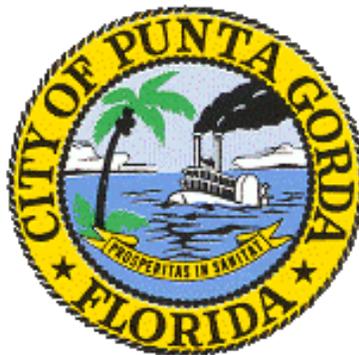


CITY OF PUNTA GORDA



Community Development Block Grant (CDBG)

FY 2016 Application & Information Package

326 West Marion Avenue
Punta Gorda, Florida
941-575-3372 Telephone
urbandesign@pgorda.us
www.pgorda.us

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

APPLICATION INTRODUCTION AND PROCEDURES

The City of Punta Gorda invites all interested and eligible parties to submit proposals for the FY 2016 Community Development Block Grant (CDBG) Program funded by the U.S. Department of Housing and Urban Development (HUD).

The CDBG application will be posted on the City of Punta Gorda's web site at: <http://www.ci.punta-gorda.fl.us/depts/growthmgmt/cdbg.html/>. You may also request to have an electronic copy of this application packet sent to you by e-mail. Requests for electronic copies should be sent to cprewitt@pgorda.us or hard copies can be picked up in the Urban Design Division located at 126 Harvey St., 3rd Floor City Hall Annex Building, Punta Gorda FL.

The following sections include information for potential applicants on the federal and local guidelines to qualify for the CDBG program, followed by the City's application. CDBG-funded projects must comply with strict eligibility criteria.

Prior to submission, please carefully review this information package to determine if your request for funds will qualify under the federal CDBG regulations.

While City of Punta Gorda staff is available to provide technical assistance, it is the responsibility of the applicant to become fully educated on the federal regulations that govern the CDBG program. For more detailed information on HUD guidelines, go to www.hud.gov.

Applications for CDBG funding must be completed in full and submitted to the City of Punta Gorda **no later than Friday, APRIL 15th @ 4:30 PM EST** in order to be considered for this funding year. When complete, submit **two originals** of your application.

APPLICATIONS SENT BY FAX OR E-MAIL WILL NOT BE ACCEPTED. LATE OR INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. NO EXCEPTIONS.

Technical Assistance

Urban Design staff is available to answer questions regarding CDBG regulations, applicant and project eligibility and the City's application process during regular business hours, Monday - Friday, 8:30AM - 4:30PM.

CDBG ELIGIBLE ACTIVITIES DEFINITIONS

The following are summary definitions of Community Development Block Grant Eligible Activities:

Please Note: Although an activity may be deemed eligible for CDBG funding, it does not guarantee funding. The Community Development Needs for the CDBG Program in

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

the Consolidated Plan sets forth the priority of needs and as such, dictates which types of eligible activities may be funded in a given year.

CDBG funds may NOT be used for costs attributable to a building used for the general conduct of government or used for political activities.

Acquisition/Disposition: The use of CDBG funds to acquire real property, in whole or in part, by purchase, long-term lease, donation, or otherwise, for any public purpose. Real property to be acquired may include: land, air rights, easements, water rights, right-of-ways, buildings and other property improvements, or other interests in real property.

Demolition/Clearance: Clearance, demolition, and removal of buildings and improvements including movement of structures to other sites.

Economic Development Activities: Economic development activities may include, but are not limited to: (1) Construction by the grantee or subrecipient of a business incubator designed to provide inexpensive space and assistance to new firms to help them become viable businesses, (2) Loans to pay for the expansion of a factory or commercial business, and (3) Providing training needed by persons on welfare to enable them to qualify for jobs created by CDBG-assisted special economic development activities. The level of public benefit to be derived from the economic development activity must be appropriate given the amount of CDBG assistance.

Rehabilitation: Rehabilitation related activities may include single-family rehabilitation, multi-family rehabilitation, energy efficiency improvements, public housing modernization, and rehabilitation of commercial properties.

General Administration: CDBG funds may be used for the general administration costs incurred by a Subrecipient to administer their CDBG program. Administration costs directly associated with a CDBG activity should be part of the activity as project administration.

Relocation: CDBG funds may be used for relocation payments and assistance to displaced persons, including individuals, families, businesses, non-profits, and farms, where required under section 570.606 of the regulations (pursuant to the Uniform Relocation Act).

Public Facilities/Improvements: CDBG funds may be used by the grantee or other public or private nonprofit entities for the acquisition (including long term leases for periods of 15 years or more), construction, reconstruction, rehabilitation (including removal of architectural barriers to accessibility), or installation, of public improvements or facilities. Buildings for the general conduct of government cannot be acquired or improved with CDBG funds. This includes neighborhood facilities, firehouses, public schools, and libraries, as well as water and/or sewer treatment plants. The regulations further specify that facilities that are designed for use in

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

providing shelter for persons having special needs are considered to be public facilities.

Public Services: CDBG funds may be used to provide public services (including labor, supplies, and materials), provided that each of the following criteria is met: 1) The public service must be either a new service or a quantifiable increase in the level of service; and 2) The amount of CDBG funds obligated within a program year to support public service activities under this category may not exceed 40% of the City's allocation and the total public services of all Subrecipients may not exceed 15% of the total grant awarded to Grantee for the fiscal year.

Planning: Includes studies, analysis, data gathering, preparation of plans, and identification of actions that will implement plans. The types of plans which may be paid for with CDBG funds include, but are not limited to: Consolidated plans; Individual project plans; Community development plans, Capital improvement programs; Small area and neighborhood plans; Environmental and historic preservation studies; and Functional plans (such as plans for housing, land use, energy conservation, or economic development).

Homeownership Assistance: Homeownership assistance activities may include financial assistance for down-payments, closing costs or other part of the purchase process and counseling for pre-purchase, post-purchase or foreclosure prevention.

Ineligible activities - 570.207

The general rule is that any activity that is not authorized under the provisions of §§570.201-570.206 is ineligible to be assisted with CDBG funds. This section identifies specific activities that are ineligible and provides guidance in determining the eligibility of other activities frequently associated with housing and community development.

(a) The following activities may not be assisted with CDBG funds:

- Buildings or portions thereof, used for the general conduct of government
- General government expenses;
- Political activities.

(b) The following activities may not be assisted with CDBG funds unless carried out as a special economic development activity, or as a public service, or by an eligible community-based development organization, or by the recipient as specifically authorized.

- Purchase of equipment;
- Construction equipment;
- Fire protection equipment. Fire protection equipment is considered for this purpose to be an integral part of a public facility and thus, purchase of such equipment would be eligible under §570.201(c);
- Furnishings and personal property;
- Operating and maintenance expenses;
- Payment of salaries for staff, utility costs and similar expenses necessary for the operation of public works and facilities;
- New housing construction;

City of Punta Gorda, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

- Income payments.
 - The provision of “income payments” is ineligible if provided as a grant. Income payments are payments to an individual or family, which are used to provide basic services such as food, shelter (including payment for rent, mortgage, and/or utilities) or clothing. However, such expenditures are eligible under the following conditions:
 - The income payments do not exceed three consecutive months; and
 - The payments are made directly to the provider of such services on behalf of an individual or family.
 - Income Payments that are provided as a loan are permissible within the public service cap.

Low-To_Moderate Income

- Varies by household size
- Income limits are set annually by HUD
- Applies to households or neighborhoods
-

FY 2015 Income Limits Summary

FY 2015 Income Limit Area	Median Income	FY 2015 Income Limit Category	Persons in Family							
			1	2	3	4	5	6	7	8
Charlotte County	\$58,400	Very Low (50%) Income Limits (\$)	20,450	23,400	26,300	29,200	31,550	33,900	36,250	38,550
		Extremely Low (30%) Income Limits (\$)*	12,250	15,930	20,090	24,250	28,410	32,570	36,250*	38,550*
		Low (80%) Income Limits (\$)	32,700	37,400	42,050	46,700	50,450	54,200	57,950	61,650

* The FY 2014 Consolidated Appropriations Act changed the definition of extremely low-income to be the greater of 30/50ths (60 percent) of the Section 8 very low-income limit or the poverty guideline as established by the Department of Health and Human Services (HHS), provided that this amount is not greater than the Section 8 50% very low-income limit. Consequently, the extremely low (30%) income limits may equal the very low (50%) income limits.

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM



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CDBG PROGRAM APPLICATION CHECK LIST & IMPORTANT INFORMATION

Application and *this checklist* with all pertinent required data (listed below)
MUST be submitted with the *CDBG Program Application for Funding*

- Two (2) Originals of the Completed Executed CDBG Application for Funding
- Completed ([signed in blue ink](#)) with all of the following Attachments:
 - Attachment 1. Articles of Incorporation/Bylaws
 - Attachment 2. Non-Profit Determination – Tax Exemption OR Acknowledgement of Religious Organization
 - Attachment 3. List of Board of Directors
 - Attachment 4. Mission Statement of Organization
 - Attachment 5. Key Personnel
 - Attachment 6. Organizational Chart
 - Attachment 7. Authorization to Request Funds
 - Attachment 8. Designation of Authorized Official
 - Attachment 9. Verification of Liability Insurance
 - Attachment 10. DETAILED budget & documentation of all funds
 - Attachment 11. Financial Statement and Audit
 - Attachment 12. Detailed implementation/time table
 - Attachment 13. Additional Supporting Documents
 - Attachment 14. ALL Required Certifications

Any application received after **APRIL 15th @ 4:30 PM EST** will be returned to the applicant and will not be considered for funding for this fiscal year – ***NO EXCEPTIONS.*** Incomplete applications WILL NOT be processed and will be returned to the applicant. The actual number and types of awards will be subject to available funding. The City of Punta Gorda City Council will make the final determination of grant requests and amount of funds to be submitted to the Department of Housing and Urban Development for final approval.

Application with all pertinent required documentations are to be submitted to ...

<u>Mailing:</u> City of Punta Gorda Urban Design Division 326 W. Marion Ave., Punta Gorda FL 33950	<u>In Person:</u> City of Punta Gorda Urban Design Division 126 Harvey St., 3 rd Floor Punta Gorda FL 33950
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City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

CDBG Program Application for Funding			
Date Reviewed:		DUNS#:	
<p>Acceptance of the application does not obligate the City to fund the application, nor does it <i>guarantee</i> that the application was submitted is complete. The City retains the right to reject any or all applications received, and to negotiate or to cancel in part, or in their entirety, grant awards.</p>			
<p>1. Application Type: <input type="checkbox"/> Public Service <input type="checkbox"/> Housing <input type="checkbox"/> Infrastructure</p>			
<p>2. Type of Activity: (Select one)</p> <p><input type="checkbox"/> Housing <input type="checkbox"/> Economic Development <input type="checkbox"/> Homeless Housing & Support <input type="checkbox"/> Public Facilities/Public Improvements <input type="checkbox"/> Public Services</p>			
<p>3. Applicant/Agency/Organization Information (Attach Organizational Chart)</p>			
<p>Type of Agency: <input type="checkbox"/> 501(c)(3) <input type="checkbox"/> For-Profit <input type="checkbox"/> Faith-Based <input type="checkbox"/> Other _____</p>			
Agency/Organization:		Project/Program Name:	
Duns Number:		Federal ID Number:	
Chief Executive Officer:		Board President/CEO:	
Mailing Address:			
City:		State:	Zip:
Agency/Organization Phone:		Email address:	
<p>4. Contact Name of Person(s) responsible for Project/Program (use additional sheet if necessary)</p>			
Name:		Title/Roll:	
Phone:		Email address:	
<p><i>I/We hereby certify that all information contained in this application for funding is true and correct to the best of my/our knowledge and agree to comply with all requirements of the program if this agency is awarded and accepts funding</i></p>			
Board President or other representative Signature	Date	Chief Executive Officer Signature	Date
<p>5. Project/Program Funding Information</p>			
CDBG Funding Requested	\$	Total Cost of Project/Program	\$
<p>Has your agency received CDBG or other federal funds in the past? <input type="checkbox"/> NO <input type="checkbox"/> YES, Year___</p>			

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

Will your agency still implement the project if CDBG funds not be awarded? <input type="checkbox"/> NO <input type="checkbox"/> YES					
If Yes, How will the implementation be achieved?					
6. Provide a detailed description of the project/program that includes existing needs and how this project/program will address this need: (Attach additional page if necessary)					
7. Is this application for a PUBLIC SERVICE Activity? <input type="checkbox"/> NO <input type="checkbox"/> YES (answer #8)					
8. Is this a new service provided by your agency? <input type="checkbox"/> NO (answer #9) <input type="checkbox"/> YES (answer #10)					
9. Will the existing public service activity level be substantially increased or improved with this project/ program? <input type="checkbox"/> NO <input type="checkbox"/> YES					
10. Describe how CDBG funding will enable you to provide new, expanded services, and/or fill-in gap services, if applicable:					
11. Describe how the project/program will continue to operate and be maintained financially once CDBG funds have been expended:					
12. Proposed number of Persons to be served or assisted?					
13. Proposed number of Households to be served or assisted?					
14. Location/Address of Project/Program:					
City:		State:		Zip:	

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

15. Discuss how this project directly benefits low-to moderate income residents:

16. Describe your methodology of verifying the eligibility for all participants:
 (NOTE: If CDBG funds are awarded an "Application for Financial Assistance will be required for each participant in the program)

17. How will you identify and measure changes and impacts brought about by participation in project/program. Please specify below:

PROGRAM COMPONENT <i>Program Name & Number Served</i>	OUTCOME <i>Expected change in conditions, skills, behavior, etc</i>	INDICATOR <i>How will you know an outcome has been achieved. Include target number and percentage</i>	MEASUREMENT TOOL <i>Survey, interviews, test, assessments, document review, etc</i>

<p>18. Select ONE (1) HUD Objective</p> <p><input type="checkbox"/> Suitable Living Environment – Activity benefits communities, families, or individuals by addressing issues in their living environment.</p> <p><input type="checkbox"/> Decent Affordable Housing – Housing activity that meets individual or community needs. This objective should not be used for activities where housing is an element of a larger effort.</p>	<p>19. Select ONE (1) HUD Objective</p> <p><input type="checkbox"/> Availability/Accessibility – Activity makes services, infrastructure, or shelter available and accessible. Note: Accessibility does not refer only to physical barriers.</p> <p><input type="checkbox"/> Affordability – Activity provides affordability in a variety of ways including: creation/maintenance of affordable housing, infrastructure hookups, or services such as transportation/daycare.</p>
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City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

<input type="checkbox"/> Creating Economic Opportunity – Activity relates to economic development, commercial revitalization, and job creation	<input type="checkbox"/> Sustainability – Activity provides livable/viable communities/neighborhoods by providing services or removing slums/blight.
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19. National Objectives - Select One and Provide Justification - Which one of the three National Objectives will this project target?

19-A. **Benefits low and moderate income persons (24 CFR 570.208(a))**

For the National Objective that **principally benefits low and moderate income persons** is selected, describe how the activity will address ONE of the subcategories listed below:

- 1) **Area Benefit Activity** - Those projects carried out in a neighborhood consisting predominantly of LMI persons and providing services for such persons, yet could be available to other non-income eligible persons in the area. See Appendix 10 map showing LMA areas located within CITY. This information can be documented by documenting that the area is primarily residential (e.g., zoning map); and that the income characteristics of households in the service area (i.e., Census data)
- 2) **Limited Clientele Activity** - Those that benefit a specific group of people (rather than all the residents in a particular area) who are, or presumed to be, income eligible. In order to meet the LMI Limited Clientele criteria, the activity must: serve at least 51% LMI, as evidenced by documentation and data concerning beneficiary family size and income; have income eligibility requirements which limit the service to persons meeting the LMI income requirements, as evidenced by the administering agency's procedures, intake/application forms, income limits and other sources of documentation; serve a specific group presumed by HUD to be income-eligible include: abused children, battered persons, elderly persons, handicapped adults, homeless persons, illiterate persons, migrant farm workers and persons living with AIDS; and be of such a nature and in a location that it may be concluded that the activity's clientele are LMI.
- 3) **Income Eligible Housing Activity** - These projects add or improve a permanent residential structure wherein, upon completion, income eligible persons will occupy 51% or more of the housing units.
- 4) **Job Creation or Retention Activity** - A project which creates or retains permanent jobs, of which at least 51% are either taken by or available to income eligible persons.

Justification:

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

19-B Aids in the prevention or elimination of slums or blight (24 CFR 570.208(b))

For the National Objective that principally aids in the prevention or elimination of slums or blight is selected, describe how the activity will address ONE of the subcategories listed below:

- 1) At least 25% of the properties throughout the area exhibit the following:
 - a. Physical deterioration of buildings/improvements;
 - b. Abandonment of properties;
 - c. Chronic high occupancy turnover rates or chronic high vacancy rates in commercial or industrial buildings;
 - d. Significant declines in property values or abnormally low property values relative to other areas in the community; or
 - e. Known or suspected environmental contamination
- 2) Public improvements throughout the area are in a general state of deterioration. Documentation must be maintained by the grantee on the boundaries of the area and the conditions that qualified the area at the time of its designation. The designation of an area as slum or blighted must be re-determined every 10 years for continued qualifications.

Justification:

19-B Qualifies as a certified urgent need (24 CFR 570.208(c))

For the National Objective that principally qualifies as a certified urgent need is selected, describe how the activity will address ONE of the subcategories listed below:

It is possible for public services activities to qualify under this National Objective if the public services are designed to alleviate existing conditions that pose a serious and immediate threat to the health or welfare of the community and following conditions are met:

- 1) The conditions are of recent origin or recently became urgent; and
- 2) The grantee is unable to secure other funds to support the activity.

Justification:

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

REQUIRED DOCUMENTATION TO BE SUBMITTED FOR CDBG FUNDING

ATTACHMENT # 1

Articles of Incorporation/Bylaws

Documents recognized by the State as formally establishing a private corporation, business or agency.

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

REQUIRED DOCUMENTATION TO BE SUBMITTED FOR CDBG FUNDING

ATTACHMENT # 2
Non-Profit Determination

Tax-exemption determination letters from the IRS and the State.

REQUIRED DOCUMENTATION TO BE SUBMITTED FOR CDBG FUNDING

ATTACHMENT # 2

Acknowledgement of Religious Organization Requirements

In accordance with the First Amendment of the United States Constitution "church/state principles," CDBG assistance may not, as a general rule, be provided to primarily religious entities for any secular or religious activities.

Therefore, the following restrictions and limitations apply to any provider which represents that it is, or may be deemed to be, a religious or denominational institution or an organization operated for religious purposes which is supervised or controlled by or operates in connection with a religious or denominational institution or organization. These requirements are outlined in 24 CFR 570.200(j)(1-6).

A religious entity that applies for and is awarded CDBG funds for public service activities must agree to the following:

1. It will not discriminate against any employee or applicant for employment on the basis of religion and will not limit employment or give preference to persons on the basis of religion.
2. It will not discriminate against any person applying for such public services on the basis of religion and will not limit such services or give preference to persons on the basis of religion. The organization may continue to carry out its mission, including the definition, practice and expression of its religious beliefs, provided it does not use direct CDBG funds to support any inherently religious activities. Among other things, faith based organizations may use space in their facilities to provide CDBG funded services without removing religious art, icons, scriptures or other religious symbols. A CDBG funded religious organization retains its authority over its internal governance and may retain religious terms in its organization's name, select its board members on a religious basis, and include religious references in its organization's mission statements and other governing documents.
3. It may not engage in inherently religious activities, such as worship, religious instruction or proselytization, as part of the programs or services funded under this part. If the organization conducts such activities, the activities must be offered separately, in time or location, from the programs or services funded under this part and participation must be voluntary for the beneficiaries of the HUD funded programs or services.

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

4. CDBG funds may not be used for the acquisition, construction or rehabilitation of structures to the extent that those structures are used for inherently religious activities. CDBG funds may be used for the acquisition, construction or rehabilitation of structures only to the extent that those structures are used for conducting eligible activities. Sanctuaries, chapels, or other rooms that a CDBG funded religious congregation uses as its principal place of worship, however, are ineligible for CDBG funded improvements.

I hereby acknowledge that I have read the specific requirements contained in this attachment and that eligibility of my organization's project depends upon compliance with the requirements contained in this agreement.

Signature

Printed Name

Title

Religious Organization

Date

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

REQUIRED DOCUMENTATION TO BE SUBMITTED FOR CDBG FUNDING

ATTACHMENT # 3

List of Board of Directors

The list must include the name, telephone number, address, occupation or affiliation of each member and must identify the principal officers of the governing body (if appropriate).

BOARD QUESTIONNAIRE, PROFILE, AND ROSTER (USE ADDITIONAL SHEET IF NECESSARY)									
How often does your Board Meet?	<input type="checkbox"/> Monthly <input type="checkbox"/> Bi-Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input type="checkbox"/> Other								
What are the standing Board Committees									
Board President									
Name									
Address:		City:		State		Zip:			
Phone		Email							
Occupation/Affiliation				# Years on Board					
Term of Expiration				# Meeting attended in past 12 Months					
<i>The following questions are optional:</i>									
Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female		Age:	<input type="checkbox"/> 20-35 <input type="checkbox"/> 36-50 <input type="checkbox"/> 51-65 <input type="checkbox"/> Over 60					
Race/ Ethnicity	<input type="checkbox"/> Caucasian/Non-Hispanic		<input type="checkbox"/> Black/Non-Hispanic		<input type="checkbox"/> Hispanic/Black				
	<input type="checkbox"/> Hispanic/Caucasian		<input type="checkbox"/> Asian/Pacific Islander						
	<input type="checkbox"/> American Indian/Alaskan		<input type="checkbox"/> Other						
Board Vice President									
Name									
Address:		City:		State		Zip:			
Phone		Email							
Occupation/Affiliation				# Years on Board					
Term of Expiration				# Meeting attended in past 12 Months					
<i>The following questions are optional:</i>									
Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female		Age:	<input type="checkbox"/> 20-35 <input type="checkbox"/> 36-50 <input type="checkbox"/> 51-65 <input type="checkbox"/> Over 60					
Race/ Ethnicity	<input type="checkbox"/> Caucasian/Non-Hispanic		<input type="checkbox"/> Black/Non-Hispanic		<input type="checkbox"/> Hispanic/Black				
	<input type="checkbox"/> Hispanic/Caucasian		<input type="checkbox"/> Asian/Pacific Islander						
	<input type="checkbox"/> American Indian/Alaskan		<input type="checkbox"/> Other						

City of Punta Gorda, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

Board Member											
Name					Board Title/Position						
Address:					City:			State		Zip:	
Phone					Email						
Occupation/Affiliation					# Years on Board						
Term of Expiration					# Meeting attended in past 12 Months						
<i>The following questions are optional</i>											
Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female		Age:	<input type="checkbox"/> 20-35 <input type="checkbox"/> 36-50 <input type="checkbox"/> 51-65 <input type="checkbox"/> Over 60							
Race/ Ethnicity	<input type="checkbox"/> Caucasian/Non-Hispanic			<input type="checkbox"/> Black/Non-Hispanic			<input type="checkbox"/> Hispanic/Black				
	<input type="checkbox"/> Hispanic/Caucasian			<input type="checkbox"/> Asian/Pacific Islander							
	<input type="checkbox"/> American Indian/Alaskan			<input type="checkbox"/> Other							
Board Member											
Name											
Address:					City:			State		Zip:	
Phone					Email						
Occupation/Affiliation					# Years on Board						
Term of Expiration					# Meeting attended in past 12 Months						
<i>The following questions are optional</i>											
Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female		Age:	<input type="checkbox"/> 20-35 <input type="checkbox"/> 36-50 <input type="checkbox"/> 51-65 <input type="checkbox"/> Over 60							
Race/ Ethnicity	<input type="checkbox"/> Caucasian/Non-Hispanic			<input type="checkbox"/> Black/Non-Hispanic			<input type="checkbox"/> Hispanic/Black				
	<input type="checkbox"/> Hispanic/Caucasian			<input type="checkbox"/> Asian/Pacific Islander							
	<input type="checkbox"/> American Indian/Alaskan			<input type="checkbox"/> Other							
Board Member											
Name											
Address:					City:			State		Zip:	
Phone					Email						
Occupation/Affiliation					# Years on Board						
Term of Expiration					# Meeting attended in past 12 Months						
<i>The following questions are optional</i>											
Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female		Age:	<input type="checkbox"/> 20-35 <input type="checkbox"/> 36-50 <input type="checkbox"/> 51-65 <input type="checkbox"/> Over 60							
Race/ Ethnicity	<input type="checkbox"/> Caucasian/Non-Hispanic			<input type="checkbox"/> Black/Non-Hispanic			<input type="checkbox"/> Hispanic/Black				
	<input type="checkbox"/> Hispanic/Caucasian			<input type="checkbox"/> Asian/Pacific Islander							
	<input type="checkbox"/> American Indian/Alaskan			<input type="checkbox"/> Other							

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

REQUIRED DOCUMENTATION TO BE SUBMITTED FOR CDBG FUNDING

ATTACHMENT # 4
Mission Statement of Organization

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

REQUIRED DOCUMENTATION TO BE SUBMITTED FOR CDBG FUNDING

ATTACHMENT # 6

Organizational Chart

- An organizational chart must be provided that describes the agency's administrative framework and staff positions, indicates where the proposed project will fit into the organizational structure, and identifies any staff positions of shared responsibility.

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

REQUIRED DOCUMENTATION TO BE SUBMITTED FOR CDBG FUNDING

ATTACHMENT # 7

Authorization to Request Funds

- Documentation must be submitted of the governing body's authorization to submit the funding request.
- Documentation of this requirement consists of a copy of the minutes of the meeting in which the governing body's resolution, motion or other official action is recorded.
- Application must be signed by the party appointed by the governing body to make application

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

REQUIRED DOCUMENTATION TO BE SUBMITTED FOR CDBG FUNDING

ATTACHMENT # 8

Designation of Authorized Official

- Documentation must be submitted of the governing body's action authorizing the representative of the agency to negotiate for and contractually bind the agency.
- Documentation of this requirement consists of a signed letter from the Chairperson of the governing body providing the name, title, address and telephone number of each authorized individual.

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

REQUIRED DOCUMENTATION TO BE SUBMITTED FOR CDBG FUNDING

ATTACHMENT # 9
Verification of Liability Insurance

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

REQUIRED DOCUMENTATION TO BE SUBMITTED FOR CDBG FUNDING

ATTACHMENT # 10

Detailed Budget & Documentation of All funds

Proposed Budget						
Keep in mind that your entire budget request may not be funded						
Budget Categories (Be Specific)	Total Projected Cost / Estimates	CDBG Funds	Applicant's Funds		Other	
		Amount	Amount	Status* <small>(circle one)</small>	Amount	Status* <small>(circle one)</small>
	\$	\$	\$	C P N	\$	C P N
	\$	\$	\$	C P N	\$	C P N
	\$	\$	\$	C P N	\$	C P N
	\$	\$	\$	C P N	\$	C P N
	\$	\$	\$	C P N	\$	C P N
	\$	\$	\$	C P N	\$	C P N
	\$	\$	\$	C P N	\$	C P N
	\$	\$	\$	C P N	\$	C P N
	\$	\$	\$	C P N	\$	C P N
	\$	\$	\$	C P N	\$	C P N
	\$	\$	\$	C P N	\$	C P N
	\$	\$	\$	C P N	\$	C P N
	\$	\$	\$	C P N	\$	C P N
	\$	\$	\$	C P N	\$	C P N
	\$	\$	\$	C P N	\$	C P N
	\$	\$	\$	C P N	\$	C P N
SOURCE TOTAL	\$	*STATUS: <i>C- Committed Funds,</i> <i>P- Funds that have been applied for & decision is pending,</i> <i>N- Funds have not yet been requested or secured</i>				

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

Identify the amount of funds to be provided by OTHER SOURCE(S) for this program. The date of commitment for funding for these other sources must be stated below			
Source:		Amount:	\$
Award Date:		Date Available:	
Source:		Amount:	\$
Award Date:		Date Available:	
Source:		Amount:	\$
Award Date:		Date Available:	
Source:		Amount:	\$
Award Date:		Date Available:	
Source:		Amount:	\$
Award Date:		Date Available:	
Source:		Amount:	\$
Award Date:		Date Available:	
Source:		Amount:	\$
Award Date:		Date Available:	
Source:		Amount:	\$
Award Date:		Date Available:	
Source:		Amount:	\$
Award Date:		Date Available:	
Total Amount Committed By Other Sources			\$

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

REQUIRED DOCUMENTATION TO BE SUBMITTED FOR CDBG FUNDING

ATTACHMENT # 11

Financial Statement and Audit

Copy of the most recent audit and current financial statement

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

REQUIRED DOCUMENTATION TO BE SUBMITTED FOR CDBG FUNDING

ATTACHMENT # 12

Detailed Implementation / Time Table

Project/Program Implementation												
Maximum time anticipated to complete the project/program									Days / Months			
Start Date:						Completion Date:						
Applicant must provide a schedule for the program that lists major activities and indicates when the activities will be occurring.												
Proposed Project Schedule												
Major Program Activity or Project	QTR. ONE			QTR. TWO			QTR. 3			QTR. 4		
	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

REQUIRED DOCUMENTATION TO BE SUBMITTED FOR CDBG FUNDING

ATTACHMENT # 13

Additional Supporting Documents

Please List Each Type of Documents Below

13-A	
13-B	
13-C	
13-D	
13-E	
13-F	
13-G	
13-H	

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

ATTACHMENT # 14

REQUIRED CERTIFICATIONS FOR CDBG FUNDING APPLICATION	
<p>The Agency agrees to abide by the provisions of 24 CFR 570.611 with respect to conflict of interest and covenants that it presently has no financial interest and shall not acquire any financial interest, direct or indirect, which would conflict in any manner or degree with the performance of services required under CDBG Program Regulations. The Agency further covenants that in the performance of receiving CDBG fund no person having such a financial interest shall be employed by the Agency hereunder. These conflict of interest provisions apply to any person who is an employee, agent, consultant, officer or elected official of the City of Punta Gorda, or of any designated public agencies or subrecipients, which are receiving CDBG funds.</p>	
<p>Is there any member of the applicant's staff, member of the applicant's Board of directors or officer who currently is or has/have been within one year of the date of this application a City employee or a member of the City Council? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	
<p>IF YES, PLEASE LIST NAME(S)</p>	
<p>Will the funds requested by the applicant be used to pay the salaries of any of the applicant's staff or award a subcontract to any individual who is or has been within one year of the date of this application a City employee or a member of the City Council? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	
<p>IF YES, PLEASE LIST NAME(S)</p>	
<p>Is there any member of the applicant's staff, member(s) of the Board of Directors, or officer(s) who are business partners or immediate family of a City employee or a member of City Council? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	
<p>IF YES, PLEASE LIST NAME(S)</p>	

City of Punta Gorda, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

<p>The organization will comply with federal requirements to be observed by organizations being funded with CDBG/HUD funds, including compliance with Federal Labor Standards, Section 3, Segregated Facilitated, Equal Opportunity, and Non-Discrimination, Section 109, Title VI and EO 11246. All requirements are described in 24 CFR 570 (CDBG Entitlement Grants).</p>			
AGENCY CERTIFICATION			
<p>Please INITIAL each statement and mark "YES" or "NO" as appropriate. Your initials certify the accuracy of each statement. <u>Supporting documents may be requested at a future date and must be supplied upon request.</u></p>			
Agency's Date of Incorporation			C.E.O. Initials
(INITIALS)	<input type="checkbox"/> YES <input type="checkbox"/> NO	Agency maintains a personnel policy manual?	
(INITIALS)	<input type="checkbox"/> YES <input type="checkbox"/> NO	Agency has an affirmative action plan?	
(INITIALS)	<input type="checkbox"/> YES <input type="checkbox"/> NO	Agency has a non-discrimination policy?	
(INITIALS)	<input type="checkbox"/> YES <input type="checkbox"/> NO	Agency has a sexual harassment policy?	
(INITIALS)	<input type="checkbox"/> YES <input type="checkbox"/> NO	Agency has a grievance procedure?	
(INITIALS)	<input type="checkbox"/> YES <input type="checkbox"/> NO	Agency has the capacity to financially administer grant funds and has an effective fiscal management system in place?	
(INITIALS)	<input type="checkbox"/> YES <input type="checkbox"/> NO	Agency maintains liability insurance coverage?	
If Yes		Amount	\$ _____ Agency _____
(INITIALS)	<input type="checkbox"/> YES <input type="checkbox"/> NO	Agency pays all payroll taxes and workers' compensation as required by Federal and State law?	
(INITIALS)	<input type="checkbox"/> YES <input type="checkbox"/> NO	Agency maintains fidelity bond coverage for principal staff handling agency accounts?	
If Yes		Amount	\$ _____ Agency _____
(INITIALS)	<input type="checkbox"/> YES <input type="checkbox"/> NO	Agency has a religious affiliation?	
If Yes		Affiliation: _____	
(INITIALS)	<input type="checkbox"/> YES <input type="checkbox"/> NO	An agency representative, paid or unpaid (staff, board, volunteer, etc.) maintains a family or business tie with an employee, agent, consultant, officer, elected or appointed official of the funding agency or personally maintains a dual role? If yes describe:	
If Yes		Name	Position
			Relationship

City of **Punta Gorda**, Florida
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

(INITIALS)	<input type="checkbox"/> YES <input type="checkbox"/> NO	Agency has by-laws in place?		
If Yes		Date Accepted:		Date Last Amended:
Signature (of person initialing above)		Printed Name	Title	Date
AUTHORIZATION AND SIGNATURE SHEET				
<i>TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE STATEMENTS AND DATA IN THIS APPLICATION ARE TRUE AND CORRECT AND ITS SUBMISSION HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT. WITH THIS SUBMISSION, WE ALSO AGREE TO FOLLOW ALL RULES AND REGULATIONS GOVERNING FEDERAL CDBG AND HUD FUNDING.</i>				

Signature of Chief Executive Officer

Printed Name

Title

Locality or Agency

Project Name

Date