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**CITY OF SPOKANE
COVID-19 Emergency Rent Assistance**

**Emergency Rent Assistance Project Application**

**Description:** The purpose of these funds is to prevent evictions and assist households that are unable to pay rent and utilities due to the COVID-19 pandemic

**PROPOSAL SUBMITTED BY:**

**ORGANIZATION** Click or tap here to enter text.

**POINT OF CONTACT** Click or tap here to enter text.

**PHONE** Click or tap here to enter text.

 **E-MAIL** Click or tap here to enter text.

 **SIGNATURE** \_\_\_\_\_\_\_\_

***Signature here will confirm compliance with all instructions, terms, and conditions of Funding Notice.***

Applicants that wish to be considered for funding under this opportunity must respond to the following questions in writing and meet all conditions and requirements as stated in the City of Spokane Notice of Funding Availability (NOFA). Submission of this application does not guarantee that a proposal will be approved.

**General Instructions**

Please complete a single narrative application for the proposal. If a proposal represents a partnership between multiple agencies, please list the name of the lead agency in the Proposal Summary boxes and detail additional partners below. If you are partnering with another agency on this project, be sure to include this information in the Proposal Summary.

Please be concise but complete in your responses. Applications must be no greater than 3 pages in length (beginning from the Narrative Questions section), with minimum margins of ½ inch and font size no smaller than 11 point. Question text may be removed to meet page limits, however applicants must include section headings and question numbers.

**Proposal Summary**

**Organization** **Leadership Contact Information**

Contact Person:

Mailing Address:

Telephone:

E-mail:

**Organization Project Contact Information**

Contact Person:

Mailing Address:

Telephone:

E-mail:

Submission Date:

Project Title: [Click or tap here to enter text.]

Applicant Organization / Lead Agency Name: [Click or tap here to enter text.]

Dollar Amount Requested from City of Spokane: [Click or tap here to enter text.]

Partner Agency Name(s) (If Applicable): [Click or tap here to enter text.]

Dollar Amount Requested from City of Spokane: [Click or tap here to enter text.]

**Narrative Questions**

1. Provide an overview of the proposed project.
	* If proposing to distribute rent and utility assistance, please include how the applicant will work with tenants, landlords, and/or partner organizations.
	* If proposing ‘By and For’ community services or to sub-contract with a ‘By and For’ organization, please describe which community will be served and how.
2. Please describe any relevant experience of the applicant.
3. Please describe any relevant experience of the applicant in administering public grants.
4. Please describe the policies and procedures the applicant will use to determine program eligibility.
5. Please describe how the applicant will work to ensure equity in who is served and the strategy to meet equity goals as listed in the Funding Notice.
6. Please describe how the applicant will ensure tenants with disabilities, who are deaf, or have limited English proficiency and are seeking rent assistance, will have meaningful language assistance services.
7. Please describe maintenance of records policy of the applicant.
8. Please describe the actions the applicant will take to ensure appropriate coordination with the City of Spokane to ensure funds are spent, documented, and reported according to requirements.

**Budget Narrative**

Applicants are required to complete and submit a Summary Budget Workbook that outlines the costs of operations of the proposal. The Summary Budget Workbook must have an accompanying budget narrative and justification that provides the total amount for implementation of the project. If multiple agencies will be partnering on this proposal, provide a cost breakdown of the expenses that will be incurred by each individual agency. **ALL COSTS ASSOCIATED WITH THE PROPOSED PROGRAM MUST BE EXPENDED NO LATER THAN JULY 31,2022, AND SUBMISSION FOR REIMBURSEMENT MUST BE RECEIVED BY THE CITY NO LATER THAN AUGUST 15, 2022. NO EXCEPTIONS TO THIS TIMELINE WILL BE ALLOWED.**

1. In a budget narrative below, please explain how the requested funds will be used to support the proposed service. For each line item listed with a dollar figure (except expense category subtotals), provide a brief narrative detailing: (a) how the item relates to the proposed service and (b) the method used to determine the cost. The budget narrative should be laid out in the same format relative to the budget categories as provided in the budget worksheet and provide information regarding the basis of estimation for each line item, including reference to sources used to substantiate the cost estimate (e.g. organization’s policy, payroll document, and vendor quotes, etc.).
2. If the budget includes indirect costs, please provide an explanation of the proposed indirect cost method.