

**NEW YORK STATE HOMES AND COMMUNITY RENEWAL
PRESERVATION PROGRAM APPLICATION**

Neighborhood Preservation Company

Rural Preservation Company

CONTRACT TERM: TO

PROGRAM YEAR: TO

Organization Name:

SHARS ID#:

Mailing Street Address:

City:

State: New York

Zip:

Telephone Number:

Is this address different than the address from where your Preservation Program activities are conducted?

Yes (If checked please fill out next section.)

Physical Street Address:

City:

State: New York

Zip:

Telephone Number:

Federal I.D. Number:

Charities Registration Number (6 Digits):

Email Address (General Inquiry Contact):

Company Web Site Address:

Executive Director:

Email:

Telephone Number:

Is the Executive Director also the primary contact person for the Preservation Program? If **NOT**, please be sure to complete Program Contact Section

Yes

No

Organization:

Board Chair/President:

Mailing Address:

City:

State: New York Zip:

Email:

Telephone Number:

Preservation Program Contact (If other than ED):

Title:

Email:

Telephone Number:

The funds requested are for the administration, planning, and implementation of the Work Plan activities included in Appendix D of the contract and checked below.

Check the Appropriate Work Plan Activities

Property Rehabilitation and Construction

Client Assistance

Community Renewal

SECTION A. Needs Assessment & Strategic Planning

- | | | | |
|---|-----|----|-----|
| 1. Have you made any significant changes to your Mission Statement since your last contract started in 2013? | YES | NO | |
| a. If you have made significant changes to your mission statement, please describe below. | | | |
| 2. Is there currently a Needs Assessment in place? | YES | NO | |
| a. If yes, state the completion date of the latest Needs Assessment. | | | |
| 3. Is there currently a Strategic Plan in place? | YES | NO | |
| a. If yes, state the completion date of the latest Strategic Plan. | | | |
| 4. Are the Needs Assessment and/or Strategic Plan reviewed annually by the board and staff to ensure the Plan's relevance to the company and the service area needs? | YES | NO | |
| 5. When the Needs Assessment and/or Strategic plan were developed, was: | | | |
| a. The Board of Directors included? | YES | NO | |
| b. The Company Staff included? | YES | NO | |
| c. Input sought from community partners? | YES | NO | |
| 6. Are there short and long term objectives considered in your Strategic Plan? | YES | NO | N/A |
| 7. Has the Company developed a means of measuring the outcomes of the objectives contained in the Strategic Plan? | YES | NO | N/A |
| 8. Can the company demonstrate that it has qualified staff necessary to carry out the Preservation Program activities described in the current Strategic Plan and/or in the proposed work plan? | YES | NO | |
| a. Append brief biographies and/or resumes of key staff responsible for implementation of Preservation Program activities. | | | |

SECTION B. Governance & Board Requirements

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|--|-----|----|
| 1. Does the Company have the required minimum number of five Board members? | YES | NO |
| a. Please fill out the attached Board Roster form. | | |
| b. For Neighborhood Preservation Companies, does 1/3 (at least 33 percent) of Board Members reside within the service area? (For NPC's only.) | YES | NO |
| c. For Rural Preservation Companies, do the majority (at least 51 percent) of Board Members reside within the service area? (For RPC's only.) | YES | NO |
| d. Does one or more Board/Staff serve on a city, county, or regional planning council? | YES | NO |
| e. Does staff, excluding the Executive Director, serve on the Company's Board as voting members? | YES | NO |
| 2. Are the Board positions currently filled for Chair (President), Vice-Chair (Vice President), Treasurer and Secretary? If NO, please provide a brief explanation below. | YES | NO |
| 3. Do the Board members have a written description of their duties and responsibilities? | YES | NO |
| 4. Does the Board include members who have skills and abilities identified as important to the organization? | YES | NO |
| 5. Does the Board have a nominating committee or plan in place (consistent with bylaws) to recruit new members? | YES | NO |
| 6. Are orientations provided for new Board members? | YES | NO |
| 7. Does the Board have an adopted code of ethics? | YES | NO |
| 8. Does the Board have Director's and Officer's liability insurance? | YES | NO |
| 9. Is the Board structure and meeting schedule in accordance with the Company's bylaws? | YES | NO |
| 10. Are financial statements presented to the Board for review in accordance with the Company's by-laws? | YES | NO |

11. Is the overall Company budget approved by the Board?	YES	NO
12. Does the Board authorize all of the Company's contracts with HCR?	YES	NO
13. Are executed conflict of interest forms kept on file for all Board members, the Executive Director, and all consultants?	YES	NO
14. Is there a board approved, formal succession plan in place for the Executive Director position?	YES	NO
15. Does the Board evaluate Executive Director and other senior staff performance annually?	YES	NO
16. Has the Board adopted an Affirmative Action Plan consistent with HCR policies?	YES	NO

SECTION C. Fiscal & Internal Controls

1. Does the Company maintain the necessary insurance required by HTFC? (<i>General liability, fire/hazard insurance, workers compensation, disability, and a fidelity bond identifying Housing Trust Fund Corp. (HTFC) as the loss payee with a 30 day cancellation notice.</i>)	YES	NO	
2. Will the Company meet the 1/2 match requirement for the previous program funding year (2015-2016)?	YES	NO	
3. Has the company spent all Preservation Program funds for the previous year program year (2015-2016)? If not, will all Preservation Program funds be spent by June 30, 2016?	YES	NO	
4. Has the Company performed an agency-wide audit for the prior fiscal year with a schedule that details preservation program costs, and submitted a copy of the Opinion Letter and/or Management Letter for this audit to Preservation Program Staff?	YES	NO	
5. Do all professional services or consultants paid with preservation funds have a written agreement, and are fees paid in accordance with HCR policy?	YES	NO	N/A
6. In instances where preservation funds are paying for Staff, are all Staff hours documented in accordance with the company employee manual?	YES	NO	N/A
7. In instances where the company owns property or holds a partnership interest, are all property taxes or PILOT payments paid in a timely manner?	YES	NO	N/A
8. If the company owns property which is monitored by HCR's Asset Management Unit, are they currently in compliance?	YES	NO	N/A
9. Has all equipment purchased with preservation funds been inventoried?	YES	NO	N/A
10. Does a bookkeeper prepare financial statements to report to the Board of Directors?	YES	NO	
11. Are there written procedures which include fiscal and administrative controls?	YES	NO	
12. Do monthly financial reports compare figures for the same period from the preceding year, to identify trends?	YES	NO	
13. If property is owned by the Company, are written policies and procedures in place for its maintenance and management?	YES	NO	N/A

14. Is there a written records retention and disposition policy?	YES	NO
15. Is there a written travel policy?	YES	NO
16. Is there a fundraising plan adopted by the Board for the Company?	YES	NO
17. Did the Company finish the most recent fiscal year with a positive fund balance?	YES	NO
18. Has the Company's plan to raise funds enabled greater diversity of funds in the last three program years?	YES	NO
19. Have funds been raised from:		
a. Private Donations	YES	NO
b. Fund Raising Revenue/Events	YES	NO
c. Developer/Administrative Fees	YES	NO
d. Private Donations	YES	NO
e. Project Revenue	YES	NO
f. Utility Companies	YES	NO
20. Does the Board have a fundraising committee that meets regularly?	YES	NO

If any question in Section C is answered "NO" please include a brief explanation.

SECTION D. Performance in Previous Contract Years & Other HCR Contracts

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|---|-----|----|
| 1. To the best of your knowledge, has the company met Substantial Completion, on the prior 2015-2016 contract, as defined in the Preservation Program Manual? | YES | NO |
| 2. Does the Company currently receive funding from other HCR funded programs or contracts? | YES | NO |
| a. If yes to the above, is the Company currently in default of any other HCR funded programs or contracts? <i>(If yes, please attach a letter to the application explaining what programs and the circumstances for the default.)</i> | YES | NO |
| 3. Does the Company currently manage property as part of its work portfolio? | YES | NO |
| a. If yes, please fill out the “Property Management Questionnaire” form portion of the Work Plan Activities (Appendix D). | | |
| 4. To the best of the Company’s knowledge, is the Company in compliance with applicable state and federal laws and regulations regarding not-for-profit organizations, Charities Bureau registration, and Grants Gateway? | YES | NO |

Section E - Company Capacity: Brief Bios/Resumes of Staff

Please attach (or email separately, as one file) the current, dated resumes/bios of key Company staff responsible for Preservation Program activities.

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