

# **COMMUNITY ONE STOP FOR GROWTH FY26 FULL APPLICATION SAMPLE TEMPLATE**

## **Planning & Zoning District Redevelopment Technical Assistance**

**This template is provided as a guide for reference purposes only. All proposals and applications must be submitted electronically through the [One Stop IGX System](#).**

This sample template shows all questions within the FY26 One Stop Full Application. Project specific templates, showing only the questions pertinent to each type of project considered for funding through the One Stop, are available at [www.mass.gov/onestop](http://www.mass.gov/onestop).

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## FORM 1. APPLICANT INFORMATION

1.1. **Applicant Organization Name:** \_\_\_\_\_

1.2. **Organization Type:**

- ☐ Public Organization  
☐ ~~Non Profit Organization~~  
☐ ~~For Profit Organization~~

**1.2.a. Public Organization Type**

- ☐ Municipality (City/Town)  
☐ Public Housing Authority  
☐ Redevelopment Authority  
☐ Regional Planning Agency  
☐ Quasi-Governmental Agency  
☐ Water, Sewer, or Service District

1.3. **Applicant Organization Legal Address**

Address: \_\_\_\_\_  
State: \_\_\_\_\_

City/Town: \_\_\_\_\_  
Zip Code: \_\_\_\_\_

1.4. **Organization CEO**

CEO Name: \_\_\_\_\_  
CEO Tel.: \_\_\_\_\_

CEO Title: \_\_\_\_\_  
CEO Email: \_\_\_\_\_

1.5. **Project Contact** (if different)

Contact Name: \_\_\_\_\_  
Contact Tel: \_\_\_\_\_

Contact Title: \_\_\_\_\_  
Contact Email: \_\_\_\_\_

1.6. **Joint Application** - Is this a joint application between two or more applicants, which will entail a formal arrangement for a shared scope of work and allocation of funds?

☐ Yes ☐ No

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

	Organization Name	CEO Name	CEO Title	Email
+				

**ATTACHMENT HERE** Attach a letter from the organization(s) affirming partnership.

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- 1.7. Community Housing Restrictions** - Does the community have any active housing restrictions or other restrictive bylaws, such as phased growth zoning, a sewer moratorium, or an active housing moratorium?

☐ Yes ☐ No

- 1.7.a.** If Yes, provide an explanation for why it was established. Include the date of restriction expiration and whether the restriction allows for at least 5% increase in housing units over a single year: (500 characters)

**ATTACHMENT HERE**

Attach a copy of by-law/ordinance/moratoria language that established the restriction .

- 1.8. Community Development Tools** - Is your community interested in pursuing any of the following economic development tools offered by the Commonwealth of Massachusetts:

[Chapter 43D Expedited Permitting Program Designation](#) ☐ Yes ☐ No

[Property Assessed Clean Energy \(PACE\) Adoption](#) ☐ Yes ☐ No

[Municipal Digital Equity Planning Program](#) ☐ Yes ☐ No

[Cultural District Designation](#) ☐ Yes ☐ No

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# FORM 2. PROJECT INFORMATION

## PROJECT CORE

2.1. Project Name: \_\_\_\_\_

2.2. Project Location:

*Show if in an MBTA Community:*

### ATTENTION

Based on the Project Location selection above, this project is located within an MBTA Community. The MBTA Community within which the project is located.

An MBTA Community must be compliant under Section 3A of the Zoning Act (MGL c. 40A) and corresponding regulations for Multi-Family Zoning Districts (760 CMR 72.00) for the project to be eligible for funding from the following programs: HousingWorks Infrastructure Program, Housing Choice Grant Program, MassWorks Infrastructure Program, Brownfields, Underutilized Properties Program, and Site Readiness Program. All other participating programs will take compliance status into consideration during application review.

View the compliance status of each MBTA community at: [www.mass.gov/mbtacommunities](http://www.mass.gov/mbtacommunities).

Choose 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 (M.G.L. c.40A).

- ☐ Compliant: Community has adopted required zoning and/or submitted required materials, but has not received a district compliance determination letter from EOHLC,
- ☐ Interim Compliance: Community has adopted required zoning and/or submitted required materials, but has not received a district compliance determination letter from EOHLC
- ☐ Interim Compliance: Community has submitted an Action Plan by the February 13, 2025, deadline and the action plan was approved by EOHLC
- ☐ Interim Compliance: Community is designated as an "adjacent small town" and therefore has a deadline to adopt required zoning and submit required materials by December 31, 2025
- ☐ Non-Compliant: Community has been determined to be noncompliant by EOHLC

### Acknowledgement

- ☐ I understand that this project is located within an MBTA Community and that the community's compliance status with the above stated Regulations will affect this application's eligibility for funding.

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### 2.3. Short Project Abstract – Provide a concise description of the project. (500 character limit)

### 2.4. Project Category for Grant Consideration – Select the [Development Continuum](#) category, Project Type and Project Focus that best fits the project.

**Development Continuum Category:** Planning & Zoning  
**Project Type:** District Redevelopment Technical Assistance  
**Project Focus:** Planning for Growth in a Commercial/Industrial or Mixed-Use District

*Show for Housing Choice Public Orgs only:*

**2.4.a.** As a Housing Choice Community, this project may be eligible for the [Housing Choice Grant Program](#). To be considered, you must complete **Housing Choice Questions**. Housing Choice awards for planning & zoning projects is \$150,000, and \$500,000 for site preparation, building, and infrastructure projects.

Do you want to be considered by the Housing Choice Grant Program and answer Housing Choice Questions?

☐ Yes

☐ No

### **ATTENTION APPLICANT**

Based on the selection above, your project is likely best fit for consideration by the following program(s):

### [Real Estate Services Technical Assistance](#)

**NOTE:** 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.

Before you proceed, it is recommended that you visit the program website and review program guidelines.

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### **PROJECT OVERVIEW**

- 2.5. Project Narrative** – Provide an overview of the project, describing the issues or opportunities that the project aims to address and why the project is critical to enhance community, housing, and/or economic development in the community. (2,000 character limit)

- 2.6. Scope of Work** – Provide a detailed description of the proposed work that would be carried out using the funds, or technical assistance, received through the grant, including the timeline to implement the project and key milestones. (2,000 character limit)

- 2.7. Progress to Date** – Describe any work that has been completed on this project so far, such as community/regional planning, design and engineering, prior project phases completed, etc. If applicable, include any prior state/federal funding received for the project. (1,000 character limit)

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- 2.8. Anticipated Outcomes** – Explain how the project will catalyze community economic development, housing development, and/or provide other public benefit. Describe the tangible outcomes, including impacts on housing production, job growth, workforce development, entrepreneurship, local business and/or other social benefits. (1,000 character limit)

- 2.9. Project Impacts** – Complete the below table to show the expected impacts of the project. If a field is unknown or not applicable, enter “0”.

Housing Impacts		
Market Rate Housing Units currently in project area (estimate as needed): <div style="text-align: center; border-bottom: 1px solid black; width: 100px; margin: 5px auto;"></div>	Affordable Housing Units currently in project area (estimate as needed): <div style="text-align: center; border-bottom: 1px solid black; width: 100px; margin: 5px auto;"></div>	<b>Total Housing Units in Project Area:</b> <div style="text-align: center; border-bottom: 1px solid black; width: 100px; margin: 5px auto;">X</div>
<p>Can the applicant reasonably and realistically estimate the number of potential new market rate and/or affordable housing units to be developed as a result of this project over the next 5 years?</p> <p><input type="checkbox"/> Yes      <input type="checkbox"/> No</p> <p style="color: green; margin-top: 10px;"><i>If yes:</i></p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">           Number of potential new market rate housing units to be developed in the project area over the next 5 years:  <div style="text-align: center; border-bottom: 1px solid black; width: 100px; margin: 5px auto;"></div> </div> <div style="width: 45%;">           Number of potential new affordable housing units to be developed in the project area over the next 5 years:  <div style="text-align: center; border-bottom: 1px solid black; width: 100px; margin: 5px auto;"></div> </div> </div>		
Business Impacts		
Total number of active businesses within project area (estimate as needed): <div style="text-align: center; border-bottom: 1px solid black; width: 100px; margin: 5px auto;"></div>	Total number of commercial vacancies within project area (estimate as needed): <div style="text-align: center; border-bottom: 1px solid black; width: 100px; margin: 5px auto;"></div>	

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### GRANT FUNDING REQUEST

**2.10. Grant Funding Request** – In the table below, provide a breakdown, by spending category, of the total funding request for the proposed project.

Spending Category	Funding Request
Consultant/Professional Fees	_____
Other/Miscellaneous	_____
<b>Total</b>	

**2.11. Applicant Match** – Will the applicant provide a match to supplement any grant funds awarded?

☐ Yes ☐ No

**2.11.a.** If yes, what is the match amount? \_\_\_\_\_

**2.11.b.** Describe the source(s) and status of all matching funds being provided by applicant, including whether the funds are secured or awaiting approval. For any funds that have not been secured, provide a timeline for securing the funds. (1,000 character limit)

**2.12. Other Match Funding Sources** – Is this project supported by additional funding being provided by outside parties (i.e. partner organizations, developer contributions, other state/federal grants, etc.)? Do not include any applicant match.

☐ Yes ☐ No

**2.12.a.** If yes, what is the total amount being contributed by other sources? \_\_\_\_\_

**2.12.b.** Describe the source(s) and status of the additional funds, including whether the funds are secured or awaiting approval. For any funds that have not been secured, provide a timeline for securing the funds. (1,000 character limit)

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### Total Project Cost

If the below table does not accurately reflect the total cost to complete the scope of work described, adjust the Grant Funding Request, Applicant Match, and Funding From Other Sources accordingly.

Source	Amount
Grant Funding Request	<i>Auto-populated</i>
Applicant Match	<i>Auto-populated</i>
Other Funding Sources	<i>Auto-populated</i>
<b>Total Project Cost</b>	<i>Auto-populated</i>

- 2.13. Consultant/Contractor Cost Estimate** – 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:*

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

### COMMUNITY DESCRIPTION

- 2.14. Project Location Map** – Attach a map showing the location of the project/project area. For site specific projects, the map should clearly identify the parcel(s) and/or structure(s) where the project will take place.

**ATTACHMENT HERE**

- 2.15. Environmental Justice** – Is the project site located within one mile of an Environmental Justice census block group? [CLICK HERE](#) to access the Commonwealth's Environmental Justice Map Viewer.

☐ Yes ☐ No

- 2.16. Community Description and Engagement Plan** – Describe the community/population(s) that will be impacted by the project and the engagement efforts that will inform the project. Discuss how the project will promote an inclusive public participation process, engage new voices, and/or empower diverse stakeholders. If applicable, describe how the project advances opportunities for community members who have been socially and economically disadvantaged, and/or historically underrepresented. (1,000 character limit)

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**2.17. Environmental Sustainability and Greenhouse Gas Reduction** – Describe how the applicant will take climate change and environmental sustainability into consideration in the execution of the work for which the funding is requested. If applicable, describe what efforts will take place to reduce greenhouse gas emissions on site during the execution of the project in support of the [Massachusetts Clean Energy and Climate Plan for 2050](#). (1,000 character limit)

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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.

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## FORM 3. CERTIFICATION OF APPLICATION SUBMISSION AUTHORIZATION

**3.1. Vote Required** - Does the submission of this application require a formal vote of any board, commission, or other local entity?

☐ Yes

☐ No

**3.1.a.** 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

**3.1.b.** If Yes, attach a certified copy of the vote taken by the relevant entity.

**ATTACHMENT HERE**

**3.2. Certification:**

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 Economic Development (EOED) and its partner organizations, specifically the Executive Office of Housing and Livable Communities (EOHLC) 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