HIGHER EDUCATION CAPITAL MATCHING (HECap) GRANT PROGRAM STANDARD APPLICATION FOR THE COMPETITIVE ROUND (CR-6)

PLEASE REFER TO THE REQUEST FOR GRANT APPLICATIONS (RGA) AND INCLUDE ANY ADDITIONAL PAGES AS NECESSARY TO FULLY RESPOND TO EACH QUESTION IN THIS STANDARD APPLICATION AND THE RGA SECTION 9

SECTION 1: GENERAL INFORMATION						
A. Project Name/Location:						
B. Project Address:						
C. Applicant College or University:						
Legally Incorporated Name:						
Street (not P.O. Box):						
City:	Zip:	County:				
Phone: Ex	t: Fax:	E-mail:				
Contact Name & Title:						
Federal Taxpayer I.D./Charity Reg.#:						
State Financial System (SFS) #	t:					
Grants Reform Document Vault	#:					
Vendor Responsibility Question	naire (VRQ) Certified or	n (date):				
SECTION 2: PROJECT DESC	RIPTION					
A. Project Description and A	mount					
 Please refer to the Request for Grant Applications and attach a detailed description of the specific capital project that will be undertaken and funded pursuant to this application. Please be sure to include a robust narrative addressing the elements set forth in the RGA. 						
2. Please list the requested amount of Grant funding to be received from the HECap Program for this project. \$						
Grant Funding Level	HECap Proje	ect Cost	Maximum Total Funding per Grant Funding Level*			
\$1,000,001 - \$3,000,000	\$4,000,004 - \$12,000,000	0	\$22,000,000			
\$500,001 - \$1,000,000	\$2,000,004 - \$4,000,000		\$10,000,000			
\$250,001-\$500,000	\$1,000,004 - \$2,000,000		\$5,000,000			
\$50,000 - \$250,000	\$200,000 - \$1,000,000		\$3,000,000			
Project Start Date: Anticipated Date of Project Completion: The Project to be funded with HECap Grant funds may not commence prior to September 1, 2023 and must be completed by no later than September 1, 2026.						

 Does the project require environmental or other regulatory per lf yes, please specify type: 	ermits? () No ()Yes				
Have they been secured?	() No ()Yes () NA				
If not, is there a reasonable expectation that such approvals be obtained and when?	will				
5. Has any State or local government agency reviewed the proje					
Review Act (SEQRA)?	() No ()Yes () NA				
If Yes, please set forth the lead agency for the review and pr statement, or Type II memo issued by the lead agency.	ovide a copy of the negative declaration, findings				
6. Is a Uniform Land Use Review Procedure process required in					
with this project?	() No ()Yes				
If Yes, what is the status of the ULURP review and estimated	completion date?				
7. Is a review pursuant to Section 14.09 of the State Historic Preservation Law required in connection with this					
project?	() No ()Yes				
If Yes, what is the status of the 14.09 review and estimated a	pproval date?				

[INTENTIONALLY LEFT BLANK]

SECTION 3: PROJECT BUDGET, DISBURSEMENT SCHEDULE, & OPERATING COSTS

1. Use of Funds

Complete the following Project Budget detailing the proposed sources and uses of funds (attach additional sheets if necessary).

necessary).						
<u>USE OF FUNDS</u>	<u>SOURCES</u>		<u>TOTAL</u>			
Uses (Attach additional pages if necessary)	HECap Grant	Non-state Matching Funds (3:1)	Other financing sources to complete project as described			
	\$	\$	\$	\$		
Acquisition						
Construction/ Renovation						
Architect/Engineer Fees						
Furniture and/or Equipment						
Total:	\$	\$	\$	\$		
2. Please provide an estimate or contracts substantiating the budget above as well as commitment letters or other evidence that funds have been secured for each source of funding. If all funding sources have not yet been secured, please provide information to demonstrate the ability to access sufficient non-State funds to meet the 3:1 match requirement and to complete the project.						
3. Is the organization currently seeking or receiving any other New York State assistance for this project?						
4. Provide a statement as to whether a recurring source(s) of revenue will be available to support facility operations and maintenance for the project to be funded with grant funds.						
5. Does the HECap project have the participation and financial support of a consortium of Colleges and/or private or public partnership? () No ()Yes						
<u>If Yes,</u> please describe suc	If Yes, please describe such participation and/or financial support.					
SECTION 4: ELIGIBILITY FOR TAX-EXEMPT FINANCING						
Do you believe your project is eligible for tax-exempt financing under the Federal Internal Revenue Service Code? No ()Yes						
2. Has the applicant previous	ly received finance	cing from the sale o	f tax-exempt bonds?	() No ()Yes		
If Yes, attach a schedule describing the details of such financing.						
3. Does the applicant anticipa	ite applying for fir	nancing for this proj	ject from the sale of othe			
<u>If Yes,</u> please provide a lin	nk to the Official S	Statement.		() No ()Yes		

Page 4 of 4

4.	Have any funds been expended or obligat application is made?	iions incurred to date on that portior	of the project for which this () No ()Yes			
	If Yes, attach a schedule showing details of	of such disbursements (date, purpo	se, payee, etc.).			
5.	Please attach a copy of the deed, lease or other document evidencing site control by the Applicant.					
	If the Applicant is acquiring property pursuant to the HECap grant, please provide a copy of the Contract of Sale and Appraisal.					
	Does the applicant plan on occupying 100	0% of the project facility?	() No ()Yes			
	If no, attach a schedule explaining the planned occupancy.					
CE	ERTIFICATION					
I,	, ser	ving in the position of				
at tl	the above referenced institution, and as an A	Authorized Officer of said institution	do hereby certify that the			
info	ormation provided in this Standard Application	on for the second Competitive Rour	d is true and accurate to the best of			
my	knowledge and that the project is eligible fo	or reimbursement from all or a portion	n of the requested HE Cap matching			
grai	ant funds. I acknowledge that the project t	to be funded with HECap grant fu	nds must comply with the			
req	quirements of Part U of chapter 57 of the	Laws of 2005, as added by Chapt	er 63 of the Laws of 2005 as			
am	nended, including by reference, the applic	cable provisions of Article 9 of th	e State Finance Law, Article 15-A			
of t	the Executive Law and Articles 8, 9 and 1	0 of the Labor Law (more commo	only known as MWBE and			
Pre	evailing Wage).					
Sigi	gnature	Date				
Prir	nted Name					
Prin	nted Title					