

STAMFORD AFFORDABLE HOUSING TRUST FUND APPLICATION FORM

Please submit completed applications and any supporting documentation digitally to:
StamfordAHTF@StamfordCT.gov

Title of Proposal: Panel and Breaker Replacement – 11-15 Woodland Ave

Legal Name of Entity Applying: Neighborhood Housing Services of Stamford, Inc.

Business Address: 295 West Main Street

Telephone Number: 203 327 1647

Contact Person: Nydia Brown, Executive Director

Funds Requested: \$ 12,500

Email Address: nbrown6733@aol.com

PROJECT or PROGRAM DESCRIPTION

Please check the category box(es) that best represent your application request.

- Creation of affordable rental or homeownership housing units
- Multi-family rehabilitation (with specified locations)
- Limited Equity Cooperative or Condominium Conversion
- Multi-family rehabilitation program (without specified locations)
- Home ownership assistance program
- Foreclosure and Eviction Prevention and Protection program
- Rental and Landlord Assistance program

I. Proposed Activity.

Describe the proposed project or program.

Replacement of electrical panels and breakers which were previously recalled. Insurance requires they be replaced to re-new the policy.

I.1. Status of the activity (conceptual, planned, in process): Planned

Proposed start and end dates of the activity:

Start: 11/6/2023 End: 11/8/2023

I.2. Does this activity aim to address health and safety issues, building efficiency or utility costs, and/or plan to provide supportive services on-site?

No

Yes - If Yes, please explain: Electrical panels and breakers were previously recalled and insurance is requiring them to be replaced to re-new the policy.

I.3. If location-based, what types of amenities are expected to be provided onsite (ex: shared or private outdoor space, gym access, etc.)? None

I.4. Below what AMI level is the primary target household for this activity (or estimate in chart below if for rehab/new construction)? Less than 30% AMI

Unit Mix	Est. sf/unit	AFFORDABILITY LEVELS (AMI)			
		30 %	%	%	%
Studio Rooms	sf/unit	14 rooms	units	units	units
One bedroom	sf/unit	units	units	units	units
Two bedroom	sf/unit	units	units	units	units
Three bedroom	sf/unit	units	units	units	units
Total # of units		14 rooms	units	units	units

I.5. List all approvals, funding or other prerequisites (ex: purchase or lease of land, zoning approval, financing) that must be secured or met before the activity can begin:

a. Subsidized through Section 8 - HUD

b. [Click or tap here to enter text.](#)

c. [Click or tap here to enter text.](#)

(continue on separate sheet if necessary)

II. Identify the Need for this Activity in Stamford.

II.1. Explain how this activity meets the objectives of Stamford’s Affordable Housing Trust Fund, Master Plan and Affordable Housing Plan.

We meet the objectives of the SAHTF by maintaining and providing a place for tenants who were homeless. By doing so, these tenants can move toward a more stable way of life, so they do not have to worry about a place to live. This house helps remove people from the streets.

II.2. Is this an ongoing or a newly proposed activity?

New

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Ongoing - If ongoing please describe how long the activity has been ongoing and what progress has been, and why the activity needs to be continued. [Click or tap here to enter text.](#)

II.3. Are similar projects/programs currently available in Stamford?

No

Yes - If yes, please list:

- a. Pacific House
- b. Inspirica
- c. [Click or tap here to enter text.](#)
- d. [Click or tap here to enter text.](#)

If Yes, how is the proposed activity different or why is there an additional need for the activity? There is a serious ongoing need to address homelessness.

II.4. Please describe the target population for this activity, including income levels and socio-economic characteristics (e.g., seniors, families, people with disabilities)
Our target is focused on homeless adults.

II.5. How will participants from the target population be selected and how will eligibility for participants in the activity be documented?
The waiting list is managed by Charter Oak Communities.

II.6. Neighborhood Factors (Only applicable if location-based):

Address(es) of proposed project: 11-15 Woodland Ave

Neighborhood(s) where proposed project is located (refer to map listed in Resources of [AHTF webpage](#)): South End

[Walk Score](#) of proposed location(s): 87 Very Walkable

[Transit Score](#) of proposed location(s): 73 Excellent Transit

% of households that are cost-burdened (paying 30% or more of gross income) in this Census Tract (refer to map listed in Resources of [AHTF webpage](#)): 45%

% of units that are deed-restricted affordable in this Census Tract (refer to map listed in Resources of [AHTF webpage](#)): 24.4%

% of units that are owner-occupied in this Census Tract (refer to map listed in Resources of [AHTF webpage](#)): 0%

(continue on separate sheet if necessary)

III. Performance Measures.

Explain how this activity will benefit the target population. Maintaining the home will address safety concerns and ensure renewed insurance coverage.

III.1. What is the total estimated number of households to be served by this activity? 14

What is the total estimated number of low-income households to be served by this activity -
Total Below 80% AMI: 14

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Total Below 50% AMI: 14

Total Below 30% AMI: 14

What is the anticipated percentage of low-income households (below 80% AMI) to be served by this activity (as a portion of all persons or households served by the project or program)? 100%

III.2. How will you determine and document the income eligibility and demographic characteristics of households served by this activity? Income eligibility information is maintained by Charter Oak Communities.

III.3. Please provide additional activity specific performance measures (e.g., number and size of units produced or rehabbed, affordability levels) 14 rooms to be improved through project at less than 30% of AMI

(continue on separate sheet if necessary)

IV. Entity Information

IV.1. What type of entity is this?

- For-profit developers of affordable housing
- Not-for-profit developers of affordable housing
- Not-for-profit organizations with the goal of furthering affordable housing
- The Stamford Public Housing Authority (Charter Oak Communities)
- The Stamford Department of Community Development

IV.2 How many years has this entity been in operation? 40 years

IV.3. Have you implemented this type of activity in the past?

- No
- Yes

IV.4. If relevant, how many units of housing has this entity produced? 100+
How many units of housing does this entity currently manage? 40

IV.5. Has the entity ever defaulted or been terminated from any contract?

- No
- Yes - If Yes, please explain: [Click or tap here to enter text.](#)

IV.6. If this entity or any key activity partners have received funding from the Trust (or through fee-in-lieu funds related to Section 7.4) in the past 5 years, provide the following information:

Funding Year	Activity Title	\$ Award Amount	Status (Complete, Underway or In-Planning)
2019	FIL	\$329,000	Complete
		\$	
		\$	

		\$	
		\$	

V. Sources and Uses:

Note: show value of all non-cash or "in-kind" contribution with italics.

SAHTF funds shall make up no more than 25% of total project costs.

Sources		Uses	
AHTF	\$12,500	Electric Services	\$12,500
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
Total Sources:	\$12,500	Total Uses:	\$12,500

(continue on separate sheet if necessary)

VI. Other Requirements (if applicable):

1. Any non-profit entity must submit with their Application a digital copy of their determination letter from the IRS recognizing the agency as a 501(c)(3) tax exempt organization and a digital copy of Certificate of Legal Existence (also called a Certificate of Good Standing in some states) from the State of Connecticut.
2. For site-specific projects applicants shall provide copies of documents which show that applicant controls the property (deed or lease of at least 99 years) or an executed contract to purchase for the property.
3. For renovations, rehabilitation or reconstruction projects applicants shall provide information regarding existing rents. The applicant shall provide a retention and relocation proposal for existing residential tenants at the time of application.

VII. Certification:

I certify that I have been duly authorized to submit this application, and that this application form is complete and accurate.

Print Name: Nydia Brown

Title: Executive Director

(Board President, Chairman, Executive Director, CEO)

Signature: *Nydia Brown*

Date Submitted: 11/6/2023