VIRGIN ISLANDS HOUSING FINANCE AUTHORITY Community Development Block Grant- Disaster Recovery



# Notice of Funding Availability & Application

Public Services and Special Needs Housing Program



Application Deadline: August 3, 2022

### **INVITATION FOR PROJECT PROPOSALS**

The Community Development Block Grant Disaster Recovery Program invites the public to submit project proposals to be considered for the funding from the 2022 grant allocation.

Applications can be found on our website at <u>https://cdbgdr.vihfa.gov/programs/public-services-facilities/</u>

**Application Submissions:** Applicants must submit a completed Application and all associated Application exhibits, as described in this NOFA, by <u>August 3, 2022.</u>

- Electronic Application Applicants must follow instructions provided within this document and at <a href="mailto:pspf@vihfa.gov">pspf@vihfa.gov</a>.
- No hard copies will be accepted.

#### **Funding Opportunity**

In accordance with the VIHFA Action Plan, as amended, the Public Services and Special Needs Housing Program was assigned thirty- seven million five hundred thousand dollars (\$37,500,000) of CDBG-DR funds. This Notice of Funding Availability (NOFA) makes seven million three hundred ninety-five thousand dollars (\$7,395,000.) available for public facilities and public services.

VIHFA reserves the right to award selected Applicants in accordance with funds made available by HUD and based on any applicable statutory constraint at the time of award issuance. Under the conditions of this NOFA it is the intent of VIHFA to award grant funds to eligible Applicants in an individual award amount not to exceed two million five hundred thousand dollars (\$2,500,000.00).

This NOFA is the initial process in identifying organizations and entities to participate in the Program. After the NOFA process has closed and projects are reviewed and selected, VIHFA will implement the Program utilizing agreements with awarded Subrecipients.

#### **Eligible Applicants**

Eligible entities for the Special Needs Housing include Nonprofit agencies of the Virgin Islands. This program's aim is to fund entities working in the Virgin Islands that may have been affected by the hurricanes or that were born from a need that was realized after the hurricanes. The Public Services and Special Needs Housing Programs will support the Island's NGOs who currently work with vulnerable populations in Virgin Islands.

#### **Eligible Activities**

Eligible activities for this Program, as per the Housing and Community Development Act of 1974 (42 U.S.C. § 5301 *et seq.*) (**HCDA**), are:

- Section 105(a)(2) acquisition, construction, reconstruction, or installation of housing for "at risk" populations, and sites or other improvements;
- Section 105(a)(4) clearance, demolition, removal reconstruction, and rehabilitation of buildings and improvements;

- Section 105(a)(5) building modifications to create accessibility accommodations for persons with disabilities;
- Section 105(a)(8) supplementary public services, a component to place limited clientele in the funded projects once completed;
  - When applicable, client services related to the initial use of funded housing may be considered an activity delivery cost as those costs support the documentation of the national objective.
- Section 105(a)(15) assistance to nonprofits organized under state or local law to carry out community development activities which address the development needs of the community in question.

#### **Eligible Use of Funds**

Program funding will be provided to implement construction, design and coordination of activities as listed below:

- Soft costs incurred in support of eligible construction and/or rehabilitation activities for special needs housing;
- Clearance of environmental contamination from sites to be used for the construction and/or rehabilitation of special needs housing;
- Rehabilitation and/or construction of housing to serve special needs populations
- Site improvements to land to enable the property to be used for the construction and/or rehabilitation of special needs housing;
- Staff costs and related expenses required for management of contractors procured for projects, screening potential beneficiaries, and other eligible services related to completion of the Program; and
- Costs of permanent fixtures for the facility.

#### **Ineligible Use of Funds**

Selected Subrecipients **shall NOT** use CDBG-DR Special Needs Housing Program funding for the following:

- Entertainment, including amusement, recreation and social activities; food and alcohol associated with parties or socials, meals, lodging, transportation, and gratuities associated with entertainment;
- Pre-award costs, including preparation of the grant proposal;
- Donations and contributions, including cash, services or properties;
- Fundraising activities;
- Lobbying;
- Supplanting Federal and State Funds;
- Operating costs associated with day-to-day functions of the NGO not associated with the approved special needs housing project;
- Support service-only activities (eligible under the Public Services portion of the NOFA);
- Rental assistance; and
- Any other items unallowable under federal cost principals as stated in 2 C.F.R. part 200.

#### Table 1: NOFA Schedule

Event	Date	
Public Notice	05/31/22	
NOFA Documents Availability	06/01/22	
Questions Due	06/19/22	
First Application Orientation Session	06/28/22	
Questions & Answers Posted	07/03/22	
Second Application Orientation Session	07/12/22	
Application Due Date	08/03/22	
	From:08/04/22	
Application Evaluation Period (Expected)	Up To: 09/04/22	
Notice of Award (Expected)	09/18/22	
Execution of the Agreement (Expected)	10/30/22	

Please note that the NOFA timeline and target dates may change. It is the responsibility of the Applicant to periodically review the VIHFA CDBG-DR Website for regular updates and other important information, which may alter the terms or requirements of this NOFA.

Prospective applicants must attend one of the **MANDATORY** orientation sessions as follows:

Applicant Orientation Session Information			
Session B			
Date: Tuesday, July 12, 2022			
Time: <b>5:30 - 6:00 PM</b>			
Meeting ID: 868 7434 9113 Passcode: 514873			
Training Registration Link:			
https://us02web.zoom.us/j/86874349113? pwd=UEIYMUpiSnNZK1UrVmtsR0J5c211Zz09			

For more information, contact Mr. Dan Derima at (340) 777-4432 (St. Thomas/St. John) or Ms. Zakenya Ross at (340) 772-4432 (St. Croix).

#### **Index and Instructions**

This application is to be completed by non-government agencies and non-profit organizations interested in obtaining Community Development Block Grant Disaster Recovery funds for Special Needs Housing and/or Public Services in the 2022-23 Program Year.

#### The Application

The application consists of four (4) sections. **Note:** Complete and return only the sections that are applicable to your project. Separate applications should be submitted for a project to be undertaken within both districts. Separate applications should also be submitted where an applicant proposes to undertake both a public service program and a construction project.

Section 1 (pages 6–8) and Section 2 (page 9) must be completed by each applicant. (Make sure to include your EIN and SAMs Entity numbers).

**Section 3** (pages 12-14) should be filled out only if the applicant is seeking CDBG-DR funds for the construction, renovation, or rehabilitation of **Special Needs Housing**.

**Section 4** (pages 15-) should be filled out only if the applicant is seeking CDBG-DR funds for **Public Services**.

Funded activities should be ready to start no later than **January 1**, **2023 and** achieve completion by **December 31**, **2025**.

The CDBG-DR program operates on a reimbursement basis. The agency/organization incurs the cost and submits the original receipts with copies of cancelled checks (or other form of proof of payment, where applicable) in order to request reimbursement of these costs. Undocumented expenses will not be paid or reimbursed. Reimbursements will be issued only for encumbrances or commitments that occurred after the effective date of the agreement authorizing the use of the funds. CDBG-DR funds cannot be used to pay or reimburse cost incurred prior to the effective date of the Sub-recipient Agreement/Memorandum of Agreement and the Notice to Proceed.

A fillable electronic version of the CDBG-DR application form is available on the VIHFA's website at <u>https://cdbgdr.vihfa.gov/programs/public-services-facilities/</u>

**Incomplete applications will be disqualified.** Do not use any other cover except the one included in this application. Application forms from prior years shall not be used. The CDBG-DR Program reserves the right to disqualify from consideration any application which does not conform to the requirements outlined above.

#### **SECTION 1: APPLICANT INFORMATION**

<mark>Th</mark>	his section is to be completed by all applicants.	
1.	Name of organization or agency:	
2.	Project Contact Person:	Position:
3.	Physical Address:	
4.	Mailing Address:	Zip Code:
	(If different from a	bove)
5.	Daytime Phone No:	Cell No:
6.	Fax No:	Email Address
7.	EIN/Tax ID #I	DUNS #
8.	Type of organization:	
	)Government () For- )For-profit, Corporation () Not	profit, Sole Proprietorship For-profit
9.	Number of years the organization has been in	operation:
10	). Major purpose of the organization:	
11	1. Describe the types of services the organization	n normally provides:
12	2. Identify clients normally served (for instance,	high school drop-outs):
Plo the ren ( ) ( )		For any documents which are not included with narrative to indicate the dates by which the as only) of it organizations only)

- ( ) Financial statements (not more than one year old)
  ( ) Financial statements (not more than one year old)
- () Formal organizational chart
- () Resumes, or job descriptions, of the organization/program's key personnel

14. Is the organization currently, or has it ever been, barred from participating in any federal or federally funded program or project (including CDBG): Yes ( ) No ( )

15. Please list below all the federal funds (including CDBG) that the organization has received over the last 3 years:

Funding Source	Amt of Funds Received	Purpose for which funds were used	Finished or Ongoing

#### Attach a separate sheet if additional space is required.

- 16. Is the organization current in its reporting on these grants? Yes () No ()
- 17. Provide a letter from each of these funding sources to show that the organization is in compliance with its requirements.
- 18. Describe the organization's fundraising activities within the last year and the amount of funds that were raised: \_\_\_\_\_\_

#### SECTION 2: ORGANIZATIONAL CAPACITY

- 1.. Describe in detail the following:
  - Experience of staff and organizational leadership of the agency with similar projects.
  - Experience of the staff and organizational leadership with federal funding.
  - Projected staffing to support the program/project being proposed.
  - Do you anticipate a need for technical assistance to complete the project and comply with all federal requirements?
- 2. Describe in detail the following:
  - Does the agency have policies and procedures for the proposed program already in place?
  - Does the organization have an understanding of the compliance requirements under 2 CFR Part 200 (for use of federal funds)?
- 3. Please attach a copy of the organization's most recent audit:
  - If there were findings, what corrective actions have been taken
  - If no recent audit is available, please submit the organization's financial information
- 4. Describe how this proposed project compares with the projects currently undertaken by the agency:
  - Relative amount of funding being requested to agency's total budget
  - Environmental/historic preservation considerations (if rehab or reconstruction)
  - Anticipated number of procurements/contracts/vendors will be involved?
  - If construction is proposed, experience in overseeing construction projects and managing architects, construction contractors
  - Number of funding sources anticipated for the project (awardees will be required to undergo a duplication of benefits analysis, and sign a subrogation agreement with VIHFA)
- 5. Describe in detail the financial management systems currently in use by the organization:
  - Invoice processing, including program and finance approvals process
  - Internal processes and controls
  - Experience with federal fiscal reporting and procurement requirements
  - Procurement process, including solicitation, evaluation and award
  - 6.. Describe in detail, the organization's experience with CDBG or other federal funds:
    - Environmental review
    - Section 3
    - Davis Bacon

#### (To be executed by organization's head)

I certify that the information contained in this application is true and correct. I agree to commit the agency to the implementation of this project if it is approved:

D	
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Print Name

Signature

Date:

#### **SECTION 3: PROJECT SUMMARY**

This section is to be completed by all applicants.

#### A. ELIGIBLE ACTIVITIES

- () Construction, reconstruction, rehabilitation, or installation of special needs housing.;
- () Clearance, demolition, and removal of buildings and improvements (limited circumstances);
- () Relocation payments and other assistance for temporarily relocated beneficiaries of existing special needs housing
- () Removal of architectural barriers
- () Provision of public services

#### **B.** Need and Appropriateness of Project

1. Describe the project/program for which CDBG-DR funding is being requested.

2. Why is this project necessary and appropriate for the community?

3. Why are CDBG-DR funds necessary and appropriate for the project? Please include how your project relates to or responds to the impact of Hurricanes Irma and Maria.

- 4. Can the project proceed without CDBG-DR funding? Yes () No ()
- 5. Indicate the beneficiaries, clients or persons for whom the project is intended (for instance, "the homeless", "youth ages 6 12", "residents of public housing"):

#### C. National Objectives

In order to be eligible for CDBG-DR funding, a project must meet at least one of the national objectives of the CDBG-DR Program outlined in Section 101(c), Section 104(b)(3),105(c) §570.208 of the Code of Federal Regulations. Select from below the national objective(s) to be met by this project.

- () Benefit to low- and moderate- income (LMI) persons;
- () Address in the prevention or elimination of slums & blight; and
- () Address an urgent need for recovery

#### D. Low/Moderate Income Benefits

If the project will meet the low/moderate national objective above, please select one of the following beneficiary categories:

- () Limited Clientele: Participation in the program would be limited to a specific group of persons and at least 51% of them qualify as low to moderate income.
- () Presumed Benefits: These following persons are assumed to be of low to moderate income: elderly, severely disabled adults, homeless persons, illiterate adults, migrant farm workers, abused children, persons with AIDS or battered spouses
- Area-wide benefits to persons of low to moderate income (Note: This selection is applicable only if the project will be located in a neighborhood or census tract where more than 51% of the persons or households qualify as low to moderate income. Please refer to the census maps attached at the end of the application).

#### E. Public Service Projects

- 1. Street Address of Project:
- 2. Number of persons or households to be directly served by the project \_\_\_\_\_

- 3. Percentage meeting the definition of low/moderate income \_\_\_\_\_%
- 4. Describe how you will ensure participation of low/moderate income beneficiaries:

Note: If the public service project is seeking to qualify as either limited clientele or presumed benefit, documentation of family income will have to be provided for each participant before the start-up of the project activity.

#### F. Consolidated Plan Consistency

Does your proposed project address either or both needs identified in the USVI's Consolidated Plan?

- 1. ( ) Reduce and prevent homelessness Examples of projects meeting this objective include, but are not limited to, projects which entail construction of, or improvements to, emergency shelters, transitional facilities, or permanent supportive housing; operations of emergency shelters, transitional housing facilities, or permanent supportive housing; construction of other homeless facilities such as soup kitchens and outreach facilities; homeless prevention, rapid re-housing, and other services, including but not limited to outreach ,counseling, medical and mental assistance and case management.
- 2. ( ) Provide services and community support Examples of projects meeting this objective include, but are not limited to, projects which provide services that assist low-income households and neighborhoods; also, projects that assist special needs populations – e.g., youth, the elderly, disabled persons, the mentally ill, victims of domestic violence, and victims of substance

#### G. Funding

The Territory of the Virgin Islands received an allocation of Community Development Block Grant – Disaster Recovery funds. These funds must be expended by July 2026. For this reason, applicants are required to propose only those programs or projects where funding can be expended, and a national objective achieved by **December 31, 2025** 

If an awarded project is not projected to achieve a national objective by the deadline above, grant funding will be withdrawn and reprogrammed to another project. Therefore, the organization should not apply for any more funds than it expects to be able to use to achieve a national objective in the time allotted.

1.	Amount of CDBG-DR funding requested by this application:	\$
2.	Anticipated amount of CDBG-DR funding required in subsequent years:	\$
3.	Total amount of CDBG-DR funding required for the project:	\$
4.	Activities for which the funding in this application would be used:	

## PROJECT BUDGET BREAKDOWN - (Amounts on this page must match amounts stated elsewhere within the application)

	DESCRIPTION	ESTIMATED COST OF PROJECT	AMOUNT OF CDBG-DR \$\$ BEING REQUESTED	OTHER FUNDS AVAILABLE FOR THIS PROJECT
1.	Acquisition or Lease of Real Estate.	\$	\$.	\$.
2.	Plans and Specs for new construction, rehabilitation, or restoration	\$	\$	\$
3.	New Construction, rehabilitation, or restoration	\$	\$	\$
4.	Operation of a program or provision of public services	\$	\$.	\$.
5.	GRAND TOTAL	\$	\$.	\$.

- 5. Explain source(s) of amounts listed under "Other Funds Available for This Project" above:
- 6. Please complete the schedule below in order to demonstrate that the organization will be able to spend the CDBG-DR by the deadline.

Quarter (2021)	Activity(ies)	Start Date	Completion Date	Quarterly Funds Expended	Cumulative Funds Expended
January- March					
April – June					
July – September					
October – December					

#### **SECTION 4: CONSTRUCTION ACTIVITIES**

Complete this section only if CDBG-DR funds are required for the construction of a new building or the renovation or rehabilitation of an existing one. Please note that if the construction or rehabilitation cost exceeds \$25,000, a lien will be recorded against the property. This lien will be removed if the building is used for the intended purpose for a minimum of fifteen years, as required by HUD.

1. Location of site: (Please also identify location of proposed project on Estate Map included as attachment)

Adjacent roads or land	marks:		
ejucont rouds or fund			
Lot size:	acres /squar	e feet (please circle i	init of measure used
a) Purpose for which	property is presen	tly being used:	
<i>")</i> <sup>1</sup> <i>"</i> <sup>1</sup> <sup>0</sup> <sup>1</sup> <sup>0</sup> <sup>1</sup> <sup>0</sup> <sup>1</sup> <sup>1</sup> <sup>1</sup>			

existing building. If project does not entail renovation or rehabilitation, please skip to Item 5.

- Size of structure: \_\_\_\_\_\_sq. ft. 4. (a)
  - (b) No. of rooms:
  - Is the building currently occupied? Yes () No () (c)

If yes, indicate whether it is occupied by [] the owner, [] residential tenant(s), [] commercial tenant(s)

- Will any tenants be displaced as a result of this project? Yes () No () (d) No. of tenant families No. of business tenants
- (e) Was the property to be assisted built prior to 1978? Yes () No()If built before 1978, indicate whether the property has been tested for the presence of Lead- Based Paint: Yes () No()

If yes, please submit a copy of the final report with this application. \*If no, complete and submit the Lead Safe Housing Rule - Applicability Form found on page 35 of this application.

5. Please describe the scope of work needed in order to place the building in service for the proposed use: \_\_\_\_\_

(Use additional sheets, if necessary)

6. Name of Present Owner of record: \_\_\_\_\_

- 7. If the applicant already has control of the property, please attach a copy of evidence of site control as applicable e.g., property deed; land contract or sales agreement; Offer to Purchase, letter of intent to sell, or other evidence of intent to acquire; lease agreement
- 8. Select below the activities for which the CDBG-DR funds will be used: *Check as many as may apply:*  Development of plans and specifications Actual construction Construction management

\* Please note that CDBG funds cannot be used to pay or reimburse costs incurred prior to the issuance of the project's Notice to Proceed.

#### 9. **Proposed Budget**

For projects which entail <u>rehabilitation or renovation of</u> an existing building, please attach a construction estimate prepared by an architect, engineer, or licensed contractor. Your application will be considered incomplete until the estimate is submitted.

Category	Total Cost	Amount of CDBG Funds Required	Amount of other Funds Available
Project design & engineering services	\$	\$	\$
Construction Services	\$	\$	\$
Construction Management	\$	\$	\$
Other Project Cost			
1.	\$	\$	\$
2.	\$	\$	\$
3.	\$	\$	\$
Total	\$	\$	\$

10.10. Attach pictures of the proposed site and building to be rehabilitated or renovated OR email pictures of the subject property to either \_\_\_\_\_\_\_ if the project is located in the St. Thomas/ St. John District or \_\_\_\_\_\_ if the project is located in the St. Croix District.

() Engineering and Design completed

<sup>11.</sup> Please indicate any work already completed on the project: *Check as many as may apply:* 

<sup>()</sup> Scope of work developed

Preliminary construction estimate completed Some construction completed	( )	Permits in place		
Legal actions required in order to develop and use the property for the intended purpose:				
<i>Check as many as may apply:</i> Zoning change Army Corps of Engineers Permit Environmental Impact Statement Legislative approval of lease <i>(government-owne)</i>		Coastal Zone Permit Environmental Assessment <i>only)</i>		
Infrastructure required in order to develop and use the property for the intended purpose:				
Check as many as may apply: Access Roads Water lines Handicapped Access Storm Water Drainage Other (describe):		Power lines Parking Sanitary Sewer		
Estimated annual maintenance cost after the buccompleted: \$Are the funds required for maintenance of the If yes, please identify the amounts and funding	building in j	place? Yes ( ) No ( )		
completed: \$ Are the funds required for maintenance of the If yes, please identify the amounts and funding	building in j	place? Yes ( ) No ( )		
completed: \$ Are the funds required for maintenance of the If yes, please identify the amounts and funding	building in p g sources be MOUNT	place? Yes ( ) No ( )		
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completed: \$         Are the funds required for maintenance of the If yes, please identify the amounts and funding         SOURCE       A	building in j g sources be MOUNT cture will f ually:	place? Yes () No () low:  be used after renovation or 		
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completed: \$         Are the funds required for maintenance of the If yes, please identify the amounts and funding         SOURCE       A	building in p g sources be MOUNT cture will f ually: in place? Ye	place? Yes ( ) No ( ) low:  be used after renovation or  es ( ) No ( )		

#### **SECTION 5: PROVISION OF SERVICES**

Describe the services to be provided:
Physical address from which the services will be provided:
Is the building properly zoned for the proposed use? Yes () No ()
Hours of operation of the proposed program:
Describe the number and common characteristics of the persons to be directly served the program <i>(e.g., 32 low-income youths between the ages of 17 and 22)</i> :
Describe other indirect beneficiaries:

Is the applicant currently licensed by the Department of Human Services? Yes ( ) No ( )
 \* License will require if the proposed program will serve children under the age of 15.

8. Has the applicant previously provided the services being proposed? Yes () No () If yes, how long has the applicant been providing these services?

 9.
 What was the program's primary source of financing?

 10.
 How many persons were served in each of the previous cycles?

 11.
 How did the organization measure the success of its program?

 12.
 How does the experience of the organization relate to its role in providing the proposed services?

 13.
 Describe the administrative, managerial, and operational capabilities of the organization's staff. Please also identify those members of the staff that would be involved in providing the proposed services.

(Use additional sheets, if necessary)

Describe your program's client screening, intake, and selection process – i.e., how, and when client assessment will be performed, and by whom: \_\_\_\_\_\_

15. What distinguishes your program from other programs providing similar services?

*Complete Items 16 and 17 below only if the organization is currently providing the proposed services. If the organization is not currently providing the proposed services, skip to Item 18.* 

- 16. Will CDBG-DR funds be used to increase the number of people served by your existing program? Yes () No ()
- 17. List your current services and the additional services:

#### **CURRENT SERVICES**

#### ADDITIONAL SERVICES TO BE OFFERED BY PROPOSAL

18. Estimated cost of the services for which CDBG-DR funds are being sought: \$\_\_\_\_\_

#### 19. **PROPOSED BUDGET**

CATEGORY	CDBG-DR FUNDS	OTHER FUNDS (Identify other funds available or committed)		
Personnel Services	\$	\$		
Material & Supplies	\$	\$		
Travel	\$	\$		
Equipment	\$	\$		
Advertisement	\$	\$		
Rent	\$	\$		
OTHER (please specify)	•			
1. Utilities	\$	\$		
2. Insurance	\$	\$		
3	\$	\$		
4	\$	\$		
TOTAL	\$	\$		

20. Sources and amounts of other funds available or required to carry out the project listed under "Other Funds Available" at Question 19 above:

SOURCES	AMOUNTS
	\$
	\$
	\$

21. Does the organization have any written commitment(s) of these funds? Yes () No () If yes, attach letter(s) of commitment. If no, indicate date(s) by which commitment(s) will be secured:

SOURCE	DATE

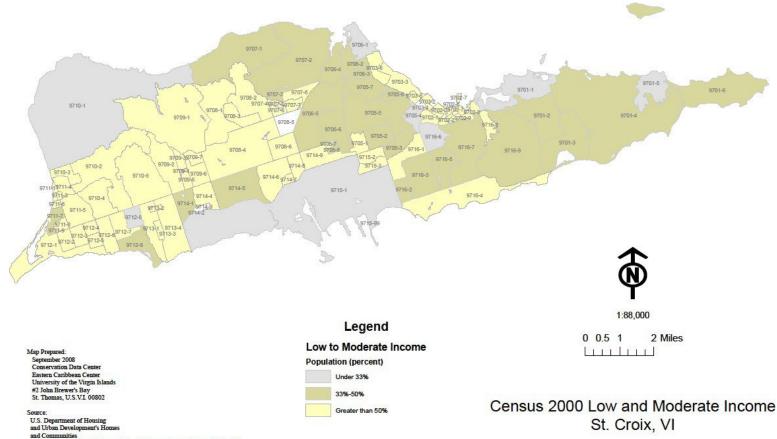
22. If your program receives CDBG-DR funds for this funding cycle, how will it continue to operate once the CDBG-DR funding is no longer available

#### 22. Personnel to be paid with and without program funds

Position Title	#Of Persons	Duration of Employment From To		# of hours weekly	Total # of hours	Hourly Rate	Total Payment	Amount to be Paid from CDBG-DR funds
TOTAL								

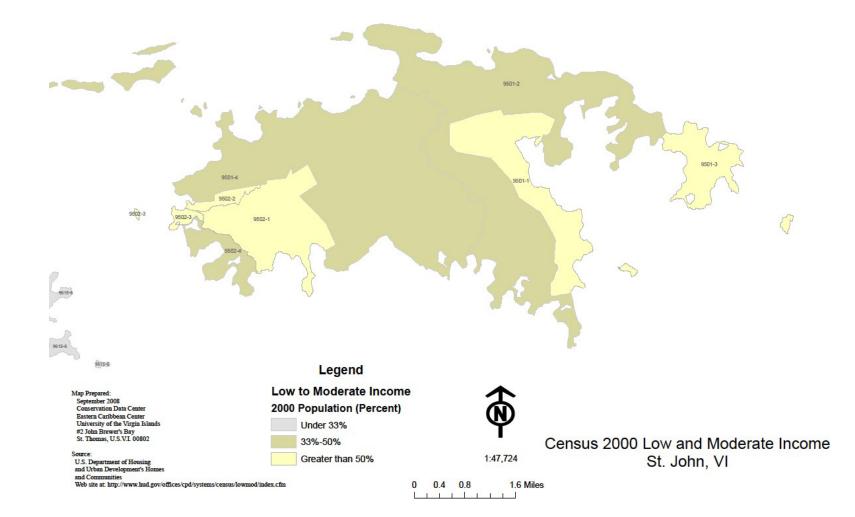
23. Describe the job duties for each position that will be participating in this program listed above (attach separate sheet(s) if necessary)

#### **CENSUS MAP - ST. CROIX**

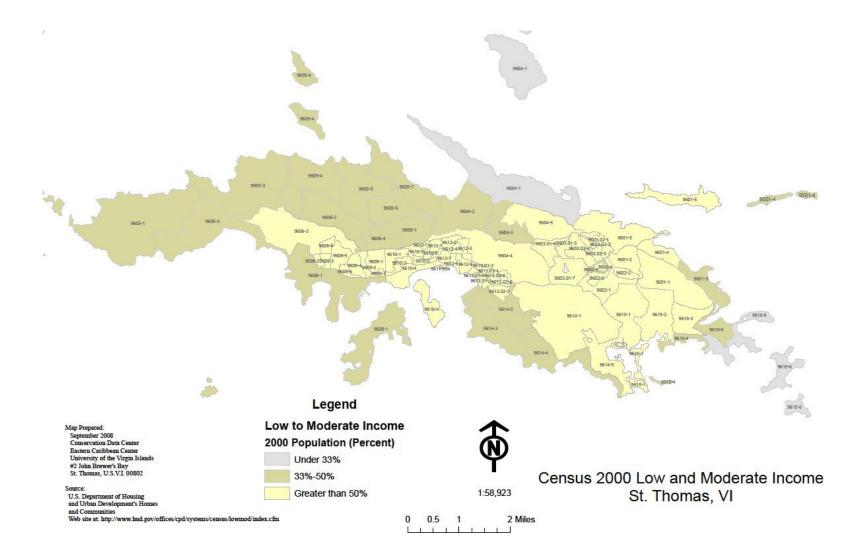


Web site at: http://www.hud.gov/offices/cpd/systems/census/lowmod/index.cfm

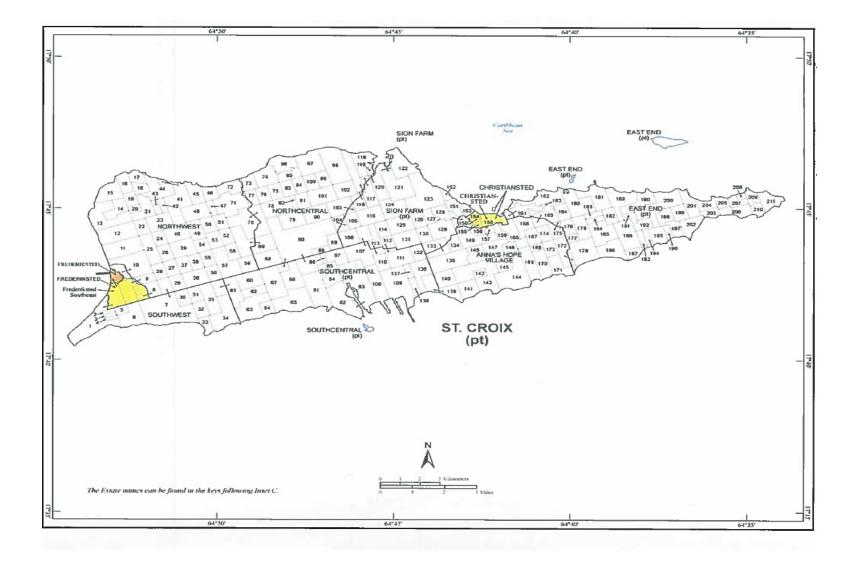
#### **CENSUS MAP - ST. JOHN**



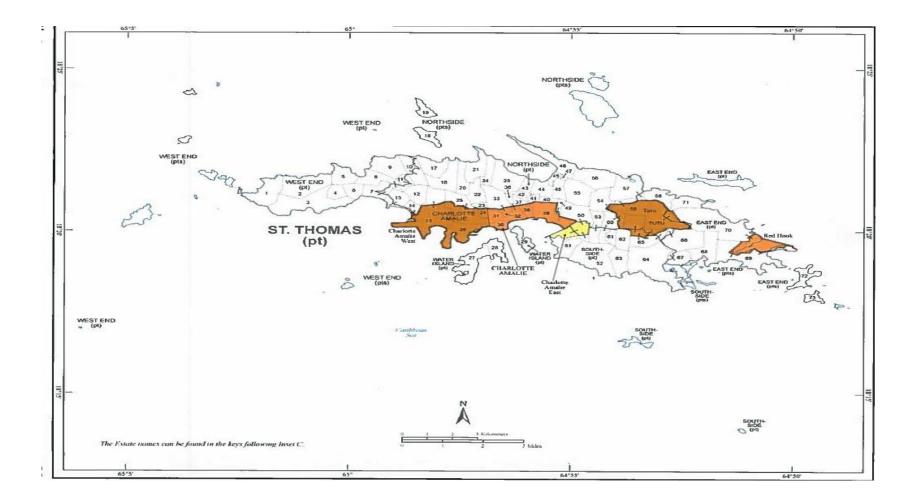
#### **CENSUS MAP - ST. THOMAS**

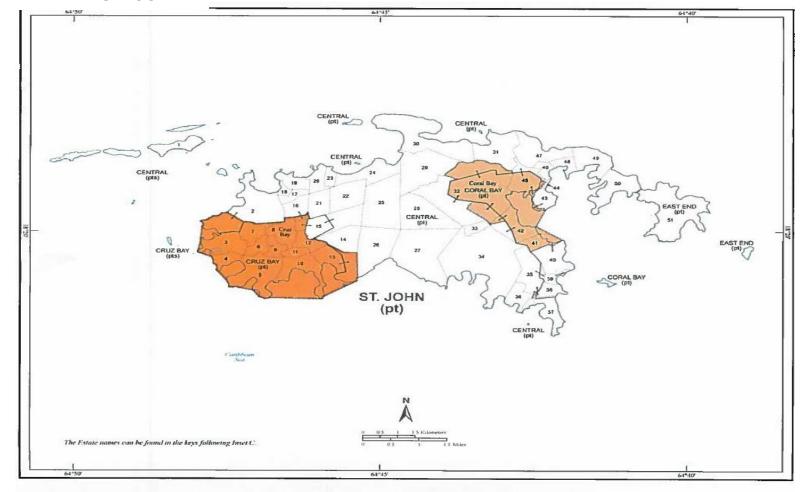


#### **ESTATE MAP - ST. CROIX**











#### Key to Estates (sorted numerically by key number)

ST. CROIX 1 Two Brothers 2 Whites Bay 1 3 White Lady 4 Whites Bay 2 5 Stony Ground 6 Hannaha Rest 7 Whim 8 Concordia West 9 Wheel of Fortuna 10 La Grange 11 Prosperity West 12 William 13 Sprat Hell 14 Mount Washington and Washington Hill 15 Northside 16 Harns Bay 17 Harns Bluff 18 Caledonia 19 Nicholas 20 North Hall 21 Mount Victory 22 Purch 23 Oxford 24 Jolly Hill 25 Little La Grange 26 Brooks Hill 27 St. Georges Hill 28 Frederiksha 29 Carlton 2 30 Cariton 1 North 31 Cane 32 Cartion 1 South 33 Cain Carlton 34 Enfield Green 35 Williams Delight 36 Hogensborg 37 Cane Valley 38 Waldberggae 39 Becks Grove 40 Orange Grove West 41 Annaly 42 Rose Hill 43 Pleasant Volley West 44 Spring Garden 45 Wills Bay 48 Sweet Bottom 47 Bodkin 48 Mount Stewart 49 Montpellier West 50 Two Edends 51 Hard Labor 52 Plessen 1 53 Springfield 54 Allandale 55 Hope West 58 Mountain 57 St. George 58 Grove Place 59 Plessen 2 60 Mount Pleasant West 61 Diamond West 62 Paradise 63 Bettys Hope 64 Envy 65 Mannings Bay 66 Golden Grove 67 Adventure 68 Lower Love 69 Upper Love 70 River 71 Fountain 72 Prospenty East 73 North Star 74 Cane Bay 75 Mount Eagle 78 Solitude West 77 Parasol 78 Hermiteo 79 Colquohoun 80 Bethlehem Old Works **B1 Bethiehem Middle Works** 82 Anguisa 83 Blessing 84 Annaberg and Shannon Grova 85 Profit 86 Kingshill 87 **Clifton Hill** 88 Upper Bethlehem 69 Body Slob South 90 Mon Biou South 91 Little Fountain 92 Mon Bijou North

93 Canaan 94 Belsys Jewel 95 Belvedere La Valleo 96 97 Rust Up Twist 98 Clairmont 99 Bonne Esperance 1 100 Mount Pleasant East 2 101 Lebanon Hill 102 Windsor 103 Glynn 104 Body Slob North 105 Bonne Esperance 2 106 La Reine 107 Barren Spot 2 109 Hope East 109 Jerusalem and Figtree Hill 110 Cottage 111 Castle Coakley 112 Diamond East 113 Strawberry Hill 114 Ruby Marys Fancy 115 116 Concordia East 117 Morning Star South 118 Salt River 119 Morning Star North 120 Montpellier East 121 St. John 122 Judiths Fancy 123 La Grande Princess 124 Ratian 125 Sion Hill 126 Thomas 127 Bellevue 128 Little Princess South 129 Beaston Hill 130 Constitution Hill 131 Sion Farm 132 Peters Rest 133 Annes Hope 134 Grange 135 Work and Rest 136 Pearl 137 Cassava Garden 138 Barren Spot 1 139 Cane Garden 140 Retreat 141 Diamond Keturah 142 Com Hit 143 Granard 144 Longford 145 Grange Stock 145 Spring Gut 147 Bugby Hole 148 Catherines Rest 149 Hermon Hill 150 Orange Grove East 151 Golden Rock 152 Little Princess North 153 Fangselet 154 Richmond 155 Friedenstha 156 Contentment 157 Peters Farm 158 East Street 159 Recovery Hill 160 Mount Welcome 151 Altona 162 Shoys 163 Roberts Hill 164 Mount Pleasant East 1 165 Boetzberg 166 St. Peters 167 Eizas Retre 168 La Press Valley The Springs 169 170 Castle Nugent 171 Fareham 172 Petronella 173 Prospect Hill 174 Carina 175 Lowry Hill 176 Marienhoj 177 Sallys Fancy 178 Hartman 179 Sight 180 Southgale 181 Green Cay 182 Seven Hills 183 All for the Better 184 Tipperary

185 Union and Mount Washington 186 Great Pond 187 Mount Fancy 188 Cotton Grove 189 Coakley Bay 190 Solitude East 191 Pleasant Valley East 192 Gumbs Land 193 Little Profit 194 Mount Retrea 195 Wood Cottage 196 Yellow Cliff 197 Madam Carty 198 Hope and Carton Hill 199 Catherines Hope 200 Cotton Valley 201 Teague Bay 202 Turner Hold 203 South Slob 204 North Slob 205 North Grapetree Bay 206 South Grapetree Bay 207 Long Point 208 Kramers Park 209 Cotton Garde 210 Jacks Bay 211 A Piece of Land ST. JOHN 1 Lovango Cay 2 Caneel Bay 3 Enighed Contan 4 5 Chocolate Hole and Great Cruz Bay Bethany 7 Pastory Glucksberg and Grunwald g San Soucci 10 Rendezvous and Diffel 11 Parcel of Gift and Regenback 12 Bellevue 13 Fish Bay 14 Sieben 15 Beverhoutborg and Esperance 16 Susannaberg 17 Number 1 of Susannoborg 1B Hawksnest 19 Donis Bay 20 Number 1 of Trunk Bay 21 Adrian 22 Hammer Farm 23 Peter Bay 24 Great Cinnamon Bay 25 Rustenberg and Adventure 26 Molendal and Little Reef Bay 27 Reef Bay 28 Hope 29 Maho Bay 30 Annaberg 31 Leinster Bay 32 Carolina 33 Bordeeup 34 Lameshu 35 Concordia B 36 Mandal 37 Parcel of Concordia 38 Concordia A 39 Johns Folly 40 St. Quaco and Zimmerman 41 Calabash Boom 42 Little Plantation 43 Fonberg 44 New Rencbath 45 Emmaus 46 Zootenvaal 47 Browns Bay 46 Hermitage 49 Mount Pleasant and Retreat 50 Haulover 51 Hensen Bay ST. THOMAS 1 Little St. Thomas Bordeaux Fortuna 3 Fortuna Hill 4 Норе 6 Perseverance Bonne Esperance 8 Santa Maria 9 Sorgenfri 10 Carel Bay

11 Pearl 12 Crown and Hawk 13 Adelphi rs Bay 14 John Brev 15 Lindbargh Bay 16 Dorothea 17 Neiljeberg 18 Inner Brass Island 19 Outer Brass Island 20 Bonne Resolution 21 Hull 22 Liliendal and Marlenhoi 23 Upper John Dunko 24 Lower John Dunko 25 Contant 26 Nisky 27 Western Water Island 28 Eastern Weter (sland 29 Hassel Island 30 Honduras 30 Honourgs 31 Demarara 32 Annas Fancy 33 Solberg 34 St. Peter 35 Lerkenlund 36 Staabi 37 Agnes Fancy 38 Queens Quarter 39 Kings Quarter 40 Hespital Ground 41 Mafolin 42 Elizabeth 43 Misgunst 44 Zutriedenheit 45 Megens Bay 46 Peterborg 47 Herleins Kob 48 Canaan and Sherpenje 49 Ross 50 Thomas 51 Bakkero 52 Frenchman Bay 53 Raphune 54 Wintberg 55 St. Joseph and Rosendal 56 Loventund 57 Mandal 58 Tabor and Harmony 59 Annas Retrea 60 Donce 61 New Hermitut 62 Hoffman 63 Bolongo 64 Bovoni 65 Charlotte Amalie 66 Langmath Marlendal 67 Nadir 68 Frydenhoj 69 Nazareth 70 Smith Bay 71 Frydenda 72 Great St. James Island Little St. James Island

#### LEAD-SAFE HOUSING RULE -- APPLICABILITY FORM

#### Address/location of subject property:

#### **Regulation Eligibility Statements (check all that apply):**

Property is receiving OR applying for federal funds

\_\_\_\_Unit was built prior to 1978.

Note: If both Eligibility Statements above have been checked, continue with the Exemption Statements below. Otherwise, the regulation does not apply, sign and date the form.

#### **Regulation Exemption Statements [24 CFR 35.115] (check all that apply):**

Emergency repairs to the property are being performed to safeguard against imminent danger to human life, health, or safety, or to protect the property from further structural damage due to natural disaster, fire, or structural collapse. The exemption applies only to repairs necessary to respond to the emergency.

The property will not be used for human residential habitation. Note: This exemption *does not* apply to common areas such as hallways and stairways of residential and mixed-use properties.

Housing "exclusively" for the elderly or persons with disabilities, with the provision that children less than six years of age will not reside in the dwelling unit.

An inspection performed according to HUD standards found the property contained no lead-based paint.

According to documented methodologies, lead-based paint has been identified and removed; and the property has achieved clearance.

The proposed rehabilitation will not disturb any painted surface.

The property has no bedrooms.

The property is currently vacant and will remain vacant until demolition.

If any of the above Exemption Statements have been checked, the Regulation does not apply. In all cases, sign, and date the form.

I, \_\_\_\_\_, certify that the information listed above is true and accurate to the (Printed Name)

best of my knowledge.

Signature

Date

Organization