Welcome, and thank you for attending this SCP Program Update Webinar!











ILLINOIS HOUSING DEVELOPMENT AUTHORITY www.ihda.org















•	Strong Communities Program Updates Overview	Slides 4-8
•	Revised Pre-Approval Process	Slides 9-32
•	Revised Reporting Requirements	Slides 33-55
•	Additional Resources and Information	Slides 56-60





# STRONG COMMUNITIES PROGRAM UPDATES OVERVIEW











#### **PROGRAM MANUAL UPDATES**

- An updated Program Manual with Appendices was provided to all grantees via email. Please make sure to review this document. This will also be sent to all webinar attendees.
- The updated Manual and all Appendices are available on IHDA's website: <u>https://www.ihda.org/my-</u> community/revitalization-programs/#collapseSix
- Detail is included on Environmental and State Requirements, property eligibility and the updated pre-approval and reporting process.
- The Manual may be updated periodically, grantees will be notified of any updates.





Strong Communities Program Program Manual

July 2021

For questions and comments please contact SCPinfo@ihda.org











#### SUMMARY OF PROGRAM UPDATES

#### Legal Authority/property ownership updates

- IHDA will require submission of a signed Certification of Legal Authority document (form provided by IHDA) that will be part of the Pre-Approval Part 2 submission. IHDA will not require submission of information about a community's legal authority/property ownership as part of the Pre-Approval Process Part 1 submission.
- Additionally, <u>only if requesting reimbursement for</u> <u>acquisition expenses for a property</u>, a copy of the deed, purchase agreement, or other relevant ownership documentation will be required as part of the reimbursement request. If not requesting reimbursement for acquisition expenses, no additional information regarding a grantee's ownership/legal authority will be required other than the above-referenced Certification of Legal Authority to be provided as part of the Pre-Approval Part 2 submission.













- IHDA will require submission of a signed Certification of Compliance with applicable Environmental Requirements (form provided by IHDA) as part of the Quarterly Reimbursement Request for each property. IHDA will not request submission of an Asbestos Project Notification Form or asbestos inspection/testing information as part of the Reimbursement Request. Asbestos testing and abatement expenses are eligible for reimbursement as part of demolition or rehabilitation projects with submission of invoice and proof of payment documentation.
- Lead risk assessment and lead abatement information will still be required to be submitted with reimbursement requests for interior rehabilitation projects.





Financing the creation and preservation of affordable housing



#### SUMMARY OF PROGRAM UPDATES CONTINUED



Flexibility on timing of submission of Bid Tabulation Form

 An exception can be granted to allow submission of the Bid Tabulation Form with the Quarterly Reimbursement Request rather than as part of the Pre-Approval Process.

Date:	Grant	ee:		
90.				
Bid #1				
Contract	or Name:			
Bid Amo	unt:			
Bid #2				
Contract	or Name:			
Bid Amo	unt:			
Bid #3				
Contract	or Name:			
Bid Amo	unt:			
Winning	Bid			
Contract	or Name:			
Bid Amo	unt:			
In-House	Cost Estimate			
Amount				
Please provide a than in-house co		ation to clarify if b	id selected is not lowe	st bidder, or higher













# **PRE-APPROVAL PROCESS**



#### SCP ROUND 1 PROPERTY PRE-APPROVAL PROCESS

- The two-step pre-approval process will remain in place. All properties must receive approval of both of these steps before being submitted for reimbursement of any expenses.
  - Step 1 is the SCP Pre-Approval Part 1: Initial Property Approval Form
  - Step 2 is the SCP Pre-Approval Part 2: Pre-Approval Checklist
- Pre-Approval Forms can still be submitted on an ongoing basis throughout the grant term.
- The Pre-Approval process will still be handled through Jotform. **The Jotform links will remain the same**.
- IHDA will reach out to confirm approval after review of your submission.



#### SCP ROUND 1 PROPERTY PRE-APPROVAL PROCESS

- Please do not submit SCP Pre-Approval Part 2: Pre-Approval Checklist until you have received confirmation of approval of the SCP Pre-Approval Part 1: Initial Property Approval Form.
- Updated instructions are included in the Instruction Manual Completing an SCP Reimbursement Request
- The Jotform Part 1 and Part 2 Pre-Approval Forms <u>will be inaccessible July 28-30</u> in order to finalize updates. These will be available again starting August 1, 2021.



#### SCP ROUND 1 PROPERTY PRE-APPROVAL PROCESS

What about properties that have already been submitted for Pre-Approval?

- All Pre-Approval Part 1 and Part 2 submissions that have already been submitted and approved prior to July 28<sup>th</sup>, 2021 <u>will not need to be re-submitted.</u>
- Pre-Approval Part 1 and/or Part 2 submissions that were denied or for which you do not receive email confirmation of approval by July 28<sup>th</sup>, <u>will need to be re-submitted using the revised forms</u> on or after August 1, 2021.

Navigate to the online form located here: <u>https://form.jotform.com/210264603389152</u>

The first section is Verification of Property Eligibility:

• All properties must be verified as meeting eligibility requirements per the definition of Abandoned Residential Property under Appendix A of the Program Manual.

• You will need to provide the address, PIN number and other basic information about the property.





Email of Individual submitting property for approval \*

#### **Property Assessment Example**

- Attach a copy of the most recent assessment information from your County Assessor.
- If current year information does not demonstrate a residential classification or that the property has a residential structure, past year information can be accepted.
- Multiple documents can be uploaded under Property assessment documentation, if needed.
- If you have questions about property eligibility don't hesitate to reach out to us at <u>SCPinfo@ihda.org</u>.

	on History Appeal History Contilicate of Error	
Property Chara	acteristics	
017 Tax Year Proper	rty Information	A.
PIN:		X
Property Location:	Station 1 Statio	No. of Lot of Lo
City:	THE REAL PROPERTY AND ADDRESS OF TAXABLE PROPERTY AND ADDRESS OF TAXABLE PROPERTY ADDR	-
Township:		-
Property Classification:		-
Square Footage (Land):		
Neighborhood:	65	
Taxcode:	10/16/	2007
ssessed Valuation		
	2017 Board Certified 2016 Board of Review Certified	
Land	Assessed Value	
	Assessed Value	
	Assessed Value	
	tics 117 Market Valu <b>(* 1199)</b> 118 Market Value	
	N7 Market Value	
Entimated 20	177 Market Value 118 Market Value Description Spit level residence with a lower level below grade, all ages, all sizes	
Estimated 20	17 Market Value 18 Market Value Description Spit level residence with a lower level below grade, all ages, all sizes Residence Type Multi-Lovel	
Estimated 20	177 Market Value 118 Market Value Description Spit level residence with a lower level below grade, all ages, all sizes	
Falimated 20	117 Market Value 118 Market Value Description Spit level residence with a lover level below grade, all ages, all sizes Residence Type Multi-Lovel Use Single Family	
Falimated 20	117 Market Valu 118 Market Valu Description Split level recidence with a lower level below grade, all ages, all sizes Residence Type Multi-Lovel Use Single Family Apartments D	
Falimated 20	17 Market Value MM Murket Value Description Split level residence with a lower level below grade, all ages, all sizes Residence Type Multi-Level Use Single Family Austimets 0 tor Construction FrameMusioniy	
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Fallmated 20	177 Market Value 118 Market Value Description Split level residences with a lower level below grade, all ages, all sizes Residence Type Multi-Lovel Use Single Family Apartments 0 for Construction FrameMassony Full Baths 1 Half Baths 1	
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Extern Kum2	171 Market Value 172 Market Value 173 Market Value Description Split level recidence with a lower level below grade, all ages, all sizes Residence Type Multi-Level Use Single Franky Asartments 0 Ior Construction Frame/Muscony Full Bartis 1 Hall Bartis 1 Basement <sup>1</sup> Partial and Unfinished Astric Hore Central Air No-	
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Extended 10 Extern Numb Go Butbling A Sociuded from building squa	117 Market Value 118 Market Value Description Split level residences with a lower level below grade, all ages, all sizes Residence Type Multi-Level Use Single Family Apartments Use Single Family Apartments Full Barles 1 Full	
Extended 10 Extern Building Au Excluded from building square Executed from building square	117 Market Value 118 Market Value Description Split level residences with a lower level below grade, all ages, all sizes Residence Type Multi-Level Use Single Family Apartments Use Single Family Apartments Full Barles 1 Full	





### **Property Ownership and Legal Authority REMOVED**

- This section has been removed from the revised Pre-Approval Part 1: Initial Property Approval.
- Note that a signed Certification of Legal Authority document will need to be provided with the Part 2: Pre-Approval Checklist submission.



- In this section indicate whether the intended project on this property is rehabilitation or demolition (or other)
  - If Other, typically the only allowance is for acquisition and a description will be required
- Indicate if you plan to also utilize non-SCP funds to complete the project.
- Review the form and click Submit.
- If any required fields are left blank you will be prompted to complete these before submitting

Please answer the foll	owing general questions ab property,	out your anticipated activities on the
Is this property intended	for rehabilitation or demoliti	on? *
O Rehabilitation	O Demolition	O Other
Do you plan to also utiliz on this property? *	e non-SCP funds to complete	the demolition or rehabilitation projec
O Yes	O No	
		property and proposed projectusing





Once you have submitted the form, you will be taken to a landing page. The form is automatically submitted to IHDA for review.

You will also receive an email confirming your submission

IHDA will reach out via email to the individual who submitted the form to confirm approval after review.





- Part 2 of the Pre-Approval process is the Pre-Approval Checklist.
- Note that the updated process will only require submission of a signed Certification of Legal Authority document (form provided by IHDA). No other ownership/legal authority documentation will be required as part of the Pre-Approval Process.
- Additionally, you will be asked to provide:
  - Certification of Legal Authority (on form provided by IHDA)
  - A scope of work narrative (on your agency's letterhead)
  - Bid Tabulation (on form provided by IHDA)
  - In-House Cost Estimate for the proposed project
  - State Historic Preservation Office Approval Confirmation Letter
  - FIRMette map showing location of property
  - ILMINES map showing location of property
  - Color "before" photo of property
  - For "acquisition-only" activities provide a Disposition Strategy relating to the submitted property

WWW.ihda.org				
	ILLINOIS HOUSING DEVELOPMENT AUTHORITY www.ihda.org			
SCP Pre-A	pproval Part 2: Pre-Approval Checklist			
	(Round 1)			
	Strong Communities Program			
Prior to submitting this Part 1: Initial Property	eet necessary program requirements. Pre-Approval Checklist, you must have completed the <u>SCP Pre-Approval</u> <u>Approval Form</u> via Jotform and received approval via email from IHDA. quired fields; you must also attach the required documentation requested			
Grantee (select) *	<b>```</b>			
Email of Individual submitting property for approval *	example@example.com. IHDA will use this email to communicate after review			
Property Address of property being submitted *	Street Address			
	Street Address Line 2			
	City State / Province			



Navigate to the online form located here: <u>https://form.jotform.com/210395055992158</u>

The first section is includes space to enter basic property information.

Note that you <u>must</u> have legal authority before submitting the Pre-Approval Checklist.

Grantees will need to provide a signed Certification of Legal Authority document. This will serve as proof of ownership/legal authority.



	~	
Email of Individual submitting property		will use this email to communicate after review.
for approval *	example@example.com.muA	will use bits entail to controllancate and Tevlew
Property Address of		
property being submitted *	Street Address	
	Street Address Line 2	
	City	State / Province
	Postal / Zip Code	
County *	Select the Illinois county	
	where the property is located	
Pin Number *		
	Enter as it appears on your ju	risdiction's assessor's website
		time of submission for Pre-Approval? (if Yes, r proof of ownership and/or legal authority)
provide ownership doc Ves Do you have legal auth	umentation below under nority to undertake the p proval (if Yes, provide door	r proof of ownership and/or legal authority) * O No
provide ownership doc Ves Do you have legal auth submission for Pre-App	umentation below under nority to undertake the p proval (if Yes, provide door	r proof of ownership and/or legal authority) * <ul> <li>No</li> </ul> proposed project on this property at the time of
provide ownership doc Yes Do you have legal auth submission for Pre-App proof of ownership and	umentation below under nority to undertake the p proval (if Yes, provide doa i/or legal authority) *	r proof of ownership and/or legal authority) * ○ No proposed project on this property at the time of cumentation of legal authority below under

The next section of the form provides a place to upload the required documentation

- Certification of Legal Authority (form provided by IHDA)
- A scope of work narrative (on your agency's letterhead)
- Bid Tabulation (on form provided by IHDA)
- In-House Cost Estimate for the proposed project
- IHPA Letter
- FIRMette map showing location of property
- ILMINES map showing location of property
- Color "before" photo of property
- For "acquisition-only" activities provide a Disposition Strategy relating to the submitted property



Proof of ownership and/or legal authority	Attach Document(s)	
•	Attach Deed, demolition order, etc. if not provided previously	
Scope of Work Narrative *	Attach Document(s)	
Hundive	summary of work to be performed an agency letterhead	
Bid Tabulation *	Attach Document(s)	
	summarize bids received on IHDA- provided template	
In House Cost Estimate *	Attach Document(s)	
	your estimate on which the request for funds is based	
Historic Preservation Approval Letter *	funds is based Attach Document(s)	
Historic Preservation	funds is based	

# **Certification of Legal Authority –new**

- You should attach a signed Certification of Legal Authority document. And include:
  - The grantee name
  - Property Address
  - PIN
  - Name, Title, and signature of individual submitting the form.
  - Include the date
- If you have any questions about legal authority under the program, please reach out to <u>SCPinfo@ihda.org</u>.



	Attach Document(s) Deed, demolition order, etc. if n d previously	ot	
		1112 Novelas Draw Jones 1000 Ottage, s. Geen 312,265,5200	
Cer	tification of Legal Authority	to undertake activities	
	(Strong Communiti		
the Property Addres	propriate legal authority so a ss identified below and hereb Development Authority from	the undersigned confirms that the Grantee s to undertake eligible grant activities at y agrees to indemnify and hold harmless a any and all losses and expenses, if any,	
Property Address	<u> </u>		
PIN			
Signature	-		
Name			
Title			
Municipality/Organ	ization	("Grantee")	
Date	-		
			1

#### **Scope of Work Narrative**

- The Scope of Work Narrative will be a summary of all work to be performed.
- Narrative must be on grantee letterhead.



roof of ownership	Attach Document(s)	
nd/or legal authority	Attach Deed, demolition order, etc. if not provided previously	
ope of Work Irrative *	Attach Document(s)	
d Tabulation *	agency letterhead Attach Document(s)	
	summarize bids received on IHDA- provided template	
Tabulation form ca	n be found <u>here</u> . It is also located as Appendi	ix ) to the Program Manual.
	Attach Document(s) your estimate on which the request for funds is based	
timate * storic Preservation	Attach Document(s)	
House Cost timate * storic Preservation oproval Letter *	Attach Document(s) your estimate on which the request for funds is based Attach Document(s) Copy of letter provided by IHPA/SHPO indicating no adverse effects to historic resources. Note that Certified Local Government (LG) approval will also be	be found <u>here</u> .

#### **Bid Tabulation**

- A minimum of two bids (preferably three) must be obtained for all projects.
- The existence of more than one bid helps your program in the following ways:
  - Assists you in assessing the validity of your cost estimate
  - Establishes that costs are reasonable for your market
- If there is only one bid, please add a comment on Bid Tabulation Form as to why that was the case.



	provided template	
Big rapulation form can	be found <u>here</u> . It is also located as A	ppenaix J to the Program Manual.
		ILLINOIS HOUSING
BID TA	BULATION FORM -Strong Communities P	rogram
Date:	Grantee:	
Address:		
PIN:		
Project Type:	-	
Bid #1		
Contractor Name:		
Bid Amount:		
Bid #2		
Contractor Name:		
Bid Amount:		
Bid #3		
Contractor Name:		
Bid Amount:		
Winning Bid		
Contractor Name:		
Bid Amount:		
In-House Cost Estimation	ate	
Amount:		
Please provide any additiona	l information to clarify if bid selected is no	t lowest bidder, or higher
Please provide any additiona than in-house cost estimate.	I information to clarify if bid selected is no	t lowest bidder, or higher

Completed by:

(Grantee's signature)

#### **Bid Tabulation** -update

- IHDA will allow submission of the Bid Tabulation Form with the Reimbursement Request rather than with the Pre-Approval Checklist if this is preferable for the grantee's bidding process and timing.
- If this is the case, please still attach a Bid Tabulation Form, and indicate in the text box at the bottom of the form that you will be providing the completed Bid Tabulation with the reimbursement request.



Big labulation form c		i la di Di la
	an be found <u>here</u> . It is also located as A	Appendix J to the Program Manual.
		A.
BIC	TABULATION FORM -Strong Communities	
Date:	Grantee:	
Address:		
Sec. Sec.		
Project Type:		
Bid #1		
Contractor Name	·	
Bid Amount:		
Bid #2		
Contractor Name		
Bid Amount:		
Bid #3		
Contractor Name		
Bid Amount:		
Winning Bid		
Contractor Name		
Bid Amount:		
In-House Cost Est	limata	
Amount:		

(Grantee's signature)

#### **In-House Cost Estimate**

- Provide an estimate of the cost of the project prepared by staff.
- This can be in your preferred format, should match the amount indicated for In-House Estimate on the Bid Tabulation Form



Provide the follo	owing documents as at	ttachments:	
Proof of ownership and/or legal authority	Attach Document(s)		
*	Attach Deed, demolition order, etc. if not provided previously		
Scope of Work	Attach Document(s)		
Hundard	summary of work to be performed an agency letterhead		
Bid Tabulation *	Attach Document(s)		
	summarize bids received on IHDA- provided template		
Bid Tabulation form ca	n be found <u>here</u> . It is also located as	Appendix J to the Program Manual.	
In House Cost Estimate *	Attach Document(s)	<b>6</b>	
	your estimate on which the request for funds is based		
Historic Preservation Approval Letter *	Attach Document(s)	Do	
Abbionarcenter	copy of letter provided by IHPA/SHPO indicating no adverse effects to historic resources. Note that Certified Local Government (CLG) approval will also be accepted.		

Instructions for submission for IHPA/SHPO Review can be found here



#### **Historic Preservation Clearance**

- The State Historic Preservation Office must review all properties submitted under SCP. The process is detailed <u>here</u>.
- A letter from the State Historic Preservation Office will need to be included with each Pre-Approval Checklist, indicating that a. The residential structure is not a historic property b. The scope of work complies with the State Historic
  - Preservation Office requirements
- If your project is located in an historic area, additional documentation will most likely be required. (Scope of work updates are typically required.)
- When submitting a property for approval, keep in mind that there is typically at least a 30-day review turn-around.
- If your community is a Certified Local Government (CLG), CLG approval can be accepted to demonstrate approval for this requirement





#### **Historic Preservation Clearance**

- At this time, approval will only be given to properties with a SHPO approval letter OR Certified Local Government approval.
- IHDA will inform grantees of any updates regarding SHPO approval.
- Note that IHDA is working on a determination regarding already completed demolition projects for which SHPO approval was not obtained prior to the demolition.





#### **FIRMette Map**

- IHDA requires that a map with the location of the property be submitted indicating whether it is located in the 100-year floodplain.
- This can be found on the FEMA website (<u>https://msc.fema.gov/portal/home</u>) ,and a copy of the "FIRMette" map can be printed. A link is included on the Pre-Approval Checklist Jotform.
- Note that for properties in the 100-year floodplain, there will likely be additional requirements. Refer to the "Illinois Quick Guide to Floodplain Management" included as Appendix E to the Program Manual for additional information.







#### **ILMINES Map**

- IHDA requires that a map showing the proximity to underground mines be provided for each project to be funded.
- All properties within the proximity zone will be required to have mine insurance.
- Example map of a project where the property would need to carry mine insurance.







#### "Before" Photos

- Include photographs with the Pre-Approval Checklist.
- Include at least one exterior photo of the property and (for rehabilitation projects) photos reflecting the line items in the Cost Estimate and Scope of Work.
- Label pictures for ease of reference.



Mine Map (in color) *	Attach Document(s)
	Attach PDF of ISGS IUMINES map, showing location of property:
	access searchable ISGS ILMINES map <u>here</u> .
Pictures (in color) of property on which	Attach Document(s)
work will be completed *	before rehabilitation or demolition, must be labeled
	submit acquisition expenses for this property?
Do you intend to only s	aubmit acquisition expenses for this property? n costs will be submitted O No, demolition and/or rehab expenses are property intended on this property
Do you intend to only o Yes, only acquisition under SCP for this p Your Disposition Strategy (optional	n costs will be submitted O No, demolition and/or rehab expenses are intended on this property           Attach Document(s)           attach a copy of your disposition strategy

Please submit this form, with all required attachments by clicking the SUBMIT button below. IHDA will notify grantees upon acceptance of this pre-approval package. Once approved, you may submit expenses for reimbursement for this property as part of the quarterly reimbursement request process. Don't hesitate to reach out to us at <u>SCPinfo@ihda.org</u> with any questions.

# Disposition Strategy (for "Acquisition only" properties)

- Indicate if you will <u>only</u> be submitting acquisition expenses on this property.
- If the property submitted is intended <u>only</u> for acquisition expenses and not expenses for any demolition or rehabilitation work, a copy of your disposition strategy must be included to demonstrate how the project will relate to community revitalization efforts in your jurisdiction.
- Review the form and click Submit.
- If any required fields are left blank you will be prompted to complete these before submitting.



access searchable FEMA floodplain map <u>here</u> .
Attach Document(s) Attach PDF of ISGS ILMINES map, showing location of property
access searchable ISGS ILMINES map <u>here</u> .
Attach Document(s) before rehabilitation or demolition, must be labeled
ubmit acquisition expenses for this property? n costs will be submitted O No, demolition and/or rehab expenses are intended on this property
Attach Document(s) attach a capy of your disposition strategy that applies to this property
Type here

Please submit this form, with all required attachments by clicking the SUBMIT button below. IHDA will notify grantees upon acceptance of this pre-approval package. Once approved, you may submit expenses for reimbursement for this property as part of the quarterly reimbursement request process. Don't hesitate to reach out to us at <u>SCPinfa@ihda.org</u> with any questions.





Once you have submitted the form, you will be taken to a landing page. The form is automatically submitted to IHDA for review.

You will also receive an email confirming your submission

IHDA will reach out via email to the individual who submitted the form to confirm approval after review.









# SUBMITTING YOUR REIMBURSEMENT REQUEST



# STRONG COMMUNITIES PROGRAM (SCP) ROUND 1 QUARTERLY REPORTING SCHEDULE



Quarterly	Reimbursement Request	Report Due
Quarter 1	<del>- 01/01/2020 - 05/31/2021</del>	<del>June 15, 2021</del>
Quarter 2	06/01/2021 - 08/31/2021	September 15, 2021
Quarter 3	09/01/2021 - 11/30/2021	December 15, 2021
Quarter 4	12/01/2021 - 02/28/2022	March 15, 2022
Quarter 5	03/01/2022 - 05/31/2022	June 15, 2022
Quarter 6	06/01/2022 - 08/31/2022	September 15, 2022
Quarter 7	09/01/2022 - 11/30/2022	December 15, 2022
Quarter 8	12/01/2022 – 3/19/2023	March 26, 2023

# SCP ROUND 1 QUARTERLY REIMBURSEMENT REQUEST DOCUMENTS



#### **Reimbursement Request Form – Excel Document provided by IHDA**

-Summary Sheet Tab
-Admin Request Tab
-Individual Property Tabs (Property 1, Property 2, etc.)

#### Individual Unit Submission Packet and Checklist- compile using Cover Sheets provided by IHDA

-Individual Unit Submission Packet and Checklist for each property submitted under the Individual Property Tabs

#### Signed Summary Sheets from Reimbursement Request Form -signed copies e-mailed

-Signed copy of Summary Sheet Tab

-Signed copy of Admin Request Tab (if requesting admin funds with quarterly submission)



### REIMBURSEMENT REQUEST DOCUMENTS: REIMBURSEMENT REQUEST FORM SUMMARY SHEET TAB

					Stron	g Communit	ies Program	(SCP)						•
			Quarte	rly Accoun	ting of Gra	ant Expens	es & Rein	nburseme	nt Reques	t Form			ILL	INOIS HOUSING
								r 11						
Complete	e this report ( <b>including all appli</b>	icable property tabs (for		ies Program reimi m for each cost/a								lized in the same	order that they appear o	in the summary she
						GRANTEE IN	ODMATION				-			Version 2.
-							ONMATION				_			
Co	Grantee Name: ontact Person for Report:		IHDA Citv Evan Ponder			-			Pho	ne Number: Email:		55-5555 @ihda.org		
					QUARTI	ERLY SUBMIS	SION INFORM	ATION						
	Time Period:	1/1/2020	to	5/31	1/2021				Select one:		Nothing to rep	ort this quarter		
	-					-			beleot one.		Expenses sub	mitted for reimb		
	Submission Quarter:	1								<b>∑</b>	Admin funds re	equested this qu	uarter	
						GENTIFIC	SATION .							
			d						The used as a large					
	rsigned certifies that the informatio s listed herein are maintained at the													
ipenioeo	noted herein are maintained at the	onioe or the underbighted an	a are all an able for mope.	ocion by circ minors	or rousing beacto	prinerier rotationity,		eg deneral, are li	inois inductor den	that, or any or an	en debighatearep	sesenaanes, and	ab other moerequired i	og approable blate
ī	Certified Financial Officer	Signature									Date			
	bertaned i manoiai omber	orginatare												
											Date			
-	Authorized Grantee Signa	ture				1					Date			
7	Authorized Grantee Signa	sture		T			PEQUERTED		D					
	-		2	T(		NT AMOUNT P				_	Date	hined Reque	st Åmount	t -
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			GRANTEE INFO	RMATION			ŀ							
Grantee Na	me:				Phone Number:	555-555-5555								
Contact Person for Rep	ort:	Evan F	Ponder		Email:	eponder@ihda.org								
			SUBMISSION INF	ORMATION										
Submission D	ate:	6/15/2021		Submission Quarter:	1									
			UENTIFICA	HUN										
er tineu Financiai Onicer sig	lature													
						6/15/2021								
ertified Financial Officer Sig	ature					Date								
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uthorized Grantee Signature						6/15/2021								
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- 5% of your total award is available for administrative expenses.
- Administrative funds can be requested once 50% of your awarded project funds have been expended (47.5% of total award)
- Grantees can request administrative funds disbursement up to two times:
  - First, once at least 50% of project funds have been expended and
  - Second, once all project funds (95% of total award) have been expended
  - Grantees can also request a pro-rated portion of admin based on total funds expended in their Quarter 8 Submission (final submission). IHDA will assist grantees in calculating the available admin in these instances.
- Grantees are not required to request admin funds, and funds available for admin can be used for project expenses.





#### ADMINISTRATIVE FUNDS ELIGIBILITY CALCULATION

Use the below input features to calculate your admin funds eligibility. Remember, grantees are only eligible to claim admin funds once they have spent 50% or more of their grant funding, and that only up to half (1/2) of the maximum admin amount will be disbursed for the first payment, regardless of the amount of grant funds expended. **NOTE**: You may only submit Two (2) administrative funds requests for this program.

	Total Admir	nistrative Funds Amount Re	equested at this Time	Ş
[	Grant Manage	ment Totals	Administrative	e Funds Eligibility
	Grant Amount	\$ 125,000.00	Total Submitted Costs to Date	
	Maximum Admin Amount	\$ 6,250.00	includes reimbursements from pre casts	vious quarters and current submitted
	5% of grant total		Percent of Grant Submitted and/or Reimbursed to Date	: 0.00%
				ter more than 50% of your grant funds have in spent
			Can Admin be Requested	: No
Auto	p-populates when		Has Admin been Previously Requested	: 🗆 Yes E No
you	select your			d, SCP staff will work with you to confirm equest, as based on approved expenses
Grar	ntee name at top of	f	Admin Amount Eligible for Request	; <b>\$</b> -
form	1.		available to request for the first payment project funds (95% of your total award	ll (N2) of your max admin amount will be et unless you have spent all of your available () OR you are requesting admin in your final hal admin payouts will be based on total

#### Requested Admin Payment Amount:

Amount you are currently requesting

percent of award expended by the grantee at the end of the program round.



#### ADMINISTRATIVE FUNDS ELIGIBILITY CALCULATION

Use the below input features to calculate your admin funds eligibility. Remember, grantees are only eligible to claim admin funds once they have spent 50% or more of their grant funding, and that only up to half (1/2) of the maximum admin amount will be disbursed for the first payment, regardless of the amount of grant funds expended. **NOTE:** You may only submit Two (2) administrative funds requests for this program.

Total Admin	strative Funds Amount Re	quested at this Time	\$
Grant Managem	ent Totals	Administrative F	unds Eligibility
Grant Amount: Maximum Admin Amount:		Total Submitted Costs to Date Includes reimbursements from previo	\$ 30,000.00
51% of grant total	• 0,230.00	Percent of Grant Submitted and/or Reimbursed to Date: Admin funds may only be requested after a been sp	
		Can Admin be Requested:	No
Auto-calculates		Has Admin been Previously Requested:	□ Yes □ No
after you enter		If Admin has been previously requested, S admin funds available for a second requ	•
• • •		Admin Amount Eligible for Request:	<b>\$</b> –
Total Submitted Costs to Date		If you are eligible for Admin, only half (1 available to request for the first payment un project funds (95% of your total award) (0 quarterly submission (Guarter 8), Final percent of award expended by the gran	nless you have spent all of your available R you are requesting admin in your final 'admin payouts will be based on total

Requested Admin Payment Amount:

Amount you are currently requesting



#### ADMINISTRATIVE FUNDS ELIGIBILITY CALCULATION

Use the below input features to calculate your admin funds eligibility. Remember, grantees are only eligible to claim admin funds once they have spent 50% or more of their grant funding, and that only up to half (1/2) of the maximum admin amount will be disbursed for the first payment, regardless of the amount of grant funds expended. **NOTE:** You may only submit Two (2) administrative funds requests for this program.

	Total Administra	tive Funds Amount f	Requested at this Tir	ne		\$		3,125.00
[	Grant Management	Totals			Administrative	Funds Eligibi	lity	
	Grant Amount: 💲	125,000.00			Costs to Date:		59,375.01 current submitted	
	Maximum Admin Amount: <u>\$</u> Etwol <sup>i</sup> grant total	6,250.00	Percent of Gra	costs ant Submitted and/or Reim	bursed to Date: y only be requested after	47 1 more than 50% of y	7.50%	
	Indicate via the check			Can Admin	be Requested:	spont Y	Yes	
	box whether admin		•	Has Admin been Previou	isly Requested:	기 도	Yes No	
	has been previously requested and enter				en previously requested, vailable for a second req		,	
	•			Admin Amount Eligib	ole for Request:	\$	3,125.00	
	your request amount. This will then auto- populate above and			available to requi project lunds (5 quarterly sub	ible for Admin, only half, est for the first payment SV of your total award) mission (Guarter 8). Flua ard expended by the gra	unless you have spe OR you are requesti al admin payouts wil	ent all of your available ing admin in your final Il be based on total	
	on the Summary Sheet tab.			Requested Admin Pa .4mount you are c	yment Amount: currently requesting	\$	3,125.00	

## **REIMBURSEMENT REQUEST DOCUMENTS: INDIVIDUAL PROPERTY EXPENSE REPORT**



#### Individual Property Expense Report

Complete this report by clearly itemizing all expenses specifically associated with your Strong Communities Program Agreement. You must complete all columns for each expense listed; list descriptions of individual activities in the Description column. Every item provided must be labeled and clearly identified in the Label Name column.



To help facilitate processing of this submission, please use the below settings to clarify if this specific property is a 1st or 2nd time submission, and if the applicable reimbursement request is for a partial or final payment of

	requested funds		_	
Property Submission Type				
Payment Request Type	Final Payment			
			Tot	al Final Cost:
			\$	21,820.00
	Acquisition Costs			
Expense	Description	🔹 🛛 Label Name 💌		Amount
Legal Expenses	Abandonment Proceedings Expense	Exhibit A	\$	3,750.00
	Tot	al acquisition costs:	ć	3 750 00
	Tot	al acquisition costs:	\$	3,750.00

	Rehabilitation Costs									
		Expense	-	Descript	tion	Ŧ	Label Name	Ŧ	Amount	Ψ.
4	•	Summary Shee	t	Admin Request	(Property 1)		(Property 2)	(	Property 3)	(Prc

Property Address and PIN will pre-populate from information entered on the Summary Sheet Tab

Enter Number of Confirmed Units Indicate Property Submission Type (1<sup>st</sup> or 2<sup>nd</sup> submission) Indicate Payment Request Type (Partial or Final payment)

Organize costs by expense type, aligning with Eligible Activities:

- Acquisition \$5,000 maximum
- Rehabilitation
- Demolition
- Tree, Shrub and Debris Removal (excluding grass cutting)
- Grass Cutting not to exceed 5% of grant amount
- Lot Treatment and Greening (i.e. sod, level and grading, shrubs, native plantings, community gardens, stormwater management projects)



Total request will

#### REIMBURSEMENT REQUEST DOCUMENTS: REIMBURSEMENT REQUEST FORM SUMMARY SHEET TAB





### REIMBURSEMENT REQUEST DOCUMENTS: REIMBURSEMENT REQUEST FORM SUMMARY SHEET TAB

omple	ete this report (including all applied	cable property tabs)fo		ties Program reimbu em for each cost/ac								nized in the same	order that they appear o	on the summary she
			-		-	GRANTEE INF	OPMATION							Version 2.
						ANAN'I EE INI	ONMATION							
C	Grantee Name: _ ontact Person for Report:		IHDA City Evan Ponder						Pho	ne Number: Email:		55-5555 @ihda.org	-	
					OUADTE		SION INFORM	ATION		Email:		,	-	
		100000		FIGU	-					_	•• ••			
	Time Period: _	1/1/2020	to	5/31/3	2021				Select one:		Nothing to rep Expenses sub	ort this quarter mitted for reimb	ursement	
	Submission Quarter:	1										equested this q		
						CERTIFIC	CATION							
ide	ersigned certifies that the information	n contained herein is true ar	id accurate and the itemi	ized expenses includ	ded are related to	Eligible Uses und	der the Strong Co	mmunities Progra	am. The undersig	ed further certifi	ies that all books	s, records, and su	upporting documents in	relation to the item
se	es listed herein are maintained at the	office of the undersigned a	nd are available for inspe	ection by the Illinois I	Housing Develop	ment Authority, I	the Illinois Attorne	y General, the Illir	nois Auditor Gene	ral, or any of the	ir designated rep	presentatives, an	d as otherwise required	by applicable state
1											CHE	72021		
ł	Certified Financial Officer	Signature									Date	12021	1	
		orgrature										/2021		
1	Authorized Grantee Signal	ure									Date		-	
	nationeed orantee orgina													
	nationeed brankee bight			то	TAL PAYMEN	IT AMOUNT F	REQUESTED T	HIS QUARTER	R					
	erty Costs Reimbursement		ri \$	TO 59,375.01			REQUESTED T juested <i>(if ap</i>		R \$	3,125.00		bined Reque	est Amount	\$ 62,50
			n \$		Total Admi	in Funds Req	juested <i>(if ap</i>					bined Reque	est Amount	\$ 62,500
	erty Costs Reimbursement	Requested this Qua	<b>\$</b>	59,375.01	Total Admi Pl	in Funds Req ROPERTY LIS		plicable)			Com			
		Requested this Qua		59,375.01	Total Admi Pl	in Funds Req ROPERTY LIS	quested <i>(if ap</i> STING TABLE	ted	\$		Com		est Amount ursement Amount:	\$ 62,50
	erty Costs Reimbursement	Requested this Qua		59,375.01	Total Admi Pl	in Funds Req ROPERTY LIS	quested <i>(if ap</i> STING TABLE	ted	\$		Com Total Reque	ested Reimbo		
op	erty Costs Reimbursement Total Number of Propertie	Requested this Qua s Submitted:	3	59,375.01	Total Admi Pi Tota Total Units	in Funds Req ROPERTY LIS al Number of	quested <i>(if ap</i> STING TABLE	ted	\$	3,125.00 Grass	Com	ested Reimbo		\$ 59,37
op	erty Costs Reimbursement	Requested this Qua		59,375.01	Total Admi Pi Tota	in Funds Req ROPERTY LIS al Number of	juested <i>(if ap</i> STING TABLE Units Submit	ted	<b>\$</b> 4 Tree, Shrub, & Debris Removal	3,125.00	Com Total Reque Lot Treatment & Greening	ested Reimbu Total Requested Loan	ursement Amount:	\$ 59,37
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### REIMBURSEMENT REQUEST DOCUMENTS: ADMIN REQUEST

	Ad	ministrative Funds Request For	m		
oject funds expended). For example, if the grantee ha	s spent only 50% of their information in all applicab	it as administrative funds. Collection of these funds is b. project funds, then up to 50% of the administrative fun- ole gray and white boxes. Complete one PDF, and subm rn Request form, to SC <b>Pinfo@ihda.org</b> . Sign and	ds will be approved for payout. hit electronically along with you	Complete this report for your Str	ong Communities
		GRANTEE INFORMATION	·		Version 2.2021
Grantee Name: Contact Person for Report:		IHDA City Evan Ponder	Phone Number: Email:	555-555-5555 eponder@ihda.org	-
		SUBMISSION INFORMATION		eponder@inide.org	-
Catacitai a Batas	6/15/2021		1		
Submission Date:	013/2021	Submission Quarter:			
		CERTIFICATION			
Certified Financial Officer Signature				Date	_
Certified Financial Officer Signature				Date	
				6/15/2021	
Authorized Grantee Signature				6/15/2021 Date	
Authorized Grantee Signature	ADM	INISTRATIVE FUNDS ELIGIBILITY CALCULAT			
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Summary Sheet Admin Request (Property 1) (Property 2) (Property 3) (Property ... + :

## REIMBURSEMENT REQUEST DOCUMENTS: INDIVIDUAL UNIT SUBMISSION PACKET

Enter the following information on the Unit Submission Packet Cover Page:

- Round and Quarter for your submission
- Grantee Name
- Property Address
- PIN
- Use the cover sheets to organize all required backup documentation including the Checklist items and invoice/proof of payment for all submitted expenses by the relevant expense category
- New Cover Sheets are included as Exhibit H to the Program Manual

	LLINOIS HOUSI	NG
		ITY
trong Communities Program –Grantee Quarterh heets –Individual Units Round <u>1</u> Quarter: <u>1</u>	ly Report Submission Cover	
Individual Unit Sub	bmission Packet	
Grantee:		
IHDA City		
Property Address:		
123 Main St		
PIN:		
111-111-1111		
<ul> <li>Maximum costs per individual PIN for all eligible Before submitting for reimbursement all proper and received approval for Part 1 and Part 2 of t o SCP Pre-Approval Part 1: Initial Property A o SCP Pre-Approval Part 2: Pre-Approval Che</li> </ul>	rrties must have been submitted via Jotform the Pre-Approval process: Approval Form	



### REIMBURSEMENT REQUEST DOCUMENTS: INDIVIDUAL UNIT SUBMISSION PACKET

trong Communities Program –Grantee Quarterly Report Submission Cover	Strong Communities Program –Grantee Quarterly Report Submission Cover Sheets –Individual Units Round 1 Quarter: 1
Individual Unit Submission Packet	Grantee: IHDA City Property: 123 Main St
Grantee:	A sourisitien Costs
IHDA City	Acquisition Costs
Property Address:	
123 Main St	
PIN:	
111-111-1111	• Include an invoice and proof of payment for every cost that you are seeking reimbursement for
Maximum costs per individual PIN for all eligible uses cannot exceed \$40,000.	<ul> <li>All invoices, proofs of payment, and additional documents must be organized and labeled according to their Excel form label</li> </ul>
Before submitting for reimbursement all properties must have been submitted via Jotform and received approval for Part 1 and Part 2 of the Pre-Approval process: o SCP Pre-Approval Part 1: Initial Property Approval Form o SCP Pre-Approval Part 2: Pre-Approval Checklist	Acquisition costs can be reimbursed up to \$5,000 per property with submission of backup documentation

The Reimbursement Request Checklist includes all items required as part of your submission. Please answer the questions and include all necessary items:

- Signed Reimbursement Request Form Summary Sheet (and Admin Request, if applicable)
- Ownership Documentation (only if requesting reimbursement of acquisition expenses)
- Scope of Work Narrative and change order information, if any have occurred after Pre-Approval
- Invoice or comparable documentation and proof of payment for all expenses being submitted and indicated on your Excel Reimbursement Request Form.
- Pictures (during and after work has been competed)
- Certification of Compliance with applicable Environmental Requirements (IHDAprovided form required for second [final] payment requests)
- Bid Tabulation Form (if not provided as part of Pre-Approval Process)

For Rehabilitation Projects:

- Lead Risk Assessment
- Confirmation of final inspection (required prior to final payment for property)
- Clarification on occupancy (Certificate of Occupancy is <u>not</u> required, but must provide an explanation)



Round _ Grantee Property		er:	
Reim	burse	ment	Request Checklis
		cond (final) payme	
0	: (partial) payme		property this is considered a second (final) payment request
			been completed on this property?
Oyes		remondon project	
		the second second	
		st and cover sheets, ken on this property	, please also provide the following, depending on
Con Chi Chi Chi Chi Chi Chi Chi Chi Chi Chi	nership Documer ppe of work narra nge orders) ange order(s) if an tractor payment er sheet oice or comparabl eligible expense c tures of complete tification of Com uired for second	tation (only if reques tive (if different fror y invoice and proof of e documentation and ategory using cover s d work (include both jiance with applicab final] payment reque	"during", for rehab, and, if completed "after" photos) le Environmental Requirements (IHDA-provided form
<ul> <li>For rehain requests:</li> </ul>	bilitation projec	ts, please also pro	ovide the following with second (final) payment
	nfirmation of fina the property read	linspection	tified lead risk assessor.
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#### **Ownership Documentation-REVISED**

- Please include ownership documentation such as the deed, purchase agreement, etc. <u>only if requesting</u> <u>reimbursement for acquisition expenses</u>.
- If not requesting reimbursement for acquisition expenses, <u>no additional documentation regarding ownership</u> <u>or legal authority is required</u>. The Certification of Legal Authority document provided with the Pre-Approval Checklist will serve as confirmation of your legal authority to undertake activities.

#### Certification of Compliance with applicable Environmental Requirements - NEW

- For all projects, provide a signed Certification of Compliance with applicable Environmental Requirements document. This document is included as Appendix C to the Program Manual.
- IHDA will no longer require submission of a Completed Asbestos Notification Form or inspection/abatement information with the reimbursement request.
- For eligible inspection and abatement expenses you intend to request reimbursement for, please submit invoice and proof of payment.







Certification of Compliance with Applicable Environmental Requirements (Strong Communities Program)

On behalf of \_\_\_\_\_\_\_\_, the undersigned confirms that the Grantee has (a) complied with all applicable local, county, state and federal laws and regulations relating to the protection of human health and the environment and the disposal of hazardous or toxic substances, pollutants or contaminants ("Environmental Laws") and (b) if applicable, have received and are in compliance with all permits, licenses or other approvals required under any and all applicable Environmental Laws, including but not limited to, those for demolition, rehabilitation, asbestos inspections, and handling/removal of hazardous containing materials and Grantee hereby agrees to indemnify and hold harmless the Illinois Housing Development Authority from and against any and all losses and expenses, if any, ensuing from any such action.

Property Address PIN	
Signature	
Name	
Title	
Municipality/Organization	("Grantee")
Date	

#### **Bid Tabulation Form -REVISED**

• If not provided with the Pre-Approval Part2: Pre-Approval Checklist, please provide a copy of a completed bid tabulation form with the Reimbursement request.



	Grantee:	
s:		
Туре:		
Bid #1		
Contractor Name:		
Bid Amount:		
Bid #2		
Contractor Name:		
Bid Amount:		
Bid #3		
Contractor Name:		
Bid Amount:		
Winning Bid		
Contractor Name:		
Bid Amount:		
In-House Cost Estin	nate	
Amount:		

ompleted by:		Date:	_
	(Grantee's signature)		



 For all Rehabilitation Projects a Lead Risk Assessment is required for pre-1978 homes.

Should be done by a certified lead risk assessor.

 Homes built after 1978 need only be tested for lead if the grantee considers it necessary.



Comprehensive Lead Based Paint Hazard Risk Assessment for



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9.4 Property Conditions Affected by Lead-Based Paint
10.0 Conclusions
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ABC Demo Company

For Invoice #1

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Mayor of City of IHDA

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### REIMBURSEMENT REQUEST DOCUMENTS: INDIVIDUAL UNIT SUBMISSION PACKET



All invoices, proofs of payment, and additional documents must be organized
and labeled according to their Excel form label

Include invoice and proof of payment for each cost you are submitting, following the relevant Cover Sheet

### **REIMBURSEMENT REQUEST DOCUMENTS: REQUIREMENTS**



#### **Submitting Properties for Reimbursement**

- Completed reimbursement request form (Excel document)
  - Complete Summary Sheet tab
  - **Complete Admin Request tab (if applicable)**
  - One Individual Unit Report tab must be completed for every property submitted
- Scanned copy of signed reimbursement request form pages (PDF documents)
  - □ Signed copy of the Summary Sheet tab
  - □ Signed copy of the Admin Request tab (if applicable)
- One Unit Submission Packet per property that you are submitting (pdf document)
  - **Contains invoices and proof of payment for every cost that you are seeking reimbursement for**
  - □ Exhibits are labeled and grouped by category
  - □ Cover sheets are included for every applicable category
  - Reimbursement Request Checklist is filled out and all necessary documentation are attached (Any changes to the scope of work, "during" and "after" Pictures, Certification of Compliance with applicable Environmental Requirements, lead risk assessment, final inspection, and Certificate of Occupancy information as applicable)

#### All materials are to be submitted digitally via email to SCPinfo@ihda.org

### **REIMBURSEMENT REQUEST DOCUMENTS: REQUIREMENTS**



#### **NOT Submitting Properties for Reimbursement**

- □ Completed reimbursement request form *(Excel document)* 
  - "Nothing to report this quarter" is checked under Quarterly Submission Information
- □ Scanned copy of signed reimbursement request form Summary Sheet tab (*PDF document*)
  - □ Signed copy of the Summary Sheet

All materials are to be submitted digitally via email to <u>SCPinfo@ihda.org</u>











# QUARTERLY REIMBURSEMENT REQUEST: REQUIREMENTS



- All reports and supporting documentation must be submitted 100% digitally to <u>SCPinfo@ihda.org</u>.
- You may submit a maximum of 50 properties per quarterly submission through the Individual Property Expense Report Tabs
- All properties must first receive Pre-Approval before any expenses will be reimbursed.
- All line items for reimbursement listed on the Excel Reimbursement Request Form must have <u>corresponding and labeled</u> documentation provided in the Individual Unit Submission Packet for that property
  - If one invoice covers more than one property submitted on the Property Identification Tab, the invoice, or additional documentation must clarify the properties covered, and clearly indicate how the per property cost was determined.
- The Reimbursement Request Checklist must be filled out and all necessary documentation included with your submission, as applicable (Pictures, Certification of Compliance with applicable Environmental Requirements, lead risk assessment, final inspection, and Certificate of Occupancy information)

The more organized and complete a report is upon submission, the more promptly IHDA can approve funds for payment





# **ADDITIONAL RESOURCES AND INFORMATION**







 If you would like to update contact information at any point during the program period, please use the SCP Round Program Working Contact Information form:

#### https://form.jotform.com/203415896631156

- Keeping your contact information updated ensures that IHDA has the correct contact information for your organization and any third-party partner that may be assisting with the administration of your grant.
- IHDA requests that all grantees provide an updated Jotform to ensure that we are communicating with the correct individuals.



#### **MORE INFORMATION AND RESOURCES**

IHDA's website contains additional guides, The Program Manual, FAQs, and presentations for your reference.

Navigate to the following website:

- → https://www.IHDA.org
  - $\rightarrow$  Community
    - $\rightarrow$  Revitalization and Repair Programs
      - $\rightarrow$  Strong Communities Program (SCP)







#### **Revitalization And Repair Programs**



IHDA understands that investing in homes and communities across the state is an effective way to combat the ongoing effects of the housing crisis and assist with revitalization efforts. We work with local governments and non-profit organizations to offer programs that address vacant residential properties and the blight that usually follows to benefit communities. We also fund programs that allow homeowners to make necessary repairs and accessibility improvements, allowing resident stay in their homes while improving the quality of single-family housing and helping to create vibrancy in neighborhoods throughout llinois.

#### Strong Communities Program (SCP)

The Illinois Housing Development Authority (1HDA') is pleased to announce its request for applications for the Strong Communities Program (SCP). SCP provides grant funds to municipalities counties, and land banks to address affordable housing needs and community revitalization efforts. SCP will return vacant residential properties to productive and taxable use through nehabilitation and provide funds for demolition in cases where properties are beyond repair and negatively impacting neighboring residences. As a result, SCP will increase property values, create jobs help reduce crime, generate additional tax revenue and attract further community investment. It will preserve existing affordable nousing stock that is often in city centers and in proximity to community amenities (schools) parks. medical facilities, shopping, jobs and transportation). CUCK HERE for a side-by-side comparison of the APP and SCP programs to determine which is best suited for your community.

The application period is now closed. An Application Tutorial Webinar was held on September 1, 2020. A recording of this webinar and the presentation slides can be found under the Strong Communities Program Documents below.

#### Please direct any questions to SCPInfo@Ihda.org

Strong Communities Program Documents
FAQs
APP v SCP
SCP Round 1 Application Tutorial Webinar Slideshow
SCP Round 1 Application Tutorial Recording
SCP Program Manual
Appendix A-Definition of Abandoned Residential Property

Appendix B-Statement of Contractor's Qualifications



#### **CONTACT INFORMATION**

SCPinfo@ihda.org

Please address inquiries to the <u>SCPinfo@ihda.org</u> account to receive a timely response



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Evan Ponder Senior Program Officer



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312-836-7431 menriquez@ihda.org





















All updates will be effective August 1, 2021.

Please note that Pre-Approval Jotforms will be down July 28-29 for testing.

The next Quarterly Reimbursement Submissions (Quarter 2) are due on or before <u>September 15, 2021</u>