



COMMUNITY DEVELOPMENT BLOCK GRANT PY2019 CDBG-CV (COVID-19) APPLICATION PACKET (#2)

Debbie Zilles, CDBG Coordinator
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Logan City has received a **second round** of CDBG-CV funding under the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) to be used to prevent, prepare for, and respond to the coronavirus pandemic (COVID-19). This supplemental funding will be used to support critical community services during the COVID-19 Pandemic. Community partners, including local government, non-profit, faith-based and for-profit organizations are invited to apply for CARES Act supplemental CDBG-CV funding to address COVID-19 related needs.

This application is broken into two parts:

1. The CDBG-CV (#2) Eligibility Worksheet
2. The CDBG-CV (#2) Funding Application

Both the CDBG-CV (#2) Eligibility Worksheet and CDBG-CV (#2) Funding Application are required for a complete submittal. Incomplete applications will not be considered.

To be considered for funding, a project/program proposal must meet one of the three National Objectives as defined by HUD and referenced in the Online CDBG reference guide ([Guide to National Objectives and Eligible Activities for Entitlement Communities](#)).

In addition to meeting a National Objective, each project/program must be an eligible CDBG-CV activity ***designed to be used for the prevention of, preparation for, and/or response to the Coronavirus pandemic*** including but not limited to:

- a. Food Assistance Program - Financial assistance to food banks, meal delivery programs, and other food assistance programs that are serving LMI clients in need of these services because of the Coronavirus.
- b. Non-Profit Assistance Program – Financial assistance for non-profit entities serving LMI persons that have been financially impacted by the Coronavirus. The non-profit must be able to prove financial hardship due to the Coronavirus.
- c. Emergency Shelter Assistance Program – Financial assistance to help provide emergency shelters for LMI residents who are victims of domestic violence.
- d. Homeless Prevention Assistance Program – Financial assistance Resource and financial assistance (for qualifying expenses) to LMI families who are at risk of or have recently become homeless due to the Coronavirus.
- e. Acquisition, construction, reconstruction, or installation of public works, facilities, and site or other improvements, or the rehabilitation of buildings and improvements.
- f. Planning, capacity building, and technical assistance.

Certain activities are **not** eligible for CDBG-CV funding including:

- a. Any activity that is **not** directly related to the **prevention of, preparation for, or response to the Coronavirus is ineligible.**
- b. Income payments.
- c. Supplanting or substituting expenses currently paid for by other sources.
- d. Political activities and/or lobbying.
- e. Operation and maintenance expenses.
- f. Purchase of furnishings and personal properties.

Specific CDBG program requirements are outlined in Section IV of the Funding Application.

Please Note: Funding applied for under this grant cannot duplicate funding you may be receiving under a different grant. It can be used to supplement other funding, but in other words, no double dipping grant funds to pay for the same thing.

Email a complete application packet and any supporting documentation to debbie.zilles@loganutah.org.

Please note, incomplete applications will be rejected and will not be considered for funding. Applications that do not specifically relate their request to Covid-19 impacts will also be rejected.

**All applications are due by noon on
October 23rd, 2020.**



COMMUNITY DEVELOPMENT BLOCK GRANT

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PY2019 CDBG-CV (#2) ELIGIBILITY WORKSHEET

| | |
|-----------------------------------|--|
| Activity Name: | |
| Applicant Organization(s): | |

| LMI Income Limit Table for FY2020 | | | | | | | | |
|-----------------------------------|----------|----------|----------|----------|----------|----------|----------|----------|
| Household Size | 1 Person | 2 Person | 3 Person | 4 Person | 5 Person | 6 Person | 7 Person | 8 Person |
| Income Limits | \$41,550 | \$47,450 | \$53,400 | \$59,300 | \$64,050 | \$68,800 | \$73,550 | \$78,300 |

1. HUD NATIONAL OBJECTIVE (mark one)

A. Which HUD National Objective category does the proposed activity meet? (mark one)

| X | Low/Moderate Income Category | HUD CDBG reference guide |
|---|---|--|
| | <u>Area Benefit:</u> Project serves a specified geographic area identified by the census as being at least 51% LMI. Applicant must be able to prove that projects primarily benefit LMI households. | Page 3-7 |
| | <u>Limited Clientele Benefit:</u> Project benefits a specific group of people who are at least 51% LMI persons. Applicant must provide income verification from clients. | Page 3-14 |
| | <u>Housing Benefit:</u> Contributes to improved or increased quantity of residential structures to be occupied by LMI persons. | Page 3-19 |
| | <u>Job Creation & Retention Benefit:</u> Creates or retains permanent jobs of which 51% will be filled by or available to LMI persons. | Page 3-24 |
| | <u>Urgent Need Benefit:</u> Meets a need having a particular urgency. | Page 3-41 |

B. Do at least 51% of the activity beneficiaries qualify as low/moderate income (LMI)?
 (According to the LMI Income Limit Table (see above))

(Mark one)

| | |
|--------------------------|--------|
| <input type="checkbox"/> | Yes |
| <input type="checkbox"/> | No |
| <input type="checkbox"/> | Unsure |

C. Please mark if at least 51% of the activity beneficiaries qualify as a presumed benefit category (Mark all that apply).

| | |
|--------------------------|---------------------------|
| <input type="checkbox"/> | Abused children |
| <input type="checkbox"/> | Elderly persons |
| <input type="checkbox"/> | Battered spouses |
| <input type="checkbox"/> | Homeless persons |
| <input type="checkbox"/> | Severely disabled persons |
| <input type="checkbox"/> | Illiterate adults |
| <input type="checkbox"/> | Persons living with AIDS |
| <input type="checkbox"/> | Migrant farm workers |

D. Do at least 51% of the activity beneficiaries reside in Logan?

(Mark one)

| | |
|--------------------------|--------|
| <input type="checkbox"/> | Yes |
| <input type="checkbox"/> | No |
| <input type="checkbox"/> | Unsure |

2. HUD ACTIVITY CATEGORY

Which Eligible CDBG-CV Activity Category is the proposed activity? (mark one).

| X | Eligible activity category |
|--------------------------|---|
| <input type="checkbox"/> | Food Assistance Program |
| <input type="checkbox"/> | Non-Profit Assistance Program |
| <input type="checkbox"/> | Emergency Shelter Assistance Program |
| <input type="checkbox"/> | Homeless Prevention Assistance Program |
| <input type="checkbox"/> | Acquisition, construction, reconstruction, rehabilitation, or installation of public works, facilities, buildings, and site or other improvements |
| <input type="checkbox"/> | Planning, capacity building, and technical assistance |
| <input type="checkbox"/> | Other: |

3. LOGAN CITY STRATEGIC OBJECTIVES (PY2019-2023)

Which Logan City Strategic Objective is met by the proposed activity? (mark one).

| X | Strategic objective |
|--------------------------|--|
| <input type="checkbox"/> | Contribute to neighborhood infrastructure or facility improvement and/or remediation of access & mobility barriers in all neighborhoods. |
| <input type="checkbox"/> | Support eligible agencies serving low/moderate income populations by funding programs or facilities that improve or increase services. |
| <input type="checkbox"/> | Contribute to Community Development planning documents and CDBG program administration. |



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PY2019 CDBG-CV (#2) FUNDING APPLICATION

| | |
|-----------------------------------|--|
| Activity Name: | |
| Applicant Organization(s): | |

| SECTION I: Applicant Information | | | |
|---|---|---------------------------------|--|
| Primary Contact Name: | | | |
| Title: | | | |
| Phone: | | | |
| Email: | | | |
| Secondary Contact Name: | | | |
| Title: | | | |
| Phone: | | | |
| Email: | | | |
| Physical Address: | | | |
| | <small>Street Address (include suite number)</small> | <small>City, State, ZIP</small> | |
| Mailing Address: | | | |
| | <small>Street Address (include suite number) / PO Box</small> | <small>City, State, ZIP</small> | |
| Phone(s): | | | |
| DUNS # <small>(www.dnb.com)</small> | | FEIN: | |
| Logan Business License #: | | www. | |
| Organization Description: <small>(i.e. mission, longevity, staff, services, programs)</small> | | | |

| SECTION II: Proposed Activity | | |
|--|---|-----------------------------------|
| CDBG-CV (#2) Funding Request: \$ | Match (see match description in Section IV): \$ | Total Activity Cost: \$ |
| Activity Description: <ul style="list-style-type: none"> • What are you going to do? • Where are you going to do it? • How are you going to accomplish it? • Include a location map (as applicable). • Be as descriptive as possible in detailing your activity. | | |
| Estimate of Beneficiaries: <ul style="list-style-type: none"> • Provide an estimate of the number of beneficiaries for the activity. • Provide a description of the type of people who will benefit from the activity. • If you have any demographic data relating to your estimated beneficiaries, please attach data as an addendum. • How will project meet the local strategic goal? | | |
| Projected Start Date: | | Projected End Date: |
| Project Timetable <ul style="list-style-type: none"> • What are the achievable milestones/goals for the project or activity? • Include major purchases/costs associated with the program. | Milestone/goals | Proposed Completion date |
| | | |
| | | |
| | | |

| | |
|--|--|
| <p>Financials: Attach any additional information as needed.</p> | <p>Activity budget</p> |
| <p>Activity budget</p> <ul style="list-style-type: none"> • Indicate which budget item(s) CDBG-CV (#2) funds will be used for • Indicate which items match funds will be used for | |
| <p>Activity funding sources</p> | <p>Activity funding sources</p> |
| <ul style="list-style-type: none"> • Breakdown of sources (include non-monetary sources) • Indicate 'committed funds' vs. 'anticipated funds' • Leveraging ratio | |
| <p>Explanation of ongoing financial support</p> | <p>Explanation of ongoing financial support</p> |
| <ul style="list-style-type: none"> • How will the program or project be financially sustainable without future CDBG funds? | |

| SECTION III: Organization | |
|---|---|
| Organization Capabilities | <p>How long has your organization been operating? ____</p> <p>Has your organization ever received a federal grant? Yes No</p> <p>Has your organization ever received a CDBG grant? Yes No</p> <p>Does your organization currently collect clientele data, including income, demographic, and residence information? Yes No</p> <p>Has your organization ever conducted competitive bidding, such as a sealed bid? Yes No</p> <p>Has your organization ever had to meet Davis Bacon requirements on a federally funded project? Yes No</p> |
| Explain how you will collect clientele information for the activity (this does not apply to LMI Area Benefit category projects). | |
| Describe your organizations experience with records management, especially any grant management experience. | |
| Evidence of financial stability: | <p>Evidence of an applicant's financial stability must be provided as part of this application. This includes the submission of audited financial statements for the organization from the <u>TWO</u> most recently-completed fiscal years, including the:</p> <ul style="list-style-type: none"> • balance sheet <li style="padding-left: 20px;">AND • income statement <p><i>Please Note:</i></p> <ol style="list-style-type: none"> 1) If the applicant is a division of a much larger organization (i.e. USU, United Way), sections of the financial statements specific to the applicant will most likely suffice. 2) In cases where audited statements are not available for an otherwise eligible organization, the City of Logan may elect to consider an unaudited submission. 3) If the organization does not have two years of financial statements for any reason, please provide another indication of financial stability, which the City of Logan may elect to consider. |

SECTION IV: CDBG-CV (#2) Program Information - Please Review

- Match Description - A 1 to 1 monetary match is required for all HUD LMI Clientele National Objective projects that have participants from outside of Logan City boundaries. The 1 to 1 match can be reduced based on one year of verifiable program participant residency data. This reduction must be approved by the Logan City CDBG Coordinator.
- Total CDBG-CV (#2) funding cannot exceed the percentage of clients that reside in Logan
- In order to be considered for CDBG-CV (#2) funding, a proposed activity shall meet at least one HUD National Objective, at least one Logan Strategic Objective, and shall be an eligible CDBG-CV activity.
- Logan CDBG-CV (#2) funding allocations are made by the Logan City Council and will adopt the final funding by resolution.
- Proposed activities are also subject to various, separate consents from the State Historic Preservation Office, US Fish & Wildlife Service, US Congress, US Department of Housing and Urban Development, and US Environmental Protection Agency. As such, significant delays which are out of the control of the City of Logan may delay the ability to officially announce funding and/or to commence the project.
- Availability of funding is subject to Congressional approval and award of funds.
- The recipient of CDBG-CV (#2) funding shall enter into a Subrecipient Agreement with the City of Logan and must comply with any HUD certification requirements and other federal and state regulations mandatory to the operation of the program, as well as all Logan CDBG procedures. Failure to submit any documentation requested by the City of Logan to demonstrate program compliance may result in administrative sanctions up to and including rescission of funding.
- Logan CDBG sub-awards are paid on a reimbursement basis.
- Public comment should be made in writing to the CDBG Coordinator or Logan City Council during the public review/comment period.
- Applicant organizations must have a local business license from the City of Logan (435-716-9230), a DUNS number from Dun and Bradstreet (free at www.dnb.com), and, as applicable, an FEIN and 501(c)(3) from the IRS (www.irs.gov) and be registered the Utah Div. of Corporations.
- Expenditures related to the activity may not be made until clearance is granted from the CDBG Coordinator. Reimbursements for expenses cannot be made until federal funding is received.
- Davis Bacon requirements must be met for all construction activities.
- Logan City CDBG-CV (#2) will not fund any salaries with sub-awards.

| SECTION V: Certifications | |
|---|--|
| I certify and acknowledge that: (Mark each box with an 'X' to demonstrate concurrence; failure to mark a box and sign at the bottom shall constitute an ineligible application.) | |
| <input type="checkbox"/> | I am duly authorized by the applicant organization to submit this application on behalf of the applicant organization. |
| <input type="checkbox"/> | The information provided on this form and accompanying application materials is verifiable and accurate to the best of my knowledge. |
| <input type="checkbox"/> | The application contacts will produce information to the CDBG Coordinator to further verify or expound on this CDBG-CV application in a timely manner. |
| <input type="checkbox"/> | There are no outstanding violations related to myself, the applicant organization or its property, with city divisions, including but not limited to: Building Safety, Neighborhood Improvement, Planning. |
| <input type="checkbox"/> | The applicant organization will permit pictures and other information about this application to be published or otherwise shared for purposes related to the Logan CDBG program. |
| <input type="checkbox"/> | I have reviewed Section IV: CDBG-CV (#2) Program Information and understand the requirement contained within. |

| | | |
|---|---------------------|-------------|
| | | |
| Representative for the Applicant Organization; Signature | Printed Name | Date |