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**FY25 DRAFT FULL APPLICATION**

**FORM 1. APPLICANT INFORMATION**

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

1.2. **Organization Location:** (Select from drop-down)

1.3. **Organization Type:**

Public Entity:

Municipality

Public Housing Authority

Redevelopment Authority

Regional Planning Agency

Quasi-Governmental Agency

Water, Sewer, or Service District

Non-Public Entity:

Community Development Corporation

Non-Profit Organization

For-Profit Organization

1.4. **Applicant Organization Legal Address**

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

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

City/Town: \_\_\_\_\_

Zip Code: \_\_\_\_\_

1.5. **Organization CEO**

CEO Name: \_\_\_\_\_

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

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

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

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

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

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

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

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

1.7. **Organization Description** – Describe your organization’s structure, including staff capacity, and housing, economic, and/or community development goals.

(1,000 Characters)

1.8. **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

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

	Organization Name	CEO Name	CEO Title	Email
+				

1.10. **Community Housing Restrictions** - Does the community have any active housing restrictions, such as phased growth zoning or an active housing moratorium?

Yes  No

If Yes, provide an explanation and date when moratorium expires:

(1,000 characters)

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

<a href="#">Chapter 43D Expedited Permitting Program Designation</a>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<a href="#">Massachusetts Vacant Downtown Storefronts Program Certification</a>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<a href="#">Property Assessed Clean Energy (PACE) Adoption</a>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<a href="#">Municipal Digital Equity Planning Program</a>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

*Show for Any Public Entity in an MBTA Community:*

**MBTA COMMUNITY QUESTIONS**

**1.12.** 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 (MGL c. 40A). If unsure you can find community compliance status at [www.mass.gov/mbtacommunities](http://www.mass.gov/mbtacommunities). Has your municipality:

- Received a determination of District Compliance from EOHLC
- Submitted a District Compliance Application but have not yet received a letter of determination from EOHLC.
- Have a deadline of December 31, 2024 or later, AND have submitted an Action Plan to EOHLC, AND have received a letter confirming Interim Compliance, AND have not yet submitted application for District Compliance.
- Have a deadline of December 31, 2023 BUT not yet submitted an application for District Compliance in accordance with the Guidelines for Multi-family Zoning Districts.

*If “Have a deadline of December 31, 2023 but not yet submitted an application for District Compliance 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, HousingWorks Infrastructure Program, and/or Housing Choice Grant Program. All other One Stop programs will take non-compliance into consideration as part of their grant making process.

*If “Have a deadline of December 31, 2024 or later, AND have submitted an Action Plan to EOHLC, AND have received a letter confirming Interim Compliance, AND have not yet submitted application for District Compliance”, then the following shows:*

**1.12.a.** 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:*

**1.12.b.** Briefly describe the nature of the changes/delays.

(500 Characters)

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## FORM 2. PROJECT INFORMATION

### PROJECT CORE

2.1. **Project Name:** \_\_\_\_\_ *(25 Characters)*

2.2. **Project Location:** *(Select from drop-down)*

Housing Choice	<i>(auto-filled)</i>	Rural or Small Town	<i>(auto-filled)</i>
Region	<i>(auto-filled)</i>	Regional Planning Agency	<i>(auto-filled)</i>
MBTA Community	<i>(auto-filled)</i>		

2.3. **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)*

2.4. **Project Category for Grant Consideration** – Select the [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

Planning and Zoning

**Site Preparation**

*Project Type (check one):*

Brownfield Site Clean Up

*Project Focus (check one):*

Brownfields Site Assessment

Brownfields Remediation

Site Improvements to Unlock Development

**Municipal Surplus Property Disposition**

*Project Focus (check one):*

**Municipal Surplus Property Disposition Study**

Building

Infrastructure

*Show for Housing Choice Public Orgs only:*

2.4.a. By virtue of the applicant’s Housing Choice Designation, this project may be eligible for the [Housing Choice Grant Program](#). Please note that the maximum Housing Choice award is \$500,000. To be considered for funding through this program, you must complete the **Housing Choice Additional Questions**.

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Do you intend to complete the Housing Choice Additional Questions in order to be considered by the Housing Choice Grant Program?

- 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**

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

**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.

**PROJECT OVERVIEW**

2.5. **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.  
*(4,000 characters)*

2.6. **Project Need** – Describe why this project is necessary in enhancing housing and/or job growth.  
*(2,000 characters)*

**GRANT FUNDING REQUEST**

2.7. **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>	

2.8. **Justification of Request** – Provide line item explanations, justifications, and/or notes for the funding requested in question 2.7. Include an explanation of the methods for estimating project costs.  
*(1,000 characters)*

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

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Yes             No

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

**2.9.b.**    Describe the source(s) and status of all matching funds.  
*(1,000 characters)*

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**2.10. 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.)?

Yes             No

**2.10.a.**    If yes, how much is being contributed by other sources? \_\_\_\_\_

**2.10.b.**    Describe the source(s) and status of funds.  
*(1,000 characters)*

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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.

<b>Source</b>	<b>Amount</b>
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>

**COMMUNITY DESCRIPTION**

**2.12. Project Location Map** – Attach a map showing the location of the project/project area.

**ATTACHMENT HERE**

**2.13. 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

**2.14. Community Description and Engagement Plan** – Describe the population that will be impacted by the project and describe the community engagement efforts that have or will inform the project. Include how the project will promote an inclusive 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.

*(2,000 characters)*

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**PROJECT IMPLEMENTATION**

**2.15. 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 and describe the experience they have on previous similar or related project and their contribution to the successful completion of this project.

*(2,000 characters)*

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**2.16. Progress to Date** – What progress has the applicant/partner organization(s) made on this project to date? Include details such as planning (noting if the project is included in any adopted district, municipal, and/or regional plans), community engagement, prior State/Federal funding, development tools used, and any environmental remediation efforts.

*(2,000 characters)*

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**2.17. Project Implementation Timeline** – Describe the steps and timeline to implement the project. Include any tasks that the applicant would need to complete before expending grant funds, if awarded (i.e. local approvals, procurement, hiring contractors, etc.), as well as information about any notable dates and/or milestones. **Note:** Grants awards will be announced in Fall 2024 for contracts starting in FY25.

*(2,000 characters)*

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**ENVIRONMENTAL SUSTAINABILITY AND EMISSIONS REDUCTION**

**2.18. Environmental Sustainability** – Describe how the applicant will take climate change and environmental sustainability into consideration in the execution of the project.

*(2,000 characters)*

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**PROJECT OUTCOMES**

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

*(2,000 characters)*

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**2.20. Project Impacts** – Complete the below table to show the expected impacts of the project:

Housing Outcomes	
Number of housing units allowed on the project site by current zoning:	
Number of new affordable rental units to be created:	
Number of new affordable ownership units to be created:	
Number of new market-rate rental units to be created:	
Number of new market-rate ownership units to be created:	
Total number of all new housing units to be created:	

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If any affordable, specify lowest income limit used (65% AMI, 80% AMI, etc.):	%
<b>Employment Outcomes</b>	
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:	
<b>Business Outcomes</b>	
Commercial development allowed on site by current zoning (square feet)	
Industrial development allowed on site by current zoning (square feet)	
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:	

**SITE INFORMATION**

**2.21. General Information**

Project Address(es)/Parcel ID(s) (If multiple parcels, enter the address or parcel ID for each individually)	
Lot area (acres) of the development site:	
Current assessed value (\$) of the development site:	

**2.22. Project Site Description** – Describe the area within the limits of work for the project, including the size of the project area and unique challenges that may exist. If applicable, include ownership history, past/present uses and operators, conditions of any existing building(s), historic considerations, etc.  
*(1,000 characters)*

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**2.23. Site Plan/Construction Drawing** – Attach a site plan, conceptual drawing, and/or construction design that clearly demonstrates the location and proposed work.

**ATTACHMENT HERE**

**2.24. Transit Oriented Development** – Is the project site located at or within a half mile of a transit station (defined as a subway, light rail, ferry, commuter rail station) or bus route, 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

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

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*(500 characters)*

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**2.25. Current Zoning** – 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: \_\_\_\_\_

**2.26. Community Development Tools** – 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)
- Current or ‘Graduated’ Transformative Development Initiative (TDI) District
- EOHLC Approved Housing Production Plan

**2.27. Site Ownership** - Does the applicant own the property?

- Yes
- No

*If no:*

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

*(2,000 characters)*

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**Climate Resilience**

**2.28. Impervious Area** – Will the project result in a net increase in impervious area?

- Yes
- No
- Unsure

**2.28.a.** If yes, please describe any design strategies that the 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)*

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**SITE PREPARATION ADDITIONAL QUESTIONS**

**3.1. Future Development Potential** – Indicate the development potential of the site:

Number of acres currently developed:	
Number of acres that cannot be developed:	
Number of acres with the potential to be developed:	

**3.2. Availability of Utilities**– Describe the availability of utility services to the project site:



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Public Water:	<input type="checkbox"/> Available <input type="checkbox"/> Not Available <input type="checkbox"/> Needs Upgrade <input type="checkbox"/> Unknown
Public Sewer:	<input type="checkbox"/> Available <input type="checkbox"/> Not Available <input type="checkbox"/> Needs Upgrade <input type="checkbox"/> Unknown
Electricity:	<input type="checkbox"/> Available <input type="checkbox"/> Not Available <input type="checkbox"/> Needs Upgrade <input type="checkbox"/> Unknown
Natural Gas:	<input type="checkbox"/> Available <input type="checkbox"/> Not Available <input type="checkbox"/> Needs Upgrade <input type="checkbox"/> Unknown

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

*(1,000 characters)*

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**3.4. 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)*

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**3.5. 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)*

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**3.6. Occupancy Status** – Is the property vacant?

- Yes             No

If no, what are the current uses?

*(1,000 characters)*

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**3.7. Surplused Status** – Has the property been officially surplused by the municipality?

- Yes             No

*If yes:*

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

*If no:*

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

**3.8. Site Studies** – To-date, have any of the following activities taken place or reports/studies been produced?

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

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### 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.

<b>Attachment Type</b>	<b>Description</b>
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

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.*

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.*

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 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