

CDBG Application Number:
CATEGORY:

For Office Use Only



WAUKESHA COUNTY
OUT-OF-CYCLE PUBLIC FACILITIES APPLICATION
COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) PROGRAM APPLICATION FORM
FOR NONPROFIT ORGANIZATIONS

DEADLINE FOR SUBMISSION: March 25, 2015, 4:30 pm
Room 320, Waukesha County Administration Building

GENERAL INFORMATION

1. Project Title: _____
2. Project Address (if different from Applicant's address): _____

3. Applicant's Legal Name: _____
4. Address: _____
5. Primary Contact Person/Title: _____
6. Telephone: _____ Fax: _____
7. E-Mail: _____
8. Federal Identification Number (Required): _____
9. DUNS Number (Required): _____
10. Type of Applicant: _____
11. Amount of CDBG 2016 Funds Requested: _____
12. Total Project Costs: _____
13. National Objective: _____

14. Check One:

New Project

Continuing previously funded project

AGENCY CAPACITY AND EXPERIENCE (25 Points Total)

15. Provide a brief description of your agency and experience. Highlight experience relevant to this application. Please describe staff experience with programs or projects like the one you are applying for.

16. List the Project Personnel who will be paid with CDBG funds:

Position Title	Total Salary	CDBG Portion (\$ and %)
_____	_____	_____
_____	_____	_____
_____	_____	_____

Project Approach (20 Points Total)

18. Provide a concise description of the proposed project.

19. If your agency collaborated with other agencies in the planning and/or implementation of this project please provide a brief description of this collaboration. If you have been engaged in any Strategic Alliance efforts or anticipate any such as: co-locating, alliance, partnership or merger, describe your effort and anticipated future effort.

20. Select how your project will serve Low and Moderate Income People (Choose one):

- a. Benefit to LMI **individuals** (at least 51% of total beneficiaries of program must be LMI and income information must be gathered from all participants)
- b. **Presumed Benefit** (all individuals served in the program qualify as low income because of the type of population served, i.e.: Elderly, Severely Disabled Adults , Abused Children, Battered Spouses, Homeless Persons, Illiterate Adults , Persons with AIDS, Migrant Farm Workers. Income information does not have to be collected.)
- c. Benefit to an **area** that is primarily residential and is located in an eligible census tract (at least 30.34% of residents are LMI). See instructions for a list of eligible census tracts.) Provide list of census tracts: _____
- d. Housing units created to benefit LMI individuals or households (every CDBG funded unit must be occupied by and LMI individual or household)
- e. Jobs created to benefit LMI individuals (1 job must be created for every \$35,000 of CDBG funds invested in project; 51% of all jobs created must be for LMI individuals)
- f. Project serves residents of a **NRSA** and agency is a certified CBDO. Provide name of NRSA:

- g. Project addresses conditions of **Slum and Blight** on an Area or Spot Basis. Must provide designation of Slum and Blighted area from jurisdiction when contract is signed, and addresses of affected properties.
- h. ADA Rehabilitation of a public facility or public improvement

NEEDS AND OUTCOMES (25 Points)

21. Describe the need for your program or project.

22. Description of Activity and Activity Outputs (5 points)

U = Units of housing, P = Persons, HH = Households, J = Jobs Created/Retained, PF = Public Facilities

Example:			
Activity Description	Reporting Periods/Outputs		
	Period I	Period II	Total
	1/1-6/30	7/1-12/31	
Rehab houses for eligible LMI residents	25 U	25 U	50 U
Provide services to persons who are homeless	200 P	200 P	400 P

Activity Description	Period I	Period II	Total
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

23. If this is a continuing activity, describe two measureable outcomes of your previous year's project whether or not it was funded with CDBG funds.

24. Describe two anticipated measurable outcomes for your proposed project and activities.

BUDGET (20 Points Total)

25. Agency Budget

<u>Revenues</u>	<u>2014 Actual</u>	<u>2015 Budget</u>
Waukesha County CDBG	_____	_____
Other Government Grants		
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
United Way	_____	_____
Program Service Fee	_____	_____
Public Support (Membership, Fund Raising, Donations, etc)	_____	_____
Investment Income	_____	_____
Other (Specify) _____	_____	_____
Other (Specify) _____	_____	_____
TOTAL	_____	_____

<u>Expenses</u>	<u>2014 Actual</u>	<u>2015 Budget</u>
Personnel Costs	_____	_____
Insurance	_____	_____
Operating Expenses	_____	_____
Capital Expenses	_____	_____
Allocated Overhead	_____	_____
Other _____	_____	_____
TOTAL	_____	_____

Explain any major deviations between any of the years: _____

25. CAPITAL BUDGET

In Column B provide the calculation for estimated costs explaining how this costs was determined. In Column C provide the proposed amount of funding that will be required in order to complete the project. In Column D indicate the total amount of CDBG funding requested for the project.

A Budget Item	B Calculation	C Total Project Costs	D Total amount of CDBG Requested
PROJECT COSTS	Provide a description of how estimated costs were reached		
Acquisition			
a. Cost of Building or Land	_____	\$ _____	\$ _____
b. Settlement Costs	_____	\$ _____	\$ _____
Hard Construction Costs			
a. Cost of Construction	_____	\$ _____	\$ _____
b. Contingency	_____	\$ _____	\$ _____
Relocation Costs	_____	\$ _____	\$ _____
Holding Costs	_____	\$ _____	\$ _____
Architecture and Engineering	_____	\$ _____	\$ _____
Construction Administration	_____	\$ _____	\$ _____
Application Fee	_____	\$ _____	\$ _____
Environmental/Lead Survey	_____	\$ _____	\$ _____
Marketing	_____	\$ _____	\$ _____
Permits & Fees	_____	\$ _____	\$ _____
Appraisals	_____	\$ _____	\$ _____
Hazard & Builders Risk	_____	\$ _____	\$ _____
Taxes (Property)	_____	\$ _____	\$ _____
Accounting	_____	\$ _____	\$ _____
Legal	_____	\$ _____	\$ _____
Title/Recording	_____	\$ _____	\$ _____
Inspection Fees	_____	\$ _____	\$ _____
Other: _____	_____	\$ _____	\$ _____
	TOTAL DELIVERY COST	\$ _____	\$ _____
TOTAL AMOUNT OF CDBG FUNDS REQUESTED			\$ _____

26. USE OF OTHER RESOURCES

A. Describe plans to use other funds on this project. In this section only describe funds that are secured. Provide the source of funds, amounts, period covered and how these funds will be used.

B. Describe plans to seek new funding to supplement CDBG funding. Describe the sources to that will be applied for, the amount to be requested and the proposed use of these funds.

Consolidated Plan Priorities and Analysis of Impediments (10 Points)

27. Select the appropriate activity category below for your project. Projects categories are listed in the order of highest priority at the top of each list.

Public Services	
	Homeless shelter and services
	Meals / Nutrition
	Youth / Childcare / Abused and neglected children
	Seniors and Disabled
	Substance Abuse / Mental Health / Healthcare
	Transportation
	Domestic abuse
	Education
	Employment training
	HIV / AIDS
	Other (list)

NRSA	
	Meals / Nutrition
	Youth / Childcare / Abused and neglected children
	Seniors and disabled
	Substance Abuse / Mental Health / Healthcare
	Domestic abuse
	Education
	Employment training
	Transportation
	HIV / AIDS
	Other (list)

Housing	
	Homeowner rehabilitation program/loans
	Rental rehabilitation (special needs/transitional or permanent housing for very low income / supportive services and case management attached to units)
	Rental rehabilitation (multi-family projects, general low income population)
	Downpayment assistance
	Housing counseling
	Acquisition / site preparation of land for housing purposes (not construction)
	Residential historic preservation
	Other (list)

Public Facilities and Improvements (Rehab/construction costs--not operating costs) *the rehab may be for ADA compliance OR to benefit low-moderate income people for each activity	
	Homeless facilities
	Youth / Abused children facilities
	Senior / Disabled facilities
	Facilities for AIDS patients
	Neighborhood / Community centers
	Parks / Playgrounds / Recreational facilities
	Streets / Sidewalk improvements
	Water / Sewer improvements
	Flood drainage improvements
	Parking lots
	Other (list)

Economic Development	
	Loans to small/medium businesses for low-moderate income job creation or retention
	Commercial / Industrial infrastructure development or improvements
	Façade improvement loans to businesses
	Non-residential historic preservation
	Other (list)

Administration and Planning	
	Housing rehab program administration
	Revolving Loan Fund administration
	Fair housing activities
	Planning for communities or NRSA's
	Other (list)

28. Select the activity or activities below that best show how your agency is working to alleviate impediments identified in the 2015—2019 Analysis of Impediments to Fair Housing Choice.

a. Impediment #2: Lack of Fair Housing Knowledge

1. Agency staff attend fair housing seminars or educational opportunities.
2. Agency provides education or training for rental property owners and managers on the requirements of the Fair Housing Act, the definitions of protected classes, discriminatory practices, and potential consequences for non-compliance.
3. Agency provides education or training to tenants on their rights under the Fair Housing Act.

b. Impediment #3: Imbalance Between Job Centers and Affordable Housing Options

1. Project is located in high opportunity community near a job center. ***FOR HOUSING PROJECTS ONLY***
2. Project is located in low or moderate income census tract. ***FOR ECONOMIC DEVELOPMENT PROJECTS ONLY***

c. Impediment #4: NIMBY/Prejudiced Attitudes

1. Agency develops and integrates appropriate diversity awareness information into staff and organizational development training.
2. Agency creates and disseminates information regarding what affordable, workforce and mixed-income housing is and what economic benefits they offer to the community, via printed materials, training sessions, website education or other methods.
3. Agency participates in regional housing initiatives and collaborative efforts.

d. Impediment #5: Limited Housing Options for People with Disabilities and the Aging Population

1. Project creates housing for people with disabilities or the elderly. ***FOR HOUSING PROJECTS ONLY***
2. Project has construction design concepts such as universal design (UD) and Visitability standards and features. ***FOR HOUSING PROJECTS ONLY***

Appendix A: Results of Prior Year Projects

29. Provide numeric statistics related to program beneficiaries (persons or households) served over the past three years. Use "P" for persons, "H" for households and "J" for jobs.

<u>Year</u>	<u>Amount of CDBG Awarded</u>	<u># Served with CDBG funds</u>	<u>Total # Project Served</u>
2012	_____	_____	_____
2013	_____	_____	_____
2014	_____	_____	_____

30. Was your agency able to spend the CDBG allocation awarded within the calendar year? (Provide explanation for any extensions into the next year for 2012, 2013 and 2014)

31. Has your agency had any CDBG funds reprogrammed (taken back) by the CDBG Board? (Explain for 2012, 2013 and 2014)

An officer of the organization's governing body must sign this application:

The undersigned, an authorized officer of the organization, does hereby certify that the information set forth in this grant application is true and correct, that the Federal tax exemption determination letter provided as part of this application has not been revoked and the present operation of the organization and its current sources of support are not inconsistent with the organization's continuing tax exempt classification as set forth in such determination letter.

Name _____ Date: _____

Title _____

Signature

Save Instructions:

Once you download the PDF application file from the Waukesha County website, save it to a file on your computer and rename it (suggest "Out of Cycle CDBG Application"). You may now open the saved, renamed PDF file and fill in the application. You may save your changes and come back to the application at another time to complete it. Once it is complete, save the file (suggest rename it to something like "Final Out of Cycle PF CDBG Application w/date"), print 13 copies and submit one original with signature and 13 copies, all on 3-hole punch paper, to the Waukesha County Department of Parks and Land – Community Development by mail or in person before the deadline submission date of **March 25, 2015** by 4:30 pm.