



## NEW YORK CITY RETURNABLE GRANT FUND LOAN APPLICATION

### About New York City's Returnable Grant Fund (RGF):

The Returnable Grant Fund (RGF) was created in 1992 to help not-for-profit organizations pay for expenses incurred while a City contract was awaiting registration. Since its inception the RGF has made over 3,200 interest-free loans, totaling more than \$200 million. The RGF is administered by the Fund for the City of New York (FCNY) in conjunction with the Mayor's Office of Contract Services (MOCS).

On April 6<sup>th</sup> 2009 Mayor Bloomberg announced a new initiative to increase loan availability for the next two fiscal years. On July 1<sup>st</sup> 2009 the RGF was increased by 150%, from \$8 to \$20 million. This enhancement will enable the City to provide loans to additional not-for-profits receiving City funds to assist them during cash flow difficulties.

### Application Instruction for Applicants:

To be eligible for an RGF loan, an Applicant must either currently hold a contract or other funding agreement entitling the Applicant to receive funding from the City's expense budget (not capital funding) **or** must have such a contract or funding agreement pending. In addition, the Applicant must demonstrate that it is experiencing significant difficulty in meeting its operating expenses.

Any Applicant wishing to receive an RGF loan must complete parts 1, 2 and 3 of the attached application. No application for a loan will be approved unless all applicable sections are completed. Applicants must submit the application to the City Agency they are contracting with. Questions should be directed to the contracting agency or to Michelle Biondi, the MOCS Loan Fund Manager, at [mbiondi@cityhall.nyc.gov](mailto:mbiondi@cityhall.nyc.gov).

### Alternatives to New York City RGF:

Not-for-profit organizations that are not eligible for the New York City RGF program may consider the following alternatives:

- 1) FCNY Cash Flow loans: FCNY has a privately funded *Cash Flow Loan Program*, which provides bridge loans to non-profit organizations waiting for committed funds from government and foundations. For more information visit: <http://www.fcny.org/fcny/core/cfl/#cashflow>.
- 2) New York City's Capital Access Revolving Loan Guaranty Program: The Capital Access Revolving Loan Guaranty Program provides assistance to micro and small businesses, including non-profits. Eligible Applicants can receive access to competitively priced loans and a network of small business lenders and guarantee of up to 40% on qualified loans. For more information visit: <http://www.nyc.gov/html/nonprofit/html/credit/credit.shtml>



## LOAN APPLICATION FORM PART 1: APPLICANT INFORMATION

Name of Applicant:
Applicant's EIN/TIN:
Agency ID: <small>If 3-digit Agency code is unknown please contact your authorized City Agency</small>
Authorized Contact Person and Title:
Phone:
Alternate Phone:
Email:
Fax:
Address:



## LOAN APPLICATION FORM PART 2: ELIGIBILITY BASIS

Please check all applicable boxes in Category I and Category II. Applicants must meet one of the criteria set forth in Category I and one of the criteria set forth in Category II to be eligible for a loan:

**1. Category I: Applicant holds a current City contract/grant, or is pending receipt of a City contract/grant (i.e., has been so notified by a City agency), funded in the expense budget (not a capital award). Funding for applicants holding current contracts/grants may be ongoing or be expiring with plans in place for continuation. Please check the appropriate box(es) below:**

- A.** Applicant currently receives expense budget (non-capital) City funding.
- B.** Applicant is pending receipt of new expense budget (non-capital) City funding

For both A and B, please provide, as applicable:

- Funding agency(ies): \_\_\_\_\_
- Contract number(s): \_\_\_\_\_
- Grant number(s): \_\_\_\_\_ *(attach Grant letter)*
- Funding agency(ies) notified Applicant of intent to continue funding during next FY:
  - Yes: Notice date: \_\_\_\_\_
  - No

**2. Category II: Applicant has a demonstrated inability to meet its operating expenses for one or more of the following reasons (attach additional sheets as needed):**

- A.** Processing of the City expense-funded contract/grant is delayed for reasons not attributable to Applicant's conduct. Please explain:

\_\_\_\_\_  
\_\_\_\_\_

- B.** City contract/grant is pending registration/filing by NYC Comptroller.

- C.** Payment under the City contract(s)/grant(s) is delayed for reasons not attributable to Applicant's conduct. Please explain:

\_\_\_\_\_  
\_\_\_\_\_

- D.** The State or another public or private funder has delayed release of funds to Applicant. Please attach **one** of the following:

- Grant letter proving entitlement to funding
- Other documentation from the public or private funder that explains the delay *and* explains when funding is anticipated.

- E.** Processing of City capital-funded award is delayed for reasons not attributable to Applicant's conduct, *and* Applicant has advanced costs intended to be funded by such award. Please explain:

\_\_\_\_\_  
\_\_\_\_\_



**LOAN APPLICATION FORM PART 3: STATEMENT OF NEED**

Amount requested:
Name of City Agency, Grantor, Organization or Foundation:
Contract Description:

Please detail the expenses below and their payment dates; attach additional sheets if necessary.

Payroll Expenses	
Payroll Date	Payroll Amount

Other Critical Expenses (rent, insurance, utilities, etc.)	
Expense Date	Payment Amount

Additional relevant information:

I, \_\_\_\_\_, hereby affirm that I have been delegated signatory authority by the  
(Print Name)  
 Board of Directors of \_\_\_\_\_, to execute New York City Contracts on behalf of the organization  
(Name of organization)  
 and attest that all of the information included herein and attached hereto are true and accurate.

Please attach one of the following:

- Board resolution authorizing signatory capability on New York City contracts
- New York City contract signature page

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Board Authorized Signature                      Print Name and Title                      Date

**THIS SECTION TO BE COMPLETED BY THE AUTHORIZING CITY AGENCY**

LOAN AMOUNT AUTHORIZED BY CITY AGENCY:	
NAME:	TITLE:
TELEPHONE:	FAX:
SIGNATURE:	DATE:

**For all Applications, please provide:**

- Applicant's information on current contracts/grant is  correct /  incorrect.  
If incorrect, provide correct contract/grant numbers: \_\_\_\_\_
- The budget codes for each contract/grant are: \_\_\_\_\_

Based on the Applicant's responses to the questions in Part 2, please attach the documents and/or provide information as indicated below:

1. If the Applicant checked **Category I (A)** please attach:
  - Notice to Applicant of Agency's plan to continue contract/grant funding during next FY
  - Signed Responsibility Determination (*for funding continuation, if applicable*)
  
2. If the Applicant checked **Category I (B)** please attach:
  - Signed Responsibility Determination
  
3. If the Applicant checked **Category II (A) or (C)** does Agency consider Applicant's **conduct** to be the **primary** reason accounting for any delays? If so, please explain:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
4. If the Applicant checked **Category II (B)** please provide:
  - Date contract was sent to the Comptroller's office: \_\_\_/\_\_\_/\_\_\_
  - OCA #: \_\_\_\_\_ Contract #: \_\_\_\_\_
  - Signed Recommendation for Award (RFA) or Request for Contract Change or Modification (RCAM) cover sheet
  
5. If the Applicant checked **Category II (E)** please provide **one** of the following attachments:
  - Certificate to Proceed (CP)
  - Written approval from OMB (*in lieu of a CP*)

**AGENCY SECTION CONTINUES ON NEXT PAGE**



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**THIS SECTION TO BE COMPLETED BY THE AUTHORIZING CITY AGENCY**

Please select **one** of the following recommended repayment plans. Note that this repayment plan may be changed in consultation with the Agency, MOCS and/or FCNY:

- 90 days for repayment of loan. *This is the suggested time frame for repayment if the Applicant checked Category II (A), (D) or (E)*
- 60 days for repayment of loan. *This is the suggested time frame for repayment if the Applicant checked Category II (B)*
- 45 days for repayment of loan. *This is the suggested time frame for repayment if the Applicant checked Category II (C) applies*

If a repayment plan that is not within the suggested time frame has been selected, please explain:

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**THIS SECTION TO BE COMPLETED BY  
THE MAYOR'S OFFICE OF CONTRACT SERVICES**

BASED ON THE LOAN FUND REPORT AS OF ____/____/____ THERE IS \$ _____ AVAILABLE FOR LENDING.	
AGENCY:	
DATE AGENCY SUBMITTED LOAN REQUEST TO MOCS:	
DATE MAYOR'S OFFICE APPROVED LOAN REQUEST:	
AMOUNT AUTHORIZED:	
SIGNATURE:	DATE:

