## HHF Blight Elimination Program Nonprofit Application Checklist

Date:	Organiz	ration's Name:	
	Name:		
	i none rumoer.	cation's Address:	
Sender's Er	Email Address:		
	** PLEASE ASSEMBLE PACKAGE	E IN ORDER LISTED BELOW **	
	PIMS – Upload First 4 Pre-Screen Items		
□ 1.	. Threshold Questions		
□ 2.	. Certificate of Existence	Certificate of Existence	
□ 3.	Copy of Articles of Incorporation, Charter, By-Laws		
□ 4.	Copy of $501(c)(3)$ determination letter from IRS <u>or</u> Letter from Habitat for Humanity International confirming the applying affiliate is an exempt subordinate and a copy of the group determination letter from the IRS		
	After Pre-Screen Approval, Submit Remaining Ite	ms to THDA	
□ 5.	Completed Nonprofit Application Form HHF/BEP-1011		
□ 6.	Most recent business plan or strategic management plan dated within 12 months		
□ 7.	Board Minutes approving participation in the HHF Blight Elimination Program		
□ 8.	Two page explanation of the organization's experience in demolition and constructing affordable housing		
□ 9.	Most recent financial audit dated within 12 months		
□ 10.	Copy of errors and omissions insurance, if any.		
□ 11.	Copy of most current IRS form 990 that was filed		
□ 12.	List of volunteers and staff member employed by the organization who will be involved in this program		
□ 13.	Resume and detailed work experience for each staff member who will be involved in this program.		
□ 14.	4. Construction Company Disclosure Form HHF/BEP-1012 or		
	Detailed explanation of screening and selection process for Cons	truction Company	
□ 15.	5. Copy of Conflict of Interest Policy	Copy of Conflict of Interest Policy	
□ 16.	6. Copy of Code of Conduct	Copy of Code of Conduct	
□ 17.	Proof of Escrow Account set up for BEP funds		
□ 18.	8. Completed IRS W-9 Form	Completed IRS W-9 Form	
□ 19.	Completed ACH Authorization Form FA-0825		
□ 20.	Copies of Voided Check for ACH Authorization Forms		

HHF/BEP-1010 (02.19) Page 1

Completed BEP Authorization for Automatic Deposit Form HHF/BEP-1013

□ 21.