



Notice of Funding Availability and Request for Applications

The City of Greenville is currently accepting applications for the Program Year 2023 - 2024 Housing Opportunities for Persons with AIDS (HOPWA) Grant Program. As an Entitlement Jurisdiction, funding from the U.S. Department of Housing and Urban Development (HUD) is made available annually on a formula basis, and the City estimates \$500,000 in a new allocation.

The HOPWA program is designed to provide states and local jurisdictions with resources to develop long-term, comprehensive strategies for meeting the housing needs and reduction of homelessness in low-income persons with acquired immunodeficiency syndrome (AIDS) and their families. The City of Greenville administers HOPWA funding as a formula entitlement for the Upstate including Greenville, Laurens, Pickens, and Anderson counties.

For a comprehensive list of eligible activities within these service areas, refer to criteria listed in 24 Code of Federal Regulations Part 574.300.

In addition to the completed application pages, please include copies of the following as applicable with your submission:

- Articles of Incorporation
- Bylaws
- IRS 501(C)(3) determination letter
- Current list of all members of the board of directors, including name, address, and beginning and ending dates of term
- Most recently completed audit
- Statement letter indicating experience with HOPWA or federal funding

Questions can be directed to Community Development Division at 864-467-4570.

Please return the following application pages to Regina Wynder, Community Development Specialist, by **March 3, 2023 at 5 p.m.** at the above email address or by mail: P.O. Box 2207, Greenville, S.C. 29602.



FY 2023 - 2024 HOPWA Funding Application

Name of Agency: _____ Date: _____

Address of Agency: _____

Telephone: _____

Contact Person: _____ E-mail address _____

List of Activities- Check all activities your agency is applying for.

<input type="checkbox"/>	Short-term rental assistance
<input type="checkbox"/>	Tenant Based Rental Assistance
<input type="checkbox"/>	Utility Assistance
<input type="checkbox"/>	Mortgage Assistance
<input type="checkbox"/>	Food and Nutrition Assistance
<input type="checkbox"/>	Supportive Services
<input type="checkbox"/>	Housing Placement
<input type="checkbox"/>	Housing Activities: Rehabilitation, Acquisition, etc.
<input type="checkbox"/>	Other

Brief Project(s) Description:

Proposed number of Person to be Assisted: _____

Target Income: _____

Proposed target Area: _____

Proposed Schedule:

	Activities to be Completed	Target Start Date	Target Completion Date
<i>Ex.</i>	<i>Utilities assistance</i>	<i>July 2023</i>	<i>September 2023</i>
1			
2			
2			
4			

Budget:

	Activity Details	Amount of Funds Requested	Other Sources	Total Budget
<i>Ex.</i>	<i>Utilities Deposit</i>	<i>\$2,000</i>	<i>Private Donations \$500</i>	<i>\$2500</i>
1				
2				
3				
4				
5				
6				
	TOTAL			

Signature: _____ Date: _____

Name: _____ Title: _____