



## **CITY OF REDWOOD CITY**

# **HUMAN SERVICES FINANCIAL ASSISTANCE FUND APPLICATION**

(HSFA)

**FY 2020-2021**

### **Application Instructions:**

- Application should be no more than 7 pages (and should not include the instruction pages or Appendix I or II)
- Application should be no smaller than Arial font size 10.
- Please submit final application and separate budget form in PDF format.
- Final submittal should be sent via email to [aavendano@redwoodcity.org](mailto:aavendano@redwoodcity.org) no later than January 16, 2019 at 5:00pm.
- Applications must answer ALL narrative questions and complete ALL financial information requested.

**Application Review/Scoring:**

Applications will be reviewed/scored by HHCC members based on the following criteria –

- Project is vital for survival for priority populations (as prioritized in the Redwood City Consolidated Plan), serving large numbers, and/or serving smaller numbers in an intensive way.
- Timeline to complete project and achieve performance benchmarks is appropriate.
- Goals are meaningful and measureable; program is achieving ambitious goals from prior years that are critical services for a priority population(s).
- Collaboration is thoughtful, directed, and central to achieving program goals.
- Serves significant number of Redwood City residents given the type of service offered.
- Program demographics reflect the demographics of Redwood City's priority populations.
- Outreach to underserved portions of priority population(s) is intentional, well-planned, and effective.
- Other sources of revenue are diverse and leverage HSFA to achieve program goals.
- Staffing is appropriate.
- Program is a reasonable cost for the services provided.
- Marketing appears to be appropriate, accessible, and effective across multiple segments of the priority population(s).

HUMAN SERVICES FINANCIAL ASSISTANCE PROGRAM,  
APPLICATION, FY 2020/2021

**CITY OF REDWOOD CITY  
HUMAN SERVICES FINANCIAL ASSISTANCE PROGRAM  
APPLICATION FISCAL YEAR 2020/2021**

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ORGANIZATION NAME: \_\_\_\_\_

PROJECT TITLE: \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_

ORGANIZATION ADDRESS \_\_\_\_\_  
(If different from project address)

DAYS AND HOURS OF PROJECT OPERATION: \_\_\_\_\_

ORGANIZATION TELEPHONE \_\_\_\_\_ ORGANIZATION WEBSITE \_\_\_\_\_

CONTACT PERSON/PROJECT ADMINISTRATOR NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_ EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

AGENCY DIRECTOR NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_ EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

FISCAL OFFICER NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_ EMAIL: \_\_\_\_\_ PHONE \_\_\_\_\_

**REQUESTED FUNDING AMOUNT FOR FY 2020-2021** \_\_\_\_\_

**Amount of HSFA Funding, if any, received in FY 2019-2020** \_\_\_\_\_

**Amount of HSFA Funding, if any, received in FY 2018-2019** \_\_\_\_\_





HUMAN SERVICES FINANCIAL ASSISTANCE PROGRAM,  
APPLICATION, FY 2020/2021

6. **Project Beneficiaries/Quantifiable Measurement:** Indicate the expected number of **incorporated** Redwood City beneficiaries to be served by the program in FY 20-21 (See Attachment I for a listing of Redwood City mailing addresses that are NOT part of incorporated Redwood City). For each response below indicate both the number of households and the number of individuals. Refer to San Mateo County Income Limits (Attachment II).

Do you collect income information for households and/or individuals you serve?

If yes, please fill out a, b, c, d below.

If no, please fill out c and d below.

a. Number of incorporated Redwood City <b>low income*</b> households to be served (Low-Income is 80% of AMI or below)	b. Number of incorporated Redwood City <b>low-income*</b> individuals to be served (Low-Income is 80% of AMI or below).	c. All incorporated Redwood City households to be served <b>regardless of income</b>	d. All incorporated Redwood City individuals to be served <b>regardless of income</b>

- e. If you wish to provide information about additional beneficiaries served by your program that are from unincorporated Redwood City or some other San Mateo County jurisdiction, please do so here:

7. **Affirmative Outreach**

- a. Use the demographics from your previous program year to provide an analysis of the population you serve relative to the demographics in the table. NOTE: *if you are a new applicant please provide your best estimation.*

Race & Ethnicity	Redwood City Population	Redwood City % by Ethnicity	Individual Beneficiaries by Ethnicity served by your Program	Your Program % by Ethnicity
Total	74,402	100%		
White and not Hispanic	40,656	54.64%		
White and Hispanic	23,557	31.66%		
Asian	6,715	9.03%		
African American	1,916	2.58%		
Pacific Islander	663	0.89%		
Native American	384	0.52%		
Other	1511	2.03%		

- b. Based on the percentages that you indicate your organization serves, describe your efforts to improve affirmative outreach to groups that may be underserved by your program and the result of your efforts:

HUMAN SERVICES FINANCIAL ASSISTANCE PROGRAM,  
APPLICATION, FY 2020/2021

8. **Other Revenues:** Please provide below information about your top 5 revenue sources for the proposed project to be funded through HSFA.

Revenue Source (be specific)	Amount	Committed or Pending

9. **Staff List:** List below key staff members who work on this program. (add more lines in the chart if needed)

Position Title	Name of Staff Person	Job Responsibilities	Qualifications

10. **Proposed Program Budget for FY 2020-2021.** Please fill in and include the separately the attached Excel Program Budget Form with your application.

**Total Agency Budget - \_\_\_\_\_**

**Total Program Budget - \_\_\_\_\_**

**Cost Per Individual for Program (all geographic areas) - \_\_\_\_\_**

**Total Cost to Provide Program to Redwood City Residents - \_\_\_\_\_**

HUMAN SERVICES FINANCIAL ASSISTANCE PROGRAM,  
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11. **Marketing/Advertising**

a. Please indicate all of the following methods your agency utilizes to promote and advertise your programs and services:

- Flyers/brochures
- Website
- Social Media – please list: \_\_\_\_\_
- Phone book Listing
- Public Service Announcements
- Outreach Presentations to Service Providers
- Other: \_\_\_\_\_

b. Which of the above marketing/advertising materials are available in multi-lingual form and which languages are they available in?

c. How and where are materials distributed?

d. What is your agency's most effective method to promote and advertise your services?  
Why do you think this is the case?



**\* REDWOOD CITY UNINCORPORATED – NORTH FAIR OAKS<sup>1</sup>**

**1<sup>st</sup> – 18<sup>th</sup> AVENUE**

1 <sup>st</sup> Ave.....	200 – 599
2 <sup>nd</sup> Ave.....	200 – 599
	600 – 769
	771 – 849
3 <sup>rd</sup> Ave.....	200 – 599
	600 – 699
	701 – 777
4 <sup>th</sup> Ave.....	200 – 599
	600 – 699
5 <sup>th</sup> Ave.....	101 – 613
	750 – 898
6 <sup>th</sup> Ave.....	300 – 599
	600 – 899
7 <sup>th</sup> Ave.....	300 – 599
	700 – 899
8 <sup>th</sup> Ave.....	400 – 699
	700 – 899
9 <sup>th</sup> Ave.....	400 – 699
	700 – 899
10 <sup>th</sup> Ave.....	600 – 799
	800 – 899
11 <sup>th</sup> Ave.....	600 – 799
	800 – 899
12 <sup>th</sup> Ave.....	600 – 799
	800 – 899
14 <sup>th</sup> Ave.....	600 – 899
15 <sup>th</sup> Ave.....	500 – 899
16 <sup>th</sup> Ave.....	500 – 899
17 <sup>th</sup> Ave.....	600 – 899
18 <sup>th</sup> Ave.....	600 – 899

**A**

Amherst Avenue.....	1 – 199
Arrowhead Lane.....	1 – 99
Athlone Court.....	1 – 99
Athlone Way.....	1 – 99

**B**

Barron Ave.....	700 – 899
Bay Road.....	2200 – 2964
	2300 – 2300
	3200 – 3698
	3700 – 3799
Blenheim Ave.....	2700 - 2899
Berkshire Ave.....	1 – 399
Buckingham Ave.....	1 – 199

**C, D**

Calvin Ave.....	2800 – 2999
Charter Street.....	800 – 899
Columbia Ave.....	1 – 199
Crocker Ave.....	2800 – 2999
Curtis Ave.....	2800 – 2999
Devonshire Ave.....	2700 – 2899
Dexter Ave.....	1 – 199
Douglas Ave.....	400 – 798 (even #s)
Douglas Ave.....	800 – 899 (even #s)

Dumbarton.....	1-499
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**E, F, H, K**

Edison Way.....	3000 – 3899
El Camino Real.....	2601 – 3499
Encina Ave.....	1 – 499
Encina Ave.....	500 – 599
Fair Oaks Ave.....	2600 – 2963, 2965 – 2975
	3000 – 3499, 3500 – 4499
Flood Ave.....	2900 – 2999
Glendale Ave.....	2900 – 3399
Halsey Ave.....	2600 – 2899
Hampshire Ave.....	400 – 699
Haven Ave.....	800 – 815
Huntington Ave.....	2800 – 2999
Hurlingame Ave.....	400 – 899
Kaynyne Street.....	828 – 899
Kramer Lane.....	1 – 99

**L, M**

Lorne.....	1 – 99
Loyola.....	1 – 199
MacArthur Ave.....	400 – 699
Markham Ave.....	1 – 199
Marlborough Ave.....	2600 – 2899
Marsh Road.....	501 – 991
Middlefield Road.....	2400 – 2674
	2601 – 2791
	2792 – 3536
	3523 – 3599

**N, O, P**

Northside Ave.....	2660 – 2999
Northumberland Ave.....	2 – 198
Nottingham Ave.....	1 – 199
Oak Drive.....	3400 – 3599
Oak Drive.....	3601 – 3799
Oakside Ave.....	500 – 699
Pacific Ave.....	200 – 399
Placitas Ave.....	500 – 699
Park Road.....	3000 – 3299
Park Way.....	2900 – 2999

**S, W**

San Benito Ave.....	106 – 106
	500 – 799
San Mateo Ave.....	2600 – 2800
Selby Lane.....	1 – 99
Semicircular Road.....	101 – 399
Spring Street.....	2227 – 2599
	2600 – 3599
Stanford Ave.....	400 – 699
Sweeney Ave.....	800 – 899
Warrington Ave.....	400 – 899
Waverly Ave.....	3000 – 3199
Westmoreland Ave.....	2600 – 2899
William Ave.....	3000 – 3199
Willow Street.....	800 – 898

<sup>1</sup> Redwood City mailing addresses which are NOT part of incorporated Redwood City



**CITY OF REDWOOD CITY**  
**2019 Maximum Income and Rent Limits**

2019 Area Median Income (AMI) is based on a household of 4 persons = \$136,800 (HUD eff. 04/24/2019)

*****MAXIMUM INCOME LIMITS BY HOUSEHOLD SIZE*****								
INCOME CATEGORY	1	2	3	4	5	6	7	8
Extremely Low	\$33,850	\$38,700	\$43,550	\$48,350	\$52,250	\$56,100	\$60,000	\$63,850
Very Low (50%)	\$56,450	\$64,500	\$72,550	\$80,600	\$87,050	\$93,500	\$99,950	\$106,400
Low (80%)	\$90,450	\$103,350	\$116,250	\$129,150	\$139,500	\$149,850	\$160,150	\$170,500
Median (100%)*	\$95,750	\$109,450	\$123,100	\$136,800	\$147,750	\$158,700	\$169,650	\$180,600
Moderate (120%)*	\$114,900	\$131,300	\$147,750	\$164,150	\$177,300	\$190,400	\$203,550	\$216,700

\*HCD Limits