



State of Alaska

COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) CFDA 14.228

Application Workshop Syllabus

Course Overview:

This workshop builds the skills needed to complete a successful Community Development Block Grant (CDBG) application. The following application will serve as the focus for the CDBG Application Workshop. Over the course of the workshop, instructors will go through each item of the application and provide one-on-one assistance to aid in the completion of a successful application.

Who should take this course:

Current and potential CDBG applicants.

APPLICANT (BOROUGH OR CITY) INFORMATION

Name: _____ DUNS#: _____
Address: _____
City: _____ State: _____ Zipcode: _____
Contact Person and Title: _____
Phone: _____ Fax: _____
Email: _____

Co-Applicant or Joint Applicant (*if applicable*)

Name: _____ DUNS#: _____
Address: _____
City: _____ State: _____ Zipcode: _____
Contact Person: _____
Phone: _____ Fax: _____

PROJECT INFORMATION

Project Title: _____

Eligibility Category:

- Community Development [Project eligible under Section 105(a)(2)(4)(5)(14)(15)]
- Planning [Project eligible under Section 105(a)(12)]
- Special Economic Development [Project eligible under Section 105(a)(14)(17)]

Proposed Budget:

\$ _____ CDBG Request
\$ _____ Cash Match
\$ _____ In-Kind Contributions
\$ _____ **Total Project Cost** (total of above three lines)

CERTIFICATION

I, the undersigned, certify that I am authorized to represent the applicant, that to the best of my knowledge and belief, data in this application is true and correct, that the document has been duly authorized by the governing body of the applicant, that the community is empowered by statute to perform the functions and provide the services encompassed by the proposed project, and that the applicant will comply with all applicable State and Federal laws and regulations in implementing the proposed project if it is selected for funding.

Authorized Signature: _____ Date: _____

Printed Name: _____ Title: _____

Project Description & Selection / Citizen Participation Plan

A. Project Description

What are you going to do? Describe the project as completely and in as much detail as possible by first identifying existing conditions, the nature of the proposed project, and what needs the project will address in your community (see page 28 of the Handbook). Though not required, have you attached photographs illustrating the existing conditions? If your project is eligible under Section 105(a)(14) or (17) of the Special Economic Development category, identify the private for-profit entity or entities which will receive assistance. Show how jobs will be created. If your project is eligible under the Planning category, identify the specific plan you will produce as a result of this project.

B. Selection Process/Citizen Participation Plan

How and why did the community decide on this project? Describe the public participation process used and how and when residents, especially low and moderate-income residents, had the opportunity to comment. Does the project demonstrate community consensus? Identify the other projects considered for CDBG funding and explain why this project was selected as the priority.

Attach copies of minutes of at least one public hearing, which was held within the six-month period prior to acceptance of this application (***no earlier than DEADLINE***). Your minutes *must* show the following:

- ✓ CDBG program and funding categories were explained
- ✓ Public had opportunity to comment
- ✓ Other projects were considered for CDBG funding
- ✓ Selected project has community consensus

(See page 28 of Handbook) ***This is a federal requirement. This application cannot be considered for funding without minutes showing that the public had an opportunity to comment and suggest a variety of possible projects.***

Guidelines for Mandatory Public Hearing for FFY 21 CDBG Application

- Give adequate notice to residents about the Public Hearing. Post notices in several different places around your community to reach as many individuals as possible. Clearly state the time, place, and reason for the Hearing. **(See “C” below)**
- The Public Hearing may be called as a special meeting or may be part of the regular City Council meetings. It must be held by the eligible applicant (City or Borough).
- After calling the Hearing to order, explain what the CDBG Program is and explain that CDBG grant funds can be used for different activities. They can be used for Community Development projects, Planning projects, or Special Economic Development projects. Ask if there are any questions on the types of projects that CDBG funds can be used for. **(See “E” below)**
- Give an example of a proposed project that is currently needed in the community. Tell what it is and why it should be chosen for the FFY 21 CDBG proposed project. **(See “E” below)**
- Call for alternative proposals. Discuss all proposals fully to clearly identify what projects are needed and why they are important to the community. **(See “F”)**
- If there are no alternative proposals, clearly state this fact in the minutes of the meeting.
- Approve project and submission of the CDBG application.
- After the meeting, the minutes of this Hearing must be written up and attached to the application. You should now be able to answer the remaining questions in this section of the application. **(See “D” below)**

C. Date of Public Hearing/Community Meeting: _____

Must be within six months of application submission. Include copy of the public notice for this meeting.

D. Are minutes of meeting attached as required? Yes No

E. Do the minutes demonstrate that the CDBG program was explained and the types of projects that can be funded discussed? Yes No

F. Do the minutes demonstrate that residents had the opportunity to suggest a variety of possible projects for which to apply? Yes No

NOTE: You must be able to answer “YES” to questions D, E, and F above and attach a copy of meeting minutes. If not, your application will not move forward.

CRITERION #2 / Maximum Points Available 25

Project Plan / Readiness

A. Identify major project activities and dates for completion of those activities:

Keep in mind that awards are usually announced in the spring following submission of the application, and funds will not be available until the grant negotiation and environmental review processes are complete.

Proposed Project Start Date: _____

Project Completion Date: _____

Activity	Date to be Completed
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

B. Indicate whether you have the following:

- 1. Completed Feasibility Study Yes No N/A
- 2. Final Engineering Documents (Design) Yes No N/A
- 3. State Fire Marshal Approval of Plans Yes No N/A
- 4. U.S. Army Corps of Engineers Permit Yes No N/A
- 5. Other Required Permits (See Appendix G) Yes No N/A
- 6. Cooperative/Joint Agreements (See Appendix E & F) Yes No N/A

C. Identify other State/Federal/Public agencies involved with this project:

1. _____
Name of Agency

Contact Person

Reason for Involvement

2. _____
Name of Agency

Contact Person

Reason for Involvement

3. _____
Name of Agency

Contact Person

Reason for Involvement

4. _____
Name of Agency

Contact Person

Reason for Involvement

5. _____
Name of Agency

Contact Person

Reason for Involvement

- D.** Describe the community's plan for implementing the proposed project. Include timelines, goals, objectives, and expected outcomes (see page 29 of the Handbook).

- E. Describe what efforts the community has undertaken to ensure the success of the project. What project agreements are in place; what resources are dedicated to the project? Did you receive CDBG funding for this project within the past two years for project design, engineering, feasibility, and/or planning? Have you completed and attached an Operations and Maintenance Budget for Community Development activities? If your project is a Special Economic Development project, has the community completed a feasibility study and/or marketing study?

F. **Site Control:** If the proposed project involves the use of real property you must provide evidence in the form of a deed, lease, or easement showing that the community has obtained an enforceable right to use that parcel of land or facility.

a. Provide the legal description of the property:

b. Attach a map which identifies the property. Map attached? Yes No

c. Indicate which document you have that proves ownership or your legal right to use the property.

Copy Attached?

Deed: Yes No N/A

Lease: Yes No N/A

Easement: Yes No N/A

d. If you do not have one of the above documents, what steps do you need to take in order to obtain the right to use the property? For example, do you need to purchase the land? ... negotiate and execute a lease with another entity? ... finalize ANCSA 14(c)(3) reconveyance? Please explain the situation as you know it and your anticipated timeframe to prove site control.

e. Have you contacted your DCCED Regional Office and asked for assistance with site control? Yes No

f. Has this property been occupied over the last 12 months? Yes No

g. Will there be anyone displaced from the property for this project? Yes No

G. **Environmental Review:** Every successful applicant for CDBG funds must obtain appropriate environmental clearances for their proposed activity. The Department will make a determination regarding the environmental requirements of each project and notify each grantee about appropriate procedures after notification of award. After this application is submitted, **all project activity must stop** until the environmental review requirement is met. **Please indicate that you are aware of this requirement.**

Yes No

CRITERION #3 / Maximum Points Available 25

Project Impact

A. Below is a list of possible ways in which a project might benefit a community. Check the boxes beside those benefits which are appropriate for the specific project you are proposing.

- Contributes to solving public facility problems by constructing, upgrading, or reducing operational costs of essential community services
- Eliminates imminent threats to public health/safety
- Develops infrastructure for community/economic development
- Promotes self-sufficiency and diversification
- Attracts other funds and resources to the community
- Promotes long-term positive solutions to continuing or reoccurring problems
- Promotes small business development in the community
- Utilizes an “underutilized work force”
- Utilizes “underutilized capital resources”

B. Describe how your project will result in the benefits identified above as well as any additional benefits the project will have on the community not listed above. Focus on the direct benefits to low- and moderate-income residents. Describe how the needs of local low- and moderate-income residents will be met with this project (see page 30 of the Handbook). Be specific. Attach additional pages if necessary.

B. (continued)

C. Pages 11 and 12 of this application apply to Special Economic Development Projects Only. If your project is eligible under Section 105(a)(14) or (17), or is part of a community economic development project under Section 105(a)(15), you must meet the **Guidelines and Objectives for Evaluating Project Costs & Financial Requirements** and the **Public Benefit Standards** identified on page 9 of the Handbook. Attach supporting documentation.

Identify the number of jobs to be created or retained by the applicant as a direct result of this project (see page 21 – 22 of the Handbook for definitions). **Note:** *This does not include short-term jobs created for implementation of this project. Only permanent jobs may be counted.*

	Full-time	Part-time	TOTAL
a. Jobs to be CREATED:	_____	_____	_____
b. Jobs to be RETAINED:	_____	_____	_____

c. Identify each of the above identified jobs by **title** and attach position descriptions if available.

<u>Created</u>	Description Attached		<u>Retained</u>	Description Attached	
	Yes	No		Yes	No
Title: _____	<input type="checkbox"/>	<input type="checkbox"/>	Title: _____	<input type="checkbox"/>	<input type="checkbox"/>
Title: _____	<input type="checkbox"/>	<input type="checkbox"/>	Title: _____	<input type="checkbox"/>	<input type="checkbox"/>
Title: _____	<input type="checkbox"/>	<input type="checkbox"/>	Title: _____	<input type="checkbox"/>	<input type="checkbox"/>
Title: _____	<input type="checkbox"/>	<input type="checkbox"/>	Title: _____	<input type="checkbox"/>	<input type="checkbox"/>
Title: _____	<input type="checkbox"/>	<input type="checkbox"/>	Title: _____	<input type="checkbox"/>	<input type="checkbox"/>
Title: _____	<input type="checkbox"/>	<input type="checkbox"/>	Title: _____	<input type="checkbox"/>	<input type="checkbox"/>

d. Explain what efforts you will make to ensure that the above jobs are targeted for low and moderate income residents.

D. For Special Economic Development projects, describe how you determined that this project is economically feasible and viable by providing cash flow and profitability data.

a. Have you completed feasibility and/or marketing studies? Yes No
(If yes, please attach copies)

b. Have you completed an Operations/Maintenance Budget? Yes No

CRITERION #4 / Maximum Points Available 25

Budget / Match / In-Kind

A. General Information about preparing your budget is provided below:

Refer to pages 24 – 26 of the Handbook for detailed instructions on how to prepare your budget to receive the highest possible score. Below is some of the most important information from the Handbook.

1. Are you applying for funding for construction?

If so, there are two ways to pay for construction labor:

- Force-Account
*Force-account labor means the applicant will hire construction workers, those workers will be on the applicant's payroll, and they will be paid prevailing wages for that area. The applicant will either manage the project in-house or hire a project manager. **If you are using force-account construction labor, you must complete the Force Account Labor and Fringe Benefits table on page 15.***
- Contractual
A contracted project means the applicant will go out to bid and hire a construction firm to construct the project. The workers in this case will be on the contractor's payroll and will be paid Davis Bacon wages.

2. Does your budget include matching funds?

In order to score the maximum number of points, your budget should include at least 25% matching funds. The following are examples of how your community can contribute matching funds:

- *Cash contribution from the applicant*
- *Administrative costs*
- *Other grant funds*
- *Cost of a design or feasibility study*
- *Cost of work already completed on the project*
- *Value of land for projects using real property (not design or planning grants)*

3. Have you included documentation?

Your budget numbers should be supported by documentation that shows how you calculated your budget. The following are some examples of budget documentation:

- *Grant award letters or cover sheets*
- *Letters of commitment or municipal resolutions showing commitment of funds*
- *Construction cost estimates*
- *Quotes for materials and freight*
- *Equipment rental cost rates*
- *Balance sheets showing available cash match*

B. Line Item Proposed Budget

Fill in the chart below to indicate how project funds will be allocated. Round off figures to the nearest whole dollar and check addition on all cost totals and sub-totals.

Cost Category	CDBG Request	Cash Match	In-Kind	TOTAL
1. Labor				
2. Fringe Benefits				
3. Materials				
4. Freight				
5. Equipment Rental				
6. Equipment Purchase				
7. Contractual				
8. Insurance				
9. Other				
10. Administration				
TOTAL*				

***These totals must match the cover page of your application.**

C. Force Account Labor and Fringe Benefits, NOT Contractual:

Include only labor and fringe benefits to be paid with CDBG funds.

Position	Wage Rate	No. of Hours	Gross Wages	FICA	ESC	Workers Comp.	Other	Total Labor Cost
Total								

NOTE: Acceptable fringe benefits include, but are not limited to, FICA @ 7.65% (includes Social Security @ 6.2% and Medicare @ 1.45%); ESC (list the current rate for the employer's share that has been computed by DOL); and Workers Compensation (%varies).

D. Matching Funds Detail

Please provide the following information about matching funds. **Attach documentation** in the form of grant award letters, letters of commitment, bank account balance sheets, property appraisals, etc. for all matching funds listed.

Source and Type (federal (include CFDA #), state, local, or private)	Amount	Cash? or In-Kind?	
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

E. Budget Narrative: Please provide an explanation for each budget figure listed on page 14 and 15 and specifics about what it will be used for. Provide a copy of city/borough's approved indirect cost rate for Administration, if applicable. Add additional pages if necessary.

G. Have you included the printout from <https://sam.gov/content/home> of your active DUNS and CCR # (including co-applicant)? Yes No

Have you included the Authority to Participate form (Appendix A), completed and signed by an authorized signer? Yes No

Have you completed and included the Determining Benefit to Low and Moderate-Income Persons form (Appendix B1)? Yes No

Have you included the Statement of Assurances and Certification (Appendix C)? Yes No

Have you included minutes of a Public Hearing held within six months of submission which demonstrates community support for this project? Yes No

H. Will your application be received by **DEADLINE.** in the Fairbanks DCCED office?
This is a firm deadline. Yes No

Appendix

This Appendix Packet includes Appendices A through I, as well as instructions for completing each appendix. Please complete the required* appendices and submit with your application. The original signed application must include the required appendices with original signature of the applicant's highest elected official or other authorized representative to be considered for funding.

APPENDIX A:	*Authority to Participate (pg. 3)
APPENDIX B1:	*Determining Benefit to Low and Moderate Income (LMI) Persons (pgs. 5–10)
APPENDIX B2:	Job Creation/Retention Forms (pgs. 12-14)
APPENDIX B3:	LMI Tables (pgs. 16 – 20) Part 1: Listing of LMI % by community Part 2: Listing of LMI Income Limits by census district
APPENDIX C:	*Statement of Assurances and Certifications (pg. 22)
APPENDIX D:	Environmental Review Information (pg. 24)
APPENDIX E:	Joint Application Agreement (pg. 26)
APPENDIX F:	Cooperative Application Agreement (pg. 28)
APPENDIX G:	Potential Project Permit Requirements (pgs. 30-31)
APPENDIX H:	*Applicant/Recipient Disclosure/Update Report (pgs. 33-35)
APPENDIX I:	*ADA Certification (pg. 37)

A

Authority to Participate

Who must submit this appendix with their application?

Every applicant for CDBG funds, regardless of project or category.

What is the purpose of this appendix?

Every applicant for CDBG funds **must** submit a resolution, motion, or similar action granting Authority to Participate in the program. The Authority to Participate also establishes signatory authority to an appropriate official to conduct normal and usual business regarding the project.

On the following page is one suggested format for this Authority to Participate. You may change the format only to the extent that it does not eliminate the key components, including the amount of the grant funds requested, the project description, and the signatory authority.

Authority to Participate

RESOLUTION NUMBER _____

A RESOLUTION of the (Council) _____ authorizing participation in the Community Development Block Grant Program.

WHEREAS, the Council of the City of _____ wishes to provide a (Project) _____ for use in the community; and

WHEREAS, this entity is an applicant for a grant in the amount of \$ _____ from the Alaska Department of Commerce, Community, and Economic Development (hereinafter "Department"), under the CDBG program;

NOW, THEREFORE, BE IT RESOLVED THAT the (Name and Title) _____ of the City of _____ is hereby authorized to negotiate and execute any and all documents required for granting and managing funds on behalf of this organization.

The (Name and Title) _____ is also authorized to execute subsequent amendments to said grant agreement to provide for adjustments to the project within the scope of services or tasks, based upon the needs of the project.

PASSED AND APPROVED BY THE _____ on _____, 20 _____.

IN WITNESS THERETO:

By: _____
Signature

Title

Attest: _____
Signature

Title

By: _____
Signature

Title

Attest: _____
Signature

Title

Determining Benefit to Low and Moderate Income Persons

Who must submit this appendix with their application?

Every applicant for CDBG funds, regardless of project or category.

What is the purpose of this appendix?

The national objective of the CDBG program is to benefit Low to Moderate Income (LMI) persons. Every applicant for CDBG funds **must** submit this appendix in order to verify that they meet this national objective.

On the following pages is a checklist which addresses each way in which a project can meet this national objective. You must work through the checklist until one of the starred notations indicates you need go no further.

Note: *If the project will not serve the entire community or if the data in Part 1 of Appendix B3 does not reflect that at least 51% of the community residents are LMI, you will need to conduct a survey of the area to be served by the project **prior** to submission of an application. **Contact CDBG Program staff for the survey methodology that must be utilized.** Survey results will be considered valid until the next application cycle or the next census data is published.*

Note: *If a project that meets the job creation benefit is in a primarily residential area, you must also show that you meet the area-wide benefit.*

Note: *Planning applications must demonstrate that at least 51% of the persons who would benefit from implementation of the plan, or a project which results from the plan, are LMI.*

Section 1: LMI Area-Wide Benefit

Complete Section 1 if you think your project meets the definition of an **Area-Wide Benefit** as defined on Pages 19 – 20 of the CDBG Handbook.

1. Identify the community your project will serve. _____

Note: *If more than one community will be served, contact DCCED for an LMI determination.*

2. Will your project serve the residents of the entire community? Yes No

3. If you answered **NO** to question #2, skip to question #10.

If you answered **YES** to question #2, refer to Part 1 of Appendix B. Is your community identified by census data as being at least 51% LMI according to Part 1 of Appendix B? Yes No

4. What is your community LMI % _____

★ If you answered **YES** to both questions #2 and #3, your project meets the criteria for providing an Area-Wide Benefit to LMI residents. STOP HERE.

5. If you answered **YES** to question #2 above, but **NO** to question #3 above, you will need to contact DCCED for information on conducting a survey to show that the income figures provided by census data in Part 1 of Appendix B are no longer valid and that your community is in fact at least 51% LMI.

6. Do the figures in Part 1 of Appendix B indicate that you must conduct a survey? Yes No

7. Have you contacted DCCED for survey methodology and followed those instructions in conducting your survey? Yes No

8. Did you include the survey that was completed prior to submission of your application? Yes No

9. Did the survey results indicate that the residents of the entire community are at least 51% LMI as defined by census data income guidelines in Part 2 of Appendix B. Yes No

★ If you answered **YES** to questions #6, #7, #8, and #9, your project meets the criteria for providing an Area-Wide Benefit to at least 51% LMI residents. STOP HERE.

10. If you answered NO to question #2, you will need to identify the specific area within your community which will be served by this project. Prior to submission of an application contact DCCED for information on conducting a survey to show that the residents of that area are at least 51% LMI defined by census data.

Specific area within the community to be served:

11. After identifying the specific area within your community to be served by the project, have you contacted DCCED for survey methodology and followed those instructions in conducting your survey? Yes No
12. Did you include the survey that was completed prior to submission of your application? Yes No
13. Did the survey results indicate that the residents of the area to be served are at least 51% LMI as defined by census data guidelines in Part 2 of Appendix B? Yes No
- ★ If you identified the specific area to be served in question #10 and answered YES to questions #11, #12 and #13, your project meets the criteria for an Area-Wide Benefit to at least 51% LMI persons. STOP HERE.

Section 2: LMI Limited Clientele

Complete Section 2 if you think your project meets the criteria for Limited Clientele as defined on Page 20 of the CDBG Handbook.

1. Will your project benefit one of the specific groups of people listed below? Yes No

If yes, please check the group to be served by this project:

- | | |
|---|---|
| <input type="checkbox"/> Abused Children | <input type="checkbox"/> Severely disabled adults |
| <input type="checkbox"/> Elderly Persons | <input type="checkbox"/> Illiterate adults |
| <input type="checkbox"/> Battered Spouses | <input type="checkbox"/> Migrant Farm Workers |
| <input type="checkbox"/> Homeless Persons | <input type="checkbox"/> Persons living with the disease AIDS |

- ★ If you answered **YES** to question #1 and checked the appropriated group, your project meets the Limited Clientele criteria for serving 51% LMI persons. STOP HERE.

2. If you answered **NO** to question #1, you will need to identify the specific group of people your project will serve and provide information to show that at least 51% of those persons have income at or below the income figures listed in Part 2 of Appendix B.

Specific group within the community to be served:

3. Have you provided family size and financial information which shows that at least 51% of the persons who make up the group identified in question #2 above have income at or below that shown in the income tables in Part 2 of Appendix B? Yes No
4. Have you included family size and income information with your application? Yes No

- ★ If you identified a specific group to be served in question #2 above and answered **YES** to questions #3 and #4, your project meets the Limited Clientele criteria for serving at least 51% LMI persons. STOP HERE.

Section 2: LMI Limited Clientele

Page Two

5. Does your project impose income eligibility requirements, which limit the activity exclusively to LMI persons as defined by census data in Part 2 of Appendix B? Yes No

6. Is your project of such a nature and location that it may be concluded that the activity's clientele will primarily be LMI persons as defined by census data in Part 2 of Appendix B? Yes No

7. Does your project fall under one of the categories listed below? Yes No
If yes, please check the appropriate category:

Construction of a Senior Center

Construction of job training facilities for severely disabled adults

8. Does your project include special projects directed to removal of material

Yes No

and architectural barriers which restrict the mobility and accessibility of elderly or handicapped persons to publicly owned and privately-owned non-residential buildings, facilities, and improvements, and common areas of residential structures containing more than one dwelling unit?

★ If you answered YES to ANY of the questions asked in #5, #6, #7 OR #8, your project meets the Limited Clientele criteria for serving at least 51% LMI persons. STOP HERE.

Section 3: LMI Housing Activities

Complete Section 3 if you think your project meets the criteria for **Housing Activities** as defined on Page 21 of the CDBG Handbook.

Note: The State of Alaska CDBG Program does not target Housing Activities.

1. Does your project include activities which add or improve permanent residential structures which are either owner or renter occupied one-family or multi-family structures? Yes No
2. Upon completion of the residential units, will at least 51% of the units of the project be occupied by LMI persons with renter units available to LMI persons at affordable rents? Yes No

★ If you answered **YES** to questions #1 and #2 above, your project meets the Housing Activities criteria for serving at least 51% LMI persons. **STOP HERE.**

3. Does your project include one of the following examples of potentially eligible housing activities? Yes No
If yes, please check the appropriate category:
 - Acquisition of property for permanent housing
 - Rehabilitation of permanent housing
 - Conversion of non-residential structures into permanent housing
 - Eligible activities connected with new housing construction (e.g. site improvements, and “soft costs”)

★ If you answered **YES** to question #3 above and checked the appropriate activity, your project meets the Housing Activities criteria for serving at least 51% LMI persons. **STOP HERE.**

Section 4: Job Creation & Retention

Complete Section 4 if you think your project meets the criteria for **Job Creation & Retention** as defined on Pages 21 – 22 of the CDBG Handbook.

Note: *Planning Activities are not, in and of themselves, recognized by HUD as resulting in job creation or retention. You may not use Job Creation and Retention for meeting the National Objective for a Planning Application.*

Note: *If a project that meets the job creation benefit is located in a primarily residential area, you must also show that you meet the area-wide benefit (Section 1).*

1. Does your project create or retain jobs (as defined on pages 21 – 22 of the CDBG Handbook) which are held or which will be available to LMI persons? Yes No
2. Have you completed and signed the attached Job Creation and Retention Certification Forms? Yes No
3. Are you prepared to report monthly to DCCED on your progress in meeting Job Creation and Retention requirements? Yes No

★ **If you answered YES to questions #1 – 3, your project meets the Job Creation & Retention criteria for serving at least 51% LMI persons. STOP HERE.**

Note: *You are asked to identify the specific jobs to be created and/or retained in your CDBG Application under Project Impact.*

Job Creation/Retention Forms

Who must submit this appendix with their application?

Any applicant for CDBG funds who is meeting the LMI Benefit in Appendix B1 through Job Creation/Retention activities. You may not use Job Creation and Retention for meeting the LMI Objective for a Planning Application.

All projects meeting the LMI benefit through Job Creation/Retention activities must document and report the Ethnic/Racial characteristics of the persons who fill the job positions.

What is the purpose of this appendix?

An applicant proposing to meet the LMI benefit through job creation/retention is committing to tracking the required job data. The first page of this Appendix is to be filled out (indicate the number of jobs involved) and submitted with your application. The second and third pages are for your information, and need not be submitted at this time; these will be required reports during the life of your grant, if funded.

Job Creation/Retention Certification

The Applicant, by signature and submittal of this application, acknowledges the requirement that, if awarded, this Community Development Block Grant Project will, during the life of the project or within two years of the start date of the project, whichever is less, result in either the creation of _____ (number) permanent, full-time equivalent jobs, 51% of which must be filled with persons of LMI households, or the retention of _____ (number) permanent, full-time equivalent jobs held by LMI persons. Job titles and descriptions for those jobs expected to be created or retained are attached.

A full-time equivalent job is defined as one in which the incumbent works at least forty (40) hours per week on a year-round basis. Low to moderate household income is defined as 80% of the median household income for the employee's family size for the area in which the project is located. Median household income information for the area in which this project is located is identified on the Income Limits Table, which is a part of Appendix B. Updates to this income data will be provided by the Department to the applicant as made available through HUD.

The applicant acknowledges that in order to justify expenditure of CDBG funds as outlined in this application and any subsequent grant agreement, the applicant will be required to maintain and submit information to the Department **monthly** which documents Job Creation activities and progress in meeting placement goals for LMI persons. This documentation will include the following information, which will be collected through use of the attached **Employee/Job Applicant Certification Form**:

1. Name, address, and social security number of each applicant for all jobs created by this project;
2. Household size for each job applicant;
3. Household income for each job applicant;
4. Racial/Ethnic characteristics.

Copies of each Employee/Applicant Certification Form will be submitted to the Department monthly by the Grantee.

Additionally, the Applicant/Grantee will be required to submit a **Job Creation Monthly Report**, copy attached, which summarizes the specific jobs created during the monthly reporting period, as well as the name, household income, family size, and date of hire for new hires during the month being reported. Racial/Ethnic characteristics will also be included.

The Applicant/Grantee further understands that failure to meet the job creation projections outlined in this certification and any subsequent grant agreement will result in withholding payment or a request for repayment of all or part of the grant funds.

Definitions: **Income:** Income includes all money or its equivalent received by members of a household in exchange for labor or services, from the sale of goods or property, public assistance payments, or as profit from financial investments. For clarification of special circumstances, contact your Grant Administrator.

Full-time equivalent: A position in which the employee works at least 40 hours per week (2,080 hours per year) on a year-round basis. A full-time equivalent position can result, for example, from two part-time permanent employees working 20 hours per week each. For clarification of special circumstances, contact your Grant Administrator.

Household/Family: A household consists of all members of a family, both adults and children, regularly sharing a single dwelling.

Employee Job Applicant Certification

The City/Borough to which you are now applying is the recipient of financial assistance through the State of Alaska's Small Cities Community Development Block Grant (CDBG) Program. As part of the program requirements, the City/Borough must report the number of jobs created for persons from low to moderate income households. This information is not part of the selection process and will not be used in determining which persons will be hired. This information is being requested to assist the City/Borough in satisfying the U.S. Department of Housing & Urban Development's requirements for documentation of the beneficiaries of CDBG assistance.

Name: _____ **SSN:** _____
Address: _____ **Date:** _____

Certification of Household Size & Income: I certify that the number of persons in my household is _____, and that my total household earning for the past year (12 months) did not exceed \$_____.

Affirmative Action Information: The following information is collected for statistical purposes only.
 Your cooperation is appreciated.

Date of Birth: ____/____/____
Sex: Male Female
Veteran Status: Veteran Disabled Veteran
Handicapped Status: Yes No

Race/Ethnic Origin (Check One)

<input type="checkbox"/> White (*11)	<input type="checkbox"/> Asian (*13)
<input type="checkbox"/> Black (*12)	<input type="checkbox"/> Haw/Pacific
<input type="checkbox"/> Am. Indian &	<input type="checkbox"/> Islander (*15)
<input type="checkbox"/> AK Native (*14)	<input type="checkbox"/> Other (*20)

(* = Identity code)

 Signature of Applicant

 Date

 Signature of City/Borough

 Date

Employer Only:

Yes No **Was Applicant hired?**
 ♦ If no, stop here
 ♦ If yes, employee's position title is _____

Yes No **Is this a new position?**
 ♦ If no, this position has been refilled, and was previously held by (name) _____
 ♦ If previously filled, who terminated employment?
 employee employer

Job Creation Monthly Report

Grantee: _____

Grant Number: _____

Report Period: From _____ To _____

- _____ Number of Permanent, Full-time Equivalent Jobs to be Created during life of grant per Grant Agreement
- _____ Number of New Permanent, Full-time Equivalent Jobs Created this report period
- _____ Number of Permanent, Full-time Equivalent Jobs in which Low to Moderate Income Persons were hired this report period
- _____ How many are new positions?
- _____ How many are refills of positions previously reported?
- _____ Cumulative number of Permanent, Full-time Equivalent Jobs Created to date under this Grant Agreement
- _____ Cumulative number of Permanent, Full-time Equivalent Jobs Created to date under this Grant Agreement which were filled by persons of low to moderate income households
- Yes No Are all jobs from previous reporting period(s) still in existence?
- Yes No Are all jobs from previous reporting period(s) currently filled?

Identify the Job Title/Classification of each new Job Created this report period which was filled with a person from low to moderate income household (do not include any refilled, pre-existing positions):

(* For Racial/Ethnic Data use codes listed on page 13)

Job title/Classification	Name of Employee	Date Hired	Hours per Week Worked	Annual Household Income	Family Size	Racial/Ethnic Data *

Certification: I certify that the above data is the most accurate available based upon current information and knowledge.

Signature

Printed Name

Date

Title

C

Statement of Assurances and Certifications

Who must submit this appendix with their application?

Every applicant for CDBG funds, regardless of project or category.

What is the purpose of this appendix?

Every applicant for CDBG funds **must** certify that it is complying with and will continue to comply with certain federal laws and requirements relating to the CDBG program.

On the following page is the suggested format for this Statement of Assurances and Certifications. We would prefer that you sign and submit this form, rather than reproducing it.

Statement of Assurances and Certifications

The local government certifies to the State that:

1. It will minimize displacement of persons as a result of activities assisted with CDBG funds;
2. Its program will be conducted and administered in conformity with Title VI of the Civil Rights Act of 1964 and the Fair Housing Act, and it will affirmatively further fair housing;
3. It will fulfill the citizen participation requirements of the plan provided by DCCED;
4. It will not attempt to recover any capital costs of public improvements assisted in whole or in part with CDBG funds by assessing any amount against properties owned and occupied by persons of LMI, including any fee charged or assessment made as a condition of obtaining access to such public improvements, unless:
 - a. CDBG funds are used to pay the proportion of such fee or assessment that relates to the capital costs of such public improvements that are financed from revenue sources other than under this subpart; or
 - b. For the purpose of assessing any amount against properties owned and occupied by persons of moderate income, the unit of local government certified to the State in a manner acceptable to the State, that it lacks sufficient CDBG funds to comply with the requirements of paragraph 4.a. of this section;
5. It will comply with the acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 as required under 570.496a(b) and Federal implementing regulations at 49 CFR Part 24; the requirements in 570.496a(c) governing the residential antidisplacement and relocation assistance plan and the relocation requirements of 570.496a(d) governing optional relocation assistance under section 105(a)(11) of the Act.
6. It will comply with Section 104(d) of the Housing & Community Development Act of 1974, as amended, including a certification that it has passed, made public, and is following a residential anti-displacement and relocation assistance plan.
7. It has adopted and is enforcing a policy prohibiting the use of excessive force by law enforcement agencies within its jurisdiction against any individuals engaged in nonviolent civil rights demonstrations and has adopted and is enforcing a policy of enforcing applicable State and local laws against physically barring entrance to or exit from a facility or location which is the subject of such nonviolent civil rights demonstration within its jurisdiction.
8. Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion — Lower Tier Covered Transactions — Appendix B to 24 CFR Part 24:
 - a. The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
 - b. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.
9. Assurance and Certification:

The governing body has read and understands the foregoing and duly adopts or passes as an official act, a resolution, motion, or similar action authorizing the submission of this application, including all understandings, assurances and certifications contained herein, and directing and authorizing the signatory to act in connection with the application and to provide such additional information as may be required.

Signature, Chief Elected Official (or Executive Officer)

Printed Name of Official

Title of Official

D

Environmental Review Information

Who must submit this appendix with their application?

Appendix D is provided for your information only and should not be submitted with your application.

What is the purpose of this appendix?

Every applicant for CDBG funds must obtain appropriate environmental clearances for their proposed activity, as required by the federal regulations which accompany expenditure of any federal funds. DCCED will make a determination regarding the environmental requirements of each project. *The applicant may not make this determination.* Successful applicants will receive information about appropriate procedures for Environmental Review after notification of award.

Note: *All project activity must **stop at the time of submitting the application** and until the Environmental Review Requirements are met, including project activities funded with non-CDBG matching funds.*

Environmental Review

Each CDBG activity must obtain appropriate environmental clearances as required by 24 CFR Part 58 of NEPA and all related laws and authorities. DCCED will make a determination regarding the environmental requirements of each project and notify each grantee about appropriate procedures **after notification of award**. Projects will be determined by the Department to be either:

1. **EXEMPT** from further environmental review; *OR*
2. **CATEGORICALLY EXCLUDED** from further environmental review; *OR*
3. Requiring completion and submission of an **ENVIRONMENTAL STATUTORY CHECKLIST** and the **ENVIRONMENTAL ASSESSMENT CHECKLIST** to determine whether the project will or will not have a significant impact on the human environment. Based upon these checklists, if it is determined that the project will have a potentially significant impact on the human environment, the grant recipient will be required to do an **ENVIRONMENTAL IMPACT STATEMENT (EIS)**. The procedure for completion of an EIS is spelled out in 24 CFR Part 58 Subparts H and I.

The following activities, subject to HUD regulations, have been designated **EXEMPT**:

- ✓ Environmental studies or assessments;
- ✓ Planning activities;
- ✓ Reasonable engineering and design costs associated with an eligible activity;
- ✓ Interim assistance under provisions for imminent threats to health and safety when the assistance does not result in permanent changes to the environment.

The following activities, or any combination thereof, are **CATEGORICALLY EXCLUDED**:

- ✓ Acquisition, construction, reconstruction, rehabilitation, or installation of public facilities and improvements, and authorized economic development activities under the CDBG program, provided that continued use remains without change in scale, size, capacity, location or character;
- ✓ Removal of architectural barriers;
- ✓ Rehabilitation of buildings and improvements, provided that unit density of building occupancy is not increased more than 20%, the project does not involve changes in land use classification, and the estimated cost of rehabilitation is less than 75% of the total.

E

Joint Application Agreement

Who must submit this appendix with their application?

If two or more eligible applicants are submitting a single application for CDBG funding, the Joint Application Agreement must be filled out, signed by all parties, and submitted with the application

What is the purpose of this appendix?

The Joint Application Agreement is one step in the required citizen participation process, and establishes a responsible party for the administration of the grant agreement, if funded.

On the following page is one suggested format for this Joint Application Agreement. You may change the format only to the extent that it does not eliminate the key components, including delegation of responsibility, access to records, and signature by all parties.

JOINT APPLICATION AGREEMENT

CITY/BOROUGH RESOLUTION NUMBER _____

An agreement by and between _____ and _____.

WITNESSETH:

WHEREAS, _____ (has/have) identified need in the community(ies) to expand economic opportunities; and

WHEREAS, _____ contemplates submitting jointly with _____ an application for CDBG funds from the Alaska Department of Commerce, Community, and Economic Development (DCCED) for the purpose of meeting such needs; and

WHEREAS, _____ and _____ understand that _____ will act as the applicant and will have the ultimate responsibility to assume all obligations under terms of the grant including assuring compliance with all applicable laws and program regulations and performance of all work in accordance with the contract. Further, _____ will be the contact person for this project; and

WHEREAS, it is understood that _____ and DCCED have access to all participants' grant records and authority to monitor all activities.

NOW, THEREFORE, pursuant to Alaska Statutes, _____ and _____ hereby agree to cooperate in the submission of an application for such CDBG funds, and agree to cooperate in implementation of the submitted program, as approved by the DCCED.

Nothing contained in this agreement shall deprive any municipality of any power or zoning, development control, or other lawful authority, which it presently possesses.

PASSED AND APPROVED BY THE _____ and _____
on _____, 20 _____.

IN WITNESS THERETO:

By: _____
Signature and Title

Attest: _____
Signature and Title

By: _____
Signature and Title

Attest: _____
Signature and Title

F

Cooperative Agreement

Who must submit this appendix with their application?

If eligible applicants choose to apply in cooperation with a non-municipal entity such as a non-profit corporation or a Native Village Council, a Cooperative Agreement must be filled out, signed by all parties, and submitted with the application.

What is the purpose of this appendix?

The Cooperative Agreement is one step in the required citizen participation process, and establishes a responsible party for the administration of the grant agreement, if funded.

On the following page is one suggested format for this Cooperative Agreement. You may change the format only to the extent that it does not eliminate the key components, including delegation of responsibility, access to records, and signature by all parties.

Note: *The eligible (municipal) entity is the applicant and the non-municipal entity is the Co-Applicant. Similarly, in the event the project is funded, the eligible entity will be the Grantee.*

COOPERATIVE AGREEMENT
CITY/BOROUGH RESOLUTION NUMBER _____

An agreement by and between _____ and _____.

WITNESSETH:

WHEREAS, _____ (has/have) identified need in the community(ies) to expand economic opportunities; and

WHEREAS, (municipal entity) _____ contemplates submitting on behalf of (non-municipal entity) _____ an application for CDBG funds from the Department of Commerce, Community, and Economic Development (DCCED) for the purpose of meeting such needs; and

WHEREAS, _____ and _____ desire, and are required to, enter into a written cooperative agreement with each other to participate in such CDBG program; and

WHEREAS, _____ and _____ understand that _____ will act as the applicant and will have the ultimate responsibility to assume all obligations under terms of the grant including assuring compliance with all applicable laws and program regulations and performance of all work in accordance with the contract. Further, _____ will be the contact person for this project; and

WHEREAS, it is understood that _____ and DCCED have access to all participants' grant records and authority to monitor all activities.

NOW, THEREFORE, it is mutually agreed between _____ and _____ as follows:

1. The _____ and _____ hereby agree that the _____ will receive some specific benefit (i.e., usefulness, advantage, return) for the residents of the rural community for (a specified period of time, usually 20 years or the useful life of the facility) _____.
2. The _____ and _____ hereby agree to cooperate in the submission of an application for such CDBG funds, and agree to cooperate in implementation of the submitted CDBG project, as approved by DCCED.

Nothing contained in this agreement shall deprive any municipality of any power or zoning, development control, or other lawful authority which it presently possesses.

PASSED AND APPROVED BY THE _____ on _____, 20____.

IN WITNESS THERETO:

By: _____
Signature and Title

Attest: _____
Signature and Title

By: _____
Signature and Title

Attest: _____
Signature and Title

Potential Project Permit Requirements

Who must submit this appendix with their application?

Appendix G is for your information only, and should not be submitted with your application.

What is the purpose of this appendix?

Applicants for CDBG funding are required to obtain all necessary permits to facilitate the lawful carrying-out of the proposed project. With Appendix G, DCCED is attempting to assist in this process by supplying the names, addresses, and phone numbers for various permitting agencies within the State and Federal Governments. This list is not intended to be all-inclusive. ***It remains the responsibility of the applicant to assure compliance with all permitting requirements.***

Potential Project Permit Requirements

Type of Permit, Approvals, Etc.	Description	Regulatory Agency
School Construction	Authority of the Department of Education for review of construction documents for educational facilities.	Department of Education & Early Development P.O. Box 110500 Juneau, AK 99811-0050 (907) 465-2800 http://eed.alaska.gov/
Solid Waste Disposal Permit	Permit needed for disposal of solid waste or hazardous material	Department of Environmental Conservation P.O. Box 111800 Juneau, AK 99811-1800 (907) 465-5285 or 555 Cordova Anchorage, AK 99501 (907) 269-7501 or 610 University Avenue Fairbanks, AK 99709 (907) 451-2120 http://www.dec.alaska.gov
Water Discharge Permit Plan Review and Approval of Sewerage or Sewage Treatment Works	Permit needed for the disposal of wastewater on land or in waters.	Juneau, AK 99811-1800 (907) 465-5285 or 555 Cordova Anchorage, AK 99501 (907) 269-7501 or 610 University Avenue Fairbanks, AK 99709 (907) 451-2120 http://www.dec.alaska.gov
Plan Review and Approval of Public Water Systems	Plans for the construction, installation, modification or operation of a public water supply system must be approved prior to construction	Juneau, AK 99811-1800 (907) 465-5285 or 555 Cordova Anchorage, AK 99501 (907) 269-7501 or 610 University Avenue Fairbanks, AK 99709 (907) 451-2120 http://www.dec.alaska.gov
Storage Tank Program	Pre-operation inspection is required to ensure compliance with health and sanitation standards for food service establishments, schools, day-care and pre-elementary schools, hotels and motels, swimming pools and bathing areas, and public toilets.	Department of Natural Resources Division of Habitat P.O. Box 115526 Juneau, AK 99811-5526 (907) 465-4105 (or contact local office in Palmer, Anchorage, Fairbanks, Craig, Petersburg or Soldotna) http://www.habitat.adfg.alaska.gov/
Anadromous (Salmon Spawning) Fish Protection Permit	Approval for any work in or near anadromous rivers, lakes, or streams.	Department of Natural Resources Division of Habitat P.O. Box 115526 Juneau, AK 99811-5526 (907) 465-4105 (or contact local office in Palmer, Anchorage, Fairbanks, Craig, Petersburg or Soldotna) http://www.habitat.adfg.alaska.gov/
Critical Habitat Area Permit State Game Refuge Permit	Approval for any work or development in a critical habitat area. Permit needed if proposing work or development within a designated state refuge or game sanctuary.	Department of Natural Resources Division of Habitat P.O. Box 115526 Juneau, AK 99811-5526 (907) 465-4105 (or contact local office in Palmer, Anchorage, Fairbanks, Craig, Petersburg or Soldotna) http://www.habitat.adfg.alaska.gov/
Hospital and Health Facility Construction	Authority of the Department of Health & Social Services for licensing and establishing standards for the construction of hospital and health facilities.	Department of Health & Social Services Health Facilities Licensing and Certification 4501 Business Park Boulevard Ste. 24 Building L Anchorage, AK 99503 (907) 334-2483 http://www.dhss.alaska.gov
Unemployment Insurance	Individuals, companies, and organizations that have one or more workers in covered employment for any part of a day must register with the Department.	Department of Labor & Workforce Development Employment Security Division P.O. Box 115509 Juneau, AK 99811-5509 (907) 465-2712 http://labor.alaska.gov/unemployment/
Workers' Compensation Insurance	Any employer with one or more employees working within the state must buy a workers' compensation insurance policy and submit proof of insurance to the Department.	Department of Labor & Workforce Development Division of Workers' Compensation P.O. Box 115512 Juneau, AK 99811-5512 (907) 465-2790 http://labor.alaska.gov/wc
Certification of Fitness – Electrical and Plumbing Certification of Pressure Vessels	Certifies the competency of electricians and plumbers. To ensure that boiler and pressure vessels and elevator constructions, installation and operation conform to regulations.	Department of Labor & Workforce Development Mechanical Inspection 3301 Eagle Street, Suite 302 Anchorage, AK 99503 (907) 269-4925 http://labor.alaska.gov/
Clearance regarding Preservation of Prehistoric and Archaeological Resources	Determination of presence/absence of cultural resources on the building site.	Department of Natural Resources Office of History & Archaeology 550 W 7 th Ave., Suite 1260 Anchorage, AK 99501-3557 (907) 269-8721 http://dnr.alaska.gov/parks/oha

Potential Project Permit Requirements (continued)

Type of Permit, Approvals, Etc.	Description	Regulatory Agency
Rights-of-Way Easement	Authorization required for rights-of-way easement and construction or improvements on easements established on State lands.	Department Natural Resources Division of Mining, Land & Water 550 W 7 th Ave., Suite 1260 Anchorage, AK 99501-3557 (907) 269-8400 http://dnr.alaska.gov/mlw/
Water Rights Permit	Must obtain permit to use surface or ground water in Alaska	
Sand and Gravel Extraction	To obtain sand and gravel on State lands for use on the project.	
Life/Fire Safety Plan Check for Construction/Occupancy of Building	Approval of building plans is required for fire protection and safety. This applies to commercial, industrial business, institutional or other public buildings containing four or more dwelling units. Construction, repair, remodel, addition or change of occupancy of any building/structure as listed above, or installation or change of fuel tanks must be approved by the State Fire Marshal's office prior to any work being started.	Department of Public Safety Division of Fire & Life Safety 5700 East Tudor Road Anchorage, AK 99507 (907) 269-5491 or 2760 Sherwood Lane, Ste. 2-B Juneau, AK 99801 (907) 465-4331 or 1979 Peger Road Fairbanks, AK 99709 (907) 451-5200 http://www.dps.alaska.gov/fire/
Handicapped Accessibility	Review and approval of plans for buildings and facilities with respect to handicapped access.	Department of Transportation & Public Facilities Statewide D & E Services P.O. Box 112500 3132 Channel Dr. Juneau, AK 99811-2500 (907) 465-2960 http://www.dot.state.ak.us/stwddes/
Driveway Permit	Permit required to construct and maintain a driveway or approach road on highway right-of-way.	
Discharge of Dredged or Fill Material into U.S. Waters	Permit required for the discharge of any dredged or fill material in US waters, including wetland. Permit cost is \$100 for commercial use or \$10 for non-commercial use.	Federal Agencies US Army Corps of Engineers US Army Engineer District, AK P.O. Box 6898 Elmendorf AFB, AK 99506-6898 (800) 478-2712 http://www.poa.usace.army.mil/
Structures or work in/or Affecting Navigable Waters	Permit required for any work or placement of structures in US waters.	
National Wildlife Refuge Land – Special Use Permit	Permit required for easements, roads or utilities in Wildlife Refuge Lands.	US Fish & Wildlife Service Division of Realty 1011 East Tudor Road, MS 221 Anchorage, AK 99503 (907) 786-3414 http://alaska.fws.gov/nwr/realty/
Oil Storage Facilities – Spill Prevention Control Counter Measures Plans	Approval required for onshore and offshore oil storage facilities. Also contact the Alaska Dept. of Environmental Conservation, Compliance Assistance Office at (800) 510-2332	US Environmental Protection Agency Alaska Operations Office 222 West 7 th Ave. #19 Anchorage, AK 99513-7588 (800) 781-0983 (907) 271-5083 http://www.epa.gov/aboutepa/epa-alaska
Structures Which May Interfere with Airplane Flight Paths	Any construction or alteration of any structure, roadway, overhead wires and so on which may interfere with airplane flight paths must be reported to the Federal Aviation Administration.	US Dept of Transportation Federal Aviation Administration Alaskan Region Airports Division 222 West 7 th Avenue #14 Anchorage, AK 99513 (907) 271-5438 http://www.faa.gov/airports/alaskan

Applicant/Recipient Disclosure/Update Report HUD Reform Act, Section 102

Who must submit this appendix with their application?

Every applicant for CDBG funds, regardless of project or category.

What is the purpose of this appendix?

This report is one part of the HUD Reform Act (24 CFR Part 12, et al), designed to ensure greater accountability and integrity in the way in which HUD makes assistance available under its programs.

Note: *There is a one page report every applicant for CDBG grant funds must submit with the CDBG application. Following the form is two pages of information/instructions.*

Applicant/Recipient Disclosure/Update Report

U.S. Department of Housing
and Urban Development

OMB Approval No. 2510-0011 (exp. 11/30/2018)

Instructions. (See Public Reporting Statement and Privacy Act Statement and detailed instructions on page 2.)

Applicant/Recipient Information

Indicate whether this is an Initial Report or an Update Report

1. Applicant/Recipient Name, Address, and Phone (include area code): () -	2. Social Security Number or Employer ID Number: - -
3. HUD Program Name Community Development Block Grant	4. Amount of HUD Assistance Requested/Received
5. State the name and location (street address, City and State) of the project or activity:	

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? These terms do not include formula grants, such as public housing operating subsidy or <u>CDBG</u> block grants. (For further information see 24 CFR Sec. 4.3). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.9 <input type="checkbox"/> Yes <input type="checkbox"/> No.
---	--

If you answered “No” to either question 1 or 2, **Stop!** You do not need to complete the remainder of this form. **However,** you must sign the certification at the end of the report.

Part II Other Government Assistance Provided or Requested / Expected Sources and Use of Funds.

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/State/Local Agency Name and Address	Type of Assistance	Amount Requested/Provided	Expected Uses of the Funds

(Note: Use Additional pages if necessary.)

Part III Interested Parties. You must disclose:

- All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity and
- any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds \$50,000 or 10 percent of the assistance (whichever is lower).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Social Security No. or Employee ID No.	Type of Participation in Project/Activity	Financial Interest in Project/Activity (\$ and %)

(Note: Use Additional pages if necessary.)

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional non-disclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that this information is true and complete.

Signature: X	Date: (mm/dd/yyyy)
---------------------	--------------------

Form HUD-2880 (3/13)

Public reporting burden for this collection of information is estimated to average 2.0 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

Privacy Act Statement. Except for Social Security Numbers (SSNs) and Employer Identification Numbers (EINs), the Department of Housing and Urban Development (HUD) is authorized to collect all the information required by this form under section 102 of the Department of Housing and Urban Development Reform Act of 1989, 42 U.S.C. 3531. Disclosure of SSNs and EINs is optional. The SSN or EIN is used as a unique identifier. The information you provide will enable HUD to carry out its responsibilities under Sections 102(b), (c), and (d) of the Department of Housing and Urban Development Reform Act of 1989, Pub. L. 101-235, approved December 15, 1989. These provisions will help ensure greater accountability and integrity in the provision of assistance administered by HUD. They will also help ensure that HUD assistance for a specific housing project under Section 102(d) is not more than is necessary to make the project feasible after taking account of other government assistance. HUD will make available to the public all applicant disclosure reports for five years in the case of applications for competitive assistance, and for generally three years in the case of other applications. Update reports will be made available along with the disclosure reports, but in no case for a period generally less than three years. All reports, both initial reports and update reports, will be made available in accordance with the Freedom of Information Act (5 U.S.C. §552) and HUD's implementing regulations at 24 CFR Part 15. HUD will use the information in evaluating individual assistance applications and in performing internal administrative analyses to assist in the management of specific HUD programs. The information will also be used in making the determination under Section 102(d) whether HUD assistance for a specific housing project is more than is necessary to make the project feasible after taking account of other government assistance. You must provide all the required information. Failure to provide any required information may delay the processing of your application, and may result in sanctions and penalties, including imposition of the administrative and civil money penalties specified under 24 CFR §4.38.

Note: This form only covers assistance made available by the Department. States and units of general local government that carry out responsibilities under Sections 102(b) and (c) of the Reform Act must develop their own procedures for complying with the Act.

Instructions

Overview.

A. Coverage. You must complete this report if:

- (1) You are applying for assistance from HUD for a specific project or activity **and** you have received, or expect to receive, assistance from HUD in excess of \$200,000 during the during the fiscal year;
- (2) You are updating a prior report as discussed below; or
- (3) You are submitting an application for assistance to an entity other than HUD, a State or local government if the application is required by statute or regulation to be submitted to HUD for approval or for any other purpose.

B. **Update reports (filed by "Recipients" of HUD Assistance): General.** All recipients of covered assistance must submit update reports to the Department to reflect substantial changes to the initial applicant disclosure reports.

Line-by-Line Instructions.

Applicant/Recipient Information.

All applicants for HUD competitive assistance, must complete the information required in blocks 1-5 of form HUD-2880:

1. Enter the full name, address, city, State, zip code, and telephone number (including area code) of the applicant/recipient. Where the applicant/recipient is an individual, the last name, first name, and middle initial must be entered.
2. Entry of the applicant/recipient's SSN or EIN, as appropriate, is optional.
3. Applicants enter the HUD program name under which the assistance is being requested.
4. Applicants enter the amount of HUD assistance that is being requested. Recipients enter the amount of HUD assistance that has been provided and to which the update report relates. The amounts are those stated in the application or award documentation. NOTE: In the case of assistance that is provided pursuant to contract over a period of time (such as project-based assistance under section 8 of the United States Housing Act of 1937), the amount of assistance to be reported includes all amounts that are to be provided over the term of the contract, irrespective of when they are to be received.
5. Applicants enter the name and full address of the project or activity for which the HUD assistance is sought. Recipients enter the name and full address of the HUD-assisted project or activity to which the update report relates. The most appropriate government identifying number must be used (e.g., RFP No.; IFB No.; grant announcement No.; or contract, grant, or loan No.) Include prefixes.

Part I. Threshold Determinations - Applicants Only

Part I contains information to help the applicant determine whether the remainder of the form must be completed. **Recipients filing Update Reports should not complete this Part.**

If the answer to *either* questions 1 or 2 is No, the applicant need not complete Parts II and III of the report, but must sign the certification at the end of the form.

Part II. Other Government Assistance and Expected Sources and Uses of Funds.

A. Other Government Assistance. This Part is to be completed by both applicants and recipients for assistance and recipients filing update reports. Applicants and recipients must report any other government assistance involved in the project or activity for which assistance is sought. Applicants and recipients must report any other government assistance involved in the project or activity. Other government assistance is defined in note 4 on the last page. For purposes of this definition, other government assistance is expected to be made available if, based on an assessment of all the circumstances involved, there are reasonable grounds to anticipate that the assistance will be forthcoming.

Both applicant and recipient disclosures must include all other government assistance involved with the HUD assistance, as well as any other government assistance that was made available before the request, but that has continuing vitality at the time of the request. Examples of this latter category include tax credits that provide for a number of years of tax benefits, and grant assistance that continues to benefit the project at the time of the assistance request.

The following information must be provided:

1. Enter the name and address, city, State, and zip code of the government agency making the assistance available.
2. State the type of other government assistance (e.g., loan, grant, loan insurance).
3. Enter the dollar amount of the other government assistance that is, or is expected to be, made available with respect to the project or activities for which the HUD assistance is sought (applicants) or has been provided (recipients).
4. Uses of funds. Each reportable use of funds must clearly identify the purpose to which they are to be put. Reasonable aggregations may be used, such as "total structure" to include a number of structural costs, such as roof, elevators, exterior masonry, etc.

B. Non-Government Assistance. Note that the applicant and recipient disclosure report must specify all expected sources and uses of funds - both from HUD **and any other source** - that have been or are to be, made available for the project or activity. Non-government sources of funds typically include (but are not limited to) foundations and private contributors.

Part III. Interested Parties.

This Part is to be completed by both applicants and recipients filing update reports. Applicants must provide information on:

1. All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity and
2. any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds \$50,000 or 10 percent of the assistance (whichever is lower).

Note: A financial interest means any financial involvement in the project or activity, including (but not limited to) situations in which an individual or entity has an equity interest in the project or activity, shares in any profit on resale or any distribution of surplus cash or other assets of the project or activity, or receives compensation for any goods or services provided in connection with the project or activity. Residency of an individual in housing for which assistance is being sought is not, by itself, considered a covered financial interest.

The information required below must be provided.

1. Enter the full names and addresses. If the person is an entity, the listing must include the full name and address of the entity as well as the CEO. Please list all names alphabetically.
2. Entry of the Social Security Number (SSN) or Employee Identification Number (EIN), as appropriate, for each person listed is optional.
3. Enter the type of participation in the project or activity for each person listed: i.e., the person's specific role in the project (e.g., contractor, consultant, planner, investor).
4. Enter the financial interest in the project or activity for each person listed. The interest must be expressed both as a dollar amount and as a percentage of the amount of the HUD assistance involved.

Note that if any of the source/use information required by this report has been provided elsewhere in this application package, the applicant need not repeat the information, but need only refer to the form and location to incorporate it into this report. (It is likely that some of the information required by this report has been provided on SF 424A, and on various budget forms accompanying the application.) If this report requires information beyond that provided elsewhere in the application package, the applicant must include in this report all the additional information required.

Recipients must submit an update report for any change in previously disclosed sources and uses of funds as provided in Section I.D.5., above.

Notes:

1. All citations are to 24 CFR Part 4, which was published in the Federal Register. [April 1, 1996, at 63 Fed. Reg. 14448.]
2. Assistance means any contract, grant, loan, cooperative agreement, or other form of assistance, including the insurance or guarantee of a loan or mortgage, that is provided with respect to a specific project or activity under a program administered by the Department. The term does not include contracts, such as procurements contracts, that are subject to the Fed. Acquisition Regulation (FAR) (48 CFR Chapter 1).
3. See 24 CFR §4.9 for detailed guidance on how the threshold is calculated.
4. "Other government assistance" is defined to include any loan, grant, guarantee, insurance, payment, rebate, subsidy, credit, tax benefit, or any other form of direct or indirect assistance from the Federal government (other than that requested from HUD in the application), a State, or a unit of general local government, or any agency or instrumentality thereof, that is, or is expected to be made, available with respect to the project or activities for which the assistance is sought.
5. For the purpose of this form and 24 CFR Part 4, "person" means an individual (including a consultant, lobbyist, or lawyer); corporation; company; association; authority; firm; partnership; society; State, unit of general local government, or other government entity, or agency thereof (including a public housing agency); Indian tribe; and any other organization or group of people.

ADA Certification

Who must submit this appendix with their application?

Every applicant for CDBG funds, regardless of project or category.

What is the purpose of this appendix?

Every applicant for CDBG funds **must** certify its compliance with the Americans with Disabilities Act, and specifically with the following applicable Titles of the Act:

- Title I - Employment
- Title II - Public Services
- Title II, Part 35 - New Construction and Alterations
- Title III, Part 36 - New Construction
- Title III, Part 36 - Alterations

ADA Certification

(Grantee, Applicant, Contractor) Notice

By signature on this form, the (Grantee, Applicant, Contractor) certifies that they will comply with regulations, policies, guidelines and requirements as they relate to the application, acceptance and use of state funds for this state capital project. Also the (Grantee, Applicant, Contractor) assures and certifies:

1. When applicable it will comply with the Americans with Disabilities Act of 1990 (P.L. 101-336), Title I - "Employment." In accordance with Title I of that Act, no covered entity shall discriminate against a qualified individual with a disability because of the disability of such individual in regard to job application procedures, the hiring, advancement, or discharge of employees, compensation, job training, and other terms, conditions, and privileges of employment.
2. When applicable it will comply with the Americans with Disabilities Act of 1990 (P.L. 101-336), Title II - "Public Services." In accordance with Title II of the Act, no qualified individual with a disability shall, by reason of such disability, be excluded from participation in or be denied the benefits of the services, programs, or activities of a public entity, or be subjected to discrimination by any such entity.
3. When applicable it will comply with the Americans with Disabilities Act of 1990 (P.L. 101-336), Title II, Part 35, Section 35.151 - "New Construction and Alterations," which provides as follows:
 - (a) Design and Construction: Each facility or part of a facility constructed by, on behalf of, or for the use of a public entity shall be designed and constructed in such manner that the facility or part of the facility is readily accessible to and usable by individuals with disabilities, if the construction was commenced after January 26, 1992.
 - (b) Alteration: Each facility or part of a facility altered by, on behalf of, or for the use of a public entity in a manner that affects or could affect the usability of the facility or part of the facility shall, to the maximum extent feasible, be altered in such a manner that the altered portion of the facility is readily accessible to and usable by individuals with disabilities, if the alteration was commenced after January 26, 1992.
 - (c) Accessibility Standards: Design, construction, or alteration of facilities in conformance with the Uniform Federal Accessibility Standards (UFAS) (Appendix A to 41 CFR Part 101-19.6) or with the Americans with Disabilities Act Accessibility Guidelines for Buildings and Facilities (ADAAG) (Appendix A to 28 CFR Part 36) shall be deemed to comply with the requirements of this section with respect to those facilities, except that the elevator exemption contained at section 5.1.3(5) and section 4.1.5(j) of ADAAG shall not apply.
4. When applicable it will comply with the Americans with Disabilities Act of 1990 (P.L. 101-336), Title III, Part 36, Section 36.401 - "New Construction." Except as provided in paragraphs (b) and (c) of the Act, discrimination for purposes of this part includes a failure to design and construct facilities for first occupancy after January 26, 1992 that are readily accessible to and usable by individuals with disabilities.
5. When applicable it will comply with the Americans with Disabilities Act of 1990 (P.L. 101-336), Title III, Part 36, Section 36.402 - "Alterations," which provides as follows:
 - (a) General: Any alteration to a place of public accommodation or a commercial facility, after January 26, 1992, shall be made so as to ensure that, to the maximum extent feasible, the altered portions of the facility are readily accessible to and usable by individuals with disabilities, including individuals who use wheelchairs.
 - (b) Alteration: An alteration is a change to a place of public accommodation or a commercial facility that affects or could affect the usability of the building or facility or any part thereof.

Name of Applicant: _____

Printed Name and Title of
Authorized Representative: _____

Signature: _____ Date _____