### Exhibit A

**Application**

**Notice of Funds Available (NOFA)**

HOME Rehabilitation Program

New Mexico Mortgage Finance Authority

344 Fourth St. SW

Albuquerque, New Mexico 87102

(505)843-6880

Applicants must complete and submit the Service Provider application form with all required documents included in the *Service Provider application checklist*. MFA staff will evaluate the application using the Minimum Qualifications and Requirements, and Service Provider evaluation and scoring criteria listed below. Upon approval, MFA and the Service Provider will enter into a Performance Agreement with a term to be determined by MFA based on service provider capacity and other factors. Upon execution of the Performance Agreement, project applications can be submitted for project awards.

MFA staff may contact Applicants for clarification of the information provided in the application process.

Entity Type:

[ ]  Non-Profit Organization

[ ]  For-Profit Organization

[ ]  Governmental Housing Agency or Authority

[ ]  Governmental Entity

[ ]  Governmental Instrumentality

[ ]  Regional Housing Authority

[ ]  Public Housing Authority

[ ]  Tribal Government

[ ]  Tribal Housing Agency or Housing Authority

[ ]  Other

Offeror                                                                                              Application Date

Federal Tax ID                                                                                 UEI #

Address

City                                                                                                              State                    Zip

Contact Person                                                                                           Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail                                                                          Phone                                                     Fax\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Offeror Website

Minimum qualification and requirements

1. Be organized under state, local, or tribal laws and can provide proof of such organization and that Applicant is in good standing, as applicable.
2. A functioning accounting system that is operated in accordance with generally accepted accounting principles or has designated an entity that will maintain such an accounting system consistent with generally accepted accounting principles or has a fiscal agent familiar with affordable housing programs and projects or in lieu of an audit, an independent CPA’s review of financial statements, signed by the reviewer.
3. No significant financial audit findings, and no significant outstanding or unresolved monitoring findings from any governmental entity, or from MFA, or otherwise; or if it has any such findings, it has a certified letter from the governmental entity, MFA, or otherwise stating that the findings are in the process of being resolved.
4. Not having been suspended, debarred, or otherwise restricted by any department or agency of the Federal Government or any State government from doing business with such department or agency because of misconduct or alleged misconduct.
5. Not having defaulted on any obligation covered by a surety or performance bond.
6. Insurance Requirements – service provider applicants must maintain acceptable General Liability Insurance and work with qualified and licensed and bonded contractors.

Non-profit applicants must also provide proof of the following:

1. 501(c)(3) tax status;
2. Having no part of its net earnings inuring to the benefit of any member, founder, contributor or individual; and
3. Compliance with the Charitable Solicitations Act, NMSA 1978, §57-22-1 et seq. and with the filing requirements by the New Mexico Attorney General’s Office under that Act.

The following criteria must be met by all Applicants to be considered an approved Service Provider to receive HOME Rehabilitation Program funding. To assist MFA in the scoring process, applicants must provide all requested documents listed in the Scoring Criteria section. Applicants must score a ***minimum of 70 points*** of the total points possible.

**SCORING CRITERIA**

**FINANCIAL STRENGTH – 25 Possible Points**

External Audit – 10 Possible Points

Independent audit or audited financial statements must be for the most recent completed fiscal year not ending earlier than 2022. Audit materials must include management’s response to any findings and corrective action to clear the finding or provide details on the current status of a finding.

Financial Management – 10 Possible Points

Provide the policy for the applicant’s system of internal controls for fiscal management as documented in a policies and procedure manual approved by the applicant’s Board of Directors/Owner

Financial Management – 5 Possible Points - Provide by-laws requiring Board of Director’s/Owner fiscal oversight.

**CONSTRUCTION AND REHABILATION EXPERIENCE– 30 Possible Points**

Complete the following table and include as an attachment, resumes for the executive director, accountant, program manger and support staff who will be administering the program

**Administrative and Financial Management Capacity**

|  |  |  |  |
| --- | --- | --- | --- |
| **Program/Staff Name** | **Title** | **Yrs. of Experience** | **Capacity/Role/Services Offered** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
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Number of Construction &/or Rehabilitation Projects Completed MFA’s **HOME** Program (10 possible points)

**List Construction &/or Rehabilitation Projects**

Please provide a list of Projects the Agency has completed in the last three years.

|  |  |
| --- | --- |
| **Project Location/Description** | **Date Completed** |
| Click or tap here to enter text. | Click or tap to enter a date. |
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Number of Construction &/or Rehabilitation Projects with other Federal Rehab Programs (10 possible points)

**List Construction &/or Rehabilitation Projects**

Please provide a list of Projects the Agency has completed in the last three years.

|  |  |
| --- | --- |
| **Project Location/Description** | **Date Completed** |
| Click or tap here to enter text. | Click or tap to enter a date. |
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Number of Years Experience with Construction and Rehabilitation Projects – 10 Possible Points

**Field Experience and Capacity**

Please provide the Names and years of experience for individuals that will be managing the HOME Rehab Program

|  |  |  |
| --- | --- | --- |
| **Name** | **Years of Experience** | **Capacity/Role** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
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**IMPLEMENTATION PLAN – 20 Possible Points**

Executive Summary- 5 Possible Points

Executive Summary of the agency detailing what comprises the agency and the agency’s mission statement.

How HOME Rehabilitation fits into agencies mission- 10 Possible Points

Provide an explanation of how HOME Rehabilitation fits into the agency’s mission and why this program will support the mission. In addition, please include answers to the following questions:

* Describe how your organization will prioritize the funds to assist low to moderate income populations.
* Describe how your organization will prioritize the funds to assist the elderly, persons with health issues, minority, and indigenous populations as it relates to providing HOME Rehabilitation services.
* Describe your organization’s HOME Rehabilitation outreach efforts.

Quality Assurance Plan- 5 Possible Points

Quality Assurance plan that thoroughly describes how Applicant will ensure the highest level of service.

**WAITING LIST – 15 Possible Points**

Number of Projects on Waiting List (up to 15 possible points)

|  |  |
| --- | --- |
| **Homeowner Name** | **Property Address** |
| Click or tap here to enter text. | Click or tap here to enter text. |
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 **UNDERSERVED COUNTY PROJECTS – 10 Possible Points**

Place an (x) next to the county your agency is willing to commit to providing home rehabilitation services.

|  |  |
| --- | --- |
| San Juan |[ ]  Quay |[ ]
| McKinley |[ ]  Guadalupe |[ ]
| Cibola |[ ]  Curry |[ ]
| Rio Arriba |[ ]  De Baca |[ ]
| Taos |[ ]  Lincoln |[ ]
| Colfax |[ ]  Chavez |[ ]
| Mora |[ ]  Roosevelt |[ ]
| San Miguel  |[ ]  Otero |[ ]
| Union |[ ]  Lea |[ ]
| Harding |[ ]  Los Alamos |[ ]

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