

Application

Fiscal Year 201G

Please read through the Avenue NYC Proposal Guidelines before completing the application.



ORGANIZATIONAL INFORMATION

Name of Organization:		
Employer Identification Number (EIN):		
Is your organization incorporated as a nonprofit entity in New York State?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date of Incorporation:
Is your organization registered with the Charities Bureau of the New York State Office of the Attorney General?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date of Most Recent Filing:
Under what section is your organization in the Internal Revenue Code?	If other, please indicate:	
Organization Address:		
	City:	
	State:	Zip:
Phone Number:	Fax Number:	
Website:		
Organization Head and Title:		
Telephone:	E-Mail:	
Contact Person and Title: (If different from organization head)		
Telephone:	E-mail:	

Briefly describe the mission, history, and principal activities of your organization:

COMMERCIAL AREA SERVED BY ORGANIZATION

Borough:	Neighborhood(s):
Commercial Area Boundaries: List specific street boundaries (example: 14 th Street from Avenue A to Avenue C)	
Community Board(s):	
City Council Member & District(s):	
State Assembly District(s):	
State Senate District(s):	
U.S. Congressional District(s):	

Please describe the targeted commercial area (retail mix, anchor stores, vacancy rate, etc.), highlighting current conditions as well as any trends or recent changes.

This description should set the context for your project proposals.

A: EXISTING ORGANIZATIONAL CAPACITY (40 points)

Please provide the following information on your organization’s staff/volunteers:

What is the total number of staff employed by your organization? Full-Time: _____ Part-time: _____

What is the total number of volunteers? _____

On average, how many hours per week do your volunteers work? _____

What is the total number of people involved in the programmatic work of the proposed Avenue NYC projects?
(Do not include people who will function as administrative or support staff):

Paid staff: _____ Volunteers: _____

Please provide the following information about your organization’s Board of Directors:

How many members are on your full board? _____ Do members have term limits? Yes No

How often does your full board meet? Monthly Quarterly Annually Other _____

Please provide the following information about your organization’s finances:

Are members of the board required to make financial contributions to the organization? Yes No

If so, what percent of the board contributed in the last completed fiscal year? _____ %

Does your organization include dues paying members? Yes No

If yes, how many dues paying members? _____ What is the amount for each member? _____

Please provide the following information about your organization’s contract history:

Has your organization been funded by SBS in the past? Yes No

If yes, please describe the work completed under the most recent SBS contract, including the year in which the contract was completed and any work that is still outstanding.

Provide a list of your organization’s contracts with the City of New York (if applicable) in FY20F€ and FY20FF:

	<u>Agency</u>	<u>Funding Amount</u>	<u>Purpose</u>	<u>Year of Funding</u>
1		\$		
2		\$		
3		\$		
4		\$		
5		\$		
6		\$		

Please provide the following information about your organization's commercial revitalization experience:

Has your organization implemented commercial revitalization initiatives in the past? Yes No

If not, why is your organization poised to do so now?

If so, please provide one example of a successful commercial revitalization initiative undertaken by your organization, including the goal of the initiative, the approach taken by your organization, and the results of the completed initiative.

Goal:

Approach Taken:

Results/Outcomes/Year Completed:

B: AVENUE NYC PROJECT PROPOSALS (50 points)

Please check the box next to the project(s) for which your group is seeking funding and provide a brief project summary for each:

Project Area	Project Summary
<input type="checkbox"/> Business Attraction Amount Requested: \$	
<input type="checkbox"/> Community Improvement Amount Requested: \$	
<input type="checkbox"/> Economic Development Amount Requested: \$	
<input type="checkbox"/> Environmental Amount Requested: \$	
<input type="checkbox"/> Health and Safety Amount Requested: \$	
<input type="checkbox"/> Housing Amount Requested: \$	
<input type="checkbox"/> Transportation Amount Requested: \$	
<input type="checkbox"/> Youth and Family Services Amount Requested: \$	

For detailed information on each of these projects, please see the Avenue NYC Program Guidelines.