CITY FISCAL YEAR 2025

CONSTRUCTION/RENOVATION APPLICATION

_____

LEGAL NAME OF ORGANIZATION

THE AMOUNT OF FUNDS BEING REQUESTED FROM EACH SOURCE SHOULD BE INDICATED BELOW.

THE AMOUNTS REQUESTED ARE ADDITIVE -- THE AMOUNTS REQUESTED FROM EACH SOURCE MUST ADD UP TO THE TOTAL AMOUNT REQUESTED FROM THE CITY.[1]

Funding Source Requested		Amount Requested
Borough President – Insert Name	Please Select	
Borough President – Insert Name	Please Select	
Total City Council Request		
Total Amount Requested from the City in FY 2025		$ 0

Please note that there are two spaces above for the Borough President selection in the rare circumstance that an Organization wishes to apply for funding from two Borough Presidents for the same Project.

Below, please list the individual City Council Members and/or Delegations that your Organization would like to consider contributing towards the City Council Request Amount listed above. Please note that only the Council Members and Delegations listed below will be able to view your application.

Specify the City Council Source Requested, if any.	
City Council Member	Please Select
City Council Member	Please Select
City Council Member	Please Select
City Council Member	Please Select
City Council Delegation	Please Select
City Council Delegation	Please Select

[1] The amount in the space above for "Total Amount Requested from the City in FY 2025," should be the total amount the Organization wishes to receive from the City. For example, if the Organization submits additive requests of $250,000 from a Borough President and $250,000 from City Council, the "Total Amount Requested from the City" would be $500,000.

REPURPOSING

If the City has previously appropriated funds to the Organization for a project that is no longer progressing or has materially changed from the project approved by the City, such funds cannot be paid out to the Organization unless the Organization has submitted a new application to "repurpose" such funds for a new project.

Is the Organization requesting to "repurpose" previously appropriated funding?
Yes ☐ No ☐

If YES, please provide the following information:

City FY of Original Appropriation	Amount of Original Appropriation - Borough President Funding	Amount of Original Appropriation - City Council Funding	Previous Project Funded (e.g., Replace HVAC unit)	Project Address

Total Amount of Borough President Funding to be Repurposed: $_____

+ Total Amount of City Council Funding to be Repurposed: $_____

= Total Amount to be Repurposed as part of this Application: $ 0

In addition to the "Total Amount to be Repurposed" as set forth above, is the Organization requesting further City funding in this Application?
Yes ☐ No ☐

Amount of new funding being requested, if applicable: $ $ 0.00

NOTE: The total amount to be repurposed plus any new funding being requested must equal the "Total Amount Requested from the City in FY 2025" on the preceding cover page.

Why are the previously approved project(s) listed above not proceeding? In other words, why is the Organization requesting to repurpose funding? Please provide further detail in **Attachment O.20 Status Report** (see Organization Form).

INTRODUCTION

Note that questions in this Application relate ONLY to the specific Construction or Renovation Project for which funding is being requested (and not for any Moveable Property (such as equipment) being purchased in conjunction with the construction or renovation). If requesting funding for any Moveable Property, complete the Initial Outfitting Application or the Standalone Equipment and/or Equipment System Application.

Please note that if the Project requested herein is approved and receives City capital funding, it will be subject to further review to verify that the Organization complies with all City funding requirements.

Please acknowledge that you have read and agree to this statement: ☐

HOUSING PROJECTS: **DO NOT COMPLETE THIS CONSTRUCTION/RENOVATION APPLICATION. IF YOU COMPLETE THIS APPLICATION, IT WILL NOT BE REVIEWED. COMPLETE THE HOUSING, PRESERVATION AND DEVELOPMENT APPLICATION INSTEAD.**

CHECK HERE THAT YOU HAVE READ THIS STATEMENT: ☐

***Please note that the following entities are NOT subject to this process, and therefore should NOT submit a Capital Request Form:**

- **New York City Health and Hospitals Corporation (HHC) hospitals**
- **New York City public schools (however, charter schools should submit a Capital Request Form)**
- **New York City private schools**
  (unless 100% of the student body consists of special education students with disabilities whose tuition costs are paid by the New York City Department of Education, and the school does not share its building(s) with another school)
- **The City University of New York (CUNY) colleges and schools**

Before submitting this Application and related attachments:

- **Review the Guidelines to determine whether the Organization meets the criteria set forth therein;**
- **Review the Glossary;**
- **Review this Application to determine the information that you will need to gather about the Project;**
- **Identify each attachment you must submit with this completed Application; and**
- **Review this Application and the related attachments together to ensure that the corresponding responses match.**

I. PROJECT INFORMATION

1) Project Description:

A. Briefly describe the goals and functions of the Project (e.g., reconstruct a wing of a community center to provide classroom facilities for an afterschool program, replace HVAC in a community center in order to provide social services to the general public).

B. Please describe how the Project will serve a City Purpose, and how the Project will benefit the general public of the City. Be specific.

C. Please identify the potential risks and benefits of carrying out the Project. Such risks may include but are not limited to budget-related risks, fundraising risks, timing, and/or service disruptions.

D. Please indicate the existing services or programs that will be served or supported by the Project, and the number of persons served in each category.

Service/Program	No. of People Served in City FY 2023	No. of People Served in City FY 2024 (Projected)	No. of People Served in City FY 2025 (Projected)
Total	0	0	0

E. Identify the general categories of work involved in your Project by marking 'x' in the right column:

Renovation	
A. Exterior or envelope of the building	☐
B. Infrastructure (plumbing, HVAC, electrical, etc.)	☐
C. Interior space	☐
New Construction	
A. Construction of new building or structure	☐
B. New addition either adjacent to its current building or adding floors to the current building	☐
C. Demolition of current structure in order to construct new building or structure	☐
D. Landscaping associated with construction of new building or structure	☐

F. Provide a breakdown of the major aspects of the Project. Please provide a detailed narrative of the proposed construction or renovation, including a description of the facility and the square footage of the area that will be affected by the reconstruction or upgrade, and the current and anticipated changes to the use or layout of the space. Please see Exhibit 12 for the Sample Construction or Renovation Project Narratives.

G. Identify the hours in an average week during which the Project will be operated or otherwise used by the Organization for a City Purpose.

Sunday:

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

If, for any reason, the Project will not be operated or otherwise used on a regular or consistent basis every week, please explain why below:

H. What is the minimum number of days per year that the Project will actually be used for a City Purpose? _____

I. Will the services provided by the Project be available to all residents of the City regardless of race, religion, creed, color, national origin, sex, age, disability, marital status, sexual orientation or political affiliation? Please note that the City will not grant funding to Organizations that discriminate on the basis of race, religion, creed, color, national origin, sex, age, disability, marital status, sexual orientation or political affiliation, or that do not make services available to all.

Yes ☐ No ☐

If YES or NO, please explain.

J. Will the spaces affected by the Project and the services to be provided in the spaces affected by the Project be accessible to individuals with disabilities?

Yes ☐ No ☐

If YES, please explain how the affected spaces and services will be accessible.

If NO, please explain which affected spaces and/or services will not be accessible, and why they will not be accessible. Please indicate whether a waiver application was submitted to the New York City Department of Buildings and/or the Mayor's Office for People with Disabilities. If a waiver application was submitted, please describe the status/outcome of the application. If a waiver application was not submitted, please explain why not.

K. Will the Organization charge a fee for the services supported by the Project?

Yes ☐ No ☐

If YES, please identify the fee to be charged:

2) Property Ownership:

A. Does the Organization itself currently own the Real Property where the new construction or renovation will take place or where the construction or renovation is already underway? Please note that if the property is owned by an Affiliate or Related Organization, the Organization is not considered the owner.

Yes ☐ No ☐

If NO, complete the questions below. Please note that the City will not provide funding unless one or more of the exceptions on pages 4-5 of the Guidelines (Exhibit 1) is met.

LEASED PRIVATELY OWNED PROPERTY: ☐

If this Project involves leased privately owned property, does the Project fall within one or more of the exceptions set forth on pages 4 and 5 of the Guidelines (Exhibit 1)?

Yes ☐ No ☐

If YES, explain how the Project falls within at least one such exception.

Note: the remaining lease term (excluding any renewal options) must be at least 10 years from completion of the Project, and may be required to be longer depending on the useful life of the improvements being funded.

Please try to fit the response in the space provided above, but if necessary, attach additional narrative, particularly to show evidence of an affiliation or common corporate control between the landlord and the tenant (e.g., bylaws or an affiliation agreement), as **Attachment A.1 Leased Privately Owned Property – Exception**. Please attach lease & any amendments as **Attachment A.2 Lease – Private Property**.

Lease Term (excluding any renewal options): _____ years

Lease Start Date: _____ Lease End Date: _____

LEASED GOVERNMENT-OWNED PROPERTY:

City: ☐ New York State: ☐ Federal: ☐

Attach lease & any amendments as **Attachment A.3 Lease – Government-owned Property**.

Lease Term (excluding any renewal options): _____ years

Lease Start Date: _____ Lease End Date: _____

Note: the lease term must be at least 10 years from completion of the Project, and may be required to be longer depending on the useful life of the improvements being funded.

If leasing Government-owned property, provide a statement from the City, New York State or federal agency that leases such property to the Organization that such agency has agreed:

(i) that the Organization (and not the government agency or a subsidiary organization) will be undertaking and overseeing the improvements to such property,

(ii) that the improvements comply with the terms of the lease,

(iii) that the improvements will not be removed during their useful life, and

(iv) that the improvements will be used for a City Purpose during their useful life

Submit such statement as **Attachment A.4 Leased Government-owned Property – Agency Statement.**

OTHER: ☐

Provide explanation below:

Please try to fit the response in the space provided above, but if necessary, attach additional narrative and/or relevant documents as **Attachment A.5 Property Ownership – Other.**

3) Project Address (See definition of "Project Address" in the Glossary):

Street: _____ City: _____

State: _____ Zip Code: _____

Borough: _____

Block: _____

Lot: _____

Community Board #:_____

Council Member/District #:_____

4) Estimated Total Project Cost (Hard & Soft Costs): _____

Include:

- total estimated costs to be covered by both non-City funds and City funds;
- 15% contingency fee (see page 7 of the Guidelines (Exhibit 1)); and
- cost of fixtures (non-Moveable Property).

Exclude:

- costs of furnishings or other Moveable Property.

5) Projected Funding Sources for the Project:

A. *City Funding*

City Funding Maximum:

- **The City contribution to all projects involving Real Property (i.e., acquisition, new construction or renovation) may not exceed 90% of the costs of the Project up to $2 million and 50% of the portion of the Project that is in excess of $2 million.**

- **The City may only pay a maximum of 50% of costs for the requested Project once City appropriations for Real Property projects at the same Project Address in aggregate exceed $1.8 million (excluding separate and distinct projects that have been fully completed and for which the funding has been closed out).**

Note: City appropriations include the total amounts appropriated, whether or not such funds have been disbursed to the Organization.

1. Complete the table below. **Do not include any prior City funding for Move-able Property or Vehicles**. Review the definition of Project Address (same block and lot number) in the Glossary.

Note that information regarding ALL prior City capital funding, whether or not such funding is related to this Project or Project Address, is to be completed in the Organization Form, Section II, question 4.

Year	Appropriations for Real Property Improvement(s) at the Project Address
Prior to City FY 2020	
City FY 2020	
City FY 2021	
City FY 2022	
City FY 2023	
City FY 2024	
City FY 2025 (Requested)	

2. Were any of the above appropriations for separate and distinct projects that have been fully completed and for which the funding has been closed out? If so, please identify the appropriation, briefly describe the project and why it is separate and distinct from the proposed Project, and provide the date of the final reimbursement.

B. *Non-City Funding* – Complete the table on the next page and specify each source (e.g., private foundations, NYS Assembly, capital campaign, bank financing; include specific names where possible).

Please read all the definitions and fill out this question (B) carefully. In the past, many Organizations have not inserted the correct amounts.

SOURCE OF NON-CITY FUNDS	AMOUNT OF RECEIVED NON-CITY FUNDS[2]	AMOUNT OF PLEDGED NON-CITY FUNDS[3]	AMOUNT OF REQUESTED NON-CITY FUNDS (Not yet Pledged or Received)[4]	TOTALS
				$ 0
				$ 0
				$ 0
				$ 0
				$ 0
				$ 0
TOTALS	$ 0	$ 0	$ 0	$ 0

Please try to fit the response in the space provided above, but if more rows are needed, attach a table in this format for additional sources as **Attachment A.6 Non-City Funding Table**.

Note that the City relies on the anticipated split between City and non-City funding and on the specific sources and amounts set forth in this table when making funding decisions. If funding is allocated by the City, any reduction of total non-City funding or changes to funds said to be in-hand or pledged could impact the City's funding toward the project, and will require detailed explanation from the Organization. **Please acknowledge that you have read and agreed to this statement:** ☐

If any of the Non-City Funding sources listed above is a loan, please provide the terms of the loan(s) (e.g., length, amount of periodic payments, date and amount of any balloon payment) and the Organization's sources for paying the debt service.

[2] *Received Non-City Funds = Amount(s) of money paid to the Organization, or cash available, from non-City sources, for the Construction or Renovation Project requested in this Application.*

[3] *Pledged Non-City Funds = Signed and dated commitments by donors and/or lenders other than the City, including New York State and the U.S. Federal Government, to make a gift or grant during a specified period according to specified terms for the Construction or Renovation Project requested in this Application. The Organization must have signed commitment letters from donors or pre-approval letters from lenders.*

[4] *Requested Non-City Funds = Amount(s) of money for the Construction or Renovation Project requested in this Application sought from sources other than the City, either through application or appeal, and, for which, as of the date of submission of this Application, the Organization* ***is awaiting an award decision*** *(i.e., pending approval or denial). These sources include, but are not limited to, individuals, government entities, and foundations.*

C. *Total Funding Sources Currently Available for the Project*:

Total Project Cost (see question 4) $ 0.00 _____

LESS the following available funds:

i. City Funding in Executed Funding Agreements for the Project: _____

ii. City Funding Appropriated in Prior Fiscal Years (with no Funding Agreement yet executed): _____
(Note: this amount does NOT include the City funding being requested in this application)

iii. Received Non-City Funds: $ 0.00 _____

iv. Pledged Non-City Funds: $ 0.00 _____

v. City Funding Requested Herein: $ 0.00 _____

EQUALS the Funding Gap: $ 0.00 _____

Summary of Non-City Funding:

$ 0.00 Pledged Non-City Funds + $ 0.00 Received Non-City Funds = 0.00 %

$ 0.00 Total Non-City Funds Needed for the Project*

*(Total Project Cost minus C.i., C.ii., and C.v. (see question (C) above))

Is the total of Pledged Non-City Funds and Received Non-City Funds at least the lesser of (i) 50% of the total non-City funds for the Project, or (ii) $1 million.

Yes ☐ No ☐

If NO, the City will not provide funding.

D. *Status of Securing Non-City Funding*

1. *Status of Securing Pledged Non-City Funds* - Please explain when the Pledged Non-City Funds will be received. In particular, if the Organization has received notification of New York State or federal funding, provide the amount(s) and explain the status of such pledge(s). Please be very specific.

Please try to fit the response in the space provided above, but if necessary, attach additional narrative as **A.7 Status of Pledged Non-City Funds.**

2. *Funding Gap* - Please explain how and when the Organization expects to close the Funding Gap. Please be very specific.

Please try to fit the response in the space provided above, but if necessary, attach additional narrative as **Attachment A.8 Funding Gap.**

The City will not enter into a Funding Agreement or disburse any portion of the Funding until the Funding Gap has been closed and the project is fully funded, even if Funding has been appropriated in the City's Budget. **Please acknowledge that you have read and agreed to this statement:** ☐

3. *City appropriation* – Elected officials may only be willing to fund less than the amount requested herein.

If the elected official(s) provide less than the amount requested herein, and the Organization does not come up with the shortfall, the Project may not go forward.

Does the Organization understand and agree to this requirement to fund the shortfall?

Yes ☐ No ☐

a) What are the Organization's backup funding resources? Please explain in detail.

b) If the elected official(s) provide less than the amount requested herein, what is the Organization's plan to proceed? Is there a smaller subset of the Project that would be able to go forward under such circumstances? Please describe in detail.

Note that if the Organization represents that the Project can go forward if the City funds only a portion of the request, the Organization shall not apply in a future fiscal year for additional funding for the Project.

Please acknowledge that you have read and agreed to this statement: ☐

6) Bank or Other Financing:

A. Does the Organization intend to seek financing (a loan) or has it already secured such financing, to construct or renovate the Real Property (including any bridge loans)?

Yes ☐ No ☐

If YES, complete B through D below.

B. What is the amount to be borrowed from a lender? _____

C. Will the loan be secured by a lien on the Real Property?

Yes ☐ No ☐

If NO, how will the loan be secured if not by a lien on the Real Property?

D. Has the lender been identified?

Yes ☐ No ☐

Note: If there will be a loan secured by a lien on the Real Property and a lender has not been identified, the City will not provide funding.

If the lender has been identified, complete the following:

1. Lender Information

   Name: Website:

   Contact Person: Email:

   Phone:

2. Will the lender subordinate its lien to the City's Restrictive Covenant?

   Yes ☐ No ☐ Don't Know ☐

Please explain what steps the lender will take to subordinate.

If NO or DON'T KNOW, the City will not provide funding.

If YES, please submit a current letter from the lender representing that it will subordinate its lien to the City's Restrictive Covenant as **Attachment A.9 Lienholder Letter(s)** (for reference, see Exhibit 3A (Form of Subordination Agreement).

7) Existing Property Liens:

A. Are there any known restrictions including liens or mortgages currently recorded against the building/building site?
Yes ☐ No ☐
If YES, indicate the type (e.g., use restriction, lien, mortgage, other), complete the table below and answer B.

TYPE OF LIEN	EXPIRATION DATE OF LIEN	LIENHOLDER NAME	AMOUNT OF LIEN

Please try to fit the response in the space provided above, but if necessary, attach information regarding additional liens and/or an explanation as **Attachment A.10 Existing Liens Table**.

B. If YES to 7(A), will the lienholder(s) subordinate its lien to the City's Restrictive Covenant?
Yes ☐ No ☐

IF NO, the City will not provide funding.

If YES, please submit a current letter from the lienholder that it will subordinate its lien to the City's Restrictive Covenant as **Attachment A.9 Lienholder Letter(s).** (For reference, see Exhibit 3A - Form of Subordination Agreement.***)***

8) Scope of Work and Budget:

A. Has the Organization hired an architect and/or engineer?

Yes ☐ No ☐

If YES, identify below:

Firm Name: Website:

Contact Person: Email:

Phone:

If NO, how was the Project cost estimated and why has the Organization not hired an architect or engineer?

B. Please provide a detailed Project cost breakdown, including the construction costs by trade. Please be sure to break out costs such as design, general conditions, overhead, profit, insurance, and the 15% contingency fee. Be sure to clearly indicate in the cost breakdown the costs that are requested to be covered by the City. **Note that the contingency fee shall be allocated between the City and non-City funds proportionally with the Project as a whole**; for example, if the City is to fund 60% of the Project, the Project cost breakdown shall have the City funding 60% of the contingency fee. See the sample cost breakdowns attached as Exhibit 7A. (**Attachment A.11 Project Cost Breakdown**)

1. Does the cost breakdown take into account that that all contractors, subcontractors, and consultants pay their staff and laborers in accordance with prevailing wage titles and pay rates as described in Section 220 of the New York State Labor Law for the entire project?

   Yes ☐ No ☐

   If NO, explain below. Be specific.

2. What is the date of and basis for the Project cost breakdown?

3. Attach site and floor plans, if available, as **Attachment A.12 Site and Floor Plans.**

If not available, please explain how the Project will be ready to proceed in the absence of such documents.

9) Expected Project Timeline:

Please be conservative and deliberate with your estimate. OMB has found that many Organizations have given unrealistic expected project timelines in the past.

A. Expected Project construction start date: _____

Expected Project construction completion date: _____

What is the basis for this projection? For example, is the projection based on an estimate provided by architectural firm or project management team?

1. If the Project has already begun, what is its current status (e.g., scope development, design, or construction) and what costs, if any, have been incurred? Please explain.

2. If the Organization incurs Project costs prior to entering into a contract with the assigned City managing agency, then the Organization runs the risk that some or all costs may be deemed to be ineligible for reimbursement by the City.

Please acknowledge that you have read and agreed to this statement: ☐

10) Contemplated Uses/Purposes of Property:

A. City capital funds may not be used to construct or reconstruct any portion of a building or condominium unit unless a majority of the entire building or condominium unit is used by the Organization for Front Line Services for a majority of the time that such space is used (as opposed to being used for administrative use (e.g., back office, executive or support service space)). Front Line Services are services that are rendered directly to the public through physical public access (such as a community center) or through a hotline. Such services do not include lobbying, advocacy, capacity-building, general administration, and/or development work.

When a majority of a building or condominium unit is used by the Organization for Front Line Services, City capital funds may be applied to construct or reconstruct any part of such building or condominium unit used by the Organization.

1. Please explain how at the Project Address (specific location of the Project), a majority of the space used by the Organization will be for Front Line Services for a majority of the time that such space is used. **If less than 50% of such space will be used for Front Line Services, the City will not fund this Project**.

Please complete the chart below **for the entire space used by the Organization** at the Project Address.

As stated in the introduction, the Application must be filled out in its entirety. **If the chart below is not completed, the City will not provide funding.**

If the room type is not indicated in the table, add the type in one of the blank rows.

Note: If the square footage of certain rooms/areas for Front Line Services varies depending on the day or time, fill in the table below based on the majority of the time that such rooms are used at all.

ROOM TYPE	Total SF of Each Room Type	SF for Front Line Services	% of Total SF for Front Line Services
Offices (see question 10(A)3 below)			0.00
Auditorium/Theater			0.00
Class Room(s)			0.00
Gymnasium			0.00
Common Elements (e.g., hallways, bathrooms, and elevators)			0.00
Kitchen(s)			0.00
Clinic/Exam Rooms			0.00
Cafeteria			0.00
Other: [specify, if applicable]:			0.00
Other: [specify, if applicable]:			0.00
Other: [specify, if applicable]:			0.00
Other: [specify, if applicable]:			0.00

Total	0	0	0.00

2. Please note that office use does NOT constitute use for Front Line Services, unless programming in such offices is provided directly to the public through physical public access or through a hotline. To the extent that offices are listed above as providing Front Line Services, please explain:

B. Will the Project be used for new services or programs not previously offered by the Organization?
Yes ☐ No ☐

If YES, the City will not provide funding.

C. Does the Organization employ salaried employees to provide the services related to the Project?
Yes ☐ No ☐

If YES, specify the number of such salaried employees: _____

Explain who will provide the services related to the Project. Include position titles and job descriptions or functions of such staff. Indicate whether such positions are (i) paid or volunteer and (ii) full-time or part-time.

Please try to fit the response in the space provided above, but if necessary, attach a separate page labeled **Attachment A.13 Staffing**.

D. *Project's impact on operating costs and operating revenues* - Please explain how this Project, during construction and once it is completed, will have an impact on the Organization's operating budget (i.e., salaries; energy costs; security costs; maintenance costs; insurance costs; etc.), revenues and ability to provide services. Please explain how the Organization will fund such operating costs during construction and after, and/or maintain the site after the Project is completed for a minimum of five years. Be specific.

E. Are the services to be performed or the programs to be provided by the Organization in the building regulated by any federal, New York State or City agency?

Yes ☐ No ☐

If YES, does the Organization have all required licenses, permits, etc. for the planned uses?

Yes ☐ No ☐

If applicable, identify all such required licenses, permits, etc.

If NO, provide an explanation below of how the Organization anticipates securing the required regulatory permits or licenses.

F. Will any of the services or programs to be provided in the building be provided pursuant to one or more City Operating Contract(s)? Such contracts include any kind of service agreement.

Yes ☐ No ☐

If YES, provide a summary description of the contract including term of the agreement(s) (start and expiration dates), number and term of renewal options (if any), contracting City agency, services covered.

Note that prior to any disbursement of City capital funds, any such current City Operating Contracts at that time (except HHC-affiliation agreements and discretionary grants from elected officials) will need to be submitted.

11) Zoning, Land, Approval and Environmental Considerations:

A.

1. Complete the following and attach the current Certificate of Occupancy as **Attachment A.14 Current Certificate of Occupancy.** If no Certificate of Occupancy has been issued, please explain in **Attachment A.14.**

   Zoning of Building: _____

   Zoning District: _____

   Department of Finance Building Classification: _____

2. Is the contemplated use of the Real Property by the Organization consistent with the Certificate of Occupancy?

   Yes ☐ No ☐ Not Applicable (i.e., there is no Certificate of Occupancy) ☐

If NO or NOT APPLICABLE, provide an explanation below as to how the contemplated use of the Real Property will be legally permissible at the Project Address. Please be specific. Describe what steps need to be taken and the corresponding time frame for accomplishing those steps.

B. Please indicate below by marking 'x' if the Project's building/site has been designated or is pending designation as part of one of the below. Please also indicate if the relevant office has issued an approval for the Project:

	Designated or Pending Designation	Approved
NYC Landmark		
NYC historic district		
NYC special natural area		
NYC Design Commission		
National register of historic places		
National historic landmark		

C. Is a Uniform Land Use Review Procedure (ULURP) (see Glossary) required for your Project?

Yes ☐ No ☐

D. Is environmental review (City Environmental Quality Review (CEQR) or State Environmental Quality Review (SEQRA) (see Glossary)) required for your Project?[5]

Yes ☐ No ☐

If YES, indicate what type of review and whether such review is complete below, and provide copies of all relevant documents as an attachment labeled **Attachment A.15 Environmental Review.** (For more information on environmental reviews, please visit NYC's Office of Environmental Coordination's website https://www1.nyc.gov/site/oec/environmental-quality-review/environmental-quality-review.page.)

[5] Despite the Organization's answer to this question, the determination as to whether or not CEQR or SEQRA is required for the Project will be made by New York City or State, and is subject to the review of the City managing agency.

E. Are any reviews or approvals, aside from environmental review, required for the Project?

Yes ☐ No ☐

If YES, indicate what type of review, a timeline for the review, and why the Organization believes the outcome of such review or approval will be favorable.

F. *Green building standards law* - The green building standards law, Local Law 86 (New York City Charter section 224.1 and chapter 10 of title 43 of the Rules of the City of New York), applies to certain construction or reconstruction projects receiving City funds. (Information on Local Law 86 can be found on the web at https://www1.nyc.gov/site/oec/green-building/green-building.page.)

Does the green buildings standards law apply to the Project?

Yes ☐ No ☐

If NO, explain why not below. If YES, explain why below. In each case, be specific and include references to the **specific** sections of the law.

If YES, will the Project(s) comply with the green buildings law?

Yes ☐ No ☐

12) Sectarian Use:

Religious or sectarian activity that should be disclosed includes worship, prayer and/or proselytization occurring any time at the Project Address, regardless of the duration, the frequency and the sponsor of such activity. In addition, it includes administration and implementation of such activities.

When answering this question, please consider and disclose any broader programs that may have worship, prayer and/or proselytization as even a small component of such programs. Failure to disclose activities that may have religious or sectarian components will lead to delays in, reduction of and/or rescindment of City capital funding. **It is recommended that if there is any uncertainty as to whether a certain activity is a religious or sectarian activity, it be disclosed.**

Please acknowledge that you have read and agreed to this statement: ☐

A. Will any portion of the Organization's space at the Project Address be used by anyone to plan, organize or implement any religious or sectarian activity (see Organization Form, Section II, questions 1(N) – 1(P))?

Yes ☐ No ☐

If YES, please explain:

B. Will any part of the proposed construction or renovation funded by the City be used to plan, organize or implement any religious or sectarian activity (see Organization Form II, questions 1(N) – 1(P))? For example, if requesting City funding to renovate a conference room, will the conference room be used to plan, organize or implement any religious or sectarian activity?

Yes ☐ No ☐

If YES or NO, please explain:

Please try to fit the response in the space provided above, but if necessary, submit the continued response as **Attachment A.16 Religious Use**.

C. Will any of the City funds requested herein be used to pay for common elements (e.g., HVAC, roof(s), hallway(s), or entryway(s))?

Yes ☐ No ☐

If YES, please explain:

Please note that if a portion of the Organization's space at the Project Address is used for religious or sectarian activity and such space is served by common elements to be improved with City funding (e.g., elevators, restrooms), such City funding may not be applied to the proportionate share of such improvements to common elements attributable to the religious/sectarian spaces. An apportionment analysis will be conducted prior to the payment of any City finding, which may result in a reduction of the City funding available to fund such common elements.

D. 1. Please note that no part of the proposed construction or renovation funded by the City shall be used to advance or support sectarian activity, including worship, prayer and/or proselytization UNLESS the Organization complies with the following requirements:

(i) Such space used to advance or support sectarian activity must be made generally available for use or rental by the public. The process used in allocating such space must be neutral and non-discriminatory. In addition, the process used in allocating such space must ensure that the Organization itself does not receive preferential treatment in the allocation or use of the space.

(ii) The availability of such space for such religious or nonreligious purposes or activities on the terms and conditions referenced above, must be made known to the general public.

(iii) The use of such space as described in (i) and (ii) above must be occasional and temporary.

(this paragraph constitutes the **Sectarian Use Exception**).

2. If any part of the proposed construction or renovation funded by the City will be used for sectarian activity pursuant to the Sectarian Use Exception, the Organization must attach as **Attachment A.17 Use Policy** a use policy that includes guidelines which comply with the requirements set forth above in question 12(D)(1).

a) Please describe how the use policy meets the criteria set forth in the Sectarian Use Exception:

b) List the means that will be used to advertise or give notice to the general public of the availability of the space for rent and the frequency of those notices.

If the Project site is used for the provision of medical services, complete questions 13-14.

13) Health Care Provider Licenses and Certifications:

A. Does the Organization's current operating certificate issued by the New York State Department of Health or New York State Office of Mental Health authorize the operation and use of the Project Address for the purposes described herein?

Yes ☐ No ☐

If YES, please provide the facility identification number for the Project Address:

_____

If YES, please provide the operating certificate number(s) for the Project Address:

_____

If NO, explain:

B. Will the Organization bill Medicare and/or New York State Medicaid for services provided at the Project Address?

Yes ☐ No ☐

If NO, explain:

14) Certificate of Need/ Notice Submission

Has the New York State Department of Health or New York State Office of Mental Health approved a Certificate of Need (CON) application or Notice Submission that covers the construction or renovation work requested herein?

Yes ☐ No ☐

If YES, upload evidence of such approval or acceptance as **Attachment A.18 Certificate of Need Approval or Notice Submission.**

If NO, (i) provide expected date of approval or acceptance and explain the delay, or (ii) explain in detail why such approval or notice is not applicable for the construction or renovation work requested herein.

15) **Optional- Additional Relevant Information:** Provide in the space below any relevant information the Organization would like the City to take into consideration while considering the funding request:

II. CITY REQUIREMENTS & COVENANTS

1. CITY PURPOSE COVENANT

Prior to the distribution of City capital funds, the Organization must agree to a City Purpose Covenant which requires, among other things, that each Project financed with City capital funds be used for a defined City Purpose for its entire useful life, which will be up to thirty (30) years depending on the Project's scope, after substantial completion of the Project. The required use of the Project pursuant to the City Purpose Covenant will be based on the particular City Purpose that is being served by the Project. Additionally, the Project's defined City Purpose shall be consistent with the type and mission of the Organization and should support its principal services and activities. The Organization shall be required to make use of the Project for the provision of such services on a consistent, measurable and regular basis.

In instances in which the City funds are for the construction, reconstruction and/or improvements to Real Property including fixtures thereof, with the exception of housing projects undertaken pursuant to statutory grant or loan authority, the City Purpose Covenant will be in the form of a Restrictive Covenant that runs with the land and must be recorded as the senior lien on the Real Property. In all cases, except for housing projects undertaken pursuant to statutory grant or loan authority, there may be no mortgages or other liens on the property unless they are subordinated to the City Purpose Covenant prior to the distribution of City funds.

For additional information, please see the Guidelines (Exhibit 1).

1) CITY PURPOSE COVENANT

A. Does the Organization understand the requirements of the use of the Project for a defined City Purpose?
Yes ☐ No ☐

B. Does the Organization understand and agree to the recordation of a senior lien restricting the use of the City funded asset to the City Purpose for the required term?
Yes ☐ No ☐

C. Does the Organization understand that it will not be able to remove such senior lien under any circumstances before the end of the required term? For example, the Organization would not be able to remove such senior lien even if a third party, such as a condo developer, offered to pay a large sum for the Project or even if the City funding were repaid.
Yes ☐ No ☐

If NO, please provide an explanation below:

D. Has the Organization secured the agreement of every prior lienholder and every potential lender to the subordination of their lien(s) to the Restrictive Covenant?
Yes ☐ No ☐ N/A *(if no prior lienholder or potential lenders)* ☐

If NO, please provide an explanation below:

2) OPINION OF COUNSEL LETTER

Please acknowledge that the Organization understands and agrees that prior to entering the Funding Agreement it will be required to obtain an Opinion of Counsel Letter substantially in the form of Exhibit 13A: ☐

3) REIMBURSEMENT BASIS OF CITY PAYMENTS

The City will reimburse the Organization only for payments made by the Organization after the date of the appropriation of City funds.

In addition, City funds will be paid to the Organization only on a reimbursement basis upon requisition by the Organization pursuant to an executed Funding Agreement. **Therefore, the Organization must pay the Project costs from its own sources and then provide proof of payment to the City in order to be reimbursed for eligible costs**. (See "Funding Process" and "Post-Funding Compliance" sections on pp. 9-10 of the Guidelines for the funds disbursement process.)

For further information on the process, see the Guidelines (Exhibit 1).

A. Does the Organization understand and agree that the City will reimburse only for payments incurred by the Organization after the date of appropriation of City funds?
Yes ☐ No ☐

B. Does the Organization understand the reimbursement basis of City payments pursuant to an executed Funding Agreement?
Yes ☐ No ☐

C. What are the Organization's intended sources for advancing such funds?

If such intended sources include any restricted funds that require consent of any third parties (e.g., Dormitory Authority of the State of New York ("DASNY")) to be used, attach such written consent(s) as **Attachment A.19 Restricted Funds Consent.**

4) Minority and Women Owned Business Enterprise Participation

Real Property projects receiving $3 million or more in City funding are subject to Minority and Women Owned Business Enterprise (M/WBE) participation requirements. If applicable, the managing agency will set a M/WBE participation goal for the Organization, which will be developed on a case-by-case basis and memorialized the Funding Agreement. **Please acknowledge that you have read and agree to this statement:**

5) If the City makes an appropriation for this Project, the Organization will be required to disclose and explain all changes to the Project since the time of this application. Such changes may prevent the Project from proceeding. Furthermore, if significant changes are made to the Project's scope or a significant amount of time has passed since the time of the application, management of the Project may be suspended until the Organization submits a new application for review. **Please acknowledge that you have read and agree to this statement:**

6) ONGOING POST-FUNDING COMPLIANCE

OMB, on behalf of the City, conducts compliance reviews of Organizations that have received capital funding from the City under the City's discretionary capital grant program. The goal of the compliance review process is to verify that the Organization is complying with its obligations and responsibilities under the corresponding legal documents relating to the funding of the project and the use of any other City-owned Real Property or capital asset.

Does the Organization understand that it will have to participate in such compliance program?
Yes No

III. REPRESENTATION FORM

The following statement must be executed by an authorized officer of the Organization (i.e., executive director, chief financial officer or the equivalent).

I, _____, as

_____ [Title] of the Organization listed above, have the authority to submit this Construction/Renovation Application on behalf of

_____
[Organization's Legal Name].

I hereby certify under penalties of perjury that all answers submitted herein (including in the Organization Form) are factual, accurate and complete to the fullest extent of my knowledge, and that this Application has been completed with the best efforts of the above named Organization.

_____
(Please Enter Your Initials)

_____
(Print Name)

_____
(Date)

Principal Contact for this Construction/Renovation Application:

Name: _____ Phone: _____

Title: _____

E-Mail Address: _____

List of Attachments

THESE ATTACHMENTS MUST BE SUBMITTED ELECTRONICALLY WITH THE FORM.

Required Attachments for this Application**:**

A.11 Project Cost Breakdown

A.14 Current Certificate of Occupancy

Attachments that **may be required** to be fully responsive to questions in this Application:

A.1 Leased Privately Owned Property - Exception

A.2 Lease – Private Property

A.3 Lease – Government-owned Property

A.4 Leased Government-owned Property –Agency Statement

A.5 Property Ownership - Other

A.6 Non-City Funding Table

A.7 Status of Pledged Non-City Funds

A.8 Funding Gap

A.9 Lienholder Letter(s)

A.10 Existing Liens Table

A.12 Site and Floor Plans

A.13 Staffing

A.15 Environmental Review

A.16 Religious Use

A.17 Use Policy

A.18 Certificate of Need Approval or Notice Submission

A.19 Restricted Funds Consent