guar	dian must verify income and sign form.
Applicant's Sign	nature Type	ed or Printed Name
my family income is subject to verificat Development and the U.S. Department	at this income information is correct and I understar ion by authorized representatives of the City of New of Housing & Urban Development. will be kept confidential and used for HUD monitor	Bedford's Office of Housing & Commun
Signature of Parent/Legal Guardian: _		Date:
FY19 CITY of NEW BEDFORD OFFICE OF CDBG INCOME CERTIFICATION FORM	HOUSING & COMMUNITY DEVELOPMENT	Revised July 1. 201





#### WHAT IS PERFORMANCE EVALUATION?

- ✓ <u>NEEDS STATEMENT:</u> A basic description of the need for your program and/or service.
- ✓ PROJECT GOAL: What can reasonably be achieved.
- ✓ PROPOSED ACTIVITY / DESCRIPTION:
  - Describes what the project will do, how it will implemented, operated and administered.
  - Very important that the summary accurately describes the activities.
  - Will be used to evaluate your proposal.



#### WHAT IS PERFORMANCE EVALUATION?

- ✓ OUTPUTS / ACCOMPLISHMENTS:
  - The number of people served by the activity.
  - Be realistic and don't overpromise.
  - Must be unduplicated numbers of people served.
- ✓ <u>OUTCOMES:</u>
  Identify and describe one or more measureable project
  - outcome(s) consistent with Consolidated Plan.
- ✓ Complete Project Outcome Worksheet



#### **RFP - PERFORMANCE EVALUATION SECTION**

Performance Evaluation Form	
Project Name:	
Needs Statement (Related to Consolidated Pl	lan Needs):
Project Goal:	
Proposed Activity:	
Expected Output:	Expected Outcome:
Number of persons served, jobs created, housing units rehabbed, etc.	Direct results of the program/project.



WHAT IS THE EVALUATION CRITERIA FOR APPLICATIONS?



#### **Project Impact**

- Does the application articulate and substantiate why the project is needed by New Bedford residents?
- Does the application demonstrate an unmet need?
- Is the proposal consistent with the needs/priorities of the New Bedford Consolidated Plan?



#### Proposed Project Accomplishments

- Are the activities and goals clearly defined?
- Are there meaningful outcomes and outputs for the proposed program activities?



#### **Activity Description**

- Has a detailed description of the proposed activity been provided?
- Does the application describe who will benefit from the proposed activity?
- Was a detailed timeline and project schedule included in the application?



#### Organizational Capacity

- Does the organization demonstrate sufficient experience/capacity in conducting the proposed activity in conducting the proposed activity?
- Does the organization demonstrate experience in administration of/compliance with, federal regulations?
- Does the organization have the financial capacity/internal controls to ensure compliance with financial practices and to ensure its ongoing sustainability?
- Does the organization have qualified staff sufficient to oversee financial operations?
- Did the applicant demonstrate that the proposed activity is economically feasible and can be implemented in a timely manner within the program year?



<u>Financial</u> 5 Points

Was the budget summary chart and budget detail (if applicable) complete including all leveraged sources?

Collaboration 10 Points

- Does the application demonstrate overall program merit including coordination with existing services (non-duplication) and evidence of community support?
- Does the proposed program/project take into consideration the collaboration of resources with other public and/or private development efforts to be more effective and efficient?



#### Past Performance Evaluation

20 Points

- Is there evidence that the applicant has expended previous funding in a timely manner?
- Has previously awarded funding been expended within the program year?
- Has the applicant demonstrated its ability to achieve previous outputs and outcomes?
- Does the agency have an outstanding financial concerns or findings?

Bonus 3 Points

Did the applicant attend either of the Action Plan Community Forums or the Technical Assistance Workshop?



#### **EVALUATION CRITERIA BREAKDOWN AND POINTS**

Evaluation Criteria					
Project Impact	15 Points				
Proposed Project Accomplishments	10 Points				
Activity Description	15 Points				
Organizational Capacity	25 Points				
Financial	5 Points				
Collaboration	10 Points				
Past Performance Evaluation	20 Points				
Bonus - Attending either Public Meeting or RFP Workshop	3 Points				
Maximum Points Possible	103 Points				



#### **EVALUATION CRITERIA FORM**

	<u> </u>	12020 CDBG AFFLIC	ATION EVALUATION FORM				
roje	ect Name:						
4ge	ncy Name:						
٩mc	nount Requested: \$ Amount Recommended: \$						
New	ew Project?						
		omply with the overall re	gulations, goals and objectives of	□ Yes □ NO			
he (	CDBG Program?			L			
Eve	aluation Factors						
Proj	ect Impact – 15 Points			Points:			
1	Does the application artic	ulate and substantiate wh	y the project is needed by New Bedford	d residents?			
2	Does the application dem	ionstrate an unmet need?					
3	Is the proposal consistent	with the needs/priorities of	the New Bedford Consolidated Plan?				
Prop	posed Project Accomplishm	ents – 10 Points		Points:			
4	Are the activities and goo	ls clearly defined?					
5	Are there meaningful out	comes and outputs for the	proposed program activities?				
Acti	ivity Description – 15 Points			Points:			
6	Has a detailed description of the proposed activity been provided?						
7	Does the application describe who will benefit from the proposed activity?						
8	Was a detailed timeline a	nd project schedule includ	led in the application?				
Org	anization Capacity – 25 Poir	ıts		Points:			
9	Does the organization der	nonstrate <u>syfficient</u> experie	ence/capacity in conducting the propo	used activity?			
10	regulations?	<u>'</u>	perience in administration of/complian				
11	Does the organization hav practices and to ensure it:		nternal controls to ensure compliance v	ith financial			
12	Does the organization hav	re qualified staff <u>sufficient</u> t	to oversee financial operations?				
13	Did the applicant demons in a timely manner within		ctivity is economically feasible and can	be implemented			
Fina	incial – 5 Points			Points:			
14	Was the budget summary	chart and budget detail (	if applicable) complete including all lev	veraged sources?			
Coll	laboration – 10 Points			Points:			
15	duplication] and evidence	e of community support?	merit including coordination with existing				
16		am/project take into consident efforts to be more effe	deration the collaboration of resources: ctive and efficient?	with other public			
Pas	t Performance Evaluation – 2	20 Points		Points:			
17	Is there evidence that the	applicant has expended	previous funding in a timely manner?				
18	Has previously awarded fu	unding been expended wi	thin the program year?				
19	Has the applicant demon	strated its ability to achiev	e previous outputs and outcomes?				
20	Does the agency have ar	y outstanding financial co	ncerns or findings?				
DOM:	NUS - Public Meeting or RFP \	Workshop 2 Points		Points:			



#### WHAT ABOUT THE PROJECT BUDGET?

#### COMPONENTS OF YOUR BUDGET

- Identify all sources attach commitments or other evidence.
- Identify source of leveraged funds.
- Complete the Budget Category Breakdown Be sure to Itemize.
- Complete Staff Salary Budget Include Job Descriptions.
- Overall Agency Budget.



#### RFP – BUDGET SUMMARY CHART

#### **BUDGET SUMMARY CHART**

Category Breakdown	CDBG	Leveraged Funds	Source of Leveraged Funds	Total Funds
Personnel *	\$	\$	\$	\$
Contractual Services (Specify)	\$	\$	\$	\$
Rent & Utilities	\$	\$	\$	\$
Communications	\$	\$	\$	\$
Iraxel	\$	\$	\$	\$
Other Specify:	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
Total CDBG Request	\$			\$
Total Other Funds		\$		\$
Grand Total	\$	\$	\$	\$



#### RFP – PERSONNEL BUDGET SUMMARY CHART

#### **BUDGET DETAIL**

Position Title	Is this a current or proposed position?	Annual Salary	Annual Fringe Benefits	Total Annual Salary	x	% Time Spent on this CDBG Project/ Program	=	Total Position Cost Requested from CDBG
Example: Case manager	Current	\$25,000	\$5,000	\$30,000	x	40%	=	\$12,000
		\$	\$	\$	x		=	\$
		\$	\$	\$	x		=	\$
		\$	\$	\$	x		=	\$
		\$	\$	\$	x		=	\$
		\$	\$	\$	x		=	\$
		\$	\$	\$	x		=	\$
		\$	\$	\$	x		=	\$





### **CONSTRUCTION PROJECTS**



#### **CONSTRUCTION PROJECTS**

#### CAN CDBG FUNDS BE USED FOR CONSTRUCTION?

#### YES - CONSTRUCTION PROJECTS ARE ELIGIBLE

- Eligible Public Facilities activities include acquisition, construction, rehabilitation and Americans with Disabilities Act (ADA) modifications to a public facility.
- Public Facilities include senior and youth centers, domestic violence shelters, neighborhood facilities, and childcare buildings.
- In accordance with the city's Sustainability Task Force recommendations, agencies will be expected to incorporate sustainable building technologies and standards, such as those in Leadership in Energy and Environmental Design (LEED) Building Rating System, whenever feasible.



#### **CONSTRUCTION PROJECTS**

#### **CAN CDBG FUNDS BE USED FOR CONSTRUCTION?**

- ✓ Must provide separate detailed Construction Budget.
  - All costs (hard and soft costs) must be itemized.
- ✓ Applicants must demonstrate project readiness
  - Include all funding sources with commitments for funding.
  - Include timeline for project commencement.
- ✓ <u>VERY IMPORTANT</u> Must demonstrate project feasibility.



#### **CONSTRUCTION PROJECTS**

#### PROJECT FEASIBILITY

- ✓ Have you had an Architect, Engineer or other Professional review the project to determine feasibility?
- ✓ Has the project estimate been completed by a knowledgeable person and included the provision of federal labor standards?
- ✓ In addition to development costs does the project identify sufficient staffing and operating costs to implement the program (if applicable)?
- ✓ Are the other sources of project funding secured or have firm commitments?





#### WHEN ARE REQUEST FOR PROPOSALS DUE AGAIN?

- ✓ All Applications are due on: Friday, February 14, 2020 @ 12:00pm.
- ✓ Applicants must provide a total of seven (7) copies of their completed applications that are 3-hole punched and clipped (not bound).
  - 1 Original copy with all attachments
  - 6 Copies of the RFP only
- ✓ Late or incomplete applications <u>WILL NOT</u> be accepted!
- ✓ Applications are available in fillable WORD format on the city's web site: www.newbedford-ma.gov/community-development/



#### **OVERALL RFP REQUIREMENTS?**

- ✓ Be sure to completely fill out each section of the application.
- ✓ Briefly describe your proposed project.
- ✓ Check appropriate National Objective and Activity.
- ✓ Understand impact on Five –Year Consolidated Plan.
- ✓ Review Consolidated Plan priorities to see if proposal is aligned.
- ✓ Special emphasis will be given to a proposal meeting a need.



#### RFP – TABLE OF CONTENTS

RF	INSTRUCTIONS	RFP PAGE #
I.	GeneralInformation	3
II.	Income & Rent Guidelines	4
III.	Eligibility & Selection	5
IV.	Community Development Needs	10
٧.	Eligible v. Ineligible Activities	11
VI.	Evaluation of CDBG Proposals	13

PRO	POSAL APPLICATION FOR CDBG FUNDING	APPLICATION PAGE #		
	General Application Information	1		
I.	Project Eligibility Section	2		
II.	Project Impact	3		
III.	Performance Evaluation Criteria	5		
IV.	Activity Description	7		
٧.	Organizational Capacity	9		
VI.	Financial	12		
VII.	Construction Projects Only	14		
Atto	Attachments - Certifications			
Α.	Threshold Certification	18		
В.	Statement of Applicant	19		
C.	Conflict of Interest Disclosure	21		
D.	Tax Compliance Certification	22		
E.	Certificate of Non-Collusion	22		
F.	Signature Authorization Form	23		



#### RFP – THRESHOLD CERTIFICATION

	In order, for your application to be accepted, in addition to the application itself, your organization must submit the following items to the Office of Housing and Community Development no later than 12:00 PM on FEBRUARY 14, 2020.
-	An original application with all questions completed (including performance evaluation criteria and budgets) along with seven (7) copies that are 3-hole punched and clipped [not bound] of the completed application. (Only the original must include the requested support documents such as the articles of incorporation and the current list of your Board of Directors.)
	The following attachments/certifications:  Articles of Incorporation Current List of Board of Directors Certified Organization Audit/Financial Statements of most recent year a. Copy of 2 CFR Part 200, Subpart F Audit (Required if \$750,000 in aggregate Federal funds expended), or b. Financial statements audited by a CPA (only if not qualified for 2 CFR Part 200, Subpart F), or c. Profit and Loss Statement for most recently completed fiscal year and General Ledger printout (only first time applicants or those who do not meet above criteria may submit)  IRS 501 (c) (3) Designation Letter (Pending letters will not be accepted) Evidence of current filling of IRS 990 Current Fiscal Year Agency Budget, including all funding sources Job Descriptions DUNS Number A completed Cortificate of Payment of State Taxes Form A completed Certificate of Payment of State Taxes Form A completed Certificate of Non-Collusion Form
	An Executed Threshold Certification Form.
	An Executed Statement of Applicant Form.
	<ul> <li>An Executed Signature Authorization Form.</li> </ul>
	Has the Signature Authorization Form been signed by an authorized officer of the Board (President or Secretary) as registered with the Secretary of Commonwealth, Corporations Division. (http://corp.sec.state.ma.us/corpweb/CorpSearch/CorpSearch.aspx)
	I hereby confirm that this packet contains all materials required.
	Signature of Authorized Signer Printed Name



#### **ADDITIONAL RFP REQUIREMENTS?**

#### **FINANCIAL STATEMENTS:**

- √ > \$750,000 Requires most recent audited financial statements.
- ✓ < \$750,000 Requires <u>up-to-date</u> balance sheet income & expense statement.
- ✓ Articles of Incorporation 501 c3 designation.
- ✓ Listing of Current Board of Directors.
- ✓ Executed Signature Authorization Form.
- ✓ Obtain DUNS Number



#### **ADDITIONAL RFP REQUIREMENTS?**

- ✓ All questions must be completed (including the performance evaluation criteria and budget sections).
- ✓ Only the original copy must include the requested supporting documentation such as the articles of incorporation and current list of your board or Directors.



#### **ADDITIONAL RFP REQUIREMENTS?**

## IMPORTANT – ALL AGREEMENTS MUST BE SIGNED BY AUTHORIZED SIGNER

- Attachment A Threshold Certification
- Attachment B Statement of Applicant
- Attachment C Conflict of Interest
- Attachment D Tax Compliance Certification
- Attachment E Certification of Non-Collusion
- Attachment F Signature Authorization Form

AGREEMENTS NOT FULLY EXECUTED WILL BE REJECTED



#### **RFP – SIGNATURE AUTHORIZATION FORM**

#### ATTACHMENT F SIGNATURE AUTHORIZATION FORM

The Board of Directors of \_\_\_\_\_does hereby resolve that on \_\_\_\_\_\_(\_\_\_\_\_), the Board reviewed the Application for Community Development Block Grant Funds to be submitted to the City of New Bedford Office of Housing and Community Development for funding consideration for the fiscal year 2020 and in a proper motion and vote approved this application for submission

The Board further certifies that the organization making this application has complied with all applicable laws and regulations pertaining to the application and is a non-profit organization, tax-exempt and incorporated in the State of Massachusetts.

(Name of organization requesting CDBG funds) hereby proposes to provide the services or project identified in the Scope of Services in accordance with this application for Community Development Block Grant Funds. If this application is approved and this organization receives CDBG funding from the City of New Bedford, this organization agrees to adhere to all relevant Federal, State and local regulations and other assurances as required by the city. Furthermore, as the duly authorized representative of the organization, I certify that the organization is fully capable of fulfilling its obligation under this application as stated herein.

I further certify that this application and the information contained herein are true, correct and complete.

I also authorize the following person(s) to act as the Authorized Signer to this grant:

Name Title

Name Title

Clerk/Secretary/Treasurer of Board (or other <u>Designated Authority</u>)

Name Title Signature

#### PENALTY FOR FALSE OR FRAUDULENT STATEMENT

U.S. Code Title 18, Section 1001, provides that a fine of up to \$10,000 or imprisonment for a period not to exceed five years, or both, shall be the penalty for willful misrepresentation and the making of false, fictifious statements, knowing same to be false.

City of New Bedford

FY20 CDBG Request for Proposal Application

23 | Page



# **RANKING PROCESS**



#### **RANKING PROCESS**

#### WHAT IS THE RANKING PROCESS FOR THE RFPs?

- ✓ <u>PRIORITIES:</u> Homeless Services, Neighborhood Crime Prevention Programs, Youth Programs, Child Care, and Health Services.
- ✓ <u>PROJECT READINESS:</u> The project needs to be implemented no later than September 1, 2020 and all money must be spent by June 30, 2021.
- ✓ <u>CAPACITY</u>: Must demonstrate the capacity to implement activity.
- ✓ **QUALITY** of program.
- ✓ <u>LEVERAGED</u> funding.





#### WHAT HAPPENS IF YOU ARE SELECTED FOR FUNDING?

- ✓ All Agreements will run from July 1, 2020 to June 30, 2021.
- ✓ Agreements will have a scope of work and a budget to which you will need to adhere.
- ✓ The city will reimburse on a monthly basis.



#### WHAT ARE SOME REQUIRED REPORTS?

- ✓ QUARTERLY DEMOGRAPHICS: Summary report that has a breakdown of the demographics of people served.
- ✓ QUARTERLY NARRATIVE REPORT: A summary narrative report about how the subrecipient is or is not achieving their stated goals, objectives and outputs.
- ✓ MONTHLY OR QUARTERLY INVOICES: Detailed description of funds spent with backup documentation.

<u>IMPORTANT:</u> All files on CDBG related funds and requirements must be maintained for a minimum of 5 Years from the end of the program year.



#### **TECHNICAL ASSISTANCE WORKSHOP?**

- ✓ Prior to the start of the program year, all successful applicants are required to attend an orientation or technical assistance workshop.
- ✓ The following issues will be discussed:
  - Understanding your Subrecipient Agreements.
  - Performance & Outcome Measurements.
  - Quarterly Reporting Requirements.
  - Reimbursement Process.
  - Budget / Amendment Process.
  - Procurement.
  - Annual Monitoring.





#### **TOP TEN COMMON MISTAKES**

1. Didn't read the RFP Instructions or Review the Evaluation.

Applicants are strongly encouraged to review the RFP Instructions before starting their application. Also, applicants should review the Evaluation Form / Questions before submitting their RFP. Remember, the Evaluation Form is our scoring mechanism and the basis for evaluating RFPs and determining funding allocations.

2. Not really understanding the RFP question and/or providing an incomplete response.

Many applicants loose points because they do not fully answer a question. If you do not understand the question, please contact OHCD for TA. Also, if you need additional space to answer a question, please attach the response on a separate page. Applicants should have enough space in a designated section.



#### TOP TEN COMMON MISTAKES

- 3. Submitting the Wrong Number of Applications.

  A total of 7 RFP Applications must be submitted. 1 Original with all
  - attachments and 6 copies of just the RFP. All copies must be 3 hole punched and clipped (not bound).
- 4. Attachment A Threshold Certification Not Completed
  Attachment A of the RFP must be completed / checked off by the applicant. If a document is not required, you must provide an explanation.



#### **TOP TEN COMMON MISTAKES**

- 5. Not knowing who your Authorized Signer should be.

  This person is usually the Director but not always. The Authorized Signer is the person listed on Attachment F Signature of Authorization Form. This person must sign all RFP Attachments.
- 6. Not knowing who authorizes the Director to Sign.

  First, the board votes and grants permission to the Director to apply for a grant. Next, the Clerk, Secretary, Treasurer completes Attachment F and grants permission for said person to sign.



#### **TOP TEN COMMON MISTAKES**

#### 7. Not having a 501(c) (3) status

Applicants must either have 501(c) (3) status or have a sponsor agency who acts as a fiduciary. The applicant will provide the 501(c) (3) # and acceptance letter from the fiduciary. No 501(c) (3) pending letters will be accepted.

#### 8. Not having a DUNS #?

Applicants must have a DUNS number in order to successfully apply and receive federal funds. Applicants are strongly encouraged to apply for a DUNS # immediately if they do not have one already.



#### **TOP TEN COMMON MISTAKES**

#### 9. Not submitting the correct Audit or Financial

- Over \$750,000 Copy of OMB A-133 Audit by a CPA (Required if \$750,000 in aggregated Federal funds expended) – Most Recently Completed Fiscal Year.
- Under \$750,000 Profit and Lost Statement + General Ledger
   Printout Most Recently Completed Fiscal Year.

#### 10. Trying to submit your application late.

Applicants are strongly encouraged to submit their RFPs days before they are due in order to avoid any issues. Prior to accepting an RFP, OHCD staff perform a review to determine if all items have been successfully submitted. Incomplete applications will be rejected and not accepted. If any issues are identified, OHCD staff provide applicants with list of necessary corrections.



# CONTACTS



# CDBG SUBRECIPIENT RFP Application Workshop

City of New Bedford
Office of Housing &
Community Development

#### Jennifer Clarke

**Deputy Director** 

#### **General Questions**

Jennifer.Clarke@newbedford-ma.gov

#### Joseph Maia

**Grants Compliance Coordinator** 

#### **Program Questions**

Jose.maia@newbedford-ma.gov

#### Rob Tetrault

Finance Manager

#### **Finance Questions**

RTetrault@newbedford-ma.gov

#### Nicole Curral

Office Manager

#### **General Questions**

Nicole.Curral@newbedford-ma.gov

#### Patrick J. Sullivan, Director

Patrick.sullivan@newbedford-ma.gov

PHONE: 508 979-1500 FAX: 508 979-1575

WEBSITE: www.newbedford-ma.gov



City of New Bedford
Office of Housing & Community Development