



**FY 2017 ALLOCATION APPLICATION  
COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG)**

**Application submission deadline – April 19, 2017**

**\*\*\* NO LATE SUBMISSIONS WILL BE ACCEPTED \*\*\***

SUBMIT COMPLETED APPLICATION WITH ALL INFORMATION AND ATTACHMENTS TO:

Kristie Tidd, Community Development Coordinator  
Greene County Department of Development  
61 Greene Street  
Xenia, OH 45385

**PART I. APPLICANT INFORMATION:**

Complete the information requested. Applicant must be Township, Village, or City. Applicants may also be a service group / non-profit organization but must attach a copy of the constitution or by-laws of the organization. **"Contact Person"** must be an individual who can respond to specifics about the project contained in the application and be able to provide additional information or material upon request.

Applicant:\* \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

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

**\*Applicant must be Township, Village, City, a public service group or non-profit entity, Please attach constitution or bylaws if a public service group or non-profit.**



**PART III. COST OF PROJECT (estimate):**

Indicate the total cost of the project. It is important to take into consideration the cost of engineering, if necessary, and who will perform this task. Breakdown costs by "Labor", "Material", and/or "Engineering" as applicable. **If the community has a separate engineering contract from project cost, please indicate that information in a separate attachment included with the application.** The "Labor" costs **must** be based on the *Federal Prevailing Wage Rates*. A letter must be submitted by a qualified individual or firm which states the estimate of costs and must state that the cost estimate is based on paying laborers the *Federal Prevailing Wage Rates*. **Should actual cost exceed estimate and amount requested, it will be the responsibility of the community to make up the additional funds.**

- a. Labor \*           \$ \_\_\_\_\_
- b. Material         \$ \_\_\_\_\_
- c. Engineering     \$ \_\_\_\_\_
- d. TOTAL COST    \$ \_\_\_\_\_ (a + b + c)

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**\* Labor must be based on Federal Prevailing Wage Rates. Submit letter from qualified person or firm making estimate. Letter must state cost estimate based on paying Federal Prevailing wage and time needed to complete project.**

**PART IV. SOURCES OF FUNDS:**

Based on the cost estimate in PART III above, indicate the source of funds, be they CDBG or otherwise. If other funds are to be utilized, indicate specifically the other source such as local funds or other State and/or Federal funding sources. If other funds are to be used, **a formal letter COMMITTING FUNDS from said source is required.** The letter(s) of commitment must equal with the amount noted as "Other \$" noted below. **"Other Funds" contributed by the community must be specifically committed to engineering costs or construction costs only. If the community is contributing funds to both engineering and construction, separate letters must be submitted indicating how funds will be used.**

FY 2017 CDBG \$ \_\_\_\_\_ + OTHER \$ \_\_\_\_\_ \* = TOTAL \$ \_\_\_\_\_

\* Identify source of "OTHER" funds - \_\_\_\_\_  
Submit **Letter of Commitment** of the "OTHER" dollars from funding source.

**PART V. SPECIFICATIONS:**

The preparation of technical drawings and specifications of the project is critical. You must indicate the qualified individual or firm who will be providing these items. The engineering costs must be calculated in the total cost of the project. The plans and specs must be completed in a timely manner in order to complete the project within the required time period. **Specs, plans, and cost estimates approved for this application must be the same utilized during the bid process for the construction period.**

Technical Specifications and/or Drawings - who will provide these items?

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**PART VII. PROJECT INFORMATION:**

Consider each subject noted in this PART carefully. If you think there is a possibility that a particular issue applies to the project, circle "Yes". If there are other conditions or circumstances that should be considered which may affect the project, note them in the space provided below. If you answer "No" on the application and it's discovered later that a "Yes" is applicable, the project could be delayed or possibly eliminated and determined ineligible for funding.

**ARE ANY OF THE FOLLOWING RELATED TO PROJECT** (circle appropriate response):

- A. Located in a Flood Plain - *Yes*    *No*                      D. Property acquisition needed - *Yes*    *No*
- B. Involve Historic Property - *Yes*    *No*                      E. Property currently occupied - *Yes*    *No*
- C. Easements required -    *Yes*    *No*                      F. Will fees be assessed -            *Yes*    *No*

**If you answered Yes to any of these, explain:**

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**PART VIII. NATIONAL OBJECTIVE:**

All projects **MUST** meet a National Objective as defined by HUD and State guidelines. If a project cannot meet either objective, it **cannot** be considered for funding. Listed below are the general objectives. You are advised to contact the Development Coordinator for more specific interpretation if you are unsure a project is eligible.

To qualify under "**A.**" BENEFIT LOW/MODERATE INCOME (LMI) HOUSEHOLDS, at least 51% of the households **benefitting** from the project **must** meet the income qualifications of the CDBG Program. You must perform an Income Survey to qualify for this objective prior to submitting this application.

To qualify under "**B.**" LIMITED CLIENTELE, the project must benefit a specific group of persons rather than a geographical area.

**PROJECT MUST MEET ONE OF THESE CDBG OBJECTIVES - "A." OR "B." BELOW.** Will the project:

- A.**    BENEFIT LOW/MODERATE INCOME (LMI) HOUSEHOLDS?    *Yes* \_\_\_\_    *No* \_\_\_\_

If *Yes*, provide the following information -

Number of Households Benefiting: \* \_\_\_\_\_

Number of Households Low/Mod Income: \* \_\_\_\_\_

Low/Mod Income Households (percent): \* \_\_\_\_\_%

\* *How did you obtain these numbers.* (Survey, US Census Bureau Data, Other)

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**NOTE:** If you conducted an Income Survey, indicate date survey was performed: \_\_\_\_\_

***Submit survey forms for verification.***

B. LIMITED CLIENTELE must exclusively benefit one of the following groups generally presumed to be principally LMI. Please select one of the following:

- |   |   |
|---|---|
| <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"/> Persons with AIDS        |
| <input type="checkbox"/> Homeless persons | <input type="checkbox"/> Migrant farm workers     |

**PART IX. MAP:**

Include a map of the general area highlighting the area served by the project. For instance, if a sewer line will only serve two blocks but must be extended another 800' to make the connection to the main sewer, only the residents along the two blocks will benefit and the two block area is the "benefit area". Highlight the two block area but also show the entire length of the sewer installation.

Submit a map showing the location of the project, highlighting the area served by this project.

**PART XI. CERTIFICATION:**

Type or print the name and title of the Chief Officer of the applying organization. This Chief Officer must sign and date the application.

Certification of Chief Official - I certify that the information in this application and related documents is true and correct to the best of my knowledge.

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*Typed Name & Title of Chief Official*                      *Signature of Chief Official*                      *Date*

## APPLICATION CHECK LIST

**REMINDER:** Have you submitted the following items (as needed) with your application?

- *Cost estimate in a letter from qualified individual or firm.*
- *Map showing the area to be served by the project.*
- *Letters committing the "other" funds to complete project.*
- *Income verification of area being served by project.*

***Please review application before submitting to be sure you have completed all of the sections in this application***

**REMEMBER:** All projects are subject to County, State, and HUD criteria. As a courtesy to applicants, staff is always available to provide assistance prior to the application due date. Consultation prior to the application deadline date ***is recommended.***

In order to be considered for FY 2017 Formula CDBG funds, this completed application as well as other documentation related to the project must be submitted no later **April 19, 2017 by 4:00pm** to:

Kristie Tidd, Community Development Coordinator  
Greene County Department of Development  
61 Greene Street  
Xenia, OH 45385

Questions concerning this form or the CDBG program requirements should be directed to the above at 937-562-5350

- **You are required to submit an application for funding consideration.**
- **Complete a separate application for each project.**