

# Delaware County CDBG Program

# **Non-Profit Attachment**

Project/Activity Title:		
Organization:		
DUNS Number:		

### Section 1: ORGANIZATION INFORMATION

On a **SEPARATE SHEET**, please provide the following information in narrative form. This should not exceed five (5) typewritten pages.

### 1. Organization Background

Include the length of time the organization has been in operation, the date of incorporation, the purpose of the organization, and the type of corporation. Describe the type of services provided, the organization's capabilities, the number and characteristics of clients served, and license to operate (if appropriate).

#### 2. Personnel

Briefly describe the organization's existing staff positions and qualifications, and state whether the organization has a personnel policy manual with an Affirmative Action Plan and Grievance Procedure.

#### 3. Financial

Describe the organization's current operating budget, itemizing revenues and expenses. Identify commitments for ongoing funding. Describe the organization's fiscal management including financial reporting, record keeping, accounting systems, payment procedures, and audit requirements.

# 4. Audit Requirements

In accordance with the Office of Management and Budget Circular, 2 CFR §200.501, a non-federal entity that expends \$750,000 or more in federal awards during their fiscal year shall have a single or program-specific audit conducted for that year in accordance with the provisions of this part. These organizations must meet such requirements in one of the following ways:

- a. If the organization already conducts audits of all its funding sources including CDBG, the organization must submit a copy of its most recent audit;
- If the organization already conducts audits of its other funding sources but has neither received nor included CDBG in the past, the scope of the audit would be modified to incorporate CDBG audit requirements; or
- c. If the organization does not have a current audit process in place, it will be required to include a 10 percent (%) set-aside in the project budget for the provision of an audit. Applicant is responsible for the costs associated with the audit.



Non-profit organizations exempt from federal audit requirements will be subject to OHCD financial reporting requirements depending on the nature and scope of the funded project. Please consult with OHCD for the type of reporting required from your organization.

### 5. Insurance/Bond/Worker's Compensation

State whether the organization has liability insurance coverage, in what amount, and with what insuring organization. State whether the organization pays all payroll taxes and worker's compensation as required by Federal and State Law. State whether the organization has fidelity bond coverage for principal staff who handle the organization's accounts, in what amount, and with what insuring organization.

#### 6. Additional Information

Include any other information that would aid our understanding of the organization and its capacity to carry out project(s).

# **Section 2: REQUIRED DOCUMENTS**

Please provide the following documentation. If the listed documentation has been provided to OHCD within the past three (3) years, please only provide documentation of any changes.

# 1. Articles of Incorporation/Bylaws

These are the documents recognized by the State as formally establishing a private corporation, business or organization.

#### 2. Non-Profit Determination

Non-profit determination letters from the Federal Internal Revenue Service and the State Franchise Tax Board.

#### 3. List of the Board of Directors or Other Governing Body

This list must include the name, telephone number, address, occupation or affiliation of each member and must identify the principal officers.

### 4. Authorization to Request Funds

Authorization from the governing body of the organization to submit the funding request. This consists of a copy of the minutes of the meeting in which the governing body's resolution, motion or other official action is recorded.

### 5. List of Authorized Representative(s)

Documentation of the governing body's action authorizing the representative(s) of the organization to negotiate for and contractually bind the organization. Documentation consists of a signed letter from the Chairperson of the governing body providing the name, title, address and telephone number of each authorized individual.

#### 6. Organizational Chart

An organizational chart must be provided which describes the organization's administrative framework and staff positions, which indicates where the proposed project(s) will fit into the organizational structure, and which identifies any staff positions of shared responsibility.



#### 7. Conflict of Interest Statement

Section 5.D. (pages 4-5) of the Core Application contains excerpted Conflict of Interest Statements from the Code of Federal Regulations at 24 CFR 570.611(b), the Delaware County Home Rule Charter, and the Delaware County Administrative Code. The applicant must review each statement and acknowledge acceptance by signing and dating in the space provided.

- 8. Resume of Chief Program Administrator and Chief Fiscal Officer
- 9. Financial Statement and Audit (if available)

### **Section 3: CONTENT CERTIFICATION**

I do hereby certify that the information contained in this attachment is complete and accurate to the best of my knowledge. I do also certify that if the information contained herein should change while a contract is in effect between the Delaware County Office of Housing and Community Development (OHCD) and the above named organization, I will notify the OHCD of such change and await their written response before proceeding with the project.

Signature	Date
Print Name	
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