COMMUNITY ONE STOP FOR GROWTH FY26 FULL APPLICATION SAMPLE TEMPLATE

Planning & Zoning Planning for Housing

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.

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FORM 1. APPLICANT INFORMATION

	Organization Name	CEO Name	CEO Title	Email
	entities):		<u>-</u>	
	1.6.a. If yes, provide the cor	ntact information for each a	additional partner mu	nicipalities (and/or
	☐ Yes ☐ No			
	arrangement for a shared scope of			
1.6.	Joint Application - Is this a joint	application between two o	r more applicants, wh	nich will entail a formal
	Contact Tel:	Contact Em	ail:	
	Contact Name:		le:	
1.5.	Project Contact (if different)			
	CEO Tel.:	CEO Email	:	
	CEO Tal.			
1.4.	Organization CEO			
	State:	Zip Code: _		_
	Address:			
1.3.	Applicant Organization Legal A			
	in thater, bewer, or bervie	o District		
	☐ Water, Sewer, or Service	•		
	☐ Quasi-Governmental A	•		
	☐ Regional Planning Age			
	☐ Redevelopment Author	•		
	☐ Public Housing Authori			
	1.2.a. Public Organization ☐ Municipality (City/Tow	· -		
	12 a Public Ougovierstican	Fr.m.o		
	☐ For-Profit Organization			
	□ Non-Profit Organization			
	□ Public Organization			
1.2.	Organization Type:			
1.1.	Applicant Organization Name:			

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

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1.7.	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 e expiration and whether the restriction allows for 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 4	3D Expedited Permitting Program Designation	□ Yes	□ No	
	Property .	Assessed Clean Energy (PACE) Adoption	□ Yes	□ No	
	Municipa	l Digital Equity Planning Program	□ Yes	□ No	
	Cultural I	District Designation	□ Voc	□ No.	

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FORM 2. PROJECT INFORMATION

PROJECT CORE

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 .
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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Project Category for Grant Considera Type and Project Focus that best fits the	tion – Select the <u>Development Continuum</u> category, Project project.		
Development Continuum Category:	Planning & Zoning		
Project Type:	Planning for Housing		
Project Focus:	☐ Housing Feasibility Plan		
	☐ Housing Site Master Plan		
	☐ Housing Infrastructure Plan		
	☐ Housing Site Design Plan		
	☐ Other Housing Plan		
Program. To be considered, choice awards for planning preparation, building, and in	you must complete Housing Choice Questions. Housing & zoning projects is \$150,000, and \$500,000 for site		
Choice Questions.			

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

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PROJECT OVERVIEW

	ent in the community. (2,000 character limit)
Scane of	Work – Provide a detailed description of the proposed work that would be carried or
-	or technical assistance, received through the grant, including the timeline to implem
	d key milestones. (2,000 character limit)
D	
_	to Date – Describe any work that has been completed on this project so far, such as y/regional planning, design and engineering, prior project phases completed, etc. If a
	y prior state/federal funding received for the project. (1,000 character limit)

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Anticipated Outcomes – Explain housing development, and/or provimpacts on housing production, journal and/or other social benefits. (1,00	vide other public lob growth, workfo	benefit. Describe the orce development,	he tangible outcomes, including
Project Impacts – Complete the unknown or not applicable, enter		ow the expected in	npacts of the project. If a field is
	Housing	Impacts	
Market Rate Housing Units currently in project area (estimate as needed):	Affordable I currently in	Housing Units project area as needed):	Total Housing Units in Project Area: X
Can the applicant reasonably and realistically estimate the number of potential new market rand/or affordable housing units to be developed as a result of this project over the next 5 years. Number of potential new market rate housing units to be developed in the project area over the next 5 years: Number of potential new affordable hous units to be developed in the project area over the next 5 years: ———————————————————————————————————			oject over the next 5 years?
			ped in the project area over the
Total number of active business area (estimate as nee	ses within project		f commercial vacancies within rea (estimate as needed):

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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	
Meeting Expenses/Events	
Project Supplies/Materials	
Other/Miscellaneous	
Total	

2.11.	Applicant M	atch – 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 no been secured, provide a timeline for securing the funds. (1,000 character limit)
2.12.	outside partie not include an	Funding Sources – Is this project supported by additional funding being provided by s (i.e. partner organizations, developer contributions, other state/federal grants, etc.)? Do ny 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

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timeline for securing the funds. (1,000 character limit)

	If the below table does not accurately re-	Project Cost effect the total cost to complete the scope of ng Request, Applicant Match, and Funding	
	Source	Amount	
	Grant Funding Request	Auto-populated	
	Applicant Match	Auto-populated	
	Other Funding Sources	Auto-populated	
	Total Project Cost	Auto-populated	
COM I	☐ Yes ☐ No If yes: ATTACHMENT HERE Attach a co contractors or other professional service MUNITY DESCRIPTION	st estimate or proposal from prospective consultant es provider(s) for this project.	(s),
2.14.	1	ng the location of the project/project area. For site sparcel(s) and/or structure(s) where the project will take	•
2.15.		cated <u>within one mile</u> of an Environmental Justice ommonwealth's Environmental Justice Map Viewer.	
2.16.	impacted by the project and the engagement ef will promote an inclusive public participation	lan – Describe the community/population(s) that w forts that will inform the project. Discuss how the process, engage new voices, and/or empower divers roject advances opportunities for community memb	roject e

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who have been socially and economically disadvantaged, and/or historically underrepresented. (1,000

	character limit)
ENVI	RONMENTAL SUSTAINABILITY AND RESILIANCE
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 greenhous
	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)

ADDITIONAL/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
Letters of Support	Attach any letters in support of the project.
Other Partner Letters	Letters from any partner organizations that are collaborating on this project.
Other Site Images	Other site photographs, illustrations, and/or maps.
Other	Any other attachment.

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FORM 3. CERTIFICATION OF APPLICATION SUBMISSION AUTHORIZATION

	equired - Does the su sion, or other local er	11	require a formal vote of any board,
□ Yes	□ No		
3.1.:	applicant entity,	by virtue of your administra n manager, authorized signat	to submit this application on behalf of the tive role (chief elected official, chief executive ory, etc.), or as a designee of an administrator
	□ Yes	□ No	
3.1.	o. If Yes, attach a ATTACHMEN	certified copy of the vote take	en by the relevant entity.
3.2. Certific	ation:		
behalf of	(App under the pains and the attached docum omic Development (ivable Communities information provide funding sources. Als ization, and/or any o curate, or misleading	licant Organization Name). penalties of perjury, that the tentation, are true, accurate, EOED) and its partner organ (EOHLC) and the Massachud in this application to make so, that the Commonwealth rether beneficiary of a grant, if	By entering my name in the space below, he responses to the questions provided in this and complete. I understand that the Executive nizations, specifically the Executive Office of setts Development Finance Agency (MDFA) decisions about whether to award a grant from eserves the right to take action against me, the any of the information provided is determined that, the applicant organization has the capacity to egulations.
Name		Title	Date