**FULL APPLICATION**

**SECTION 1. Applicant Information** (*may be auto-filled from Expression of Interest*)

1. Primary Location: (*Select from drop-down*)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| EOHED Region | *(auto-filled)* | MassDOT Highway District | *(auto-filled)* | Rural or Small Town | *(auto-filled)* |
| MDFA Regional Office | *(auto-filled)* | Gateway City | *(auto-filled)* | Housing Choice | *(auto-filled)* |
| Regional Planning Agency | *(auto-filled)* | MVP Community | *(auto-filled)* | MBTA Community | *(auto-filled)* |

1. Organization Type: (*Select from following drop-down options*)

**Public Entity:**

Municipality

Public Housing Authority

Redevelopment Authority

Regional Planning Agency

☐ Quasi-Governmental Agency (i.e. Economic Development Industrial Corporation, etc.)

Water or Sewer District

**Non-Public Entity:**

Community Development Corporation

Non-Profit Organization

For-Profit Organization

1. Applicant Organization Name:
2. Applicant Organization Legal Address:
3. City/Town:
4. State: MA
5. Zip Code:
6. CEO Name:
7. CEO Title:
8. CEO Tel.:
9. CEO Email:
10. Project Contact Name (if different):
11. Project Contact Title:
12. Contact Tel:
13. Contact Email:
14. Organization Description – Describe your organization’s structure, including staff capacity, and economic development goals.

(*2,000 characters*)

1. Is this a joint application between two or more municipalities (and/or entities), which will entail a formal arrangement for a shared scope of work and allocation of funds?

|  |  |
| --- | --- |
| Yes | No |

* 1. If yes, provide the contact information for each additional partner municipalities (and/or entities):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Organization Name** | **CEO Name** | **CEO Title** | **Email** |
|  |  |  |  |  |
| **+** |  |  |  |  |
| **+** |  |  |  |  |

1. Indicate any applicable certifications and/or classifications for this organization: (ONLY For Non-Public Entities)

Women-Owned Business Enterprise

Minority-Owned Business Enterprise

Disadvantaged Business Enterprise

Veteran-Owned Business Enterprise

LBGTQ-Owned Business Enterprise

Disability-Owned Business Enterprise

N/A

**MBTA COMMUNITY QUESTIONS**

*(Questions show only for Public Entity Applicants in an MBTA Community)*

1. Chose the option below that best reflects your municipality’s compliance status with the Guidelines for Multi-family Zoning Districts Under Section 3A of the Zoning Act (MGL c. 40A). Has your municipality:

Submitted an Action Plan to DHCD and NOT YET received a letter confirming Interim Compliance

Submitted an Action Plan to DHCD and HAVE received a letter confirming Interim Compliance

Received a determination of District Compliance from DHCD or

Have not submitted an Action Plan nor application for District Compliance to DHCD in accordance with the Guidelines for Multi-family Zoning Districts

*If Have not submitted an Action Plan nor application for District Compliance to DHCD in accordance with the Guidelines for Multi-family Zoning Districts, the following note shows:*

An MBTA Community must be in compliance with the referenced guidelines in order to be eligible for funding from the MassWorks and/or Housing Choice programs.

*If Submitted an Action Plan to DHCD and NOT YET received a letter confirming Interim Compliance or Submitted an Action Plan to DHCD and HAVE received a letter confirming Interim Compliance show:*

* 1. Does the community anticipate any changes to its approved Section 3A Action Plan that may result in delays to the plan’s schedule of more than 180 days?

|  |  |
| --- | --- |
| Yes | No |

*If yes:*

* 1. Briefly describe the nature of the changes/delays.

                  (500 Characters)

**SECTION 2: Project Information**

1. Project Name: *(50 Characters)*
2. Short Project Description / Abstract – Provide a concise description of the project, with a focus on how the grant funds would be used if awarded.

(*500 characters*)

1. Project Category for Grant Consideration. Select the [Development Continuum](https://www.mass.gov/info-details/one-stop-for-growth-development-continuum) category, Project Type and Project Focus that best fits the project. Applicants can see the One Stop grant program most likely to review each type of project by hovering over the radio button next to each Project Focus option.

Community Activation and Placemaking

*Project Type (check one):*

Early Stage Engagement

*Project Focus (check one):*

Consultant Services for Downtown

Community Visioning for Future Placemaking

Workshops/Community Feedback Sessions

Local Engagement Facilitation Training

Participatory Displays and Engagement Tools

Removing Barriers within the Placemaking Process

Compensation for Labor-Intensive Engagement

Action Grants

*Project Focus (check one):*

Implementing a Community Economic Development Program

Check one:

Entrepreneurship, Small Business Development and Technical Assistance

Workforce Development, Training Initiatives, and Job Pipelines

Supporting Access to Opportunity

Community Organizing and Leadership Development

Creating District Support

Business Improvement District (BID) Formation

District Improvement Financing (DIF)

Implementing Locally Driven Placemaking

Check one:

Place-Based Activities and Events

Creating Community Gathering Spaces

Sidewalk Retail Solutions

Reclaiming Roadways and Sidewalks for Pedestrians

Local Re-Granting for Micro-Projects

Planning and Zoning

*Project Type (check one):*

Community Plan

*Project Focus (check one):*

Master Plan

Neighborhood Plan

Downtown Plan

Urban Renewal Plan

Housing Production Plan

Regional Plan

Corridor Plan

Other Plan Specify:\_\_\_\_\_\_

Zoning Revision

*Project Focus (check one):*

Zoning to Comply with Section 3A of MGL c.40A

Comprehensive Zoning Review & Revision

Other Zoning Revision Specify:\_\_\_\_\_\_

Site Preparation

*Project Type (check one):*

Site Predevelopment

*Project Focus (check one):*

Preparing for Site Improvement Construction

Site Due Diligence

☐ Site Plan Design

☐ Market Study

☐ Civil Engineering

☐ Pre-Permitting/Permitting

Brownfields Site Assessment

Municipal Surplus Property Disposition Plan

Sitework Implementation

*Project Focus (check one):*

Site Improvement Construction

Demolition

Site Acquisition, related tasks

Construction of site related upgrades

Brownfields Remediation

Building

*Project Type (check one):*

Building Predevelopment

*Project Focus (check one):*

Building Rehabilitation Feasibility Study

Check all that apply:

Building Condition Study

Development Feasibility Studies

Code Compliance Studies

Architectural or Engineering Plans

Collaborative Workspace Feasibility / Predevelopment

Municipal Building Construction Feasibility Study (Municipal Applicants Housing Choice and/or Rural & Small Town Designation Only)

Public Facility Construction Feasibility Study

Housing/Mixed Use Construction Feasibility Study

Building Construction

*Project Focus (check one):*

Rehabilitation of a Blighted or Underutilized Property

Check all that apply:

Code Compliance

Building Accessibility Improvements

Building Stabilization and/or Shell Repair

Interior Demolition or Remediation

Collaborative Workspace Fit-Out

Municipal Building Construction (Municipal Applicants Housing Choice and/or Rural & Small Town Designation Only)

Public Facility Construction

Housing/Mixed Use Construction

Infrastructure

*Project Type (check one):*

Infrastructure Predevelopment

*Project Focus (check one):*

Preconstruction: Design / Engineering Documents Only

Infrastructure Construction\*

*Project Focus (check one):*

Public Infrastructure to Support Growth

Roadway / Streetscape Improvements

Bridge / Culvert Repair or Replacement

Water / Sewer Infrastructure

Public Utility Project (Gas, Electric, etc.)

Small Town Road Improvements to Enhance Public Safety (aka STRAP)

\*Note: Infrastructure Construction may include predevelopment components.

1. Narrative / Scope of Work –Explain the project. Describe the proposed work that would be funded by the grant and carried out to execute this project.

*If Consultant Services for Downtown show:*

**Note:** For Consultant Services for Downtowns projects, describe how the technical assistance would be implemented.

(*4,000 characters*)

*If Consultant Services for Downtown show:*

* 1. Choose the consultant services category that best describes this project.

|  |
| --- |
| Choose an item. |

1. Project Need – Describe why this project is necessary in enhancing community economic development.

**Note:** For Small Town Road Improvements to Enhance Public Safety projects, the applicant should describe why the project is necessary to enhance roadway safety.

(*1,000 characters*)

1. Target Population Description – Describe the specific population(s),neighborhood(s), or census block that will be served and how they will be supported by the outcomes of the project. If the project is city/town wide, provide the description for the whole community. If applicable, describe how the project aligns with recommendations of the Governor’s Black Advisory and/or Latino Advisory Commissions and focuses on Black and/or Latino communities.

(*2,000 characters*)

1. Is the project area located within an Environmental Justice census block group? Click [HERE](https://mass-eoeea.maps.arcgis.com/apps/webappviewer/index.html?id=1d6f63e7762a48e5930de84ed4849212) to access the Commonwealth’s Environmental Justice Map Viewer.

*If Brownfield Site Assessment or Brownfield Remediation project, question will read:*

Is the project site located within one mile of an Environmental Justice census block group? [**CLICK HERE**](https://mass-eoeea.maps.arcgis.com/apps/webappviewer/index.html?id=1d6f63e7762a48e5930de84ed4849212) to access the Commonwealth’s Environmental Justice Map Viewer.

|  |  |
| --- | --- |
| Yes | No |

1. Anticipated Outcomes and Impacts – Explain how the project will catalyze community economic development. Describe the tangible outcomes, including impacts on housing production, job growth, workforce development, entrepreneurship, local business and/or other social benefits.

**Note:** For Small Town Road Improvements to Enhance Public Safety projects, the applicant should describe the anticipated outcomes related to roadway safety.

(*2,000 characters*)

1. Does the community have any active housing restrictions, such as phased growth zoning or an active housing moratorium?

|  |  |  |
| --- | --- | --- |
| Yes | No | Unknown (*option for Non-Public entities only*) |

* 1. If Yes, provide an explanation:

(1,000 characters)

1. Leadership and Ability to Execute – Describe the leadership and project management group for this project and why it is an effective team to advance this project. Identify the full name of the person(s) that will serve as the applicant’s project contact. If the applicant is partnering with other organizations, list the partner organization(s), and briefly describe their role in accomplishing the project.

(*2,000 characters*)

1. Progress to Date – What progress has the applicant/partner organization(s) made on this project to date? Include details about planning, community engagement, prior State/Federal funding, development tools used, noting if the project is included in any adopted municipal or regional plans (e.g. Master Plan, CEDS, HPP, etc.).

(*2,000 characters*)

1. Timeline Information – Describe the timeline for the project. Include any tasks that the applicant would need to complete before expending grant funds, if awarded (i.e. procurement, hiring contractors, issuing RFPs, etc.), as well as information about any notable dates and/or milestones. **Note:** Grants awards will be announced in Fall 2023 for contracts starting in FY24.

(*1,000 characters*)

1. Budget– In the table below, provide a breakdown, by spending category, of the total funding request for the proposed project.

***One of the following budget tables will show based on the Project Focus selected in question 2.3:***

*Consultant Services for Downtown:*

|  |  |  |
| --- | --- | --- |
| **Category** | **Spending Description** | **Funding Request** |
| Operating | Consultants / Prof. Fees | $25,000 |

Please note that Consultant Services for Downtown grant funds are to be used exclusively for up to $25,000 worth of technical assistance. The consultant used to deliver the technical assistance will be chosen by MDI staff from a list of pre-qualified consultants. The consultant is paid directly through the MDI program.

*Creating District Identity and Municipal Surplus Disposition Plan:*

|  |  |  |
| --- | --- | --- |
| **Category** | **Spending Description** | **Funding Request** |
| Operating | Consultants / Prof. Fees |  |
| Other | Other / Miscellaneous |  |
|  | **Total** |  |

Please note that Real Estate Technical Assistance grant funds are to be used exclusively for up to $50,000 worth of technical assistance. The consultant used to deliver the technical assistance will be chosen by MassDevelopment staff from a list of pre-qualified consultants. The consultant is paid directly by MassDevelopment.

*Implementing a Community Economic Development Program, Community Visioning for Future Placemaking Implementing Locally Driven Placemaking, and Planning & Zoning:*

|  |  |  |
| --- | --- | --- |
| **Category** | **Spending Description** | **Funding Request** |
| Operating | Consultants / Prof. Fees |  |
| Operating | Project Supplies / Materials |  |
| Operating | Meeting Expenses / Events |  |
| Other | Other / Miscellaneous |  |
|  | **Total** |  |

*If Community Visioning for Future Placemaking or Implementing Locally Driven Placemaking show:*

Please note that Commonwealth Places requires a 1:1 local match for all awards, as detailed in the  [Commonwealth Places program guidelines](https://cloud.massdevelopment.com/owncloud/index.php/s/lX2E0al3MJkJzkv). Please note that certain projects may require the match be made through a crowdfunding campaign. For consideration for Commonwealth Places funds, the project budget must include the required match as outlined in the program guidelines.

*Preparing for Site Improvement Construction, Brownfields Site Assessment, Building Rehabilitation Feasibility Study, Municipal Building Construction Feasibility Study and Infrastructure Predevelopment:*

|  |  |  |
| --- | --- | --- |
| **Category** | **Spending Description** | **Funding Request** |
| Operating | Consultants / Prof. Fees |  |
| Capital | Pre-Construction (Design, Engineering, Permitting, Bidding, etc) |  |
| Other | Other / Miscellaneous |  |
|  | **Total** |  |

*Collaborative Workspace Feasibility Study:*

|  |  |  |
| --- | --- | --- |
| **Category** | **Spending Description** | **Funding Request** |
| Operating | Consultants / Prof. Fees |  |
| Other | Other / Miscellaneous |  |
|  | **Total** |  |

All Collaborative Workspace Program grants must be matched one-to-one. This match must be in the form of financial contributions, non-state grants, loans, free/discounted rent, donated building improvement materials, equipment, or other quantifiable (and certifiable) contributions to

the project.

*Collaborative Workspace Fit-Out:*

|  |  |  |
| --- | --- | --- |
| **Category** | **Spending Description** | **Funding Request** |
| Capital | Construction (Including Demolition) |  |
| Capital | Contracting (electrical, HVAC, etc.) |  |
| Capital | Site Equipment/Furnishings |  |
| Other | Other / Miscellaneous |  |
|  | **Total** |  |

All Collaborative Workspace Program grants must be matched one-to-one. This match must be in the form of financial contributions, non-state grants, loans, free/discounted rent, donated building improvement materials, equipment, or other quantifiable (and certifiable) contributions to

the project.

*Brownfields Remediation*

|  |  |  |
| --- | --- | --- |
| **Category** | **Spending Description** | **Funding Request** |
| Capital | Pre-Construction (Design, Engineering, Permitting, Bidding, etc) |  |
| Capital | Environmental Remediation |  |
| Capital | Construction (Including Demolition) |  |
| Capital | Construction Admin |  |
| Other | Other / Miscellaneous |  |
|  | **Total** |  |

*Site Work Construction, Municipal Building Construction and Infrastructure Construction:*

|  |  |  |
| --- | --- | --- |
| **Category** | **Spending Description** | **Funding Request** |
| Capital | Pre-Construction (Design, Engineering, Permitting, Bidding, etc) |  |
| Capital | Environmental Remediation |  |
| Capital | Construction (Including Demolition) |  |
| Capital | Construction Admin |  |
| Capital | Contingency |  |
| Other | Other / Miscellaneous |  |
|  | **Total** |  |

*Building Construction: Rehabilitation of a Blighted or Underutilized Property:*

|  |  |  |
| --- | --- | --- |
| **Category** | **Spending Description** | **Funding Request** |
| Capital | Pre-Construction (Design, Engineering, Permitting, Bidding, etc) |  |
| Capital | Environmental Remediation |  |
| Capital | Construction Admin |  |
| Capital | Building Code Compliance |  |
| Capital | Fire/Life Safety Code Compliance |  |
| Capital | Accessibility Improvements |  |
| Capital | Building Shell Repair |  |
| Capital | Building Stabilization |  |
| Capital | HVAC Improvements or Renovations |  |
| Capital | Interior Demolition or Remediation |  |
| Capital | Contingency |  |
| Other | Other / Miscellaneous |  |
|  | **Total** |  |

*Questions 2.14-2.16 show for all project focuses other than Consultant Services for Downtown:*

1. Provide line item explanations, justifications, and/or notes for the funding requested in question 2.13. Include an explanation of the methods for estimating project costs.

(*1,000 characters*)

1. Will the applicant provide a match to supplement any grant funds awarded?

|  |  |
| --- | --- |
| Yes | No |

* 1. If yes, what is the match amount? \_\_\_\_\_\_\_\_\_\_\_
  2. Describe the source(s) and status of all matching funds.

(*1,000 characters*)

* 1. Does the match include local ARPA funds?

|  |  |
| --- | --- |
| Yes | No |

* 1. If yes, what amount of the match is from local ARPA funds? \_\_\_\_\_\_\_\_\_\_\_

*If Community Visioning for Future Placemaking or Implementing Locally Driven Placemaking show:*

* 1. Will your match include a crowdfunding campaign?

|  |  |
| --- | --- |
| Yes | No |

*Show for all projects except Consultant Services for Downtown, Creating District Identity, Municipal Surplus Property Disposition Plan and Infrastructure:*

1. Do you have a cost estimate or proposal from prospective consultant(s), contractors or other professional services provider(s) for this project?

|  |  |
| --- | --- |
| Yes | No |

*If yes show for all projects except Brownfields and Infrastructure:*

**ATTACHMENT HERE: *Attach a cost estimate or proposal from prospective consultant(s), contractors or other professional services provider(s) for this project.***

*If Brownfield project:*

**ATTACHMENT HERE: *Attach a cost estimate or proposal from prospective consultant(s), professional services provider(s), or contractor(s) for this project. Include a detailed workplan and schedule for the assessment and/or remediation work, prepared by a Mass. Licensed Site Professional in good standing.***

*If Infrastructure Predeveopment project, question will read:*

2.16 Attach a cost estimate or proposed scope of work from a qualified design professional or similar document that details and substantiates the requested grant amount for construction. Applicant may submit a pre-filled worksheet, such as from the MassDOT Construction Project Estimator. Contingencies should be clearly identified using a separate line item(s).

**ATTACHMENT HERE: *Attach cost estimate.***

*If Infrastructure Construction project, question will read:*

2.16 Attach an engineer’s cost estimate or similar document that details and substantiates the requested grant amount for construction. Applicant may submit a pre-filled worksheet, such as from the MassDOT Construction Project Estimator. Contingencies should be clearly identified using a separate line item(s).

**ATTACHMENT HERE: *Attach cost estimate.***

*The following attachment shows for Planning & Zoning projects:*

**ATTACHMENT HERE : A*ttach a map or conceptual drawing showing the location of the planned district and/or project area.***

**SITE INFORMATION:**

*(Questions 2.15-2.21 show if applicant selects Site Preparation, Building, or Infrastructure in 2.3)*

1. Project Address(es): (*If multiple, enter the ID for each parcel individually. Add lines as necessary)*
2. Parcel ID(s): (*If multiple, enter the ID for each parcel individually. Add lines as necessary.*)

**ATTACHMENT HERE: *Attach a map showing the project location.***

1. Describe the project site(s) or building, include square footage, ownership history, past/present uses and operators, conditions of any existing building(s), historic considerations, unique challenges that may exist at this location, etc. If applicable, indicate whether the applicant has site control.

(*1,000 characters*)

1. What type of use is currently allowed by zoning on the project site(s)? (*Check all that apply*)

Industrial/Commercial

Residential – Single Family / Townhome

Residential – Multi-family

Mixed - Use

Other:

None of the above

*Question 2.21 show only for public organizations*

1. Would you like this application to be reviewed for potential 43D expedited permitting designation of the site? (*If site is already designated, check No)*

|  |  |
| --- | --- |
| Yes | No |

**SPECIAL DESIGNATION: HOUSING CHOICE COMMUNITY**

*(Show only for public Housing Choice Community applicants)*

By virtue of the applicant’s Housing Choice Designation, this project may be eligible for the [Housing Choice Grant Program](https://www.mass.gov/how-to/housing-choice-community-grant-program). Please note that the maximum Housing Choice award is $300,000. To be considered for funding through this program, you must complete **Section 8. Special Designation Additional Questions**, located on Form 3.a. of the application**.**

1. Do you intend to complete Form 3.a. Special Designation Additional Questions in order to be considered by the Housing Choice Grant Program?

|  |  |
| --- | --- |
| Yes | No |

**SPECIAL DESIGNATION: RURAL AND/OR SMALL TOWN**

*(Show only for public Rural and Small Town applicants)*

By virtue of the applicant’s status as a Rural and/or Small Town, this project may be eligible for the [Rural and Small Town Development Fund](https://www.mass.gov/service-details/rural-and-small-town-grants). Please note that the maximum Rural and Small Town Development Fund award is $500,000. To be considered for funding through this program, you must complete **Section 8. Special Designation Additional Questions**, located on Form 3.a. of the application**.**

1. Do you intend to complete Form 3.a. Special Designation Additional Questions in order to be considered by the Rural and Small Town Development Fund?

|  |  |
| --- | --- |
| Yes | No |

**DEVELOPMENT CONTINUUM QUESTIONS**

Development Continuum sections will populate based on the selection made in question 2.3

# **SECTION 3: Community Activation and Placemaking Additional Questions**

|  |
| --- |
| ATTENTION APPLICANT: You are seeing the below questions because you made the following selection in question 2.3:  **Development Continuum Category:** Community Activation and Placemaking  **Project Type:**  **Project Focus:**  Before you proceed, we recommend that you read the program guidelines for [[Urban Agenda](https://www.mass.gov/service-details/urban-agenda-grant-program), [Real Estate Services](https://www.massdevelopment.com/what-we-offer/real-estate-services/technical-assistance/https:/www.massdevelopment.com/what-we-offer/real-estate-services/technical-assistance/) Technical Assistance, [Commonwealth Places](https://www.massdevelopment.com/what-we-offer/real-estate-services/commonwealth-places/) or [Massachusetts Downtown Initiative](https://www.mass.gov/service-details/massachusetts-downtown-initiative-mdi)]. |

1. Challenge and Vision – Describe the challenge and how it will be addressed by this project. Please explain how this project will impact the community, neighborhood, or district, as well as the target population. If applicable, include any relevant details about and/or unique challenges related to the downtown, neighborhood, or commercial district and how the proposed work impacts the neighborhood or community served.

(*1,000 characters*)

1. Community Engagement - Describe any community engagement efforts that have informed or will inform this project. Include how the project will promote an inclusive participation process, engage new voices, and/or empower diverse stakeholders. Please identify any stakeholders that have been engaged in this project to date.

(*1,000 characters*)

1. Sustainability– Describe how the work of this group will be carried out and how it will be sustained over time, particularly past the time of this grant or technical assistance request.

(*1,000 characters*)

*Question 3.4 shows only if applicant selects Creating District Identity in 2.3:*

1. Is there a strategic plan or master plan for the area that will be supported by the identified DIF/BID?

Yes  No

*The following attachments show only if applicant selects Consultant Services for Downtown in 2.3:*

**ATTACHMENT HERE: P*rovide a map outlining the area to be addressed.***

**ATTACHMENT HERE: *If applicable, please attach relevant pictures.***

# **SECTION 4: Planning and Zoning Additional Questions**

|  |
| --- |
| ATTENTION APPLICANT: You are seeing the below questions because you made the following selection in question 2.3:  **Development Continuum Category:** Planning and Zoning  **Project Type:**  **Project Focus:**  Before you proceed, we recommend that you read the program guidelines for the [Community Planning Grants Program](https://www.mass.gov/service-details/planning-and-zoning-grants).  *Shows if applicant is a Housing Choice Community:*  As a designated Housing Choice Community, we recommend that you read the program guidelines for the [Housing Choice Grant Program](https://www.mass.gov/how-to/housing-choice-community-grant-program). Please note that the maximum Housing Choice award is $300,000. Please complete Form 3.a. Special Designation Questions to be considered for funding.  *Shows if applicant is a Rural and/or Small Town:*  As a designated Rural and Small Town, we recommend that you read the program guidelines for the [Rural and Small Town Development Fund](https://www.mass.gov/service-details/rural-and-small-town-grants). Please note that the maximum Rural and Small Town Development Fund award is $500,000. Please complete Form 3.a. Special Designation Questions to be considered for funding. |

1. Public Engagement Plan – Describe the community engagement process for the project. Address the following: How are you adding voices to the public engagement process through remote only, hybrid, or in-person engagement? How are you engaging voices that are typically not represented?

(*1,000 characters*)

1. ImplementationStrategy **–** Describe the enactment, adoption, and/or implementation process for the plan(s) completed by this project. Identify any necessary review and/or approval entities such as Planning Board, Council or Selectboard and/or subcommittee Committee, town meeting, etc.

(*1,000 characters*)

# **SECTION 5: Site Preparation Additional Questions**

|  |
| --- |
| ATTENTION APPLICANT: You are seeing the below questions because you made the following selection in question 2.3:  **Development Continuum Category:** Site Preparation  **Project Type:**  **Project Focus:**  Before you proceed, we recommend that you read the program guidelines for [[Site Readiness](https://urldefense.proofpoint.com/v2/url?u=http-3A__www.massdevelopment.com_srp&d=DwIFAw&c=lDF7oMaPKXpkYvev9V-fVahWL0QWnGCCAfCDz1Bns_w&r=dd5S5-xOxY_AsPFOCbX-UbbK6jAx-Avl9_b_yYOSIwE&m=aD6PUaKweSHUCgr935CmBPINebxoONnBa1z2G2PL0OU&s=I3nZojIFoNBYqNFIEtNnldDANm92XLk0d-ZH2OzZbYk&e=) Program, [Real Estate Services](https://www.massdevelopment.com/what-we-offer/real-estate-services/technical-assistance/https:/www.massdevelopment.com/what-we-offer/real-estate-services/technical-assistance/) Technical Assistance or [Brownfield Redevelopment Fund](https://www.massdevelopment.com/what-we-offer/financing/grants/#brownfields)].  *Shows if applicant is a Housing Choice Community:*  As a designated Housing Choice Community, we recommend that you read the program guidelines for the [Housing Choice Grant Program](https://www.mass.gov/how-to/housing-choice-community-grant-program). Please note that the maximum Housing Choice award is $300,000. Please complete Form 3.a. Special Designation Questions to be considered for funding.  *Shows if applicant is a Rural and/or Small Town:*  As a designated Rural and Small Town, we recommend that you read the program guidelines for the [Rural and Small Town Development Fund](https://www.mass.gov/service-details/rural-and-small-town-grants). Please note that the maximum Rural and Small Town Development Fund award is $500,000. Please complete Form 3.a. Special Designation Questions to be considered for funding. |

1. Site Information – provide the assessed value and acreage information. (Estimate as needed)

|  |  |
| --- | --- |
| Current assessed value of the site: |  |
| How many acres are currently developed: |  |
| How many acres have the potential to be developed: |  |
| How many acres cannot be developed: |  |
| Total Site Acreage: |  |

1. Utilities – Describe the availability of utility services to the project site:

|  |  |
| --- | --- |
| Public Water: | ☐ Available ☐ Not Available ☐ Needs Upgrade ☐ Unknown |
| Public Sewer: | ☐ Available ☐ Not Available ☐ Needs Upgrade ☐ Unknown |
| Electricity: | ☐ Available ☐ Not Available ☐ Needs Upgrade ☐ Unknown |
| Natural Gas: | ☐ Available ☐ Not Available ☐ Needs Upgrade ☐ Unknown |

1. Utilities – Describe any other relevant information about existing utilities, deficiencies, and/or needed upgrades to support your project:

­ (*1,000 characters*)

1. Site Access – Describe existing access to the project site and required improvements, noting whether the existing access can accommodate traffic volumes associated with the as-of-right build out of the site.

(*2,000 characters*)

1. Site Marketing Status – Summarize past and current site marketing efforts and indicate if the site is on the market now or has been on the market before.

(*2,000 characters*)

**Site Improvement Questions**

*Questions 5.6 and 5.17 show if applicant selects Preparing for Site Improvement Construction or Site Improvement Construction in 2.3.*

1. Anticipated Size of Development: Indicate the estimated square footage of anticipated development that will be supported with this funding. (*Check one*)

Less than 50,000 SF

50,000 SF – 100,000 SF

200,0000 SF or greater

Not yet determined

1. What is the intended end use for the project site(s)? (*Check all that apply*)

☐ Industrial/Commercial

☐ Residential – Single Family / Townhome

☐ Residential – Multi-Family

☐ Mixed - Use

☐ Other:

**Municipal Surplus Property Questions**

*Questions 5.8-5.11 show if applicant selects Municipal Surplus Property Disposition Plan in 2.3.*

1. Is the property vacant?

|  |  |
| --- | --- |
| Yes | No |

* 1. If not, what are the current uses?

(*1,000 characters*)

1. Is the Surplus Property owned or controlled by the municipality, municipal agency, or other public entity?

|  |  |
| --- | --- |
| Yes | No |

1. Has the property been officially surplused by the municipality?

|  |  |
| --- | --- |
| Yes | No |

*If yes:*

**ATTACHMENT HERE:** Please attached declaration of surplus document

*If no:*

* 1. If No, estimated date to be declared surplus \_\_\_\_\_\_\_\_

1. To-date, have any of the following activities taken place or reports/studies been produced?

|  |  |
| --- | --- |
| Site Survey  Phase One Environmental  Phase Two Environmental  Building Condition Report  Existing Conditions Report  Community Engagement/Visioning Process  Site Concept Plans | Site Concept Plans  Property Appraisal  Market Feasibility Study  Request for Proposals/Qualifications  Neighborhood/District Plan |

**Brownfields Questions**

*Questions 5.12-5.18 show if applicant selects Brownfields Site Assessment or Brownfields Remediation in 2.3.*

|  |  |  |
| --- | --- | --- |
| Is the applicant a statutorily eligible municipality, redevelopment authority, economic development and industrial corporation, or economic development authority? *See program guidelines*. | Yes | No |
| Does the applicant have full site ownership/control or current legal authority to access the site with the ability and a plan to attain full site ownership/control by the time of the project start date? | Yes | No |
| Has the site been previously used in a commercial or an industrial capacity? | Yes | No |
| Has there been any confirmed or suspected release of oil and/or other hazardous materials at the site. | Yes | No |

**If No to any of the above questions, applicant is not eligible to apply in this category.** Applicants answering Yes to all four, may proceed to the next set of questions related to site conditions:

|  |  |  |
| --- | --- | --- |
| Did the Applicant own or operate the Site at the time of the contamination? | Yes | No |
| Did the Applicant cause or contribute to the contamination? | Yes | No |
| Does the applicant have a familial or business relationship with the party responsible for the contamination? | Yes | No |
| Is the site eligible for funding under Chapter 21J – the Underground Storage Tank Fund? | Yes | No |
| Does the applicant have any outstanding administration or judicial enforcement actions? | Yes | No |

**If Yes to any of the above questions, applicant is not eligible to apply in this category.** If No to all five questions, applicant may continue to complete this section for grant consideration.

*If ineligible show:*

|  |
| --- |
| **ATTENTION APPLICANT:** Based on the answers provided to question 5.12, this application is not eligible for funding by the [Brownfield Redevelopment Fund](https://www.massdevelopment.com/what-we-offer/financing/grants/). |

Please upload the below attachments and save in order to access the remaining Brownfields questions:

**ATTACHMENT HERE: *Attach high resolution photo of the project site. Please attach in jpeg format if possible.***

**ATTACHMENT HERE : *Attach evidence of site ownership/control demonstrating permission and/or legal authority to enter site for testing, remediation, etc.***

**ATTACHMENT HERE : *Attach an Assessor’s Card for this property. (Compile all documents into a single file)***

**ATTACHMENT HERE : *Attach any available environmental report(s) for this site.***

1. Enter the following demographic information for the brownfield site, based on best available data.

|  |  |  |  |
| --- | --- | --- | --- |
| Census Tract Number |  | Poverty Rate |  |
| Unemployment Rate |  | Median Household Income |  |

1. Community Support – Describe the community support for this project. Please note key stakeholder groups and their involvement in the project.

(*2,000 characters*)

1. Describe the nature, extent, and specific location of any releases or suspected releases of oil or hazardous material at the site detailing the assumed responsible party for the contamination.

(*2,000 characters*)

1. Describe all adjacent properties and/or natural resources that are potentially affected by contamination at this site:

(*1,000 characters*)

1. List any DEP assigned Release Tracking Numbers associated with the site.

(*1,000 characters*)

1. Describe any known EPA and/or DEP non-compliance history for the site.

(*2,000 characters*)

# **SECTION 6: Building (Vertical Construction) Additional Questions**

|  |
| --- |
| ATTENTION APPLICANT: You are seeing the below questions because you made the following selection in question 2.3:  **Development Continuum Category:** Building  **Project Type:**  **Project Focus:**  Before you proceed, we recommend that you read the program guidelines for [[Underutilized Properties Program](https://www.massdevelopment.com/what-we-offer/real-estate-services/underutilized-properties-program) or [Collaborative Workspace Program](https://www.massdevelopment.com/what-we-offer/financing/grants/)].  *Shows if applicant is a Housing Choice Community:*  As a designated Housing Choice Community, we recommend that you read the program guidelines for the [Housing Choice Grant Program](https://www.mass.gov/how-to/housing-choice-community-grant-program). Please note that the maximum Housing Choice award is $300,000. Please complete Form 3.a. Special Designation Questions to be considered for funding.  *Shows if applicant is a Rural and/or Small Town:*  As a designated Rural and Small Town, we recommend that you read the program guidelines for the [Rural and Small Town Development Fund](https://www.mass.gov/service-details/rural-and-small-town-grants). Please note that the maximum Rural and Small Town Development Fund award is $500,000. Please complete Form 3.a. Special Designation Questions to be considered for funding. |

1. Describe the project’s public purpose in one or more of the following categories: creating jobs, driving innovation, eliminating blight, increasing housing production, supporting economic development projects, increasing the number of commercial buildings accessible to persons with disabilities, conserving natural resources through targeted rehabilitation, and/or reuse of vacant and underutilized property.

(*4,000 characters*)

1. Community Support – Describe any community support for this project, including key stakeholder groups and their involvement in the project.

(*2,000 characters*)

1. Describe the impact that the project would have on the surrounding area.

(*2,000 characters*)

*Questions 6.4-6.5 shows if applicant selects Building Rehabilitation Feasibility Study, Municipal Building Construction Feasibility Study, Rehabilitation of a Blighted or Underutilized Property, or Municipal Building Construction in 2.3.*

1. What additional work and/or adjacent but separate work does the applicant plan to do beyond the work funded by this requested grant? Describe the scope, estimated cost, and timeline. Provide a pro forma and/or business plan if available.

(*2,000 characters*)

**ATTACHMENT HERE : *Attach a pro-forma and/or business plan demonstrating the additional construction work that is planned for this project. If Predevelopment, attach pro-forma or other relevant documents to the scope of the project.***

1. Do you own this property, for which you are applying?

|  |  |
| --- | --- |
| Yes | No |

* 1. If no, describe how you will acquire the property prior to grant award. Specify timing of closing and other key dates.

(*2,000 characters*)

**Building Rehabilitation Questions**

*Questions 6.6-6.11 show if applicant selects Building Rehabilitation Feasibility Study or Rehabilitation of a Blighted or Underutilized Property in 2.3.*

1. Building Details – Complete the table to below to outline the specific characteristics of the building, particularly as they relate to the current vacancy rates and/or uses of the property.

|  |  |  |  |
| --- | --- | --- | --- |
| In what year was the property built? | | | (*4-digit year*) |
| How long (years) has the property been in its current ownership? | | |  |
| What is the property’s current assessed value? | | | $ |
| What is the property’s appraised value? | | | $ |
| If known, what was the date of the most recent appraisal? | | |  |
| How many floors (stories) does the property have? | | |  |
| How many square feet of the property can potentially be occupied? | | |  |
| Is the property currently vacant? | | | Yes  No |
| What is the property’s overall vacancy rate (%)? | | |  |
| Check which floors exist in the building, and specify the vacancy rate and use(s) by floor. | | | |
| Basement | % Vacant: | Present Use: | |
| 1st Floor | % Vacant: | Present Use: | |
| 2nd Floor | % Vacant: | Present Use: | |
| 3rd Floor | % Vacant: | Present Use: | |
| 4th Floor & Above | % Vacant: | Present Use: | |

1. Additional information/comments about the building details, as needed:

(*1,000 characters*)

1. Can the entire property be used/occupied for the highest and best purposes?

|  |  |
| --- | --- |
| Yes | No |

* 1. If the entire property cannot be used/occupied for the highest and best purposes, describe whether any part of the property, and how much, can be used and/or developed. Note if not applicable.

(*1,000 characters*)

1. Is the building (or any part of it) condemned?

|  |  |
| --- | --- |
| Yes | No |

* 1. If the building, or any part of it, is condemned, provide an explanation. Note if not applicable. (*1,000 characters*)

1. Have there been any code enforcement actions taken in past 5 years?

|  |  |
| --- | --- |
| Yes | No |

* 1. If there have been any code enforcement actions in the past five years, provide an explanation. Note if not applicable.

(1*,000 characters*)

1. Are property taxes current?

|  |  |
| --- | --- |
| Yes | No |

* 1. If not, is the property currently in tax title?

|  |  |
| --- | --- |
| Yes | No |

* 1. If the property taxes are not current and/or the property is currently in tax title, provide an explanation. Note if not applicable.

(*1,000 characters*)

**Building Rehabilitation and Municipal Construction Capital Questions**

*Question 6.12 shows if applicant selects Rehabilitation of a Blighted or Underutilized Property in 2.3.*

1. For capital improvement request: A copy of each plan will be required if project is recommended. (*Check all that apply*)

|  |  |
| --- | --- |
| **Capital Improvement Item** | **Plans Available?** |
| Building Code Compliance | Yes  No  Not Applicable |
| Fire/Life Safety Code Compliance | Yes  No  Not Applicable |
| Accessibility Improvements | Yes  No  Not Applicable |
| Building Shell Repair | Yes  No  Not Applicable |
| Building Stabilization | Yes  No  Not Applicable |
| HVAC Improvements or Renovations | Yes  No  Not Applicable |
| Interior Demolition or Remediation | Yes  No  Not Applicable |
| Other. Specify: | Yes  No  Not Applicable |

*Questions 6.13-6.18 show if applicant selects Rehabilitation of a Blighted or Underutilized Property, or Municipal Building Construction in 2.3.*

1. What percentage of the project design is completed? (Ex. 0%, 25%)

**ATTACHMENT HERE : *Attach construction drawings and/or design documents that clearly demonstrate the proposed work.***

1. Which of the following permits, licenses, and/or approvals are required for this project? (*Check all that apply*) For selected items, indicate if secured and the actual or anticipated dates of filing and issuance.

|  |  |  |  |
| --- | --- | --- | --- |
| **Check if Required** | **Check if Secured** | **Filing Date (Actual or Anticipated)** | **Decision Date (Actual or Anticipated)** |
| Article 97 Land Disposition |  |  |  |
| Chapter 91 License |  |  |  |
| 401 Water Quality Certification |  |  |  |
| Superseding Order of Conditions |  |  |  |
| Water Management Act Permit |  |  |  |
| MassDOT Access Permit |  |  |  |
| Mass Historic Commission Review |  |  |  |
| Planning Board |  |  |  |
| Conservation Commission |  |  |  |
| Zoning Board |  |  |  |
| Sewer Extension Permit |  |  |  |
| Utility Relocation |  |  |  |
| Building Permit |  |  |  |
| Other. Specify: |  |  |  |

1. Is the financing or other funding sources for this project fully secured?

|  |  |
| --- | --- |
| Yes | No |

* 1. If Yes, provide details on all sources and if there are any significant contingencies.

(*1,000 characters*)

* 1. If No, indicate the status of all sources, if there are any significant contingencies, and by when the applicant expects to secure the resources needed to proceed.

(*1,000 characters*)

1. What is the proposed plan for managing the construction?

(*1,000 characters*)

1. Describe the experience of the proposed construction team with similar projects:

(*1,000 characters*)

1. Indicate all of the applicable characteristics of the development project:

|  |  |
| --- | --- |
| Total area (in acres) to be developed: |  |
| Total value of private investment leveraged: |  |
| Square footage of office and/or retail space to be created, including restaurants: |  |
| Square footage of industrial space to be created, including warehouses: |  |
| Total square footage of all commercial developments: |  |
| Number of NEW market-rate housing units to be created: |  |
| Number of NEW affordable housing units to be created: |  |
| Total number of housing units to be created: |  |
| Number of NEW part time jobs to be created: |  |
| Number of NEW full time jobs to be created: |  |
| Total jobs to be created: |  |
| Number of construction jobs that will be supported: |  |
| Number of full time jobs to be retained as direct result of this project: |  |

**Collaborative Workspace Questions**

*Questions 6.19-6.31 show if applicant selects Collaborative Workspace Feasibility / Predevelopment or Collaborative Workspace Fit-Out in 2.3.*

1. What is the **legal name** of the intended recipient? (Recipient must be a corporation, LLC, LLP, or other form of business organization registered with the Secretary of the Commonwealth. Please note any fiscal agent relationships)

(*500 characters*)

**ATTACHMENT HERE : *Attach documentation evidencing that status and any articles of organization, or partnership documents.***

1. What is the **commonly used name** of the Collaborative Workspace?
2. Which of the following best describes the collaborative workspace?

|  |  |
| --- | --- |
| ☐ Coworking Space  ☐ Maker Space  ☐ Arts-Related Space | ☐ Commercial Kitchen  ☐ Incubator Space  ☐ Other. Specify: |

1. Describe the functions of the space.

(*1,000 characters*)

1. How long has the space been operating?

(*500 characters*)

1. How many members or users does the space currently have?

(*500 characters*)

1. Which of the following best describes the applicant?

Collaborative Workspace Operator

Building Owner

Both

**ATTACHMENT HERE : *Attach a letter of commitment from the building owner certifying that the owner will use best efforts to rent the space specified in the grant to a collaborative workspace for the remaining term of the lease at the current lease rates, if the current operator/applicant is unable to continue operations. (IF Collaborative Workspace Operator in 6.32)***

**ATTACHMENT HERE: *Attach a copy of an executed lease. (IF Collaborative Workspace Operator in 6.32)***

**ATTACHMENT HERE: *Attach proof of ownership in the form of a deed. (IF Building Owner or Both in 6.32)***

1. Describe your connection to the user community. Please describe the **potential new users** in your community, as well as your **capacity to accept new users** and the **revenue per member** that you expect to generate.

(*1,000 characters*)

1. Please describe the innovation ecosystem in the community in which the collaborative space operates or plans to operate. Please include relevant groups, industries, organizations, and individuals.

(*1,000 characters*)

1. How does, or how will, your space support people underserved in the innovation community? (Specifically, those from diverse and/or economically distressed backgrounds or other communities of need.)

(*1,000 characters*)

1. How does your space fit into this ecosystem? Citing specific examples of other spaces, please describe how your space is complementary to, rather than duplicative of, other coworking spaces in the ecosystem. Note any existing partnerships.

(*1,000 characters*)

**ATTACHMENT HERE : *Attach letters of support from key partners.***

1. How will this project result in economic growth, entrepreneurial activity, job creation and business growth? Include a description of supportive programming offered.

(*1,000 characters*)

**ATTACHMENT HERE : *Attach an operating budget for the space’s current fiscal year, and its most recent income statement and balance sheet, if available. If the space is not yet operational, attach a pro forma operating budget for the first year of operation.***

1. Required 1:1 Grant Match

|  |  |  |
| --- | --- | --- |
| Funds Raised (Cash on Hand) | $\_\_\_\_\_\_\_\_ | **ATTACHMENT: See below** |
| Rent Discount Amount | $\_\_\_\_\_\_\_\_ | **ATTACHMENT: See below** |
| Donated Equipment | $\_\_\_\_\_\_\_\_ | **ATTACHMENT: See below** |

**ATTACHMENT HERE : *Attach an explanation of the source of funds with commitment letters, bank statements or other evidence that these funds have been committed or secured and are available for use on the project.***

**ATTACHMENT HERE : *If applicable, attach a signed lease, a letter from the landlord, and three rent comps demonstrating the value of the rent discount.***

**ATTACHMENT HERE : *If applicable, attach a list of donated equipment and how you arrived at its value, while accounting for depreciation.***

**ATTACHMENT HERE : A*ttach a photograph of the interior and exterior of the proposed or existing space***

**ATTACHMENT HERE : *Attach a map showing the location of the space with labels showing other significant businesses or assets in the neighborhood.***

# **SECTION 7: Infrastructure (Horizontal Construction) Additional Questions**

|  |
| --- |
| ATTENTION APPLICANT: You are seeing the below questions because you made the following selection in question 2.3:  **Development Continuum Category:** Infrastructure  **Project Type:**  **Project Focus:**  Before you proceed, we recommend that you read the program guidelines for the [MassWorks Infrastructure Program](https://www.mass.gov/massworks).  *Shows if applicant is a Housing Choice Community:*  As a designated Housing Choice Community, we recommend that you read the program guidelines for the [Housing Choice Grant Program](https://www.mass.gov/how-to/housing-choice-community-grant-program). Please note that the maximum Housing Choice award is $300,000. Please complete Form 3.a. Special Designation Questions to be considered for funding.  *Shows if applicant is a Rural and/or Small Town:*  As a designated Rural and Small Town, we recommend that you read the program guidelines for the [Rural and Small Town Development Fund](https://www.mass.gov/service-details/rural-and-small-town-grants). Please note that the maximum Rural and Small Town Development Fund award is $500,000. Please complete Form 3.a. Special Designation Questions to be considered for funding. |

1. Is the project site located at or within a half mile of a transit station (defined as a subway, light rail, ferry, or commuter rail station), and/or is located in a zoning district that allows multi-family by right in accordance with Section 3A of MGL c.40A?

|  |  |
| --- | --- |
| Yes | No |

* 1. If yes, identify the name of the transit station(s):

(*500 characters*)

**ATTACHMENT HERE: *Attach an aerial view map showing the limits of work of the public project site in relation to the limits of work of the private project site (if applicable). Clearly delineate the two.***

**ATTACHMENT HERE: *Attach a site plan, conceptual drawing, and/or construction design that clearly demonstrates the location and proposed work.***

1. Is the project site publicly owned?

|  |  |
| --- | --- |
| Yes | No |

* 1. If Yes, describe the type of public ownership (*Check all that apply*).

|  |  |  |
| --- | --- | --- |
| Public Land | Right of Way | Other. Specify: **\_\_\_\_\_\_\_\_** |
| Leasehold | Easement |  |

* 1. If No, explain how the site will be publicly acquired/owned by the project start date or if public ownership is not applicable.

(*1,000 characters*)

1. If the applicant is not the municipality, does the applicant have a letter from the municipal CEO outlining knowledge of and support for the proposed project?

|  |  |  |
| --- | --- | --- |
| Yes | No | N/A |

If Yes:

**ATTACHMENT HERE: *Attach the support letter from the municipal CEO.***

*Question 7.4 does not show if applicant selects Small Town Road Improvements to Enhance Public Safety (aka STRAP) in 2.3.*

1. Indicate which, if any, of the following housing and/or economic development tools have been adopted within the project site.

40R/40Y Smart Growth or Starter Home District

43D Expedited Permitting District

Approved Urban Renewal Plan

District Improvement Financing (DIF)/Tax Increment Financing (TIF)

Economic Opportunity Area (EOA)

Current or ‘Graduated’ Transformative Development Initiative (TDI) District

DHCD Approved Housing Production Plan

**Infrastructure Predevelopment Questions**

*Questions 7.5-7.8 show if applicant selects Preconstruction: Design / Engineering Documents Only in 2.3.*

1. Will this predevelopment work support one or more specific private developments?

|  |  |
| --- | --- |
| Yes | No |

*If yes:*

* 1. Describe how the predevelopment work will support one or more specific private developments.

(*1,000 characters*)

1. When do you anticipate completing the design phase of the work?
2. When do you expect the public infrastructure to break ground?

(*500 characters*)

1. Do you have a private developer identified?

|  |  |
| --- | --- |
| Yes | No |

* 1. If Yes, provide information about private developer:

|  |  |  |  |
| --- | --- | --- | --- |
| Proponent Entity/Company: |  | Contact Name/Title: |  |
| Project Name: |  | Phone: |  |
| Project Address: |  | Email: |  |

* 1. When do you expect the private development (s) to break ground?

(*500 characters*)

**Infrastructure Construction Questions**

*Questions 7.9-7.16 show if applicant selects Infrastructure Construction in 2.3.*

1. Provide the planned schedule/timeline for the public infrastructure project.

|  |  |  |
| --- | --- | --- |
| **Milestone** | **Start Date** | **End Date** |
| Design / Engineering / Permitting |  |  |
| Bidding Open / Close |  |  |
| Construction Start |  |  |
| 50% Construction |  |  |
| Construction Complete |  |  |

1. What percentage of the public infrastructure project design is completed? %
2. Which of the following permits, licenses, and/or approvals are required for the public infrastructure project? For each selected item, indicate if secured and the actual or anticipated dates of filing and issuance. *Note: Please do not include any requirements related to associated private development.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Check if Required** | **Check if Secured** | **Filing Date (Actual or Anticipated)** | **Decision Date (Actual or Anticipated)** |
| Article 97 Land Disposition |  |  |  |
| Chapter 91 License |  |  |  |
| 401 Water Quality Certification |  |  |  |
| Superseding Order of Conditions |  |  |  |
| Water Management Act Permit |  |  |  |
| MassDOT Access Permit |  |  |  |
| Mass Historic Commission Review |  |  |  |
| Planning Board |  |  |  |
| Conservation Commission |  |  |  |
| Zoning Board |  |  |  |
| Sewer Extension Permit |  |  |  |
| Utility Relocation |  |  |  |
| Building Permit |  |  |  |
| Other. Specify: |  |  |  |

1. Is the construction work planned as a non-participating scope item on a MassDOT TIP project?

|  |  |
| --- | --- |
| Yes | No |

* 1. If yes, identify the TIP Project Number, if available, and indicate whether this project will be entirely or partially included in the non-participating scope of work.

1. Will the project include work on a state roadway and/or at an intersection with a state roadway?

|  |  |
| --- | --- |
| Yes | No |

* 1. If Yes, identify the state roadway(s) involved:

(*500 characters*)

1. Does the public infrastructure project meet or exceed any of the thresholds for MEPA review set forth in 301 CMR 11.03?

|  |  |
| --- | --- |
| Yes | No |

* 1. If Yes, list any filings that the proponent has made or plans to make with the MEPA Office for the project, and indicate whether the review is expected to be full scope or limited scope.

(*1,000 characters*)

**ATTACHMENT HERE: *Attach a copy of the project's output report from the*** ***Commonwealth’s online Climate Resilience Design Standards Tool.***

**The Climate Resilience Design Standards Tool guides users to input basic project information and will generate a downloadable report for attachment. Please note that only information related to the public infrastructure portion of the project should be entered into the tool. After clicking “Submit Project” inside the tool, the project information will be saved, and a “Download Report” icon will appear for the user. The entire process, exclusive of registration, should take no more than 15 minutes per project. Click**[***HERE***](https://resilientma.org/rmat_home/designstandards/)**to register and access the Climate Resilience Design Standards Tool .**

1. Does the project’s Climate Resilience Design Tool report provide a “High” preliminary exposure score for either Sea Level Rise/Storm Surge, Extreme Precipitation - Urban Flooding, or Extreme Precipitation - Riverine Flooding (see above ATTACHMENT)?

|  |  |
| --- | --- |
| Yes | No |

* 1. If yes, please specify the design storm (return period) that the applicant intends to use in the engineering of the public infrastructure project (e.g., the 25-year storm or 4% storm). Additionally, please describe any design strategies that the public infrastructure project will incorporate, and/or that the applicant plans to investigate as part of the project’s design, to mitigate the potential impacts of future flooding.

(*1,000 characters*)

1. Will the public infrastructure project result in a net increase in impervious area?

|  |  |
| --- | --- |
| Yes | No |

* 1. If yes, please describe any design strategies that the public infrastructure project will incorporate, and/or that the applicant plans to investigate as part of the project’s design, to mitigate a heat island effect.

(*1,000 characters*)

**Small Town Road Improvements to Enhance Public Safety Questions**

*Questions 7.17-7.19 show if applicant selects Small Town Road Improvements to Enhance Public Safety (aka STRAP) in 2.3.*

1. If available, please provide the pavement condition rating for the road.
2. Describe existing infrastructure conditions and public safety concerns related to this road improvement project. If relevant, please specify accident hazards, traffic details, instances of road closure and impact on emergency vehicles, etc.

(*2,000 characters*)

**ATTACHMENT HERE : *Attach images of the road, particularly focused on the areas that create the public safety hazards and areas in which the work with be focused.***

1. Please complete the below table with information from the last calendar year:

|  |  |
| --- | --- |
| Vehicles Per Day |  |
| Number of Accidents |  |
| Number of Fatalities |  |
| Number of Emergency Calls |  |
| Number of Days Road was Fully Closed |  |
| Number of Days Road was Partially Closed |  |

**Public Infrastructure to Support Growth Questions**

*Questions 7.20-7.35 show if applicant selects Public Infrastructure to Support Growth in 2.3.*

1. Does the public infrastructure project support an imminent private development?

|  |  |
| --- | --- |
| Yes | No |

*If yes show all remaining questions. If no, end form and show the following note* *non-Housing Choice and/or non-Rural and Small Town applicants:*

Please be aware that to be competitive for a [MassWorks](https://www.mass.gov/orgs/massworks) Implementation grant, the project will need to be advanced in design and permitting, while also leveraging a private development that is imminent and closely linked to the public improvements. For projects that do not yet have private development identified, applicants should consider applying for an Infrastructure Predevelopment grant to support the creation of design and/or engineering documents.

1. Select the one category below that best describes the type of development that is being supported by the public infrastructure project proposed in this section:

Mixed-Use Development (Residential with office, retail, and/or commercial development)

Housing Development (Residential only)

Economic Development with job creation and/or retention (No Residential/Housing)

1. Does the private development project, identified herein, meet or exceed the MEPA thresholds as set forth in 301 CMR 11.03?

|  |  |
| --- | --- |
| Yes | No |

* 1. If Yes, list any filings that the proponent has made or plans to make with the MEPA Office for the project, and indicate whether the review is expected to be full scope or limited scope.

(*1,000 characters*)

1. Will the public infrastructure improvements directly serve or connect to the private development?

|  |  |
| --- | --- |
| Yes | No |

1. Will the public infrastructure project be on parcels of land that are either, a) part of the private development project site, or b) adjacent to the private development project site?

|  |  |
| --- | --- |
| Yes | No |

1. Will the public infrastructure project involve the construction of improvements that are required as a condition in a state/local permit or approval for a private development project, including Section 61 findings?

|  |  |
| --- | --- |
| Yes | No |

* 1. If Yes, please explain.

(*500 characters*)

1. Describe the private development project(s), including the scope of the development, expected public benefits, and project phasing, if any.

(*4,000 characters*)

1. Is this private development project allowed by-right in the municipality’s current zoning? **Note:** Uses requiring a special permit do not qualify as allowed by-right.

|  |  |
| --- | --- |
| Yes | No |

* 1. If no, is a zoning amendment required for this private development project to move forward?

|  |  |
| --- | --- |
| Yes | No |

1. What percentage of the project design is completed for the private development? %
2. Does the private development have all required permits and approvals to commence construction?

|  |  |
| --- | --- |
| Yes | No |

* 1. If No, identify what permits and/or approvals are outstanding and the anticipated timeframe within which they will be secured.

(*2,000 characters*)

1. Provide the anticipated schedule/timeline for the private development project.

|  |  |  |
| --- | --- | --- |
| **Milestone** | **Start Date** | **End Date** |
| Design/Engineering/Permitting |  |  |
| Construction Start |  |  |
| 50% Construction |  |  |
| Construction Complete |  |  |

1. Is the private development project’s financing fully secured?

|  |  |
| --- | --- |
| Yes | No |

* 1. If No, indicate the status of the financing, if there are any significant contingencies, and by when the private developer expects to secure the resources needed to proceed.

(*1,000 characters*)

1. Complete the table below with the specific housing production and/or economic growth impact that is expected to result from the **primary private development project – the single private project that will be most directly leveraged by the public infrastructure work.**

|  |  |
| --- | --- |
| **General Information** |  |
| Development Address (or Parcel ID) |  |
| Total estimated construction value ($) of the private development project: |  |
| **Information on Commercial Development** |  |
| Square footage of office and/or retail space to be created, including restaurants: |  |
| Square footage of industrial space to be created, including warehouses: |  |
| Total square footage of commercial space to be created: |  |
| **Information on Residential Development** |  |
| Lot area (acres) of the housing and/or mixed-used private development project: |  |
| Number of NEW market-rate units to be created for rent/lease: |  |
| Number of NEW market-rate units to be created for homeownership: |  |
| Number of NEW affordable units to be created for rent/lease: |  |
| Number of NEW affordable units to be created for homeownership: |  |
| Total number of all NEW housing units to be created: |  |
| Total density (units/acre) of all NEW housing units: |  |
| If any affordable, specify lowest income limit used (65% AMI, 80% AMI, etc.): | % |
| **Information on Job Creation** |  |
| Number of NEW permanent full-time jobs to be created: |  |
| Number of NEW permanent part-time jobs to be created: |  |
| Total number of all NEW permanent jobs to be created: |  |
| Total construction jobs to be supported by the private development project(s): |  |
| Total existing full-time jobs to be retained as direct result of this project: |  |

1. Provide the following information for the primary private development project most directly leveraged by this infrastructure project, including the entity name and contact information.

|  |  |  |  |
| --- | --- | --- | --- |
| Proponent Entity/Company: |  | Contact Name/Title: |  |
| Project Name: |  | Phone: |  |
| Project Address: |  | Email: |  |

1. Can the private development proceed independently without the public infrastructure project?

|  |  |
| --- | --- |
| Yes | No |

**ATTACHMENT HERE : *Attach a letter from the private development proponent confirming and explaining this answer.***

1. Is the infrastructure project associated with any additional private development projects?

|  |  |
| --- | --- |
| Yes | No |

*If yes:*

* 1. Complete the table below with the specific housing production and/or economic growth impact that is expected to result from the additional private development project(s).

|  |  |
| --- | --- |
| **General Information** |  |
| Development Address (or Parcel ID) |  |
| Total estimated construction value ($) of the private development project: |  |
| **Information on Commercial Development** |  |
| Square footage of office and/or retail space to be created, including restaurants: |  |
| Square footage of industrial space to be created, including warehouses: |  |
| Total square footage of commercial space to be created: |  |
| **Information on Residential Development** |  |
| Lot area (acres) of the housing and/or mixed-used private development project: |  |
| Number of NEW market-rate units to be created for rent/lease: |  |
| Number of NEW market-rate units to be created for homeownership: |  |
| Number of NEW affordable units to be created for rent/lease: |  |
| Number of NEW affordable units to be created for homeownership: |  |
| Total number of all NEW housing units to be created: |  |
| Total density (units/acre) of all NEW housing units: |  |
| If any affordable, specify lowest income limit used (65% AMI, 80% AMI, etc.): | % |
| **Information on Job Creation** |  |
| Number of NEW permanent full-time jobs to be created: |  |
| Number of NEW permanent part-time jobs to be created: |  |
| Total number of all NEW permanent jobs to be created: |  |
| Total construction jobs to be supported by the private development project(s): |  |
| Total existing full-time jobs to be retained as direct result of this project: |  |

* 1. Provide the following information for the primary private development project most directly leveraged by this infrastructure project, including the entity name and contact information.

|  |  |  |  |
| --- | --- | --- | --- |
| Proponent Entity/Company: |  | Contact Name/Title: |  |
| Project Name: |  | Phone: |  |
| Project Address: |  | Email: |  |

* 1. Can the private development(s) proceed independently without the public infrastructure project?

|  |  |
| --- | --- |
| Yes | No |

**ATTACHMENT HERE: *Attach a letter from the private development proponent confirming and explaining this answer. Include letter(s) from additional private developer(s) noted above*.**

# **SECTION 8: Special Designation Additional Questions**

**SPECIAL DESIGNATION: RURAL AND/OR SMALL TOWN**

*Only Show if applicant is a Public Entity with Rural and/or Small Town designation that selects Planning and Zoning, Site Preparation, Building or Infrastructure in 2.3 and answers “Yes” to question 2.23:*

If you would like this application to be considered for a Rural and Small Town award, you must complete the following questions related to strategies for rural and small town priorities.

1. Does the project involve more than one (1) community allowing for shared services and/or peer to peer learning opportunities and/or housing or economic development opportunities meaningful to all affected communities?

|  |  |
| --- | --- |
| Yes | No |

* 1. If YES, describe how, including, where applicable, any impacts to infrastructure, housing, shared economic development, or other local impact that both communities will experience, and its significance to the region and partnering communities.

(*1,000 characters*)

1. Does the project directly relate to the design, enhancement or provision of water and sanitary sewer infrastructure?

|  |  |
| --- | --- |
| Yes | No |

* 1. If YES, describe the expected impact, including, where applicable, how many housing units, businesses, and number of residents, consumers, workers, students, etc. may be impacted by this project, and its significance to the region.

(*1,000 characters*)

1. Does the project directly relate to transportation infrastructure and transportation mobility?

|  |  |
| --- | --- |
| Yes | No |
|  |  |

* 1. If YES, describe how, where applicable, the project will create safer roads, greater multimodal transit access, greater opportunity for economic development or connectivity between homes and businesses, and its significance to the region.

(*1,000 characters*)

1. Does the project address the unique challenges faced by rural and small towns to create jobs, invest in their workforce, retain workers/jobs, and implement other economic development goals specific to rural communities and small towns?

|  |  |
| --- | --- |
| Yes | No |

* 1. If YES, describe how, where applicable, the project will impact direct economic development including but not limited to job growth and/or retention, land use and working lands, population trends, and its significance to the region.

(*1,000 characters*)

1. Does the project directly relate to addressing the impacts of climate change and enhance the capacity to provide or create mitigative solutions in rural and small towns??

|  |  |
| --- | --- |
| Yes | No |

* 1. If YES, describe how, where applicable, the project equips the municipality with the resources to address the impacts of climate change and or improve resiliency for the health and safety of residents, and its significance to the region.

(*1,000 characters*)

**SPECIAL DESIGNATION: Housing Choice Community**

*Only Show if applicant is a Public Entity with Housing Choice designation that selects Planning and Zoning, Site Preparation, Building or Infrastructure in 2.3 and answers “Yes” to question 2.22:*

1. Eligibility Questions

|  |  |  |  |
| --- | --- | --- | --- |
| H.1.a. | Does the community have an ACTIVE housing moratorium? | Yes | No |
| H.1.b. | Does the community have a housing restriction bylaw or ordinance that limits housing production to less than 5% per year? | Yes | No |

**If Yes to any of the above questions, community is not eligible to apply in this category.** Applicants answering No to BOTH, may proceed by answering the following questions:

|  |  |  |  |
| --- | --- | --- | --- |
| H.1.c. | Has the community completed an ADA Self Evaluation Plan and/or Transition Plan? | Yes | No |
| H.1.d. | If no, has the community executed a memorandum of agreement to complete an ADA Self Evaluation and/or Transition Plan within 5 years? | Yes | No |
| H.1.e. | If no, is the community willing to execute a memorandum of agreement to complete an ADA Self Evaluation and/or Transition Plan within 5 years? | Yes | No |

**If No to all three questions above, community is not eligible to apply in this category.** If Yes to any question, applicant may continue to complete this section for grant consideration.

***(If eligible, show questions 8.2-8.3)***

**BONUS POINTS** – Bonus points will be awarded in this section for the community's implementation of Housing Choice Best Practices. Bonus points are available for up to fourteen (14) Best Practices. As applicable, select the best practice from the list below, provide a brief description, and attach the requested information. Descriptions should highlight how Best Practices has increased Housing Units in the community. Upload only the pertinent sections of the zoning ordinances or bylaw that apply to each selected best practice.

1. Has the community implemented any of the following **Zoning Best Practices** in the last five years? For each selection, provide a brief description and attach the requested evidence.
   1. **Multi-Family allowed by right**: Have at least one zoning district that allows multifamily by right (in addition to 40R districts) where there is capacity to add units and that allows for family housing that is not age restricted and does not restrict units with more than 2 bedrooms (or have a pattern of approving such developments over the last 5 years).

|  |  |
| --- | --- |
| Yes | No |

If Yes, please provide a brief description:

(250 characters)

**ATTACHMENT HERE**: *Attach a copy of the relevant current zoning section(s) and/or other evidence that demonstrates implementation of this best practice, include a map if necessary/available.*

* 1. **Inclusionary Zoning, with density bonus**: Have Inclusionary Zoning that provides for reasonable density increases so that housing is not unreasonable precluded.

|  |  |
| --- | --- |
| Yes | No |

If Yes, please provide a brief description:

(250 characters)

**ATTACHMENT HERE**: *Attach a copy of the relevant current zoning section(s) and/or other evidence that demonstrates implementation of this best practice, include a map if necessary/available.*

* 1. **40R or Starter Home District**: Have an approved 40R Smart Growth or Starter Homes district that remains in compliance with the 40R regulations. Please note, that if your community repealed its only 40R district, it no longer qualifies for this best practice.

|  |  |
| --- | --- |
| Yes | No |

If Yes, please provide a brief description:

(250 characters)

**ATTACHMENT HERE**: *Attach a copy of the relevant current zoning section(s) and/or other evidence that demonstrates implementation of this best practice, include a map if necessary/available.*

* 1. **Mixed-Use or Cluster Development**: Have zoning that allows mixed use or cluster/Open Space Residential development by right that is not part of a 40R district (or have a pattern of approving such developments over the last 5 years).

|  |  |
| --- | --- |
| Yes | No |

If Yes, please provide a brief description:

(250 characters)

**ATTACHMENT HERE**: *Attach a copy of the relevant current zoning section(s) and/or other evidence that demonstrates implementation of this best practice, include a map if necessary/available.*

* 1. **Accessory Dwelling Units (ADU)**: Have zoning that allows for accessory dwelling units by right (or have a pattern of approving ADUs over the last 5 years).

|  |  |
| --- | --- |
| Yes | No |

If Yes, please provide a brief description:

(250 characters)

**ATTACHMENT HERE**: *Attach a copy of the relevant current zoning section(s) and/or other evidence that demonstrates implementation of this best practice, include a map if necessary/available.*

* 1. **Multi-Family Parking Requirement**: Reduced parking requirement for Multi-Family units within the last 5 years or require no more than 1 parking space per unit for multifamily units.

|  |  |
| --- | --- |
| Yes | No |

If Yes, please provide a brief description:

(250 characters)

**ATTACHMENT HERE**: *Attach a copy of the relevant current zoning section(s) and/or other evidence that demonstrates implementation of this best practice, include a map if necessary/available.*

1. Has the community implemented any of the following **Other Best Practices** in the last five years? For each selection, provide a brief description and attach the requested evidence.
   1. **Local funding sources that support housing**: Designated local resources for housing such as established an Affordable Housing Trust, donated land, or spent substantial Community Preservation Act (CPA) funds for community housing over the last 5 years.

|  |  |
| --- | --- |
| Yes | No |

If Yes, please provide a brief description:

(250 characters)

**ATTACHMENT HERE**: *Attach a list of community housing expenditures over the last 5 years, include a map if necessary/available.*

* 1. **Land Use Board training**: Provide evidence of education and training for a majority of members on a land use board (Planning Board, Board of Appeals, Select Board and/or City Council) from Citizen Planner Training Collaborative, Massachusetts Housing Partnership’s Housing Institute, Community Development Partnership’s Lower Cape Housing Institute, or Urban Land Institute’s (ULI’s) Urban Plan Public Leadership Institute over the last 5 years.

|  |  |
| --- | --- |
| Yes | No |

If Yes, please provide a brief description:

(250 characters)

**ATTACHMENT HERE**: *Attach evidence of formal education and trainings, and/or specific information about any comparable trainings, received by the local land use board(s).*

* 1. **SHI at or above 10%**. Have units currently eligible for inclusion in the Subsidized Housing Inventory (SHI) that equal or exceed 10% of total year round housing stock according to the DHCD subsidized housing inventory, where such 10% was not reached after local comprehensive permit(s) were denied or conditioned and had the denial or condition overturned by the Housing Appeals Court (HAC).

|  |  |
| --- | --- |
| Yes | No |

If Yes, please provide a brief description:

(250 characters)

If SHI at or above 10%, indicate current SHI (%): \_\_\_\_\_\_\_\_\_\_\_

**ATTACHMENT HERE**: *Attach a copy of the current SHI for your community.*

* 1. **SHI increased at least 2.5%**. Have increased your community’s SHI by at least 2.5% points in the last 5 years where such increase was not reached after local comprehensive permit(s) were denied or conditioned and had the denial or conditions overturned by HAC.

|  |  |
| --- | --- |
| Yes | No |

If Yes, please provide a brief description:

(250 characters)

If SHI increased at least 2.5%, indicate the SHI increase: \_\_\_\_\_\_\_\_\_\_\_

**ATTACHMENT HERE**: *Attach evidence of at least a 2.5% increase in SHI in last five years.*

* 1. **Community Compact, Housing Best Practices**: Selected a housing best practice as part of a Community Compact*.*

|  |  |
| --- | --- |
| Yes | No |

If Yes, please provide a brief description:

(250 characters)

**ATTACHMENT HERE**: *Attach evidence of Community Compact Housing Best Practice(s).*

* 1. **Locally adopted programs that support housing**: Participate in the Housing Development Incentive Program (HDIP), have adopted an Urban Center Housing Tax Increment Financing district, approved District Improvement Financing (DIF) related to housing, have adopted an Urban Renewal Plan that includes a significant Housing element.

|  |  |
| --- | --- |
| Yes | No |

If Yes, please provide a brief description:

(250 characters)

**ATTACHMENT HERE**: *In Attach evidence of participation in related programs.*

* 1. **Property tax relief / Community Impact Fee**: Have adopted local option property tax relief programs for income eligible seniors either as provided for by statute (MGL c. 59 section 5) or through a home rule petition; OR have adopted a Community Impact Fee for short term rentals (MGL c. 64G, section 3D) where your community has committed in writing to using a portion of such revenues for affordable housing.

|  |  |
| --- | --- |
| Yes | No |

If Yes, please provide a brief description:

(250 characters)

**ATTACHMENT HERE**: *Attach evidence of community’s adoption of related programs and statutes, and/or other commitment to affordable housing.*

* 1. **Housing Production Plan:** Have a CERTIFIED Housing Production Plan which means that you have an DHCD approved Housing Production Plan and have subsequently seen an increase of 0.5% or 1% in your year-round housing units.

|  |  |
| --- | --- |
| Yes | No |

If Yes, please provide a brief description:

(250 characters)

**ATTACHMENT HERE**: *Attach evidence of community’s CERTIFIED Housing Production Plan.*

* 1. **Housing Plan Implementation:**Demonstrated implementation of at least two strategies identified in a Housing Production Plan, housing component of a Master Plan, Housing Needs Assessment, or other housing related plan or analysis, other than adoption of the best practices specifically listed above

|  |  |
| --- | --- |
| Yes | No |

If Yes, please provide a brief description:

(250 characters)

# **SECTION 9: Certification of Application Submission Authorization**

1. If the applicant is a public entity, does the submission of this application require a formal vote of any board, commission, or other local entity? If Yes, attachment required.

|  |  |  |
| --- | --- | --- |
| Yes | No | Not Applicable |

**ATTACHMENT HERE : *If yes, attach a certified copy of the vote taken by the relevant entity.***

1. If the applicant is a non-public entity, does the submission of this application require the authorization of the entity’s board of directors, or other governing body or bylaw? If Yes, attachment required.

|  |  |  |
| --- | --- | --- |
| Yes | No | Not Applicable |

**ATTACHMENT HERE : *If yes, attach a document demonstrating such authorization.***

1. If No to the items above, are you authorized to submit this application on behalf of the applicant entity, by virtue of your administrative role (chief elected official, chief executive officer, city/town manager, authorized signatory, etc.), or as a designee of an administrator and/or authorized signatory?

|  |  |
| --- | --- |
| Yes | No |

I, (Submitter Name), hereby certify that I am duly authorized to submit this application on behalf of (Applicant Organization Name). By entering my name in the space below, I further certify, under the pains and penalties of perjury, that the responses to the questions provided in this application, and the attached documentation, are true, accurate, and complete. I understand that the Executive Office of Housing and Economic Development (EOHED) and its partner organizations, specifically the Department of Housing and Community Development (DHCD) and the Massachusetts Development Finance Agency (MDFA), will rely on the information provided in this application to make decisions about whether to award a grant from their respective funding sources. Also, that the Commonwealth reserves the right to take action against me, the applicant organization, and/or any other beneficiary of a grant, if any of the information provided is determined to be false, inaccurate, or misleading. I also affirm that, if awarded, the applicant organization has the capacity to carry out the project in accordance with all applicable laws and regulations.

Name Title Date

# **SECTION 10: OTHER/OPTIONAL ATTACHMENTS**

Applicants may submit other attachments to support the application, which may be reviewed and/or filed. However, please note that these items will generally not be scored or assessed as part of the formal evaluation of the proposal.

|  |  |
| --- | --- |
| **Attachment Type** | **Description** |
| Other Site Images | Other site photographs, illustrations, and/or maps. |
| Other Partner Letters | Letters from any partner organizations that are collaborating on this project. |
| Other Support Letters | General support letters. |
| Other | Any other attachment. |
| Other | Any other attachment. |
| Other | Any other attachment. |