Roll Call Number

Agenda Item Number

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Date June 30, 2009

AUTHORIZING SUBMITTAL OF DISASTER DAMAGE HOUSING **ASSISTANCE GRANT FUND (JUMPSTART STATE 3) APPLICATION TO THE IOWA FINANCE AUTHORITY (IFA)**

WHEREAS, there is a continued need in the City of Des Moines for home repairs due to the heavy rains and flooding in 2008; and

WHEREAS, the Iowa Finance Authority (IFA) has developed the Jumpstart Housing Assistance Program (the "Program") to assist with housing repairs and rehabilitation: and

WHEREAS, IFA and the City of Des Moines previously entered into a Grant Agreement (the "Agreement") pursuant to which IFA granted funds to the City of Des Moines with which to make loans to persons whose homes were adversely affected by the natural disasters of 2008; and

WHEREAS, the Iowa General Assembly in January 2009, passed 2009 Iowa Acts HF 376 ("HF 376"), continuing the Program, making certain modifications thereto, and requiring localities to apply for additional Jumpstart funds; and

WHEREAS, the City of Des Moines has compiled a Disaster Damage Housing Assistance Grant Fund Application (attached as Exhibit A) requesting \$500,000 in additional funds to help homeowners who are unable to have their repair needs met through current funding sources.

NOW, THEREFORE, BE IT RESOLVED, by the City Council of the City of Des Moines, Iowa, that the Disaster Damage Housing Assistance Grant Fund (Jumpstart State 3) Application is hereby approved for submittal to IFA, and the City Manager or his designee is hereby authorized and directed to execute and submit the application on behalf of the City.

PPROVED AS TO FORM:

Glenna K. Frank, Assistant City Attorney

Moved by to approve.

YEAS NAYS ABSENT **COUNCIL ACTION** PASS COWNIE COLEMAN HENSLEY KIERNAN MAHAFFEY MEYER VLASSIS TOTAL MOTION CARRIED APPROVED

CERTIFICATE

I, DIANE RAUH, City Clerk of said City hereby certify that at a meeting of the City Council of said City of Des Moines, held on the above date, among other proceedings the above was adopted.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal the day and year first above written.

Mayor

City Clerk



Disaster Damage Housing Assistance Grant Fund (State Jumpstart 3) Application

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			uthority
NGIN	HOME	AND	COMMUNIT

Submit completed application by July 7, 2009 to: Terri Rosonke, Housinglowa Development Specialist Iowa Finance Authority	SUBMISSION DEADLINE: JULY 7, 20 FOR IFA USE ONI	
2015 Grand Avenue Des Moines, IA 50312	Application #:	
Phone: 515.725.4956 or 800.432.7230	Date Received:	
Fax: 515.725.4901		
Email: terri.rosonke@iowa.gov www.lowaFinanceAuthority.gov	Award Amount:	

Section 1 APPLICANT INFORMATION

Applicant (Entitlement City or Council of Governments): City of Des Moines				
State Jumpstart Agreement Number: JHAP #09-09				
Applicant Contact Information				
First Name:	Sadie			
Last Name:	Hildebrand			
Title:	Assistant Planner			
Address 1:	600 Rober D Ray Drive			
Address 2:				
City:	Des Moines			
State:	ΙΑ			
Zip Code:	50309			
Phone:	515 - 283 - 4753			
Fax:	515 - 237 - 1694			
Email:	mail: srhildebrand@dmgov.or			

Section 2 PROJECT INFORMATION

Section 2a

Disaster Damage Housing Assistance Fund (State Jumpstart 3) amount requested: \$500,000

Of this total, amount being requested for activities eligible under State Jumpstart 2 but unable to be funded due to a lack of State Jumpstart 2 resources: \$Up to \$100,000, currently we have no applicants in this situation but as we qualify more

\$Up to \$100,000, currently we have no applicants in this situation but as we qualify more applicants, we may have some need in this category

Section 2b

Briefly explain the proposed use(s) of the State Jumpstart 3 funds requested in this application, including why other disaster recovery resources are not available to provide assistance: The primary focus of these funds will be to assist Jumpstart Applicants that we are unable to assist due to their income or the assessed value of their homes. We currently have one applicant who is over income and six applicants who are in the situation where the low assessed value of their structure prevents needed repairs. In many of these cases, expensive foundation work is needed on houses that are only assessed between \$20,000 and \$30,0000. This new funding will allow us to make needed repairs to stabalize the structures and keep families in their homes.

The City of Des Moines continues to have State 2 and Federal CDBG Jumpstart funds available. These new funds would be used in conjunction with the existing funds to complete needed repairs. For example, if an applicant is eligible, the first \$24,999 of the project will be funded by Federal CDBG funds. Additional funding would be provided by State 2 (up to 60% of assessed value) and the remaining funds needed would be awarded through State 3. While these cases are few and far between, we do have several cases where the only option for the family (due to inability to finance a replacement home) is to repair the home, even though the cost of repairs may meet or exceed the assessed value of the home.

No other funding source exists for applicants who are over 150% Area Median Income. We have one applicant who is over income but may otherwise be eligible for assistance. If this funding is awarded, other applicants who thought they previously didn't qualify, may come forward.

Section 2c

Number of total eligible residents anticipated to be assisted under this application: 20-25

Of the total, number of eligible residents who have not received any moneys to date under the Jumpstart program: 15

Of the total, number of eligible residents who are in need of an interim mortgage assistance extension meeting the conditions specified in subrule 29.5(2) of the Jumpstart Housing Assistance Program administrative rules: 0

Of the total, number of eligible residents who are ineligible for assistance under the requirements of other available disaster recovery assistance programs: 4--that we currently know of. Others may be eligible for some funds but not enough to meet their repair needs.

Section	2d
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Disaster Recovery Resources	Amount	Amount Committed	Amount
	Awarded to	to Eligible Recipients	Expended

	Applicant	or Projects	
State Jumpstart 1	\$658,711.43	\$620,306	\$614,229
State Jumpstart 2*	\$790,453.71	\$371,558	\$67,497
Federal Jumpstart	\$2,185,883	\$793,740	\$169,398
Community Disaster Grant Program	\$0 for JHAP	\$	\$

*Do you anticipate having State Jumpstart 2 funding available for reallocation to other disaster recovery zone areas?
Yes No
If yes, estimated amount available for reallocation: \$

Section 3 MINORITY IMPACT STATEMENT

The applicant must attach the completed Minority Impact Statement as Exhibit 1.

ACKNOWLEDGMENT, RELEASE OF INFORMATION AND CERTIFICATION

I acknowledge that I have read and understand the application materials and administrative rules. Further, I give permission to the Iowa Finance Authority (IFA) to perform due diligence, perform credit checks, contact the organization's financial institutions, and perform other related activities necessary for reasonable evaluation of this proposal. I understand that all information submitted relating to this application is a public record. I certify that all representations, warranties, or statements made or furnished in connection with this application are true and correct in all material respects. I understand that it is a criminal violation under Iowa law to engage in deception and knowingly make, or cause to be made, directly or indirectly, a false statement in writing for the purpose of procuring assistance from a state agency or subdivision.

I further agree to coordinate any federal funds with state, local, and private funds and shall avoid any duplication of benefits that would limit or cause the loss of federal funding.

Name: Chris Johansen

Title: Assistant City Manager

Signature

Date:

Exhibit 1 MINORITY IMPACT STATEMENT

Pursuant to 2008 Iowa Acts, HF 2393, Iowa Code Section 8.11, all grant applications submitted to the state of Iowa that are due beginning January 1, 2009 shall include a Minority Impact Statement. This is the state's mechanism for requiring grant applicants to consider the potential impact of the grant project's proposed programs or policies on minority groups.

Please choose the statement(s) that pertains to the grant application. Complete all the information requested for the chosen statement(s).

The proposed grant projects programs or policies could have a disproportionate or unique **positive** impact on minority persons.

Describe the positive impact expected from this project:

	U Wor	e which group is impa men nos erican Indians		l: Persons with a Disa Asians Alaskan Native Am	•	 Blacks Pacific Islanders Other 	
		The proposed grant project programs or policies could have a disproportionate or unique negative impact on minority persons.					
	Describ	e the negative impac	t ex	pected from this proj	ect:		
	Present	t the rationale for the	exis	tence of the propose	ed program or	r policy:	
	Provide	evidence of consulta	ation	with representatives	s of the minor	rity groups impacted:	
	U Wor	e which group is impa men nos erican Indians		l: Persons with a Disa Asians Alaskan Native Am	·	 Blacks Pacific Islanders Other 	
\boxtimes	The proposed grant project programs or policies are not expected to have a disproportionate or unique impact on minority persons.						
	Present the rationale for determining no impact: Jumpstart projects are located throughout the City of Des Moines.						
l hereb knowle		that the information of	on tl	nis form is complete	and accurate,	e, to the best of my	
Signati	ure:	1. A.F. J. L.					
Name:		Chris Johansen					

Title: Assistant City Manager

DEFINITIONS

"Minority Persons," as defined in Iowa Code Section 8.11, mean individuals who are women, persons with a disability, Blacks, Latinos, Asians or Pacific Islanders, American Indians, and Alaskan Native Americans.

"Disability," as defined in Iowa Code Section 15.102, subsection 5, paragraph "b," subparagraph (1): b. as used in this subsection:

(1) "Disability" means, with respect to an individual, a physical or mental impairment that substantially limits one or more of the major life activities of the individual, a record of physical or mental impairment that substantially limits one or more of the major life activities of the individual, or being regarded as an individual with a physical or mental impairment that substantially limits one or more of the major life activities of the individual, in the physical or mental impairment that substantially limits one or more of the major life activities of the individual.

"Disability" does not include any of the following:

(a) Homeosexuality or bisexuality.

(b) Transvestism, transsexualism, pedophilia, exhibitionism, voyeurism, gender identity

disorders not resulting from physical impairments or other sexual behavior disorders.

(c) Compulsive gambling, kleptomania, or pyromania.

(d) Psychoactive substance abuse disorders resulting from current illegal use of drugs.

"State Agency," as defined in Iowa Code Section 8.11, means a department, board, bureau, commission, or other agency or authority of the state of Iowa.