



**BROWARD COUNTY BOARD OF COUNTY COMMISSIONERS**

**MUNICIPALITIES CDBG APPLICATION**

Complete the following sections. **Submit one form for each project.** Attach additional pages as needed

<u>COMMUNITY DEVELOPMENT GRANT PROJECT SUMMARY</u>			
<u>Category</u>	<u>Budget</u>		
Cash			
In-Kind			
Other Grants			
<b>CDBG TOTAL</b>			
<b>PROGRAM ACTIVITIES:</b>		<b>NATIONAL OBJECTIVE</b>	
Only one category per application			
Public Service (15% Cap)	( )	Limited Clientele	( )
Capital Improvement	( )	Limited Clientele	( )
Capital Improvement	( )	Area Benefit	( )
Housing	( )	Low/Mod Housing (LMH)	( )
Capital Improvement	( )	Area Benefit	( )
Economic Development	( )	Low/Mod Jobs (LMJ)	( )
Continuing Project:	Yes ( )		
New Project:	Yes ( )		
<b>Applicant completes the following items.</b>			
<b>1. Applicant Organization Name:</b>			
Address:			
Telephone #:		FAX #:	
<b>2. Contact Person:</b>			
Title:			
Street Address:			
E-MAIL Address:			
Telephone #:		FAX #:	
<b>3. Project Name:</b>			
<b>4. CDBG Funds Requested (\$15,000 Minimum Request): \$</b>			



6. **Applicant's Management Capability:** Briefly describe the capacity of your municipality to undertake the proposed project. Discuss prior experience in the administration of Federal funds and list existing funding agreements.
- a. Discuss experience in the administration of Federal funds and general management capacity, include other Broward County funded programs.

- b. Provide a list of current CDBG projects.

**First Grant**

<b>Project Name</b>		<b>Funding Amount</b>	
<b>Contract Period</b>		<b>Balance of funds unspent</b>	

**Second Grant**

<b>Project Name</b>		<b>Funding Amount</b>	
<b>Contract Period</b>		<b>Balance of funds unspent</b>	

**Third Grant**

<b>Project Name</b>		<b>Funding Amount</b>	
<b>Contract Period</b>		<b>Balance of funds unspent</b>	

7. **Description:** Describe the outcome(s) of the project. Description is to include time frame for start-up and completion, street location of the service and census tract(s). Describe the service area.
- a. **Project Description:** Capital Improvements should state anticipated linear feet of project or number and description of public facilities. Public service projects should specifically state number of clients per year. Housing development or rehabilitation should state number of housing units. Economic development projects, should state number of businesses to be assisted, jobs created and describe loans and amounts of loan funds available. New Housing Construction should comply with Energy Star Requirements.
  
  - b. **Time Frame:** What is the time frame for start-up and completion after notification of funding award. Indicate what funding commitment is required to provide for timely project start-up.
  
  - c. **Street address / Location:** Attach map identifying project location. Also provide an address in the description when site acquisition is involved. Provide evidence of Phase 1 – Environmental Assessment for Capital, New Construction and Economic Development activities.
  
  - d. **Census Tract(s) and Block Groups:** Consult census maps for the census tract location of this project. (Area benefit projects must serve 51% low and very low income persons.)

8. **Budget Table Instructions:** Complete the following Budget Table and provide the requested information on the matching share of resources committed to the project.

a. **Budget Table:** For each expenditure category in the left hand column enter the proposed amount necessary to complete this project under the column for the source of funding. Enter the source of funding in the appropriate cell.

Category	CDBG	Non CDBG	Non CDBG	TOTAL All Sources
Personnel				
Benefits				
Travel				
Training				
Equipment				
Supplies				
Contractual With Outside Agencies or Vendors				
Construction				
Other				
Totals				

9. **Budget Narrative Instructions:** The budget narrative statement should provide a detailed explanation justification for each cost category space shown in the Budget Table on page 5. The budget narrative should identify non-CDBG resources to be utilized in financing including mortgages or construction financing for the project. Also, specify the costs for which CDBG funding is being requested and the costs to be covered by non-CDBG resources. Additional pages can be added, if necessary.

10. **Describe and calculate Leveraging:** Describe and attach supporting documentation including letter of commitment, resolutions, minutes of meetings, etc. providing the specific resources the applicant will commit to the project identified in columns 2 and 3 of the Budget Table above. Include and identify in-kind contributions, sweat equity and other resources.

- a. Provide documentation as an attachment and summarize below.
  - 1. For economic development projects, the value of the jobs produced in the previous year can be used as leverage. Documentation must be provided showing name of business, title of job and salary.
  - 2. For housing development projects, anticipated mortgage financing will be considered as in-kind contribution.

b. Instructions on calculating leveraging

Leveraging will be computed by taking into account the total dollar cost of the entire project including in-kind contribution.

$$\text{Percent Leveraging} = \frac{\text{Total Non-CDBG Funds}}{\text{Total CDBG \$} + \text{Total Non-CDBG Funds}} \times 100$$

In computing Total Cost of the project, funding from all sources for the project must be added. This includes Federal funds, State funds, contributions, private sector financing, in-kind contributions, etc.

In-Kind Contributions are non-cash items. Non-cash items are contributions to the project, e.g., labor, office space, use of equipment, etc that do not involve cash payments by the entity. However, a dollar value must be provided for in-kind contributions and that value must be added to the cost of the project. In-kind contributions must be accounted for and included in the financial audit of the funded entity.

Calculations:

11. **The project generally reflects adopted plans, goals, objectives and policies.**
- a. **Project consistent with Broward County Consolidated Plan: Project should explain which Consolidated Plan priority it will address.**
  - b. **Project Consistent with Local Government Plans and Zoning: Project letters from municipality or County government in which the project will occur, stating consistency with county or municipal adopted comprehensive plans. Provide Flood Plan Map, if in flood plain.**
  - c. **Is project a permitted use in the zoning text regulations for the zoning district designated for the project site?**  
 Yes [  ] **Attach municipal or County verification of zoning and adopted future land use plan designation for the site**  
 No [  ] **plan of action to achieve zoning district change.**
  - d. **Plat Approval: Does your project require platting or a plat note amendment?**  
 Yes [  ] **Attach platting requirements and time table for completion.**  
 No [  ] **Provide Plat Name, Plat Book Number and Plat Page Number**
  - e. **Countywide Programs: If a specific program in the area of single family or rental rehabilitation, residential redevelopment, commercial revitalization, or redevelopment is proposed, explain how the program will be more effective on a cost and services basis than the same program provided by the Broward County Community Development Division.**
  - f. **State and Regional Policy Plans: The Florida State Comprehensive Plan provides long-range policy guidance for the orderly social, economic and physical growth of the state. The Strategic Regional Policy Plan for South Florida specifically addresses housing and economic development.**

**12. Real Property and Relocation Policy: Complete this section when displacement of families or businesses is required.**

- a. Real property: Does the proposed project require the acquisition, subordinated or leasing of real property?**

**Yes [ ] Provide a legal description, street address and the property owner's name. *Consult the Community Development Division staff before acquiring real property to follow the Uniform Acquisition Procedures.***

**No [ ] No property is to be acquired**

- b. Relocation: Does the proposed project necessitate the relocation of homeowners, tenants or commercial establishments.**

**Yes [ ] Outline the proposed relocation plan and show source of funds on Page 5 and 6 for the budget table and narrative above.**

**No [ ]**

13. **Citizen Participation:** Complete this section for citizen participation documentation. How did the citizens in your jurisdiction participate in the selection of this project?
- a. A copy of the resolution from the governing body giving authorization to submit proposal(s) with name and title of official designated to sign application.
  - b. Copies of meeting or hearing notices which verify efforts to invite citizen input (to include points of distribution) and pertinent information from the municipality reflecting inclusion of citizen input in final decisions. Documentation includes a copy of the certified proof of advertising of the public hearing held by the governing body.
  - c. Verification of other efforts which provide information to citizens, i.e., workshop notices, attendance records, sunshine ads, civic association meetings.

14. **Certification:** Please complete the certification below:

If this application is approved for funding, the organization agrees to comply with all required Federal, state and local laws and regulations. The organization confirms that it is fully capable of fulfilling the obligations as stated in this proposal and in any attachments or documents included with this application.

As a duly authorized representative of this organization, I submit this application to the Broward County Community Development Division and verify that the information herein is true, accurate and complete.

**PENALTY FOR FALSE OR FRAUDULENT STATEMENT:** U.S. Code Title 18, Section 1001, provides that a fine up to \$10,000 or imprisonment for a period not to exceed 5 years, or both, shall be the penalty for willful misrepresentation and the making of false fictitious statement, knowing same to be false.

Name of Organization:

Type of Organization:  Municipal

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)