

225 Commerce Drive
Canton, CT 06019

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APR 19 2018

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April 19, 2018

Robert H. Skinner
Chief Administrative Officer
4 Market Street, P.O. Box 168
Collinsville, CT 06022

Dear Mr. Skinner:


The Arc of the Farmington Valley, Inc. - Favarh is a community organization interested in participating in the Connecticut Neighborhood Assistance Act (NAA) Tax Credit Program. Favarh is pleased to submit its application to the Town of Canton for review and approval.

We understand that our energy conservation program, described in detail in the attached application will be forwarded to the Board of Selectman for a public hearing and thereafter to a Town Meeting for final municipal approval. All applications approved at Town Meeting will be submitted by the Town of Canton to the Connecticut Department of Revenue Services for its approval.

Favarh looks forward to working with the Town of Canton and the Connecticut Department of Revenue Services on the application approval process. Subsequently, Favarh will work with one or more eligible C-Corporations to secure up to \$150,000 in investment funding to support the development of our energy conservation program. Working together as a team all of the public and private sector participants will ensure that Favarh will be able to continue to provide services to its clients care, professional skill and ... energy conservation.

If you have any questions regarding this application, please feel free to contact me at Favarh at 860.693.6662 x 125.

Sincerely,


Bill McDonough,
Development Associate, Favarh



Municipality: Canton

Form NAA-01
2018 Connecticut Neighborhood Assistance Act (NAA)
Program Proposal

This form **must** be completed and submitted to your municipality for approval. All items **must** be completed with as much detail as possible. If additional space is needed, attach additional sheets. Please type or print clearly. See attached instructions before completing. **Do not submit this form directly to the Department of Revenue Services.**

Part I — General Information

Name of tax exempt organization/municipal agency: _____
The Arc of the Farmington Valley, Inc. - Favarth

Address: 225 Commerce Drive, Canton, CT 06109

Federal Employer Identification Number: 06-6011136

Program title: Favar's Energy

Name of contact person: William McDonough, Development Associate, Favarth

Telephone number: (860) 693-6662 Ext. 125

Email address: wjmcdonough@comcast.net

Total NAA funding requested (\$250 minimum, \$150,000 maximum): \$ 150,000.00

Is your organization required to file federal Form 990 or 990EZ, Return of Organization Exempt from Income Tax?

Yes No

If **Yes**, attach a copy of the **first page** of your most recent return.

If **No**, attach a copy of your determination letter from the U.S. Treasury Department, Internal Revenue Service.

Part II — Program Information

Check the appropriate description of your program:

100% credit percentage

- Energy conservation; or
 Comprehensive college access loan forgiveness (see Conn. Gen Stat. §12-635(3)).

60% credit percentage

- Job training/education for unemployed persons aged 50 or over;
 Job training/education for persons with physical disabilities;
 Program serving low-income persons;
 Child care services;
 Establishment of a child day care facility;
 Open space acquisition fund; or
 Other (specify): _____

Description of program: _____

Favarh is in the process of developing two buildings on its property located at 150 Commerce Drive in Canton. One building (12,500 sf) will be rehabilitated and another (7,500 sf) will be a "new" addition. The rehabilitation and new construction work on these two adjacent buildings will include a full compliment of energy efficient treatments including: facade, fenestration, insulation, HVAC, etc.

Need for program: _____

Favarh provides services to a wide variety of individuals with developmental disabilities -- and their families. The number of clients we serve is more than 350 and rising. As Favarh's client population grows and our need to serve them increases, Favarh operates an increasing number of properties in the community. Favarh, as an experienced property owner, is aware of the importance of energy efficiency in the design, rehabilitation, and construction (as well as the operating and maintenance) functions and costs. We are keenly aware of the critical role that energy conservation plays in the developmnet and maintenance of our facilities, of financial sustainability, and most importantly, our capacity to provide quality services to our clients and community.

Neighborhood area to be served: _____

Canton and the entire Farmington Valley.

Plan to implement the program: _____

The Arc's Energy Efficiency program will be implemented thrououghout the entire design, development, construction, rehabilitation, operations and maintenance components of the overall building expansion program in Canton. Most of the Energy Efficient components of the development program will be addressed and completed during 2018. We will design, build and begin using a wide variety of energy conserving efficiencies

Timetable:

Program start date: July 1, 2018

Program completion date: December 31, 2019

The program completion date must not be more than two years from the program start date. A certified post-project review is due to the municipality overseeing implementation no later than three months after program completion date for all projects receiving \$25,000 or more in NAA funding.

Part III — Financial Information

Program Budget:

Complete in full. Expenditures must equal or exceed total funding.

Sources of Revenue:

NAA funds requested	<u>\$150,000.00</u>
Other funding sources - itemized sources:	
a) <u>Capital Campaign Funding (Raised from various sources)</u>	<u>\$850,000.00</u>
b) _____	_____
c) _____	_____
d) _____	_____

Total Funding: \$1,000,000.00

Proposed Program Expenditures:

Direct operating expenses - itemized description:	
a) <u>Design, Development and Consturction of Energy</u>	_____
b) <u>Efficient Improvements of Existing and New Construction</u>	<u>\$900,000.00</u>
c) <u>Components of the Over All Project</u>	_____
d) _____	_____

Administrative expenses - itemized description:	
a) <u>Management / Administration Staff and Consultants</u>	_____
b) <u>(estimated at 10%)</u>	<u>\$100,000.00</u>
c) _____	_____
d) _____	_____

Total Proposed Expenditures: \$1,000,000.00

Part IV — Municipal Information

To be completed by the municipal agency overseeing implementation of the program

Name of municipal agency overseeing implementation of the program: _____ Office of the Chief Administrative Officer _____
Mailing address: _____ P.O. 148 // 4 Market Street. // Collinsville, CT 06022 _____
Name of municipal liaison: Robert Skinner _____
Telephone number: 860.693.7837 _____
Fax number: _____
Email address: rskinner@townofcantonct.org _____

<p style="text-align: center;">Post-Project Review</p> <p style="text-align: center;">Is a post-project review required for this proposal?</p> <p style="text-align: center;">Yes No</p> <p style="text-align: center;">If Yes, date post-project review due:</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Date</p>
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2018 Connecticut Neighborhood Assistance Act (NAA) Program Proposal Instructions

Complete all items on **Form NAA-01, 2018 Connecticut Neighborhood Assistance Act (NAA) Program Proposal**. Incomplete applications will **not** be accepted. Direct inquiries to Department of Revenue Services (DRS), Neighborhood Assistance Act Program, Attn: Research Unit, 450 Columbus Blvd Ste 1, Hartford CT 06103-1837, or call **860-297-5687**.

Part I General Information

Enter the name of the tax exempt organization or municipal agency, address, Federal Employer Identification Number, and email address.

Program Title: Assign a unique program title to each program for which your organization is making an application.

Federal Form 990: Attach a copy of the first page of your organization's most recent federal Form 990 or Form 990EZ. If your organization is not required to file either Form 990 or Form 990EZ, attach a copy of the determination letter from the Internal Revenue Service.

Part II Program Information

Description of Program: Describe the program, including information about how the program will operate, its benefit to the community, how recipients will be selected, and any measures used to determine the program's impact on the community.

Need for Program: Demonstrate a need for this program. For example, provide relevant statistics.

Neighborhood Area to Be Served: Describe the neighborhood or municipality this program will serve.

Plan to implement the program: Describe how the program will operate. Identify other persons or organizations involved in the administration of the program.

Timetable: Indicate the starting and completion dates of the program. The program completion date must not be more than two years from the program start date.

Part III Financial Information

Each program proposal must include a program budget that includes all sources of funding and all anticipated expenditures. The information provided in the budget may be used during a post-project audit.

Sources of Revenue: The budget must include the requested NAA funding and any other anticipated revenue sources.

NAA Funding Requested: Indicate the total amount your organization is requesting for its program. This amount may not exceed the total proposed expenditures. Please note that the minimum NAA funding is \$250, with a maximum funding of \$150,000 per organization or agency per year.

Other Funding Sources: Provide a detailed description(s) and the amount(s) of all funding sources.

Proposed Program Expenditures: The budget must include a detailed description and the amount of all direct operating and administrative expenditures. **Expenditures must equal or exceed total funding.**

Direct Operating Expenses: Expenses include materials, equipment, wages, salaries, tuition fees, sub-contracting services, and any other expenses needed to administer the program.

Part IV Municipal Information

This part is to be completed by the municipal agency overseeing implementation of the program.

Municipal Liaison: The municipality must designate an individual to serve as a liaison with DRS for all NAA matters.

Post-Project Review: Any program receiving \$25,000 or more in NAA funding is required to provide a post-project review, prepared by a certified public accounting firm, to the municipality overseeing the program. This review must be submitted to the municipality no later than three months after the program completion date.