

**2015-2016**

**Community Development Block Grant (CDBG) Program**  
***Application for Funding***



***CDBG Application: Building Improvements & Rehabilitation***

***Important Considerations:***

- Fill out this application in its entirety. Incomplete applications will not be accepted.
- Please limit narrative responses to 250 words or less.
- If more space is needed than what is available on this application, attachments can be included.  
Please reference the applicable section number for all attachments.
- A representative of your organization must attend a mandatory Application Workshop Training session.  
Refer to the CDBG Application Handbook for more information.
- This application must be signed by an executive director of the organization applying for funds.
- Completed applications are due **Friday, October 10, 2014, by 4:00 p.m.**

**PART I: GENERAL INFORMATION**

**A. FUNDING REQUEST**

<b>Program/Project Title:</b>			
<b>Funding Request:</b>	\$		
<b>Program/Project Category:</b>	<input type="checkbox"/> Public Service Building Improvement <input type="checkbox"/> Commercial Rehabilitation		

**B. AGENCY INFORMATION**

<b>Agency Legal Name:</b>			
<b>Tax ID Number:</b>		<b>DUNS Number:</b>	
<b>Type of Agency:</b>	<input type="checkbox"/> Community council <input type="checkbox"/> Gov't./public <input type="checkbox"/> Other: _____		
	<input type="checkbox"/> Private non-profit	<input type="checkbox"/> Private for-profit	
<b>Agency Director:</b>			
<b>Phone Number:</b>		<b>Title:</b>	
<b>Street Address:</b>			
<b>Email Address:</b>			

**Required Documentation for Non-profit organizations:**

- ☐ An IRS 501(c)3 status letter must be provided as an attachment.
- ☐ A list of current board members must be provided as an attachment.

**Mission Statement:**

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## A. LOCAL GOALS &amp; PRIORITIES

Salt Lake City's 2015-2020 Consolidated Plan is a strategic plan focused on building **Neighborhoods of Opportunity** to promote capacity in neighborhoods with concentrated poverty and to support the City's most vulnerable populations. The five-year plan provides a strategy for maximizing and leveraging the City's block grant allocations to build healthy and sustainable communities that connect and expand opportunities for housing, education, transportation, services and economic development.

Projects funded through Salt Lake City's CDBG program must align with the goals and priorities outlined in the 2015-2020 Consolidated Plan.



Select the Consolidated Plan Priorities and Goals that apply to your program/project. Check all that apply.

PRIORITY:	GOAL:
<input type="checkbox"/> <b>HOUSING</b> To provide housing options for all economic and demographic segments of Salt Lake City's population while diversifying the housing stock within neighborhoods.	<input type="checkbox"/> Expand housing options for extremely low-income (ELI) individuals and special needs populations. <input type="checkbox"/> Support affordable housing development in high opportunity areas. <input type="checkbox"/> Improve and rehabilitate the housing stock in concentrated areas of poverty. <input type="checkbox"/> Expand affordable housing opportunities within walking distance of transit stations. <input type="checkbox"/> Develop healthy and sustainable housing that utilizes energy conservation and green building technologies. <input type="checkbox"/> Provide housing opportunities to emphasize stable housing as a primary strategy to end homelessness.
<input type="checkbox"/> <b>EDUCATION</b> To promote educational opportunities, with focus on reducing intergenerational poverty.	<input type="checkbox"/> Address the digital divide by promoting digital inclusion through access to communication technologies. <input type="checkbox"/> Expand access to affordable early childhood education to set the stage for academic achievement and social development.
<input type="checkbox"/> <b>HEALTH</b> To promote access to affordable healthcare, fresh foods, and safe living environments.	<input type="checkbox"/> Improve the condition of housing and capital infrastructure in distressed neighborhoods. <input type="checkbox"/> Support access to supportive services for persons experiencing homelessness. <input type="checkbox"/> Expand access to healthy, fresh foods for children living in poverty. <input type="checkbox"/> Support access to healthcare for the City's most vulnerable populations. <input type="checkbox"/> Improve and expand green infrastructure in distressed neighborhoods.
<input type="checkbox"/> <b>TRANSPORTATION</b> To promote access to public transportation for all Salt Lake City residents.	<input type="checkbox"/> Support access to public transportation for vulnerable populations. <input type="checkbox"/> Increase the accessibility of public transit in distressed neighborhoods. <input type="checkbox"/> Expand and improve multimodal transportation infrastructure .
<input type="checkbox"/> <b>ECONOMIC DEVELOPMENT</b> To expand access to economic mobility and commercial facilities.	<input type="checkbox"/> Provide job training programs for vulnerable populations, including chronically homeless, refugees and persons with disabilities. <input type="checkbox"/> Expand and improve commercial infrastructure in distressed neighborhoods. <input type="checkbox"/> Expand economic opportunities for low-income residents.

**Community Needs:**

Based on the ***Priorities*** and ***Goals*** selected on the previous page, describe the need or problem to be addressed. Include quantifiable data to demonstrate need.

**Activities to Address Needs:**

Based on the ***Priorities*** and ***Goals*** selected on the previous page, how will the proposed project address the identified problem/needs. Include a discussion on the services or activities used to carry out the program/project.

**Anticipated Outputs:**

Briefly describe measurements of the anticipated outputs. Examples would include the number of low/moderate income clients served, the number of households served, or number of units constructed.

## C. NATIONAL OBJECTIVES

### Benefit Categories:

To be eligible for CDBG funding, a project/program must provide a benefit to low and moderate income (LMI) persons in **one** of the following categories. Select the category that best applies to your project/program.

- ☐ **1. Area:** At least 51% of residents within the targeted **service area** are LMI.

- Define the service area for people using the project/program:

- List the census tract(s) of project/program location(s):

- ☐ **2. Client:** Select **one** of the following subparts:

- ☐ Clientele with a presumed benefit.

- ☐ Abused children
- ☐ Battered spouses
- ☐ Elderly persons
- ☐ Severely disabled adults
- ☐ Homeless persons
- ☐ Illiterate adults
- ☐ Persons living with AIDS
- ☐ Migrant farm workers

- ☐ 51% of clientele are documented to be LMI.

- Identify Area Median Income (AMI) percentages of the program/project's service clients:

	%	≤ 30% AMI
	%	31% to 50% AMI
	%	51% to 80% AMI

- ☐ Nature and location of activity is such that it can be concluded clientele is LMI.

- Describe the process for determining that the nature and location of the facility/service is such that it can be presumed to benefit LMI:

**What percentage of the proposed project's clients are residents of:**

Incorporated Salt Lake City: 

	%
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Other locations: 

	%
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### 3. Job Creation or Retention

## PART III: PROGRAM/PROJECT INFORMATION

### A. PROJECT DESCRIPTION

Provide a concise description of the proposed program:

Describe how you would use the CDBG funds from Salt Lake City, if awarded:

List an address for each location:

1)	
2)	
3)	
4)	
5)	
6)	
7)	
8)	
9)	
10)	
11)	
12)	

**Is this an ongoing program or project?**

☐ Yes ☐ No

- If ongoing, what is the timeframe?:

- If ongoing, do you anticipate any changes to the project during the 2015-16 program year?

☐ Yes ☐ No

If Yes, describe the anticipated changes:

- If this is a new program/project:

Project start date:

Anticipated end date:

**B. PERFORMANCE MEASUREMENTS**

**Objectives:**

Select **one** of the following three possible objectives for your program/project:

- ☐ **Create Suitable Living Environments:** Activities designed to benefit communities, families or individuals by addressing issues in their living environment.
- ☐ **Provide Decent Housing:** Covers a wide range of housing activities whose purpose meets individual or family needs.
- ☐ **Create Economic Opportunities:** Activities in economic development, commercial revitalization or job creation.

**Outcomes:**

Outcomes are benefits that result from the activity or program for individuals or community. There are only three possible outcomes; please select **one** below that best fits your program/project:

- ☐ **Availability/Accessibility:** Activities that make services, infrastructure, public facilities, housing or shelter available or accessible to LMI persons. In this category, accessibility does not refer only to physical barriers, but also to making the basics of daily living available and accessible to low- and moderate-income persons where they live.
- ☐ **Affordability:** Activities that provide affordability in a variety of ways in the lives of LMI persons. It can include the creation or maintenance of affordable housing, basic infrastructure hook-ups, or services such as transportation or day care. Affordability is an appropriate outcome whenever an activity is lowering the cost, improving the quality or increasing the affordability of a product or service to benefit a LMI household.
- ☐ **Sustainability:** Activities that are aimed at improving communities or neighborhoods, helping to make them livable or viable by providing benefit to low and moderate-income persons. This outcome is designed to promote livable or viable communities and neighborhoods and not for assistance to individual households.

**C. TARGET POPULATION**

**Historical Populations Served:**

Number of unduplicated LMI persons served during the last completed program year:	
Total persons served:	<input type="text"/>
Persons served with CDBG funding received from Salt Lake City:	<input type="text"/>

**2015-16 Target Populations:**

Number of unduplicated LMI persons expected to be served during the 2015-2016 program year at the requested funding level (including improvements requested in this application):	
Total persons expected to be served:	<input type="text"/>
Persons expected to be served with CDBG funding received from Salt Lake City:	<input type="text"/>

## D: PROPOSED BUDGET

List the total project costs, including those requested to be funded by CDBG funds, in the personnel, operating and/or construction budget categories.

<b>Project Costs</b> List expenses, such as construction, engineering and design, feasibility studies, acquisition, and capital equipment.	Salt Lake City CDBG portion of operating expenses	Total operating expenses
Total Expenses:	\$	\$

## E: LEVERAGING

**Community Leveraging:**

Does the program/project coordinate with other efforts in the community? ☐ Yes ☐ No

Does the program/project coordinate with other efforts in the community? ☐ Yes ☐ No

If Yes , provide a brief description:

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**Fund Leveraging:**

Amount of funds requested in this application: \$

Amount of funds requested in this application: \$

Amount of non-CDBG funds secured for this program/project:	\$
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Amount of non-CDBG funds secured for this program/project:	\$
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Amount of other funds earmarked for the program/project:	\$
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Amount of other funds earmarked for the program/project:	\$
--	----

Total amount needed to complete program/project:	\$
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Total amount needed to complete program/project:	\$
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List all funding sources requested and secured for your program/project. Include Salt Lake City CDBG, other CDBG programs, other federal programs, private funds, foundation funds, and your own agency funds:

Funding Source	Amount Requested	Amount Secured
Salt Lake City CDBG	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Total:	\$	\$

Describe your contingency plan in the event your CDBG request is not fully funded, or funded at all by Salt Lake City:

## PART IV: IMPROVEMENT INFORMATION

### A. IMPROVEMENT SUMMARY

[Does the project align with Salt Lake City's CIP 10-Year Plan?](#)

☐ Yes

☐ No

Type of program/project:

☐ **Public Service Building Improvements. Specify project type:**

☐ Senior centers

☐ Child care centers

☐ Centers for the disabled

☐ Health facilities

☐ Homeless facilities

☐ Other, please specify:

☐ Youth centers

☐ Community centers

☐ **Commercial Rehabilitation**

Is the program/project applied for in this application to be carried out in phases?

☐ Yes

☐ No

If Yes , describe the estimated timeline and cost of future phases:



**If partial CDBG funding is received, can a portion of the program/project be completed? Does this project have scalability?**

☐ Yes ☐ No

If Yes, explain how you would scale the program/project to CDBG funding availability:

**Have construction plans and drawings been completed for the proposed project? If Yes , attach plans and drawings.**

☐ Yes ☐ No

**Have cost estimates been gathered for the proposed project? If Yes , attach estimates.**

☐ Yes ☐ No

**Can you verify you will be able to spend all of the awarded CDBG money before June 30, 2016?**

☐ Yes ☐ No

If No , explain why:

## B. SITE INFORMATION

**What is the ownership status of the site/facility?**

☐ Owned ☐ City-owned ☐ Agency-owned ☐ Privately-owned  
☐ Leased

Lease expiration date: \_\_\_\_\_

If property is leased, attach a letter from the property owner that demonstrates support of site improvements.

**Is the property owner willing to sign a 5-year Property Restriction?**

☐ Yes ☐ No

**Is there a lien on the property?**

☐ Yes ☐ No

**What is the current zoning of the project site?** \_\_\_\_\_

**Is the proposed project allowed under the current zoning?**

☐ Yes ☐ No

**Is there a local, state, or federal historic designation on the facility/site?**

☐ Yes ☐ No

If Yes , describe the nature of the designation:

## C. ENVIRONMENTAL INFORMATION

**Will the project include demolition activities?**

☐ Yes ☐ No

If Yes , describe the nature of the demolition activities:

**Does the site/facility contain any known hazards? I.e. asbestos or other hazardous material.**

☐ Yes ☐ No

## D. ACCESSIBILITY

☐ No

## E. LABOR

☐ No

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Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**PART V: AGENCY CAPACITY**

Name:		Title:	
Phone Number:		Fax Number:	
Street Address:			
Email address:			

Name:		Title:	
Phone Number:		Fax Number:	
Street Address:			
Email address:			

**Describe your agency's record keeping procedures, with regards to the proposed program/project:**

**Describe the procedures your agency will use to segregate and track CDBG funds from other agency funds:**

**Describe your agency's internal controls for waste and fraud prevention:**

**Does your agency have a Language Access Plan (LAP) to provide Services to limited English proficiency persons?**

☐ Yes

☐ No

## PART VI. APPLICATION SUBMITTAL

### A: SUBMITTAL INSTRUCTIONS

Did a representative of your organization attend a mandatory Application Training session? ☐ Yes ☐ No

**Completed applications are due Friday, October 10, 2014, by 4:00 PM**

**Two applications must be submitted, as follows:**

#### 1) HAND-DELIVERED SUBMITTAL

**Hand-deliver one (1) printed copy to:**

Salt Lake City Corporation  
Housing & Neighborhood Development Division  
City & County Building  
451 South State Street, Room 445  
Salt Lake City, Utah 84114

*\*This is your official application with original signature. Applications must be received by October 10, 2014 at 4:00 pm to be eligible.*

*\* Print applications should be paper clipped together, not stapled. Place applications in a 9"x12" envelope with your organization's name on the front.*

#### 2) ELECTRONIC SUBMITTAL

**Submit one (1) electronic copy via either DropBox or email, as follows:**

**Email:** SLCFederalGrants@slcgov.com

**DropBox:** Contact Tammy Hunsaker at tammy.hunsaker@slcgov.com for DropBox submittal instructions.

*\*The PDF submittal is for administrative purposes and does not require a signature.*

**The printed application is the official copy and must be delivered to the Housing and Neighborhood Development office by 4:00 pm on Friday, October 10, 2014 to be eligible.**

**Printed applications must be hand-delivered. Mailed, faxed, or late applications will not be accepted by Salt Lake City.**

### B: APPLICANT CERTIFICATION

Organization: \_\_\_\_\_

Name of Project: \_\_\_\_\_

Authorized Official: \_\_\_\_\_

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date