

# HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS

## PY22 WV HOPWA REQUEST FOR PROPOSALS

### LETTER OF INTENT TO APPLY

**INSTRUCTIONS:** Complete all requested information below within the Letter of Intent to Apply. The submission of this document qualifies the applicant's project proposal for inclusion and consideration in the submission and scoring process for PY22 funding. **The Letter of Intent to Apply must be submitted by the deadline of August 10, 2022 by 11:59pm** to [HOPWA@wv.gov](mailto:HOPWA@wv.gov) titled "**RFP Process.**" (NOTE: The Letter of Intent to Apply form must be completed digitally with all information typed. A handwritten signature is acceptable in the event the digital signature option is inaccessible.)

#### APPLICANT INFORMATION

**ORGANIZATION NAME AS LISTED WITHIN WVOASIS:**

**MAILING ADDRESS:** (include mailing address, street, city, county, state and zip code):

**FEDERAL TAX ID #:**

**UEI # FROM SAM.GOV:**

**TYPE OF ORGANIZATIONAL ENTITY** (check all that apply):

- |   |  |
|---|--|
| <input type="checkbox"/> Nonprofit Organization       | <input type="checkbox"/> Hospital/Health Provider              |
| <input type="checkbox"/> For Profit Organization      | <input type="checkbox"/> State Institution of Higher Learning  |
| <input type="checkbox"/> Community-Based Organization | <input type="checkbox"/> Substance Abuse Recovery Organization |
| <input type="checkbox"/> Minority Organization        | <input type="checkbox"/> Private                               |
| <input type="checkbox"/> Religious-Based Organization | <input type="checkbox"/> Other (specify): _____                |

**PROJECT START DATE:**

**PROJECT END DATE:**

**PROPOSED COUNTIES TO BE SERVED BY PROJECT:**

**PROPOSED TOTAL OF FUNDING REQUESTED:** \$

#### PROJECT PROPOSAL CONTACT PERSON

Name:

Title:

Phone:

E-mail:

**SELECT ALL HOPWA ACTIVITIES TO BE INCLUDED WITHIN THE PROJECT PROPOSAL:**

- FACILITY OPERATIONS
- SUPPORTIVE SERVICES
- HOUSING INFORMATION
- PERMANENT HOUSING PLACEMENT
- TBRA
- STRMU

<p><b><u>PROJECTED EXPENDITURES</u></b>  Does the applicant's projected state or federal expenditures exceed \$500,000 for the applicant's current fiscal year (excluding amount requested in line above)? **</p> <p>Yes <input type="checkbox"/>      No <input type="checkbox"/></p> <p><i>**Projected expenditures should include funding for all activities including "pass through" federal funds from all state agencies and non-project-related funds.</i></p>	<p align="center"><b><u>FINANCIAL OFFICER</u></b></p> <p>Name:</p> <p>Phone:</p> <p>E-mail:</p>
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***"The facts affirmed by me in this proposal are truthful and I understand that the truthfulness of the facts affirmed herein are conditions precedent to the award of a contract. This document has been duly authorized by the governing body of the applicant and I (the person signing below) am authorized to represent the applicant."***

***"By providing my authorized signature below our organization fully intends to participate in the WV HOPWA PY22 Request for Proposal Process."***

<p align="center"><b><u>AUTHORIZED APPROVAL AUTHORITY</u></b></p> <p>Name:</p> <p>Title:</p> <p>Phone:</p> <p>E-mail:</p>	<p><b>SIGNATURE OF AUTHORIZATION:</b></p>
	<p><b>DATE OF SIGNATURE APPROVAL:</b></p>