

2020

Community Development Block Grant



FUNDING APPLICATION FOR:

- PUBLIC FACILITIES & IMPROVEMENTS
- ECONOMIC DEVELOPMENT
- HOUSING ACTIVITIES

APPLICATIONS WILL BE ACCEPTED:

Monday, December 9, 2019 - Monday, January 13, 2020

APPLICATIONS SHOULD BE SUBMITTED TO:

City of Anniston
Community Development Department
4309 McClellan Blvd
Anniston, AL 36206

Agency Name

Project Title

SUBMITTAL INSTRUCTIONS

Please provide **one (1) original application with attachments & one (1) application copy with attachments** to the **City of Anniston Community Development Department** no later than **4:00 p.m. on Monday, January 13, 2020**. Please label all attachments.

CHECKLIST

Submission Requirements	Documentation	Check if Enclosed
1. The applicant must a. have nonprofit status for at least one (1) full year, or b. have two (2) full years of operating experience under another nonprofit entity, or c. be a local governmental entity or agency (governmental agencies can skip to line 5)	ATTACHMENT 1: Provide a copy of a 501(c) (3) designation letter from the Internal Revenue Service if a non-profit applicant	<input type="checkbox"/>
2. The applicant must be registered to conduct business in the State of Alabama at the time of application. (Not applicable to governmental agencies)	ATTACHMENT 2: Provide a copy of current certification from the AL Secretary of State. For assistance, please visit: https://www.sos.alabama.gov/	<input type="checkbox"/>
3. The applicant must have an audit prepared by a qualified accountant or accounting service, covering the last two most recent reporting periods of operation. Copies of each audited financial statement must be submitted with the application. Reviews and Compilations will not be accepted. Audit findings will make the applicant ineligible to receive assistance. (Not applicable to governmental agencies)	ATTACHMENT 3: Provide one copy each of the last two most recent audited financial statements that meet the criteria described. Include management letters if applicable.	<input type="checkbox"/>
4. Non-profit organizations must have an active Board of Directors within the last 12 months. (Not applicable to governmental agencies)	ATTACHMENT 4: Provide list of board members and a copy of board meeting minutes authorizing the submittal of this application. Please also include a copy of Conflict of Interest Statement from the Board of Directors.	<input type="checkbox"/>
5. The applicant must have at least twelve (12) months experience directly related to the proposed project or program.	ATTACHMENT 5: Provide funding commitments displayed on letterhead, resumes of principal staff and personnel directly working on the project, and include descriptions of the applicant's previous related program activities.	<input type="checkbox"/>
6. The applicant must submit a written copy of its financial management procedures, including staff responsibilities and required procedures.	ATTACHMENT 6: Provide a copy of the agency's written financial management procedures, and a current organization chart.	<input type="checkbox"/>
7. Each applicant must submit proof of insurance for the following types of insurance: General Liability, Auto Liability, and Worker's Compensation	ATTACHMENT 7: Provide a copy of Certificate of Insurance.	<input type="checkbox"/>
8. Each applicant must submit proof that the organization has registered with the U.S. System for Award Management. Visit www.sam.gov .	ATTACHMENT 8: Provide proof of registration with the U.S. System for Award Management.	<input type="checkbox"/>
9. The contract period for the project, if approved, will begin October 1, 2020 and end no later than September 30, 2021.	ATTACHMENT 9: Provide a projected timeline of proposed activities.	<input type="checkbox"/>

All submitted materials will be used in determining the organization's eligibility for funding.

Public Facilities & Improvements / Economic Development / Housing Activities Overview

The United States Department of Housing and Urban Development (HUD) through the Community Development Block Grant (CDBG) program provides communities with resources to address a wide range of unique community development needs. The CDBG Program provides annual grants on a formula basis to Entitlement Communities as a means to support viable communities by providing decent housing, a suitable living environment, and opportunities to expand economic opportunities, principally for low-and moderate-income persons.

The CDBG Program has three national objectives:

- Provide a direct benefit(s) to low to moderate income households
- Prevent or eliminate slum or blight
- Address an urgent need or problem within the community

Annually, the **City of Anniston Community Development Department** requests proposals from local non-profit organizations and government entities to carry out eligible activities in the City. This funding application is for the period beginning October 1, 2020 through September 30, 2021.

A Selection Committee will review all applications for compliance with requirements and make funding recommendations to the City Council. Recommendations for grant awards will be provided to the City Council during the month of August 2020.

CDBG are eligible for the following activities:

Public Facilities & Improvements

Acquisition
Commercial/ Residential Rehabilitation
Removal of Architectural Barriers for Accessibility
Construction/ Reconstruction
Equipment Installation
Water
Sewer

Economic Development Activities

Construction of a Business Incubator
Technical assistance to a business facing bankruptcy
Providing training for low income persons to enable them to qualify for jobs created by CDBG-assisted special economic development activities

Housing Activities

Rehabilitation of Single Family Housing
Historic preservation
Lead-based paint hazard evaluation and reduction

In order for a project or program to qualify for CDBG funds, 51% of the program beneficiaries must be low- to moderate-income as defined by HUD. The following table reflects the current HUD income limits for one-to-eight person households who earn at or below 80% of the Area Median Income (AMI) for Anniston-Oxford-Jacksonville, Alabama including Calhoun County, Alabama.

2019 CDBG MAXIMUM HOUSEHOLD INCOME LIMITS
Effective: June 28, 2019

<u>FAMILY SIZE</u>	<u>EXTREMELY LOW 30%</u>	<u>VERY LOW INCOME 50%</u>	<u>LOW INCOME 80%</u>
1	\$11,800	\$19,700	\$31,500
2	\$13,500	\$22,500	\$36,000
3	\$15,200	\$25,300	\$40,500
4	\$16,850	\$28,100	\$44,950
5	\$18,200	\$30,350	\$48,550
6	\$19,550	\$32,600	\$52,150
7	\$20,900	\$34,850	\$55,750
8	\$22,250	\$37,100	\$59,350

Source: U. S. Department of Housing and Urban Development (HUD) www.huduser.gov

CDBG QUALIFYING CRITERIA

The criteria for how a CDBG activities benefit low and moderate income (L/M) persons are categorized as follows:

- 1.) **Area Benefit Activities** - these activities must benefit all residents in a particular service area, where at least 51% (for water, sewer, and flood control projects) or 51% (for capital improvement projects) of persons in the service area are low- and moderate-income, per most recent U.S. Census Data.
 - The service area is determined based upon the nature of the activity, location of the activity, accessibility issues, availability of comparable activities, and boundaries for public facilities and public services. Service area must be determined prior to provision of CDBG assistance.
 - Examples of eligible activities include infrastructure, public facilities, and economic development.
- 2.) **Limited Clientele Activities** - At least 51% of the beneficiaries of the proposed project activity must be low- and moderate-income. In contrast to the low-mod are
- 3.)
- 4.) a benefit activity category listed above, it is not the low- and moderate-income concentration of the service activity that determines eligibility, but rather the actual number of low-and moderate-income persons that will benefit from the activity. In order to qualify under this category, an activity must satisfy one of the following criteria:
 - Benefit a clientele that is generally presumed to be principally low- and moderate-income including abused children, battered spouses, elderly persons, severely disabled adults, homeless persons, illiterate adults, persons living with AIDS, and migrant farm workers or
 - Document household size and income which demonstrates that at least 51% of the clientele are low- and moderate-income or
 - Restrict income eligibility for the activity to low- and moderate-income persons or
 - Be of such a nature and in such a location that it can be concluded that clients are primarily low- and moderate-income.
- 3.) **Economic Development Activities:** Low-mod job creation or retention activities - these activities must be undertaken with the purpose of creating or retaining permanent jobs, at least 51% of which (computed on a fulltime equivalent basis) will be made available to or held by low-and moderate-income persons.
- 4.) **Housing Activities** - include that are undertaken for the purpose of providing or improving permanent residential structures which, upon completion, will be occupied by at least 51% low and moderate-income households.



I. AGENCY INFORMATION			
Agency Name:			
Mailing Address:			
Telephone Number:		Email:	
Contact Person:		Title:	
DUNS Number:		Tax ID #:	
II. PROGRAM INFORMATION			
Program Title:			
Program Location:			
Project Priority:	If your agency submits more than one CDBG application, please rank the priority. This project is ranked ____ of ____ CDBG project applications.		
Project Type:	Activities		
	<input type="checkbox"/> Facility Acquisition	<input type="checkbox"/> Water	
	<input type="checkbox"/> Commercial Rehabilitation	<input type="checkbox"/> Sewer	
	<input type="checkbox"/> Removal of Architectural Barriers for Accessibility	<input type="checkbox"/> Other	
	<input type="checkbox"/> New Construction/ Reconstruction	<input type="checkbox"/> Housing Activities	
	<input type="checkbox"/> Park Improvements	<input type="checkbox"/> Economic Development Activities	
Funding Request Type:	<input type="checkbox"/> New Project	<input type="checkbox"/> Existing Project	
III. REQUESTED FUNDING			
Total Program Cost		\$ _____	
Total CDBG Amount Requested		\$ _____	
Percentage of CDBG Investment (<i>CDBG Amount Requested/ Total Program Cost</i>)		_____ %	



IV. ORGANIZATION INFORMATION	
1. What is your organization’s mission statement?	
2. How long has the Organization existed in its current form?	
3. How long has the Organization had its 501 (c) (3) status? If your organization is a government entity, enter N/A.	
4. How many years has the Organization conducted the project/program for which it is requesting funding?	
V. ORGANIZATION CAPACITY	
I. What percentage of the Organization’s budget is grant funded?	
II. How many program staff persons are dedicated to this project (i.e. Case Managers, Intake Coordinators)?	
III. Does the organization have administrative staff (i.e. Accountants, Executive Director) dedicated to this grant?	Yes <input type="checkbox"/> No <input type="checkbox"/>
IV. Has the organization secured funding for the administrative staff for this project?	Yes <input type="checkbox"/> No <input type="checkbox"/>
VI. TARGET POPULATION	
Briefly describe the target population/category of persons to be served in Anniston (i.e. seniors, homeless, abused children, or persons with disabilities). All services must benefit low/mod clientele. For more information select the link provided. For more information select the link provided. 24 CFR 570.208	
VII. PERFORMANCE OBJECTIVES & OUTCOMES	
Select only one of the following <u>objectives</u> that best describes your project.	Select only one of the following <u>outcomes</u> that best describes your project.
<input type="checkbox"/> Suitable Living Environment	<input type="checkbox"/> Improving Availability / Accessibility
<input type="checkbox"/> Decent Housing	<input type="checkbox"/> Improving Affordability
<input type="checkbox"/> Creating Economic Opportunity	<input type="checkbox"/> Improving Sustainability



PUBLIC FACILITY ACTIVITIES (only)

VIII. NARRATIVE

Low and Moderate Area Benefit: *If proposing a public facility activity under the Area Benefit criteria in which the facility benefits all residents of an area where at least 51 percent of the residents are low and moderate income, answer the following question.*

1. Please provide a detailed description of the proposed project for funding.

Limited Clientele Criteria: *If proposing a public facility activity under the Limited Clientele criteria in which the facility will benefit a specific group primarily presumed to be low and moderate income, such as abused children, battered spouses, elderly persons, severely disabled adults, homeless persons, illiterate adults, persons living with AIDS, and migrant farm workers of persons or serve at least 51 percent low and moderate income persons, answer the following question.*

1. Please provide a detailed description of the proposed project for funding. If this is an existing service, please also include detailed information on how existing service will be expanded if CDBG funds are awarded; the estimated increase of persons receiving the service and/or discussion of additional service to be provided through project/program.



2. The City of Anniston will require organizations to submit monthly reports pertaining to expenditure of CDBG-funded activities. Describe and discuss any experiences you have in reporting, monitoring, and/or record-keeping compliance requirements with CDBG and other funding agencies.

A large, empty rectangular box with a thin black border, intended for the applicant to provide their response to the question above.



ECONOMIC DEVELOPMENT ACTIVITIES (only)

VIII. NARRATIVE

1. Type of Funding Requested:

- Grant Loan (Explain Below) Combination (Explain Below)

If this is a loan request or a combined loan/grant request, provide proposed repayment schedule and terms. *Please note that for-profit agencies are generally not eligible for grants.*

2. Eligible Economic Development Activities: Please check below the eligible economic development activities that will be undertaken: (Check all that apply)

- Commercial/Industrial land acquisition/disposition
- Commercial/industrial infrastructure development
- Commercial/industrial building acquisition, construction, rehabilitation
- Other commercial/industrial improvements
- Direct financial assistance to for-profits
- Economic development technical assistance
- Micro-enterprise assistance
- Other; specify: _____



3. Estimated Full-time Private Sector Jobs Created/Retained (if applicable)

of new jobs to be created: _____

existing jobs to be retained: _____

of jobs to be available to low/mod persons: _____

4. Types of Private Sector Jobs Created/Retained (If applicable)

Indicate the specific types of jobs to be created/retained, including the # of each type of job and the pay or professional level.

5. Estimated number of businesses Assisted (if applicable)

of new businesses to be assisted _____

of business expansions to be assisted _____

of business relocations to be assisted _____

For business relocations: Specify area/location from which business will move, and explain why relocation is needed.



<p>7. Summary of Project Need and Justification: Provide a concise summary of the need for the project and why this project is a priority. Please indicate who is served or will be served by the facility, and include information about the location of similar facilities; the demand for services in the surrounding area; pedestrian, bicycle and public transit accessibility; and the applicant's financial ability to operate and maintain the facility.</p>
<p>6. Please provide a description of the proposed project for funding.</p>



HOUSING RELATED ACTIVITIES (only)

VIII. NARRATIVE

1. Please provide the exact address(s) where the housing activity will take place. If address(s) have not been identified, please describe the criteria that will be used to select structure(s).

2. Please provide the number of units to be assisted: _____

3. Please describe the current condition of the structure(s):

4. Please describe in detail the type of activity(s) to be completed.



5. If applicable, please describe if counseling services will be offered to homeowners.

6. Please describe how your organization proposes to monitor the project after completion.



PLEASE COMPLETE FOR ALL CDBG ACTIVITIES

IX. LEVERAGING

Leveraging other funding: If applicable, please describe how your municipality or agency will leverage other funds, public or private, over the long-term to support similar projects and reduce reliance upon the City's CDBG funding.

X. TIMETABLE

Timetable: Provide your timetable for execution of project activities, explaining any phasing or staging of activities that will be required. Assume that the City's funding will be available after October of the program year from which funding is being requested. Timetable should include any needed design or bid preparation activities, procurement actions, and all major components up to occupancy of the facility.



BUDGET INFORMATION (For Construction/Development Projects)

IX. BUDGET PROPOSAL

Complete the following budget template:

Line Items	CDBG Funds	Other Funds	Total Funds
Appraisals	\$	\$	\$
Acquisition	\$	\$	\$
Legal Services	\$	\$	\$
Demolition	\$	\$	\$
Architects	\$	\$	\$
Surveys	\$	\$	\$
Other	\$	\$	\$
Site Preparation	\$	\$	\$
Labor	\$	\$	\$
Materials	\$	\$	\$
Equipment	\$	\$	\$
Fees and Permits	\$	\$	\$
Construction Management Fees	\$	\$	\$
Builder/Developer Fees	\$	\$	\$
Lead-Based Paint Assessment/Abatement	\$	\$	\$
Insurance/Bonding ¹	\$	\$	\$
Audit ²	\$	\$	\$
Other (Specify): _____	\$	\$	\$
Other (Specify): _____	\$	\$	\$
Other (Specify): _____	\$	\$	\$
Total Construction Costs	\$	\$	\$
Relocation Assistance	\$	\$	\$
GRAND TOTAL	\$	\$	\$

¹Note that General Liability Insurance or General Commercial Liability (1 million); Automobile Liability Insurance, Worker’s Compensation, Fidelity Bond (100% of contract amount), and Payment and Performance Bonding are usually required for all contractors. Builders’ Risk Insurance is required for all new construction. Costs for coverage should be included in this Budget Summary. If you do not already have this coverage, it is an eligible CDBG expense. All policies must have endorsement specifically naming the City of Anniston as additional insured.

²All projects must have annual independent audit. Agencies with federal or federally-derived funded expenditures of \$750,000 or more must have an annual A-133 audit. Cost of conducting this audit is an eligible CDBG expense.



BUDGET INFORMATION (For Service/Operational Costs)			
IX. BUDGET PROPOSAL			
Complete the following budget template:			
Line Items	CDBG Funds	Other Funds	Total Funds
Staff Salaries ¹	\$	\$	\$
Staff Fringe Benefits	\$	\$	\$
Staff Travel	\$	\$	\$
Office/Program Communications	\$	\$	\$
Office/Program Rental/Lease	\$	\$	\$
Office/Program Utilities	\$	\$	\$
Equipment Purchase	\$	\$	\$
Office/Program Materials/Supplies	\$	\$	\$
Insurance/Bonding ⁶	\$	\$	\$
Contractual Services	\$	\$	\$
Direct Client Costs ²	\$	\$	\$
Printing and Reproduction	\$	\$	\$
Audit ³			
GRAND TOTAL	\$	\$	\$

¹Attach job descriptions of all staff members to be paid under this project.

²Direct client costs Include those expenses that can be tied directly with a benefitting client or household, and those tangible items that are supplied directly to clients. These costs can include: rental/lease of a housing unit; payment of utility bills for a housing unit; transportation cards; furniture or equipment for a housing unit; financial aid to prevent homelessness or to enable a family to move into a permanent housing unit; clothing or hygiene supplies for clients; etc.

³All projects must have annual independent audit. Agencies with federal or federally-derived funded expenditures of \$750,000 or more must have an annual A-133 audit. Cost of conducting this audit is an eligible CDBG expense.



BUDGET PROPOSAL NARRATIVE

1. For each line item listed in your budget, provide a detailed description of how CDBG funds will be used to support your program.

[Empty space for detailed description of how CDBG funds will be used to support the program.]

2. Please provide the source and amount of funding commitments, as well as, additional funding awarded in the past three years for this project.

[Empty space for providing the source and amount of funding commitments, as well as, additional funding awarded in the past three years for this project.]



I. CONFLICT OF INTEREST ACKNOWLEDGEMENT

Do any family relationships (by blood or marriage) exist between staff in your organization and/or Agency Board members?
Yes **No**
 If yes, please explain in detail and document the staff person’s involvement with these grant funds in the section below.

Do any family relationships (by blood or marriage) exist between staff in your organization and/or Anniston City Council?
Yes **No**
 If yes, please explain in detail and document the staff person’s involvement with these grant funds in the section below.

ACKNOWLEDGED RESPONSIBILITY TO ABIDE BY ALL HUD AND CITY OF ANNISTON REQUIREMENTS

The applicant agrees to abide by all policies, regulations, ordinances, or statutes as required by HUD and the City of Anniston. Please select the following link to comprehensively review the CDBG regulations, [24 CFR 570](#).
Yes **No**

CERTIFICATION

I certify that the applicant agency meets the conditions specified in the application instructions and will be able to carry out the proposed services in concert with all federal requirements. I also certify that the organization is a certified IRS 501(c) (3) non-profit or governmental agency. I agree to adhere to the above provisions for all programs receiving assistance from the US Department of Housing & Urban Development. All board and staff members have disclosed any potential conflicts of interests that could violate CDBG Program regulations at this time or at a later date. I further certify that I have reviewed the contents of this application and the rating form and deem them to be accurate and true.

Authorized Representative

Signature	Date
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Printed Name	Title
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