

## **Commitment and Disbursement Procedures for Local Program Administrators**

Office of Community Renewal state funded programs including:  
*Buffalo Main Streets Initiative (BMSI)*  
*OCR Managed Downtown Revitalization Initiative Projects (DRI)*  
*New York Main Street Program (NYMS)*

The procedures set forth in this document should be followed by organizations administering state programs seeking disbursement of grant funds from the Housing Trust Fund Corporation (HTFC). Local Program Administrators (LPAs) must follow these procedures to report on program activities and receive disbursement of funds.

This document provides LPAs with instructions on commitment and disbursement procedures established by HTFC and the Office of Community Renewal (OCR). Each form referenced in this document is available as a fillable form on the program web site:

<https://hcr.ny.gov/new-york-main-street>  
<https://hcr.ny.gov/downtown-revitalization-initiative-dri-forms>  
<https://hcr.ny.gov/buffalo-main-streets-initiative>

Please note: these instructions provide guidance for administrators of grants from several different sources and funding years with different program rules and requirements. Please reference the grant agreement to confirm the rules applicable to the specific project.

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### **Designation of Depository Form**

Local Program Administrators must designate a bank account to receive program funds directly from HTFC. LPAs must complete and sign all required fields of the Designation of Depository for Direct Deposit of Funds form. This form will be submitted with the required forms to execute the Grant Agreement.

When projects are completed and appropriate paperwork is submitted, HTFC will use the bank account information to transfer funds to the LPA through an Automated Clearing House (ACH) procedure, i.e. direct deposit. The LPA must disburse funds to the property owner or vendor within five business days of deposit, except where such funds are to reimburse the LPA for payments already disbursed to the property owner or vendor.

#### **Instructions for Direct Deposit Form:**

- This form must be typed—handwritten forms will not be accepted.
- On the top of the form, include the program name and the contract's SHARS number.
- In Part 1, fill in payee contact information.
- Below Part 1, initial the box acknowledging no IAT transactions will be accepted. The form cannot be accepted unless it is initialed.
- For Part 2, provide the financial institution's information and the account and routing numbers.
- Part 3 gives HTFC authorization to deposit payments by electronic funds transfer.

### **Authorized Signature Form**

An Authorized Signature Form must be completed to designate the representative(s) authorized to sign disbursement requests and must reflect the LPA's written policy on internal controls.

A board member should authorize the executive director or fiduciary staff member to sign disbursement requests. To maintain effective internal controls, OCR suggests that the person responsible for preparing paperwork for disbursement requests not also be authorized to sign disbursement requests. Please contact an OCR representative for additional guidance.

#### **Instructions for Authorized Signature Form:**

- **Program Name:** Enter the applicable state program name, i.e. NYMS, BMSI, etc.
- **Recipient Name:** Enter the Local Program Administrator (LPA) name. The LPA is the recipient not-for-profit organization or municipality.
- **SHARS ID:** This is the eight-digit identification number that is available on the grant agreement and award materials.
- **Mailing Address:** Enter the mailing address of the LPA.
- **Contact Person:** Provide a name and phone number for the person OCR should contact with questions related to the Authorized Signature Form.
- **Disbursement Requests require (check one):** Check the box that represents the number of signatures required to authorize a disbursement. It is recommended that two signatures be required for the authorization of requests for funds to maintain effective internal controls.
- **Persons Authorized to Sign Request for Funds:** Enter the name, title, date, and signature of the person(s) authorized to sign the Local Program Administrator Disbursement Request Form.
- **Certification:** Enter the name and title of the representative authorizing the signatures.
  - This representative may **not** also be an individual authorized to sign disbursement requests.
  - This certification must be signed and dated at least one day after the form has been completed and each authorized signatory has signed and dated the form.

## **Project Commitment and Set up**

HTFC and OCR use the data provided on the Project Set Up form to monitor program status and to reserve funds for the building or streetscape project or other activity identified on the form. The LPA is responsible for submitting accurate Project Set Up forms to OCR. Set Up forms should be submitted via e-mail to [disbursements@hcr.ny.gov](mailto:disbursements@hcr.ny.gov) and the assigned OCR representative. OCR will confirm accuracy of building information and allowable funding amounts presented on the Project Set Up form.

The Project Set Up process first requires a commitment at the local level to the project. For building renovations and downtown anchor grants, it is expected that the LPA will have a preliminary agreement with the property owner to do the specified work prior to requesting Project Set Up from OCR. A site-specific Environmental Compliance Checklist, with required supporting documentation, must be submitted at the time of project set up. LPAs must submit the Project Set Up form and receive approval from OCR to commit funds prior to the start of project construction.

### **Project Set up Form:**

- **Date:** Enter the date that the form is prepared.
- **Project Status:** In the drop-down menu select Project Set Up.
- **SHARS ID:** This is the eight-digit identification number that is available on the grant agreement and award materials.
- **LPA Name:** Enter the name of the Local Program Administrator (LPA). The LPA is the recipient not-for-profit organization or municipality.
- **Program:** Select the relevant program in the drop-down box.
- **Individual preparing form and Phone Number:** Provide a name and phone number for the person completing the form, or a person OCR should contact with questions related to Project Set Up.

### **Project / Site Information**

- **Project Name:** Enter the formal or informal name used to refer to this property, e.g. property owner name, business name, or building use.
- **Project Street Address:** Enter the street address of the building. Confirm that the building address is accurate by referencing a tax bill or consulting the local assessor's office. OCR's database tracks projects by street address and staff will typically use the confirmed street address to reference a project. Enter N/A for Streetscape Set Ups.
- **Primary Activity:** A Project Set Up is required for each building or separate project activity. Identify the primary activity for this form.
- **City and Zip Code:** Enter the project's City and zip code.
- **County:** Enter the County in which the project is located.
- **SWIS Code:** The Statewide Information System is a numbering system established by the Office of Real Property Service to uniquely identify each county, city, town, or village. This code is provided on a tax bill. Enter N/A for Streetscape Set Ups.
- **Section / Block / Lot:** Enter the tax parcel ID or Section / Block / Lot (SBL) number associated with the building. Confirm that the building address matches the SBL by referencing a tax bill or consulting the local assessor's office. Enter N/A for Streetscape Set Ups.

### **Project Activity Costs:**

Enter the applicable budget information for the building. Indicate the amount designated as program funds in the first column and the amounts attributed to Owner Match and Other

Match in the second and third columns respectively. Please refer to the Funding Round Rules and Requirements Summary Table at the end of this document for activity funding limits and match requirements applicable to each program award year.

- Soft Costs must be documented at the time of set up and must be *project* specific expenses. If the Soft Cost is not for site tests / surveys or design, add the expense under Other, and specify the type of expense. Please consult with OCR staff prior to incurring costs as reimbursement of soft costs is subject to review and approval by OCR.
- Soft Costs must be included within activity funding limits. For example, if a NYMS project includes the renovation of one commercial space, then the awarded building renovation funds and soft costs combined cannot exceed \$50,000.
- If a completed building is “reopened” for additional renovations, a revised Set Up form must show the total project budget.
- *Specify Use*: provide a brief explanation for use of program funds

### Clearances (Project Set Up)

- **HTFC Determination Letter Date**: Provide the date of the determination letter issued by the Housing Trust Fund Corporation’s Environmental Analysis Unit (EAU) for the contract. This may be for a programmatic or site-specific review.
- **Site/Project Specific Environmental Checklist Date**: Provide the date the checklist was completed.
- **Environmental Hazards**: Indicate if Environmental Hazards were identified when the site-specific environmental checklist was completed for the property.
- **SHPO Conditions**: Indicate if the OPRHP / SHPO letter issued conditions for compliance.

\*The second Clearances section is for Project Completion only and does not need to be filled out at Project Set Up.

### Units

In the three fields in the left column, enter the total number of Residential, Commercial, and Civic / Community Units *in the building*. This includes assisted units *and* non-assisted units.

In the three fields in the right column, enter the number of Residential, Commercial, and Civic / Community Units *assisted with program funds*.

- Every renovation project must assist *at least* one unit.
- Leave the unit fields blank for Streetscape activities or other activities that do not involve building renovations.

### Streetscape Set Up

A Project Set Up form is required for all Streetscape projects. A single Project Set Up form should be submitted for the entire project, even if an LPA chooses to complete multiple activities. OCR tracks Streetscape funds as a single project.

An eligibility request must be submitted for OCR review for all streetscape projects to receive a formal determination prior to submitting the project set up and environmental review. An eligibility request must include the following:

- A detailed scope of work;

- Design plan(s) and/or site map denoting amenity locations. Keep in mind, streetscape activities must be within the target area;
- Two cost estimates;
- An ongoing maintenance plan for the five-year regulatory period. This should include who is responsible for regular maintenance, repair and/or replacement if any damage occurs due to circumstances such as weather, vandalism, etc.

### Revised Set Up

If the amount of program funds committed to a project increases or decreases, the amount of program funds set aside for the activity must be revised. In the event of an increase of more than 10%, the LPA must resubmit a Project Set Up form with the Revision box checked, showing the new totals.

### Cancelling a Set Up

If a commitment is withdrawn and a building project does not proceed, the building Set Up must be cancelled. The cancellation is important for maintaining accurate funding commitment information and assisted unit totals. If a property withdraws from participation, please notify OCR staff in writing, and clearly document the cancellation in the project files. Please note, buildings may not be cancelled or removed once program funds have been disbursed for the project.

## **Disbursement Requests**

LPAs must submit the Project Set-Up form to commit funds for a building prior to requesting disbursement of funds. LPAs may then request disbursement of program funds for completed projects by submitting the required forms and applicable supporting documentation. A disbursement request must be submitted in its entirety including all the documentation listed below:

- LPA Disbursement Request Form;
- Project Detail Sheet(s) and/or Administrative Funds Detail Sheet;
- Project Completion Form (*for completed projects*);
- Supporting documentation and proof of payment (typically cancelled checks);
- Progress inspection reports (*for progress payments*) and final inspection reports (*for final disbursement requests*);
- Environmental Clearance documentation, e.g. lead, radon, as applicable;
- Signed draft Property Maintenance Declaration (*drafts are also required for progress payments*);
- Before-and-After photographs must be taken for each project documenting the building renovations or streetscape work completed. Please provide photos by email to OCR representatives. The digital photos should be sent as .jpg files, with file names that include the SHARS ID and building address. Please do not send PDFs, printouts, or hard-copy photographs unless specifically requested by OCR.
- Additional information as needed.

## **Submission Instructions for Disbursement Requests**

Disbursement request forms and supporting documents must be packaged as a PDF in the order identified above and submitted electronically to [Disbursements@hcr.ny.gov](mailto:Disbursements@hcr.ny.gov) . A request will not be accepted, formally reviewed, or processed until a fully compiled and complete request is submitted to [Disbursements@hcr.ny.gov](mailto:Disbursements@hcr.ny.gov) .

When submitting disbursement requests via email, provide the following information:

- Original Submission Subject Line: *SHARS ID# - Organization Name*
- Resubmitted Subject Line: *Revision - SHARS ID# - Organization Name*

In the body of the email, provide contact information including:

- Name
- Telephone
- Email

If the LPA has concerns that the disbursement is too large or complicated to submit electronically, please contact OCR staff for instructions.

A single disbursement request package may include reimbursement requests for multiple buildings or activities. To do this, complete a single Disbursement Request Form and separate Project Detail Sheets for each building address/project or activity included in the request. Attach supporting documentation in the order identified on the Project Detail Sheets.

OCR will make payments to LPAs through an automated deposit system, which is usually completed within 10-20 business days from the time of receipt of a complete and accurate request. Incomplete paperwork or insufficient supporting documentation will delay payments.

Per the grant agreement, all program funds disbursed to the LPA for building projects must be provided to the property owner within five business days of deposit.



## **Supporting Documentation**

The programs operate fully as reimbursement programs and payment will be made only upon satisfactory completion of building projects or activities. Disbursement requests must be accompanied by appropriate and legible supporting documentation to substantiate expenses. LPAs must provide copies of detailed invoices and proof of payment in the form of cancelled checks and lien releases. Invoices must include a detailed description of work completed, if detailed invoices are not available, the original bid/quote must be included.

OCR may request additional documentation, such as bids and the full scope of work, to maintain effective internal controls. LPAs must clearly communicate the necessity of this documentation to the participating building owners and contractors prior to the start of construction.

### **Please note:**

#### **Cash payments will not be reimbursed.**

#### **Material purchases separate from contractor invoices are not eligible for reimbursement.**

Copies of invoices from contractors must support the information provided on the Project Detail Sheet(s). If formal invoices are not available, required information must be provided on the letterhead of the contractor, containing at **minimum** the following information:

- The contractor's name, business address, contact information, and signature;
- The building address where the work was completed;
- The date(s) the work was done;
- A description of the work completed; and
- The dollar amount of the work

Copies of invoices from consultants or vendors must support soft costs or administrative expenses listed on the Project Detail Sheet(s). LPAs must generate invoices for in-house staff time and have supporting payroll documentation available. Invoices for Administrative and soft cost expenses must clearly outline program specific activities completed.

For the initial or up-front disbursement of administrative funds, estimate the amount of time the requested funds are expected to cover for administrative expenses. For later disbursements of administrative funds, indicate the time period for the administrative expenses that are included in the disbursement request. Itemize administrative expenses that are in addition to staff or consultant time. Staff and consultant time should be broken down by hour/rate and reference specific program activities performed. **All reimbursements for staff time should be supported by payroll records retained in files.**

LPAs must retain the original versions of all supporting documentation in project files.

### **Disbursement Request Form**

- **Program Name:** Select the funding Program Name from the drop-down menu.
- **Name of LPA:** Enter the name of the Local Program Administrator (LPA). The LPA is the recipient not-for-profit organization or municipality.
- **SHARS ID:** Enter the eight-digit identification number that is available on the grant agreement and award materials.
- **Name and phone number of the person completing this form:** Provide the name and contact information for the person completing form, or the person OCR should contact with questions related to the disbursement paperwork.
- **Date:** Enter the date that the disbursement request paperwork is prepared.
- **Mailing Address:** Enter the complete mailing address of the LPA.
- **Total amount of this request:** Enter the full amount of the attached disbursement request. This amount must exactly equal the total of the amounts indicated on the attached Project/Administrative Detail Sheet(s).
- **Payee Certification:** Enter the name(s) and title(s) of the LPA representative(s) indicated on the Authorized Signatory Form. Once the request is prepared and reviewed, the Authorized Signatories must sign and date the form. In signing the certification on the Disbursement Request form, the LPA is certifying that the reimbursement requested: complies with the requirements of the Grant Agreement between HTFC and the LPA; contains eligible expenses; and does not duplicate reimbursement or disbursement of costs and/or expenses from any other source.
- **# Administrative Funds Detail Sheet(s):** Fill in how many Administrative Funds Detail Sheet are included with the request.
- **# of Project Detail Sheet(s):** Fill in how many Project Detail Sheets are included with the request.
- **Identify Documents included with Disbursement Request:** Fill in or check off what forms are included with the request. The forms include: Project Completion Form(s), Supporting Documentation & Cancelled Checks, Inspection report(s), Signed Property Maintenance Declaration(s), Lead Based Paint Clearance Documentation, Before and After photographs, and Additional Information (specify below)

## **Administrative Funds Detail Sheet**

An Administrative Funds Detail Sheet must be prepared and submitted each time reimbursement of administrative expenses is requested. All dollar amounts entered on the form must be supported by payroll documentation, invoices and receipts.

LPAs are permitted to request an initial disbursement of up to 40% of the budgeted administrative funds prior to completion of building projects. Administrative funds beyond the initial 40% will be available based on overall program completion. This will be determined by evaluating the percentage of program funds disbursed, and the proposed program activities. Documentation of how the initial 40% request was ultimately allocated should be provided with the subsequent disbursement.

Allowable uses of administrative funds include salaries and related costs associated with the administration of the grant, including consultant expenses, or equipment and supplies used exclusively for the administration of the program. It is acceptable to request administrative funds for a pro-rated portion of the cost, based on the percentage designated for program use. Requests for payment of administrative costs must be charged to administration and not to other activities (e.g. Building Renovation) or soft costs as administrative costs do not require matching funds.

The first Administrative Funds Detail Sheet submitted will serve as the formal commitment of the budgeted administrative funds.

Requests for administrative funds must include supporting documentation for all items listed on the detail sheet, including proof of payment.

An administrative funds detail sheet should include the following information:

- **Program Name:** Select the funding Program Name from the drop-down menu.
- **SHARS ID:** Enter the eight-digit identification number that is available on the grant agreement and award materials.
- **LPA Name:** Enter the name of the Local Program Administrator (LPA). The LPA is the recipient not-for-profit organization or municipality.
- **Time Period:** Enter the range of dates for which payment of administrative expenses is requested. For the initial 40% drawdown of funds, an estimated time period will be accepted.

### **Personnel Services**

- **Staff Name & Title:** Enter the names and job titles of staff members for the LPA whose duties include program administration, and for whom a disbursement of Administrative funds is being requested. (Individuals providing consulting or other professional services outside of the LPA organization should be listed on the lines for Other.)
- **Total prior admin requests:** Enter the sum of the administrative funds requested to date for each staff person included. This amount should be the sum of all prior requests, and not include the amount requested for this period.
- **Total Salaries:** These fields will automatically calculate the totals identified above for staff salaries.
- **Fringe Benefits:** Enter the amount of fringe benefits being requested.
- **Total Personnel Services:** These fields will automatically calculate the total salaries and fringe benefits identified above.

- **Other Than Personnel Services (OTPS):** Enter non-personnel related costs included in the request for administrative funds.
- **Total OTPS:** These fields will automatically calculate the total OTPS items identified above.
- **Other:** Enter any other administrative expenses included in the request for administrative funds. Typically, this includes consultants and other professional services.
- **Total Administrative Funds Requested:** These fields will automatically calculate the amounts entered for this this period, and the total of prior requests. If the amounts indicated are not correct, please check the amounts entered above.
- **Total Administrative Funds:** Enter the total amount of administrative funds contracted as part of the program budget. Refer to Schedule A of the grant agreement. This amount should stay the same on each request.
- **Balance of Administrative Funds:** This field will use the amounts identified in the “Total Administrative Funds Requested” and “Total Administrative Funds” fields to automatically calculate the balance of administrative funds.

## **Project Detail Sheet**

Project Detail sheets are used to organize and itemize the invoices and receipts required as supporting documentation. This form is used across several other program areas. Please note these instructions are to be used for NYMS, BMSI, and DRI programs.

- Organize invoices and proof of payment in the order listed on the Project Detail Sheet(s).
  - A separate Project Detail Sheet(s) must be submitted for each building or project for which funds are requested.
- **Program Name:** Select the funding Program Name from the drop-down menu.
  - **SHARS ID:** Enter the eight-digit identification number that is available on the grant agreement and award materials.
  - **LPA Name:** Enter the name of the Local Program Administrator (LPA). The LPA is the recipient not-for-profit organization or municipality.
  - **Project Address:** Enter the street address of the building. This should be the address confirmed following the approved Project Set up for the building.
  - **Property Owner Name:** Enter the formal or informal name used to refer to this property, e.g., business name or general building use.
  - **Payment Type:** Select the payment type from the drop-down menu, progress or final.
  - **Total Setup Amount:** The total set-up amount should be the project's total/final award amount. This amount should be the same as the total award amount on the Project Completion form.
  - **Amount Requested This Draw:** Enter the total amount requested for this draw.
  - **Amount Requested in Previous Draws:** Enter the total amount requested from any previous draws.
  - **Balance Remaining:** Will auto calculate based on information provided in amount requested this draw and in previous draws. On final disbursement requests, this amount should be \$0.

The purpose of the project detail sheet is to organize supporting documentation for a disbursement request. The fields in the table are used to identify the attached invoices and proof of payment.

- **Invoice Date or Number:** Provide the date or number for each invoice or receipt included in the disbursement request. One row should be completed for each invoice. Multiple check numbers may be entered on one row to support one invoice.
- **Proof of Payment/Check #:** Proof of payment must be included for all supporting documentation. Provide the check number(s) used to pay the invoice.
- **Certified M/WBE:** Select Yes or No to identify if the contractor or vendor is a NYS Certified M/WBE. If yes, additional information will be requested.
- **Contractor/Vendor Name:** Use this field to identify the contractor or vendor that issued the receipt or invoice. The contractor or vendor name listed must match the supporting invoice(s) provided.
- **Trade or Work Performed:** Indicate the general type of construction activities provided by contractor, e.g. install windows, repoint brick façade. Brief responses only.
- **Invoice Amount:** Enter the amount, minus the cost of ineligible activities, charged by the contractor or vendor indicated. This amount should generally match the invoice(s) provided.
- **Amount Requested:** Enter the portion of the invoice amount for which reimbursement of program funds is requested. The amount requested cannot exceed 75% of the invoice

total and cannot be rounded up to the nearest cent.

- The sum of all project detail sheets should match the Amount Requested This Draw line item and the amount on the Disbursement Request form.
- **Soft Cost:** Check the box to indicate if the invoice is documentation for a Soft Cost, i.e. filing fees, environmental testing, architectural or engineering.
- **100% Complete:** Check Yes or No to indicate if the contract with the specified contractor or vendor described is complete.
- **Amount Other Grant Source:** Specify additional grant sources and amount. If an invoice has or will be submitted for reimbursement from another source, please indicate the amount requested from the other source.

As explained in the Project Set Up Form instructions, Soft Costs must be included within activity funding limits. When including Soft Costs in a disbursement request, these expenses must be included on a Detail Sheet with a project activity.

If additional Contractor Information fields are needed, please complete, and attach additional Project Detail Sheets with the same information provided in the top portion of the form

## **Project Completion Form**

A Project Completion form must be submitted with the final disbursement request for each building or project.

The Project Completion form is the same form as the Project Set Up form. The Project Completion form verifies final project budget data, required clearances (final property inspection, environmental and lead clearances as applicable), and assisted building unit information.

Provide all information included on the Project Set Up for the building with final budget information, in addition to the following:

### **Clearances (for Project Completion)**

- **Date site was determined free from environmental hazard:** If the Set-Up form indicates that Environmental Hazards were identified when the property was evaluated using the environmental checklist, provide the date the site was determined free from environmental hazards. If no environmental hazards were identified, enter the date the Building/Site specific environmental checklist was completed.
- **Date assisted residential units were determined lead-safe:** Provide the date assisted residential units and/or residential windows that were impacted during renovations were determined lead-safe.
- **Date of the Final Inspection:** Provide the date of the final inspection of the property. Before a final payment can be made, a final inspection is required, and documentation must be provided with the disbursement request and saved in the project files.
- **Initial to confirm that project has received all required permits and approvals:** Confirm all required permits were received and relevant codes/regulations were followed.
- **Initial to confirm that SHPO conditions have been met:** If SHPO conditions were identified on the Set-Up form, confirm that the requirements were met. Confirmation that SHPO conditions have been met should also be included in the final inspection report submitted with the final disbursement request.

**Page Two:** If the renovation project directly assisted residential units, please complete page two of the Project Completion form to provide information about the units assisted.

**BMSI:** Not applicable

**DRI:** Not applicable

**NYMS:** Assisted residential units that are vacant or become vacant during the applicable five-year regulatory term must be marketed to and affordable to households with incomes at or below 90% of the Area Median Income (AMI). LPAs must market the units to income-eligible households and this requirement is met through a rent limit imposed on the assisted unit(s) during the regulatory term. OCR will provide annual rent limits for the applicable county upon request.

## **M/WBE Requirements and Procedures**

All NYMS, BMSI, and DRI programs have specific MBE and WBE goals that the LPA is required to meet. Contract goals are outlined in the Schedule C. Participation by Minority Group Members, Women and Service-Disabled Veterans with Respect to State Contracts: Requirements and Procedures, under Section II. Contract Goals. The M/WBE process requires specific steps and forms to be completed at different times during a grant's life cycle.

The M/WBE process is as follows:

### **Contractor Bid Solicitation Plan**

LPAs will prepare and submit a Contractor Bid Solicitation Plan when submitting the signed Grant Agreement and supplemental documents required to execute the Grant Agreement. The Contractor Bid Solicitation Plan will outline the goals (percentages are included in the Schedule C of the existing grant agreement) and how the awarded organization intends to conduct marketing and outreach and make good faith efforts to include MWBE and Service-Disabled Veteran Owned Businesses in contracting opportunities.

- **SHARS ID:** Enter the eight-digit identification number that is available on the grant agreement and award materials.
- **LPA Name:** Enter the name of the Local Program Administrator (LPA). The LPA is the recipient not-for-profit organization or municipality.
- **Program Name:** Fill in the funding Program Name, i.e. DRI, NYMS, BMSI.
- **Contract Amount:** The total contract amount, including all activity types.
- **Primary Contact Name, Address, Email, Phone:** Provide the name and other relevant contact information for the primary contact for the Grant.
- **Section I. Goals/Dollar Amount:**
  - Total Contract Amount: The total contract amount, including all activity types. Refer to the Schedule A. Awarded Budget & Projected Accomplishments of the Grant Agreement for contract amounts.
  - Subtract Admin: Fill in the Administrative Funds awarded for the project.
  - Amount Used to calculate M/WBE Goals: The dollar amount used to calculate the M/WBE goal percentages for the total contract.
  - MBE%, WBE%: M/WBE percentage goals can be found in the Schedule C, Section II. Contract Goals, of the Grant Agreement. For example, if the MBE and WBE goal was 10%, and the amount used to calculate was \$400,000, the total dollar amount for each goal would be \$40,000.
- **Section II. Marketing and Outreach Plan:** This section should be used to outline a marketing and outreach plan the LPA will conduct to specifically encourage participation of certified M/WBE firms and/or contractors.
- **Section III. List of Firms/Contractors:** Using the State's directory for "State Certified" M/WBE firms, compile a list of contractors that will be included in the bid solicitation process.
  - Please keep in mind only *State Certified* M/WBE contractors will count towards M/WBE goals.
- **Section IV. Certification:** This section is certifying that the LPA will follow the proposed plan to help ensure M/WBE participation.



### **Bid Solicitation Log**

As activities proceed, scopes of work are finalized and the bidding process begins, LPAs will prepare a Bid Solicitation Log for **each** project to document all the contractors or vendors included in the outreach and bidding process. LPAs should also document its bid review and selection decisions as the low bid must be selected, M/WBE goals do not outweigh the low-bid requirement. LPAs are not required to choose the higher bid to meet goals, but if the goals are not met, efforts and justification must be clearly documented.

### **Affirmation of Payment to Contractor Form**

When an M/WBE firm is contracted for a project, utilization information (FID and payment amount) and an Affirmation of Payment to Contractor form will be reported when the awarded organization seeks reimbursement from HTFC for a particular trade/invoice. The Project Detail Sheet used for disbursement requests includes a drop-down box to note if the firm is an M/WBE/SDVOB. This Affirmation of Payments form should be submitted with each disbursement request that includes work completed by M/WBE contractors or firms that will be reimbursed with program funds. The fields labeled “dates work performed” and the amount shown for “payment received for this reporting period” should correspond with invoices and proof of payment provided in the disbursement request. Be sure both parties sign the bottom of the form.

### **Certification of Good Faith Efforts**

If an LPA is unable to reach the M/WBE contract goals, a Certification of Good Faith Efforts form and supporting documentation to demonstrate the LPAs efforts must be submitted. The documentation should demonstrate that the LPA followed the plan as outlined in the Bid Solicitation Plan and include documentation of each of the steps outlined above. Additional guidance on good faith efforts can be found in the *Good Faith Efforts Guide*.

### **Recordkeeping, Reporting, and Monitoring**

All Local Program Administrators are responsible for maintaining complete program and project files, including: participant applications, eligibility documentation, work specifications, bid documents, financial commitments, contracts, contractors' invoices, inspection reports, documentation on historic preservation issues, lead-based paint, environmental conditions and clearances, and program correspondence.

OCR recommends using the program and project file checklists available on the program forms pages. Files will be examined by an OCR representative during the monitoring process and technical assistance visits.

Housing Trust Fund Corporation is not able to advise on the taxable status of grant funds for participating property owners and LPAs. Seek consultation with a tax professional for advice on the taxable status of the grant funds.

**NYMS and BMSI Program Funding Rules & Requirements Summary Table**

Program Year*	Funding Limits	Admin.	Building Renovation			Match**	Downtown Anchor	Streetscape	Regulatory Term***
			Per Building	+ Residential	Maximum				
<b>BMSI 2018</b>	\$50k-300k	10%	\$50,000	\$25,000/ unit	\$150,000	25% TPC	\$500,000 or 50% TPC	\$25,000	5 years
<b>2018</b>	\$50k-500k	7.5%	\$50,000	\$25,000/ unit	\$100,000	25% TPC / 10% Owner	\$500,000 or 75% TPC (5% Admin Limit)	\$15,000	5 years
<b>BMSI 2019</b>	\$50k-500k	10%	\$50,000	\$25,000/ unit	\$150,000	25% TPC	\$500,000 or 50% TPC	\$25,000	5 years
<b>2019</b>	\$50k-500k	7.5%	\$50,000	\$25,000/ unit	\$100,000	25% TPC / 10% Owner	\$500,000 or 75% TPC (5% Admin Limit)	\$15,000	5 years
<b>2020</b>	\$50k-500k	7.5%	\$50,000	\$25,000/ unit	\$100,000	25% TPC / 10% Owner	\$500,000 or 75% TPC (5% Admin Limit)	\$15,000	5 years
<b>2021</b>	\$50k-500k	7.5%	\$50,000	\$25,000/ unit	\$100,000	25% TPC / 10% Owner	\$500,000 or 75% TPC (5% Admin Limit)	\$15,000	5 years
<b>BMSI 2022</b>	\$50k-500k	10%	\$50,000	\$25,000/ unit	\$150,000	25% TPC	\$500,000 or 50% TPC	\$25,000	5 years
<b>2022</b>	\$50k-500k	7.5%	\$50,000	\$25,000/ unit	\$100,000	25% TPC / 10% Owner	\$500,000 or 75% TPC (5% Admin Limit)	\$15,000	5 years
<b>2023</b>	\$50k-500k	7.5%	\$50,000	\$25,000/ unit	\$100,000	25% TPC / 10% Owner	\$500,000 or 75% TPC (5% Admin Limit)	\$15,000	5 years

\*The first four digits of the contract ID number (SHARS ID) will indicate the Program Year.  
 \*\* TPC is an abbreviation for Total Project Cost.  
 \*\*\* NYMS assisted residential units must comply with a rent limit during the five-year regulatory term.