

Revised 1/11/21
SJZ

Scituate Community Preservation Committee
Funding Request Form

Revised
1/5/21
SJZ

DATE and YEAR of Application: Sept 2020

APPLICANT INFORMATION

Project Sponsor or Organization: Affordable Housing Trust

Contact Name & Address: Stephen Irish, Chairperson

Telephone Number: 617-901-7915 Email: stephen.irish9@gmail.com

PROJECT INFORMATION

CPA CATEGORY (check all that apply):

- OPEN SPACE
- RECREATION
- HISTORIC PRESERVATION
- COMMUNITY HOUSING

NAME OF PROJECT: Emergency Rental Assistance Program

BRIEF DESCRIPTION OF PROJECT: Provide rental assistance to Scituate residents adversely impacted by COVID19.

The AHT requests \$100,000 of the Trust's CPC allocation to reimburse AHT funds set aside for establishment

Project Location or Address: Scituate Affordable Housing Trust of Emergency Rental Assistance Program.

Assessor's Map Page, Block & Lot Number: NA

Number of acres in parcel: _____

Current Zoning Classification: _____

Assessed Value: _____

Title in name of: _____ Title Abstract Date: _____

Number of housing units proposed: _____

Summarize how this request benefits the Town of Scituate and meets the goals of the Community Preservation Act.

Providing some rental assistance to Scituate residents in need will help these residents to remain in their homes.

PERMITS AND APPROVALS

What permits and approvals are required? Have they been obtained or have you filed for them?

Name of Permit	Filed? (Y/N)	Filed (Date)	Obtained (Date)
NA			

Have you met with any other Town Boards or committees? If so, what were the outcomes of those meetings? (Letters of support from other Boards and committees should be included in the application or supplied at a later date.)

Notes: _____

What non-financial support and services are necessary, and how will these be provided?

The AHT will work with state agencies such as Mass Housing Partnership and NeighborWorks for the application process and distribution of these funds.

FUNDING

Describe the proposed funding for this project. Identify other sources you are seeking funds from, and whether those funds are secured. Identify any funds you or your organizations are willing to provide.

The AHT is requesting \$100,000 of CPC funds identified for community housing be allocated to this project. These funds will reimburse AHT funds set aside for establishment of an Emergency Rental Assistance program.

Proposed Funding


Total Project Cost	CPC Funds Requested	Sources of Funds other than CPA	Amount	Funding Secured? (Y/N)*
\$ 100,000	\$ 100,000		\$ 100,000	
			\$	
			\$	
			\$	
			\$	

** If the request is still outstanding, when do you expect to hear a decision?*

OTHER COMMENTS

Provide any other information you think the CPC should be aware of in evaluating your request for funding.

By signing below, the Applicant represents he/she is duly authorized, agrees to the terms and conditions and all other requirements of this Application and agrees to be bound thereby if funding is granted for the Project.

Date: 9/28/2020 Signature:  Stephen Irish Trustee/Chair

FOR COMMUNITY PRESERVATION COMMITTEE USE

This request received by Scituate CPC on _____

Copies provided to CPC Members on _____

Additional information required: _____

Committee Vote

Votes:	Yes / No	Votes: Y/N/Abstain	Date
Recommend to Town Meeting			

Other: _____
