Application Details

Funding Opportunity: 672-Workforce Housing Investment Program

Program Area: 02 Community Impact Support

Status: Editing

Organization: ABC NonProfit

Workforce Housing Program Application

Workforce Housing Investment Program

Project Summary

Provide a brief (1-2 sentence) summary of your proposed project.*:

Select the locality where your project

Alleghany County

is located.*:

Qualifying Economic Development Announcement

Do you have a qualifying economic

development announcement from

July 1, 2023 to present?*:

Yes

Number of jobs to be created: 0.00

Amount of private investment:

\$0.00

Industry:

Average wage of new positions

\$0.00

Provide the average wage as \$____/ hour

:

Attach a copy of the qualifying economic development announcement.:

Regional Needs

Provide a brief demographic description of the region.

Include things like homeownership rate, particular high-cost areas, etc.

What are the biggest challenges to the housing market in this region?:

Has a needs assessment and plan for additional housing been produced within the past three years?:

Yes

Attach a copy of the needs assessment and plan for additional housing.: Provide examples of steps taken in the locality or region to expedite and support further housing development.: **Project Information** Provide the location of your project (street address or description of the location): 0.00 Drive time, in minutes, to the job site.: Attach documentation of the drivetime (Google maps directions or other methodology): Name of the Development: **Developer Name:** All rental borrowers must be special purpose single asset LLCs **Developer Type: Developer Contact Information:** Include point of contact, email, and phone number Type of Development: Homeownership Is the site currently owned, under Yes contract, or otherwise controlled by the developer?: If yes, describe the control of the property.: Is the site currently serviced by Yes utilities and public access roads?: Provide detail on available utilities and public road access.: If infrastructure is a part of this project, describe the plan and funding in place to complete the infrastructure improvements.: Yes Will the development include any commercial space or other areas not exclusively for residential use?: If yes, describe the other spaces: Unit Consistency

Will this project intersperse workforce housing units with market-rate units?

For example, units targeting 80% AMI interspersed with units above 120% AMI

If yes, describe how the units will be integrated together.:

How will the appearance of the workforce housing units be kept consistent with other nearby units?:

Unit Count

What is the total number of residential units in the proposed development?:

What is the number of workforce housing units in the proposed development?:

How will you ensure affordability of these units and for how long? List previous experience where you have applied this approach, if applicable.:

Provide a brief description of how this project may be used to model additional development.:

Project Implementation

Outline your project plan, including key milestones and a timeline for each phase of the project. How do you plan to ensure the feasibility of your project with the presented plan?

How will this project be marketed to potential residents?:

Describe the team members and partners you have assembled for this project. What specific skills and expertise do they bring to the table? Provide evidence of formal agreements, MOUs, or letters of intent from critical partners.:

Explain any economic impact your project may have on the local community. This could include job creation, skills development, or increased local business opportunities.:

How do you plan to handle unexpected budgetary challenges or changes in resource availability during the project? Provide examples of contingency plans in place.:

Outline your approach to monitoring project progress. :

How will the required locality match be met?:

Are any proffers tied to this development? :

These would be units that meet the income eligibility requirements for this program.

Partner Investment		
Describe any additional incentives, beyond the required match, the locality is providing to support this effort.:		
If applicable, describe how private employers are participating in this project. :		
Unit Type		
Bedroom Count		Number of Units
Studio		
1 bedroom		
2 bedroom		
3 bedroom		
4 bedroom		
	Total	0
Income Targets		
Income Limits	Number of Units	
80% AMI		
100% AMI		
120% AMI		
150% AMI		
Unrestricted		
	Total	0

If yes, describe the proffers:

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Budget

Homeownership Grant Request

Budget Item	Amount Requested	Other Project Funds	Total Project Cost
Administration	\$0.00	\$0.00	\$0.00
Project Specific Marketing	\$0.00	\$0.00	\$0.00
Consultant Fees	\$0.00	\$0.00	\$0.00
Contractor Fees	\$0.00	\$0.00	\$0.00
Soft Costs	\$0.00	\$0.00	\$0.00
Materials	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

Rental Request

Amount of Workforce Housing \$0.00

Investment Funds requested for your

Rental project:

Rental Sources and Use

Select PROJECT BUDGET SOURCES AND USE to download a template for your Sources and Use budget. Complete the form and attach it below.

Attach your Sources and Use budget:

Other Project Funds

Source of Funds Amount Federal Source? Type of Funding Is this source part of the required Locality Match?

No Data for Table

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Attachments

Attachments

File Upload
Named Attachment Required Description Name Type Size Date

Applicant Eligibility

If the applicant is a nonprofit or other non-government entity, attach a copy of your 501(c)3 determination letter, if applicable, or other documentation of your eligibility for this grant.

Attach the document showing the organization's structure and reporting. Include First and Last names for Board Members, Executive Director/CEO, and top line staff.

Attach a copy of the organization's prior year audited financial statements or prior year reviewed financial statements or two years of financial statements.

Documentation of Site Control

Additional Attachments

Description File Name Type Size Upload Date

No files attached.

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Certification

By electronically signing this application, I certify (1) that the statements contained are true, complete, and accurate to the best of my knowledge; (2) that I am authorized to submit this application on the agency's behalf; (3) that the Agency agrees to comply with all programmatic requirements set forth by Virginia Housing; 4) that I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties.

I certify the above conditions*: Yes

I understand that receipt of a Workforce Housing Investment Program grant/subsidy award in no way guarantees Virginia Housing financing for this project.

I understand the above statement*: Yes

Name of individual authorized to submit the application*: