



ModPHASE Initiative for Local Housing Authorities

APPLICATION

Please answer all questions and email the completed application with required attachments to: amy.stitely@state.ma.us (Subject line: "ModPHASE - name of housing authority").

In addition, please transmit one hard copy by mail to:

Amy Stitely
Director, Bureau of Housing Development and Construction
DHCD
100 Cambridge Street Suite 300
Boston, MA 02114

1) Basic Information

Date: _____

Housing Authority: _____

Contact Person and Title: _____

Address: _____

Phone: _____ Email: _____

Development Name: _____

Development # (667-1, etc): _____

Development Address: _____

Number of total units: _____

A. Was this Development on the DHCD-generated list of eligible developments attached to the NOFA?

Yes

No

2) Condition of Development

- A. Describe the physical conditions at the development with a full description of the systems or components that have failed. Also describe any partial or failed repair attempts in the past 6 years.

- B. Describe any site or building hazards at the development that, if not addressed, pose a risk to the health and safety of residents, staff, and visitors.

3) Scope

A. Project Description and Costs:

- i. Briefly, describe the proposed scope of work with specific details about the exact components which will be renovated and how these components relate to other building systems. Please also submit REQUIRED APPLICATION EXHIBIT A: PROJECT SCOPE (Detailed, line-by-line scope and budget derived from CPS or developed by a consultant and submit in Excel format).

- ii. Over the next 20 years, what other components, outside of the proposed scope, will need to be addressed in order to preserve the development?

iii. Cost Summary

Total estimated construction cost:	\$ _____
Estimated per unit construction cost:	\$ _____
Total development cost (including soft costs):	\$ _____
Total development cost per unit:	\$ _____ per unit

- iv. If applicable, describe how the proposed scope will make current LHA maintenance operations and budgets more efficient.**

Estimate the annual savings in maintenance materials and/or equipment:

\$ _____ per year

Estimate the hours per week of maintenance staff time gained:

_____ hrs per wk

- v. Identify the impact, if any, on energy and/or water consumption at the LHA.**

- vi. Describe how the proposed renovations would improve resident quality of life and better allow residents to age in community.**

B. Extra Project Costs. *If not already included in the scope*, please identify any potential code- or latent condition-related project costs:

i. Accessibility Compliance

(1) How many units need to be converted to reach 5% accessible units at the development?

(2) Describe any other site/common area improvements needed to reach full compliance with MAAB/ADA. Describe any known barriers to compliance.

(3) What is the LHA's total percentage of accessible units in all elderly public housing developments (including federal sites)?

ii. Describe any information you have that documents the presence or absence of lead paint, asbestos, PCBs, underground oil tanks, or other hazardous materials that would need to be addressed as a result of this project:

4) Proposal to Expand Services to Elderly Residents

A. Current Service Levels: In the chart below, please list all supportive services that are currently available to residents at the proposed development. LHA may attach a separate list.

Description	Residents Served Per Month (number and type)	Provider	Cost paid by Resident to Participate	Annual Program Cost to LHA for All Participants
<i>Example 1: Exercise Program that meets 2X week in community room</i>	<i>Up to 80 clients – open to all residents in development</i>	<i>Volunteers from Sunnyside Community College</i>	<i>None</i>	<i>None</i>

B. Resident Services Proposal: In the following section, please provide key highlights about the service expansion proposal.

Then, submit REQUIRED EXHIBIT B: SERVICE PROPOSAL, including a detailed narrative (5 page maximum), staffing plan, and any letters of commitment or support.

- For properties with existing services, list any proposed expansion or enhancement of services.
- For properties without existing services, list proposed new services.

Proposed services can be leveraged through a commitment from a community-based elder service agency, funded by private resources (e.g., grant from philanthropic or community-based agency), or covered by other LHA-controlled resources.

i. Leveraged Services from Partner Agencies to be offered in-kind/at no cost to LHA:

Description of Services	Provider	Annual Value of Leveraged Services (\$)

ii. Private or other Leveraged Funds that will cover the costs of services:

Source of Funding	Descriptions of Services	Annual Commitment (\$)

iii. Estimated number of residents who will access proposed services:

Estimated number of residents to be served: _____

Total number of residents at development: _____

Estimated percentage of residents to be served at development: _____ %

iv. Date when partnerships will be formalized and services will be available to residents (Note DHCD and EOEA expect no later than 3 years from date of submission):

v. Duration (in years) that services are forecasted to be available to residents:

5) LIST OF REQUIRED EXHIBITS: *For all exhibits, please include a page header with the housing authority name and the title of the exhibit.*

A. Project Scope: Detailed capital project scope and line-by-line Excel budget (indicate if derived from CPS or a consultant's estimate).

B. Service Proposal: Detailed Aging in Community service expansion proposal that includes the following components

- i. **Narrative description (5 pages maximum)** that covers the nature of services, provider, number and type of clients currently served and proposed to be served annually, and the current and proposed frequency and duration of service availability. LHAs should describe any partnerships put in place as part of ModPHASE and any new or leveraged resources that will be used to expand or enhance services for residents in the identified property. Note that many elderly public housing residents are currently receiving individualized services through a plan with a local service agency, such as an Aging Service Access Point (ASAP). Any services proposed through ModPHASE should include those available to all elderly residents – over and above those that may be provided to specific residents through individualized services plans with service agencies.
- ii. **Staffing Plan**, which describes in detail how services will be delivered, program will be staffed and managed.
- iii. **Signed letters of commitment or support (required)** from service providers or funders that will make the proposed services possible.

C. Required exhibits listed in NOFA/Public Housing Notice:

- i. **Cover Letter:** Narrative Cover letter explaining why proposal is a strong candidate for ModPHASE (signed by LHA Executive Director and Chairperson)
- ii. **Photos:** Interior and exterior photos of the property (12 maximum)
- iii. **Site Plan:** (e.g. original development plan, or copy of assessor's map)
- iv. **Board Vote:** A board vote of application approval, as evidenced by a certified extract from the minutes of the board meeting;
- v. **Tenant Letter:** A letter from the head of the tenant organization(s) or representative of tenants that demonstrates evidence of compliance with tenant participation regulations (760 CMR 11.10). If no letter can be obtained, then the LHA director may instead submit a letter certifying that tenants were offered the opportunity to be involved in setting the needs and priorities of the application.