

Partner Agency Application for Funding

FY2016

FACE SHEET

Agency Name:	Greater Fredericksburg Habitat for Humanity				
<i>Has the City/ County Funded This Agency in Previous Years?</i>					<input type="checkbox"/> Yes <input type="checkbox"/> No
Physical Address:	4755 Jefferson Davis Hwy				
Mailing Address/PO Box:					
City:	Fredericksburg	State:	VA	Zip:	22408
Telephone Number:	540-891-5009	Fax Number:	540-891-7009		
Federal Tax ID #:	54-17377851				
Web Address:	Fredhab.org				
General Email Address:	admin@fredhab.org				
Agency Main Contact:	Tom Carlson	Title:	Executive Director		
Telephone Number:	540-891-4401				
E-Mail Address:	ed@fredhab.org				

Agency General Information

Agency Mission:	<p>Demonstrating God's love by working to ensure every family has a decent place to live. Habitat for Humanity brings people together to build and repair homes, communities, and hope.</p>				
Number of years agency has been in operation:	19				
Localities Served:	Spotsylvania, Fredericksburg, Stafford and King George				

Agency Financial Information

	List Programs	Personnel Expenses	Benefits	Operating Expenses	Total Program Budget
1.	New Home Construction	\$83,168	\$3493	362,500	\$449,161
2.	Home Repairs formerly known as A Brush with Kindness	\$45,236	\$1899.	\$80,000	\$127,138
3.					
4.					
5.					
Agency Administration:		\$131,374	\$5517	\$1,331,439	\$1,1406,439
Capital Outlay:					\$75,000
Total Agency Budget:					\$1,982,738

If your application includes funding increases for personnel (to include new positions or merit / COLA increases), please check here and explain in detail the need for this type of increase under each program budget.

Submission Checklist: <i>(include 1 copies of each)</i>	<input type="checkbox"/> IRS 501(c)(3) Letter	<input type="checkbox"/> Audit Report <i>(with Audit Management Letter)</i>	<input type="checkbox"/> Current Financial statement	<input type="checkbox"/> IRS 990
<input type="checkbox"/> Accountant Contact Information	<input type="checkbox"/> Organizational Chart	<input type="checkbox"/> Current Board Roster <i>(with contact information)</i>	<input type="checkbox"/> Agency's Current Strategic Plan	

Agency Administrative Expenses:

In the box below, provide an overview of the administrative costs detailed on the face sheet for the agency as a whole. **Please provide justification for and specific amounts of administrative costs that are defrayed by locality funds.** If your agency is requesting an increase or decrease in administrative funding, please describe, in detail, the reasons for these changes. (The description should not exceed 15 lines of text.)

We are not seeking any money to help pay staff.

Capital Outlay:

In the box below, provide an overview of the capital expenses detailed on the face sheet for the agency as a whole. **Please provide justification for and specific amounts of capital costs that are defrayed by locality funds.** (The description should not exceed 10 lines of text.)

The increase is to perform more repairs for low income homeowners in Spotsylvania County. Currently almost 2/3rds of all applications are from rural Spotsylvania.

Personnel Expenses (General):

In the box below, provide an overview of any increases or decreases in general personnel expenses for the agency. This would include any planned or projected merit or COLA increases, or new positions being requested. Also include a description of any changes to agency benefits structure or cost. **(The description should not exceed 10 lines of text.)**

We will hire additional construction staff however we are not asking for any funds to pay for staff. 100% of all funds are used directly to help repair the homes of Spotsylvania county residents.

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BUDGET EXPLANATIONS

Greater Fredericksburg Habitat for
Humanity

Budget Information

Please complete the following chart with the financial information for the agency as a whole. In each area include the budget specifically allocated to your agency from each locality/entity listed below.

	FY2014 Actual	FY2015 Budgeted	FY2016 Projected
Caroline	0	0	0
Fredericksburg	0	0	0
King George	0	0	0
Spotsylvania	\$10,000	\$10,000	\$20,000
Stafford	0	0	0
United Way	\$12,000	\$14,400	\$20,000
Grants	\$80,000	\$450,000	\$600,000
Client Fees	\$1000	\$25,000	\$35,000
Fundraising	\$681,315	\$656,750	\$704,000
Other <i>(explain below)</i>	\$220,146	\$826,588	\$1,000,000
Total Agency Budget for PD16	\$994,461	\$1,982,738	\$2,379,285

Detail below what is included in the category 'Other':

Greater Fredericksburg Habitat for Humanity operates a ReStore resale shop that brings a significant amount of both funds and in-kind donations of building materials. Often we are able to use these donated items in the repair of local homes. For example, if a person needs a new window often I will already have a window I can get from the store. This keeps cost per job down to reasonable amount allowing us to serve more residents.

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BUDGET EXPLANATIONS

Agency Name:

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Humanity

Please detail below any legislative initiatives or issues that may impact the agency for the upcoming year and how you are planning for them. This could include new legislation that may increase or decrease projected funding at any level (Federal/State/Local), or could affect grants or designated funds as they are currently received. If you are aware of "outside" funding sources that will expire or be reduced on a set cycle or date, please note those below and how you are planning for them.

In FY2016 we will begin a partnership with the USDA to offer direct loans to low income families. The USDA program is for rural construction only, so Spotsylvania county and King George will be our primary area of construction for this new program. We hope to build two or three new homes a year using this funding source. In addition this will open the door for funding for large scale home repairs with funding from the USDA for qualified applicants. This funding source will be used to accomplish larger scale home repairs like well repairs, and heating and cooling repairs.

Please detail below any identified agency needs or areas of concern that are currently not being addressed in your funding request. This could include training or technical assistance for specific areas, administrative support for a program or service, evaluation of current programs, or consultation for strategic planning, board support, or fundraising.

In the future we will want to become lead-certified to better help residents that live in older homes.

Please use the area below to provide any locality specific notes or statements that may be relevant to your application.

City of Fredericksburg:

Fredericksburg administers its own repair program with funding; however we do work with them to complete projects.

Caroline County:

We do not service Caroline County but we have helped other nonprofits and area churches to help with about 3 repairs last year.

King George County:

Spotsylvania County:

Spotsylvania County continues to be the area we do the most repairs in. About 2/3rds of our applications come from Spotsylvania County.

Stafford County:

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PROGRAM INFORMATION

Each agency submitting a funding request must fill out the following pages for each program serving citizens within the region and for which funding is requested. Any incomplete applications or programs that do not have a full application will not be considered for funding. PLEASE do not include any unrequested information. Each locality reserves the right to request additional information once the application has been submitted.

Program name:	Home Repair (formerly A brush with Kindness)	Is this a new program?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Program Contact:	Jason Tickle	Title:	Director of Operations
Telephone Number:	540-891-4401		
E-Mail Address:			

1. Program Purpose/Description: *(the following description should not exceed 10 lines of text)*

The Critical Home Repair program focuses on three areas of the home: health, safety, and accessibility. We provide repair assistance to homeowners that are at or below 50% area median income. We do everything from major repairs like repairing entire roofs to simply cleaning out a senior citizen's gutter to prevent problems from developing.

2. Justification of Need: *(Please state clearly why this service should be provided to the citizens of the region and why the localities should consider this funding request. If this is a new program, be sure to include the benefit to the region for funding a new request. The following should not exceed 10 lines of text, and should include the most recent data available.)*

Many local residents struggle to pay their most basic bills like medical costs and heating. This leaves little money for needed home maintenance; often the lack maintenance turns into a major problem. Habitat is in a unique position to help, as we have a ready supply of volunteers eager to do construction.

3. Program Collaboration: *(The following should describe, in detail, examples of collaborative efforts and key partnerships between your program and other programs or agencies in the area, and should not exceed 10 lines of text.)*

Information in this area not needed

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PROGRAM INFORMATION

Program Name:	Page 2
Home Repair Program	

4. Program Audience and Service Delivery: *(The following should describe the program's intended audience or client base and how those clients are served. This should include the location of the service and what geographic areas are served or targeted for service. If your program has specific entry or application criteria, please describe it below. Please do not exceed 10 lines of text.)*

Information in this area not needed

5. Client Fees: *(Please describe the fees clients must pay for the services provided in this program, and how those fees are determined.)*

6. Budget Information: *(Please complete the following chart with the financial information for this program. In each area include the dollars specifically allocated/requested for this program.)*

	FY2014 Actual	FY2015 Budgeted	FY2016 Projected
Caroline		NA	
Fredericksburg		\$13,334	\$16,000
King George		\$13,333	\$16,000
Spotsylvania		\$25,000	\$50,000
Stafford		\$13,333	\$17,000
United Way			
Grants			
Client Fees		\$800.00	\$1000.00
Fundraising			
Other			
Total Program Budget for PD16		\$80,800	\$100,000

Please indicate, in detail, reasons for increases or decreases in the amounts requested for FY2016. Include whether these changes come from increases in personnel, benefits, or operating expenses. If an increase is being requested, please describe the impact not receiving an increase would have on the program. In particular, please describe in detail if any increase is sought for new positions or personnel.

We are requesting additional funding to perform more home repairs in Spotsylvania County. About 2/3rds of our applications are from Spotsylvania County. Last year's goal was to complete 16 repairs in Spotsylvania, we completed 18. The need is there.

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PROGRAM INFORMATION

Program Name:

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7. Goals, Objectives, & Evaluation: *(Please provide the following information regarding the goals and objectives for your program. Space has been provided for two goals, with two objectives per goal. If your agency is funded by the United Way, please include a copy of your Logic Model for this program as a supplemental attachment. Individual descriptions should not exceed 5 lines of text.)*

Program Goal 1:

Objectives:

1a.

1b.

Information in this area not needed

Program Goal 2:

Objectives:

2a.

2b.

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PROGRAM INFORMATION

Program Name:

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Evaluation Method: *(Please describe the method used to measure the above goals/objectives. Please do not exceed 10 lines of text.)*

8. Outcome Data: *(Please give the most recent outcome data for the objectives above. Indicate below what time period the data covers.)*

Data Collection Period:

Objective 1a.

Information in this area not needed

Objective 1b.

Objective 2a.

Objective 2b.

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PROGRAM INFORMATION

Program Name:

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9. Program Goal Updates: *(Please provide a brief description of the current status of your program goal(s), given your outcome data. For example, if reported data was well below the stated outcome measure, please indicate why you feel that is the case. Also, include how your outcome data will influence or modify the program for the upcoming fiscal year. These descriptions should not exceed 20 lines of text.)*

Program Goal 1:

Information in this area not needed

Program Goal 2:

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Program Name:

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10. Community Impact: *(Please provide at least two examples of how your services have impacted members of our community. This description should not exceed 20 lines of text.)*

Information in this area not needed

11. Collaborative Impact: *(Please describe how the community would be impacted if your agency were dissolved or merged with another partner agency. This description should not exceed 20 lines of text.)*

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SERVICE DATA

Program Service Data:			Service Period:		to					
Locality Served	Total Served		Gender		Race					
	FY2014	FY2016*	Male	Female	Caucasian	African American	Asian	Hispanic	American Indian	Other
Fredericksburg	20	20								
Caroline	5									
King George	6	20			Information in this area not needed					
Spotsylvania	63	80								
Stafford	7	20								
Other										
Total	101	150								

**Please include the projected number to be served in each locality for the upcoming fiscal year.*

Locality Served	Age Groups								Income Levels				
	0-4	5-10	11-13	14-18	19-25	26-40	41-60	60 +	Under \$10,000	\$10,000 - \$19,000	\$20,000 - \$39,000	\$40,000 - \$59,000	Over \$60,000
Fredericksburg													
Caroline													
King George									Information in this area not needed				
Spotsylvania													
Stafford													
Other													
Total													

Please describe below your data collection methodology and tracking measures. Indicate systems or processes that are used and responsible parties. Please also describe how your projections are determined for the upcoming year. If any of the above information is not available, please indicate why: