

STATE OF WISCONSIN
Department of Administration



**COMMUNITY DEVELOPMENT BLOCK GRANT -
PUBLIC FACILITIES for ECONOMIC DEVELOPMENT
(CDBG-PFED)**

GRANT APPLICATION



Revised 1/23/2017

CDBG-PFED PROGRAM CONTACT INFORMATION

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PLEASE NOTE:

CDBG-Public Facilities for Economic Development Grant Application materials can be downloaded from the Bureau of Community Development section on the Division of Housing, Energy, and Community Resources website at:

<http://doa.wi.gov/Divisions/Housing/Bureau-of-Community-Development/CDBG-PFED-Program-Overview/#CDBGPFEDapplication>

Please **download the electronic document(s) prior to application submission** to ensure that you are referencing the most up-to-date version of the application as periodic revisions may have been made since this copy was printed.

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Wisconsin Department of Administration

APPLICATION

Community Development Block Grant - Public Facilities (CDBG-PFED)

PART 1 – GRANT REQUEST		
Grant Request Amount: \$	Applicant's Local Match: \$	Total Project Cost: \$
	Applicant's Non-Local Match: \$	
Project Title:		
Brief Project Description:		
If Project receives CDBG funding: Project Begin Date (MM/YY): / / Project Completion Date (MM/YY): / /		
The Proposed Project Budget has been attached to this application: <input type="checkbox"/> Yes <input type="checkbox"/> No A Budget Match Waiver has been attached to this application: <input type="checkbox"/> Yes <input type="checkbox"/> No		

PART 2 – APPLICANT INFORMATION		
APPLICANT (UGLG):	Population:	
Applicant Type: <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town <input type="checkbox"/> County	County:	
Senate District #:	Assembly District #:	
Joint Application? <input type="checkbox"/> No <input type="checkbox"/> Yes (If yes, list other unit[s] of government):		
Chief Elected Official (CEO):	Title:	
Clerk:		
Public Works Director:	Finance Director:	
Official Municipal Street Address:		
City, Zip:	DUNS #:	
CEO Phone: () -	CEO Fax: () -	FEIN:
CEO E-Mail:	Clerk E-Mail:	
Chief Elected Official Signature:		Date:
Application Contact		
Name:	Agency/Company:	
Mailing Address:		
Phone: () -	Fax: () -	E-Mail:

PREVIOUS CDBG ASSISTANCE

List All Previous CDBG-PF, CDBG-ED, CDBG-PLNG, CDBG-PFED, and CDBG-Housing Awards Received Since 2007:

Project:	Grant Agreement / Contract No:	Award Date:	Closeout Date:	Award Amount:

Did any previous CDBG award(s) monies fund part or all of the Public Facilities project for which you are applying today?

Yes No

PART 3 – INITIAL ELIGIBILITY

Provide or acknowledge the following to demonstrate initial application eligibility:

Yes No

- 1. Acknowledge that the applicant is a non-entitlement community that does not receive CDBG funds directly from the Department of Housing and Urban Development (HUD).
- 2. Applicant’s Citizen Participation Plan is attached.
- 3. Documentation of the first public hearing notice published in the newspaper, verifying that the public was given a minimum of 2 weeks (14 days) advance notice of the public hearing, is attached.
- 4. Public hearing meeting minutes or Citizen Participation Public Hearing Certification is attached.
- 5. Public hearing sign-in sheet(s) is attached.
- 6. Applicant’s authorizing resolution is attached.
- 7. Statement of Assurances is attached.
- 8. Lobbying Certification is attached.
- 9. Potential Fair Housing Actions are attached.
- 10. Acknowledge that if the applicant’s project is funded, the applicant will be required to complete an environmental review before the unit of general local government can receive grant funds.
- 11. If this project is funded, I/we acknowledge that Professional Services for Grant Administration will be properly procured in compliance with Federal, State, and local requirements.
- 12. Applicant certifies it is not on the federal debarment list (found at: www.sam.gov).
- 13 By initializing the Chief Elected Official (CEO) certifies that the eligibility information shown is complete and accurate.

Briefly describe your process for procuring a grant administrator and explain how it complies with Federal, State, and local procurement requirements:

||

Contact the Bureau of Community Development if any answer in this section is “No”

Briefly explain:

1. *How the project will meet the National Objective of low and moderate income job creation:*

PART 5 – PROJECT NEED

On the following page, concisely describe the community's need for the proposed project. Be sure to address each of the bullet points below and provide quantifiable data:

- Is this a new facility/site, expansion and/or acquisition?
- The current condition of the problem, the frequency it occurs and the effect(s) of the problem if left untreated.
- The extent to which completion of the proposed project will address the needs of the business.
- The scope of work (including a detailed project area description).
- Explain how jobs will be created and/or retained by the project.

Data or pertinent information that quantifies the need can be included in the narrative or as an attachment to this application.

Also provide a brief description of business benefiting from this project. Include:

- Business history, current function, products, services, etc.
- Description of operation and/or financial relationships with any parent or subsidiary and any potential changes in ownership due to this project.
- Current markets served, size, industry, trends, growth potential, etc.
- Market feasibility information and/or sales commitments to support sales or revenue projections.
- Impact analysis of how the project positively or negatively affects the community.

Limit your narrative to two (2) pages (pages 6-7 of this application) with not less than a 12-point font and ¾" margins.

||

||

PART 6 – COMMUNITY DISTRESS

<p>Median Household Income: (source of data: _____) (date that source data was published: _____)</p>	<p>\$ </p>
<p>Per Capita Property Value: (source of data: _____) (date that source data was published: _____)</p>	<p>\$ </p>
<p>Local Property Tax Rate: (source of data: _____) (date that source data was published: _____)</p>	<p> </p>

PART 7 – FINANCIAL NEED

Amount of Local Matching Funds Committed to Project: <i>(This is the amount of Applicant Funds on the Proposed Project Budget Page)</i> (Attach the completed Proposed Project Budget to the application)	\$
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If the Local Matching Funds amount is less than 10% of the Total Project Cost, has a waiver request from the UGLG CEO been attached to the application? <input type="checkbox"/> No	<input type="checkbox"/> Yes
--	------------------------------

Funding Source for Local Funds Committed to Project:

General Obligation (G.O.) Debt
 Revenue Bonds
 Other (briefly explain):

If G.O. Debt is Funding Source:	
G.O. Debt Capacity For 2017:	\$
Used G.O. Debt (to date):	\$
Anticipated used G.O. Debt For 2017 without CDBG Assistance:	
Anticipated used G.O. Debt For 2017 with CDBG Assistance:	
Future (within the next three years) G.O. Debt Obligations (Attach Resolution or Capital Improvement Plan to the application)	\$

For Water and Sewer Projects:	
(Attach current balance sheet of the Enterprise Statements to the application)	
Annual <u>water</u> charge calculated for a household using 70,000 gallons of water:	\$
Projected increase in the water charge with grant assistance:	% \$
Projected increase in the water charge without grant assistance:	% \$
Annual <u>sewer</u> charge calculated for a household using 70,000 gallons of water:	\$
Projected increase in the sewer charge with grant assistance:	% \$
Projected increase in the sewer charge without grant assistance:	% \$

PART 8 – PUBLIC BENEFIT/ECONOMIC DEVELOPMENT

Does the Applicant have an adopted Comprehensive Plan, Community Redevelopment Plan, or other long-range plan?

Yes:

Date the Plan was adopted or most recently revised: _____

Briefly explain, within the space provided, how this project is consistent with the goals and objectives of the Plan and attach a copy of the applicable sections of the Plan.

||

No

PART 9 – COMMITMENT OF MATCHING FUNDS

APPLICANT: _____

DATE: _____

Attach documentation of financial commitments and information to demonstrate the validity and reasonableness of budgeted costs.

Activity	CDBG Funds		Source of Matching Funds						Total	
			Applicant		Other Public Funds		Private Funds			
Acquisition – Land										
Acquisition – Building										
Building Improvements										
Center/Facility Construction										
Clearance – Site										
Curb and Gutter										
Electrical System Improvements										
Environmental Remediation										
Equipment										
Relocation										
Sanitary Sewer										
Storm Sewer										
Streets/Sidewalks										
Wastewater Treatment Facility										
Water										
Furnishings & Fixtures (match only)										
Engineering (match only)										
Administration										
Sub-Total(s):										

In addition to Applicant Match Funds, summarize the other Public and Private sources of project funding:

Signed Commitment Documents Included?

- Source: _____ Amount: \$ _____ Status: Pending Committed Yes No
- Source: _____ Amount: \$ _____ Status: Pending Committed Yes No
- Source: _____ Amount: \$ _____ Status: Pending Committed Yes No
- Source: _____ Amount: \$ _____ Status: Pending Committed Yes No

PART 10 – PROJECT MAP

Please provide a map of the proposed project area within the applicant's boundaries. Map should clearly show existing land uses in the surrounding area and location of the proposed activities.

PART 11 – CDBG – PFED BUSINESS BENEFICIARY INFORMATION		
Type of Business : <input type="checkbox"/> C Corp <input type="checkbox"/> S Corp <input type="checkbox"/> LLC <input type="checkbox"/> LLP <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Non Profit		
Legal Name: <input type="text"/>		
Trade Name:		
Address:		
City, State, Zip:	County:	
FEIN #: <small>(Federal Employee Identification Number –Tax ID or Social Security Number)</small>	State of Organization: <small>(Per Articles of Incorporation/Organization)</small>	
WWW:		
Tele. #:	Fax #:	
CEO Name:	CEO Title:	
PART 12 – BUSINESS INFORMATION		
Date Established:	SIC or NAICS:	
Minority Owned: <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, the Minority Classification is: <input type="checkbox"/> Eskimo <input type="checkbox"/> Native <input type="checkbox"/> Hawaiian <input type="checkbox"/> Hispanic <input type="checkbox"/> Native American <input type="checkbox"/> Aleut <input type="checkbox"/> Asian-Indian <input type="checkbox"/> Asian-Pacifi <input type="checkbox"/> African American		
Women Owned: <input type="checkbox"/> Yes <input type="checkbox"/> No	Owned by a Person with a Disability: <input type="checkbox"/> Yes	
Foreign Owned: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: Country:	% of ownership:	
Primary Product or Service:		
Total Company Employment:	Full Time:	Part Time:
Total Wisconsin Employment:	Full Time:	Part Time:
Total Project Location Employment:	Full Time:	Part Time:
% of Project Location Full Time Employees that are WI Residents:		
Provide the Following for All Other Existing Wisconsin Operations:		
Address(Street, City, Zip):		Number of Full Time Employees:
-----		-----
-----		-----

PART 13 – PROJECT INFORMATION	
Project Location: <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village Of:	County:
Project Street Address	Square Footage of Project Facility(ft ²):
PART 14 – PROJECT TIME-LINE	
Secure all financing by:	Break ground/lease by:
Begin production by:	Achieve full production by:

PART 15 – PROJECTED EMPLOYMENT

Full Time Positions Only (2,080 hours/year)

Existing Positions		Position Title	Positions Created ¹				
			Year One		Year Two	Year Three	Total
Avg. Hourly Wage	Number of Existing		Avg. Starting	Number Created	Number Created	Number Created	Number Created
		TOTAL					

PART 16 – BENEFIT INFORMATION

Check the Health Insurance Provided to Employees:	<input type="checkbox"/> None	<input type="checkbox"/> Individual	<input type="checkbox"/> Family
Percent of Health Insurance Premium Paid by Company:		%	%
Average Deductible Paid by Employee:		\$	\$
Other Benefits Provided to the Majority of the Workforce: <input type="checkbox"/> Life Insurance <input type="checkbox"/> Pension <input type="checkbox"/> 401(k) <input type="checkbox"/> Childcare <input type="checkbox"/> Tuition Reimbursement <input type="checkbox"/> Other: (Specify)			
Will new employees be provided with substantially the same benefits as described above: <input type="checkbox"/> Yes <input type="checkbox"/> No			

¹Definitions:

A full-time employee is an employee working an average of at least 40 hours per week/annually. This does not include part-time or contract employees. A retained job is one that would be lost if the project does not go forward.

Minority is defined for employment purposes as African-American, Hispanic, Native American, Asian Indian, Asian or Pacific Islander.

A maintained job is one that will remain even if the project does not go forward.

Low- and moderate-income person is a member of a family having an income equal to or less than the Section 8 low-income limit established by HUD. Unrelated individuals will be considered as one-person families for this purpose. (CFR § 570.3)

PART 17-SUMMARY OF PROJECTED FINANCIAL INFORMATION

FYE	/	/	/	/
Total Sales				
Net Income				
Total Assets				
Total Liabilities				
Equity				

WI Income Tax Liability (C Corporations Only)			
--	--	--	--

PART 18-SUMMARY OF HISTORICAL FINANCIAL INFORMATION			
FYE	/	/	/
Total Sales			
Net Income			
Total Assets			
Total Liabilities			
Equity			
WI Income Tax Liability (C Corporations Only)			

PART 19 – LEGAL INFORMATION*	YES/NO
Has the applicant, any owner, officer, subsidiary, affiliate or beneficiary been involved in any lawsuits in the last 5 years or have any lawsuits pending?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the applicant, any owner, officer, subsidiary, affiliate or beneficiary ever been involved in any bankruptcy or insolvency proceedings or have any proceedings pending?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the applicant, any owner, officer, subsidiary, affiliate or beneficiary had any civil or criminal charges in the last 5 years that could have a material adverse impact on the project or have any charges pending?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the applicant, any owner, officer, subsidiary, affiliate or beneficiary have any outstanding tax liens?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the applicant, any owner, officer, subsidiary, affiliate or beneficiary ever been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the applicant, any owner, officer, subsidiary, affiliate or beneficiary ever been convicted of or enjoined from any violation of state or federal securities law?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the applicant, any owner, officer, subsidiary, affiliate or beneficiary ever been a party to any consent order or entry with respect to an alleged state or federal securities law violation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the applicant, any owner, officer, subsidiary, affiliate or beneficiary ever been a defendant in a civil or criminal action?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Please attach a detailed explanation of any YES responses.	
*An Application will be deemed ineligible and denied based on the falsification of information	

PART 20 – MARKET INFORMATION	
THREE MAJOR CUSTOMERS:	% OF SALES
1.	
2.	
3.	
THREE MAJOR COMPETITORS	LOCATION (City and State)
1.	
2.	
3.	

Provide a brief market analysis describing the current market, trends, growth potential, etc. Include market feasibility information and/or sales commitments to support sales or revenue projections.

PART 21 – CERTIFICATION STATEMENT

1. Certifies that to the best of its knowledge and belief, the information being submitted to Department of Administration (DOA) is true and correct.
2. Certifies that the applicant is in compliance with all laws, regulations, ordinances and orders of public authorities applicable to it.
3. Certifies that the applicant is not in default under the terms and conditions of any grant or loan agreements, leases, or financing arrangements with its other creditors.
4. Certifies that the Department is authorized to obtain a credit check and Dun and Bradstreet on the applicant, the business and/or the individual(s).
5. Certifies that the applicant has disclosed and will continue to disclose any occurrence or event that could have an adverse material impact on the project. Adverse material impact includes but is not limited to lawsuits, criminal or civil actions, bankruptcy proceedings, regulatory intervention or inadequate capital to complete the project.
6. Understands that unless it qualifies as trade secret, all information submitted to DOA is subject to Wisconsin's Open Records Law. Please complete Attachment 12 to designate any information as trade secret.

Signature: _____ Date: _____
(Authorized Representative)

Name: _____ Title: _____
(Authorized Representative)

ATTACHMENTS

Attachments for the CDBG-PFED Application are on the following pages.

ATTACHMENT 1: CITIZEN PARTICIPATION PLAN

In order to apply for CDBG-PFED funds, the applicant must have in place a Citizen Participation Plan. This plan, adopted by resolution by the applicant, identifies the steps to be taken to involve area residents in the development of the CDBG-PFED application. If the applicant does not have a Citizen Participation Plan already in place, the Citizen Participation Plan should be adopted as one of the first steps in applying for CDBG-PFED funds. Minutes of the meeting adopting the Citizen Participation Plan, along with the Plan itself, must be submitted with this application. Alternatively, the resolution adopting the Plan, along with certification by the Clerk, can be submitted.

The following three pages contain the suggested Citizen Participation Plan format. Most of the blank spaces should be filled in with the name of the applicant (e.g., the Village of Grantville.) Some blanks require other information. For example, the first paragraph in "NOTICE OF HEARINGS" should be completed with the name of the applicant's local newspaper or the location of official notice postings.

****Please include a copy of the public hearing notice(s), meeting minutes, and sign-in sheet(s)***

ATTACHMENT 1A: CITIZEN PARTICIPATION PLAN

Community Development Block Grant Program

(Name of UGLG/Community)

PURPOSE

In order for the CDBG Program to operate effectively, and to address the needs of the citizens of the _____ (county, city, village, town; circle one), the entire population must be kept informed. The decision-making process must be open and consistent with State and Federal regulations. To accomplish this, the following plan will be followed:

PROGRAM OVERSIGHT

1. The _____ (county, city, village, or town; circle one) shall create a Citizen Participation Plan Committee, members of which shall be appointed by the Chief Elected Official and confirmed by the _____ (county, city, village, or town; circle one) Board/Council. This Committee shall be responsible for implementation of the Citizen Participation Plan, as well as offering guidance in preparation of the grant application.

The _____ (county, city, village, or town; circle one) shall oversee the preparation of the Community Development Block Grant.

2. To insure responsiveness to the needs of its citizens, the _____ (county, city, village, or town; circle one) shall provide for and encourage citizen participation. Particular emphasis shall be given to participation by persons of low- to- moderate income (LMI).

CITIZEN PARTICIPATION

1. The _____ (county, city, village, or town; circle one) shall establish a committee composed of persons representative of the _____ (county, city, village, or town; circle one) demographics. This committee must include at least one LMI person.

The committee members should also include representatives from the local government, real estate, banking and labor communities whenever possible. This committee shall assume responsibility for coordinating all required elements of the Citizen Participation Plan. All committee members must be residents of the _____ (county, city, village, or town; circle one).

NOTICE OF HEARINGS

1. Official notice of hearings will be by public notice in the _____ (Name of local newspaper) at least two full weeks prior to the hearing. In addition, the public notice shall be posted at the _____ (county, city, village, or town; circle one) municipal building. These notices will include time, place and date of meetings, as well as a brief agenda.
2. All notifications of meetings and available assistance must be worded in such a way as to encourage LMI participation. In addition, all meeting announcements shall include where, and during what time, information and records relating to the proposed and actual use of funds may be found.

REQUIRED PUBLIC HEARINGS

Public hearings shall be held to obtain citizen views and to enable them to respond to proposals at all stages of the CDBG Program, including the development of needs, the review of proposed activities and the review of program performance. Hearings shall be held after adequate notice, at times and locations convenient to potential or actual beneficiaries and with accommodations for the handicapped, and, if needed, for non-English speaking persons.

1. The first hearing will receive citizens' views and provide an explanation of:
 - a. Community development needs, objectives, and strategies.
 - b. The CDBG program including goals, objectives, application process, amount of funds available, timetable, eligible activities, etc.
2. The second hearing will receive citizens' views and provide a review of the performance of the funded activities.
3. The first public hearing shall be held during the development of the application for funds. The second public hearing shall be held during the implementation of the program. The _____ (county, city, village, or town; circle one) will attempt to have at least one of the public hearings in the service area (if applicable).

PROGRAM INFORMATION/FILES/ASSISTANCE

1. Technical assistance will be provided to any citizen who requests information about program requirements. Assistance with _____ (type of assistance available) will be provided by _____ (county, city, village, or town; circle one) staff in the Community Development Department. A _____ (county, city, village, or town; circle one) staff member will meet with citizens on request.

To request assistance,

_____ (procedure used to request assistance).

2. The _____ (county, city, village, or town; circle one) will maintain, in the _____ (location), a record of all citizen participation efforts including minutes of meetings, newspaper clippings, and copies of notices and brochures.
3. Citizens will be invited to make proposals regarding the application. If suitable proposals are submitted in writing, a written response will be provided within 15 days. Every effort will be made to respond to all proposals prior to the final action on the subject.
4. Citizens may petition or request in writing assistance or changes. The _____ (county, city, village, or town; circle one) staff will respond to all such requests within 15 days after the _____ (county, city, village, or town; circle one) _____ (committee name) has met to discuss the request.

COMPLAINTS

The _____ (county, city, village, or town; circle one) will handle citizen complaints about the program in a timely manner. By federal regulation the _____ (county, city, village, or town; circle one) will respond in writing to all written letters of complaint within 15 days after receipt of the complaint. The nature and disposition of verbal complaints will be reported in a complaint log. The first contact for complaints should be made to the _____.

In addition to the above procedure, any citizen wishing to object may complain directly to the following address:

Director of Bureau of Community Development
DOA Division of Housing, Energy, and Community Resources
101 E Wilson Street, 6th Floor
PO Box 7970
Madison, WI 53707-7970

NON-ENGLISH SPEAKING PERSONS

The _____ (county, city, village, or town; circle one) will regularly survey the municipality to identify non-English speaking persons and will make all special efforts to assure them equal opportunity in the citizen's participation process.

ATTACHMENT 2: RESOLUTION AUTHORIZING SUBMISSION OF A COMMUNITY DEVELOPMENT BLOCK GRANT APPLICATION (SAMPLE)

Relating to the _____ of _____ participation in the
(County, City, Village, or Town) *(Name)*
Community Development Block Grant program.

WHEREAS, Federal monies are available under the Community Development Block Grant program, administered by the Wisconsin Department of Administration (DOA)- Division of Housing, Energy, and Community Resources (DEHCR) for the purpose of the provision or economic development activities; and

WHEREAS, after public meeting and due consideration, the

(Name of Appropriate Committee)
has recommended that an application be submitted to DEHCR for the following project(s):
_____ and

WHEREAS, it is necessary for the

_____ to
(County Board, City Council, Village Board, Town Board)
approve the preparation and filing of an application for the
_____ to receive funds from this program; and

(County, City, Town, Village)
WHEREAS, the _____ has reviewed the need
(County Board, City Council, Village Board, Town Board)
for the proposed project(s) and the benefit(s) to be gained there from;

NOW, THEREFORE, BE IT RESOLVED, that the _____
(City Council, County Board, Village Board, Town Board)
does hereby approve and authorize the preparation and filing of an application for the
above-named project(s); and that _____ is hereby authorized to sign

(Council Pres., Mayor, Board Chair, Village Pres.)
all necessary documents on behalf of the _____; and that authority is hereby
(County, City, Village, Town)

granted to _____ to take the necessary steps to prepare and file the
(Name of Appropriate Committee)
application for funds under this program in accordance with this resolution.

ADOPTED on this ____ day of _____, 20 ____.

ATTEST: _____
(Signature of Clerk)

The governing body of _____ has authorized the above resolution
(County, City, Village, Town)

by Resolution No. _____, dated _____

(Signature of Chief Elected Official)

ATTACHMENT 3: LOBBYING CERTIFICATION FROM THE MUNICIPALITY

The undersigned certifies, to the best of his/her knowledge and belief, that:

1. No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.
2. If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this federal contract, grant, loan, or cooperative agreement, the undersigned shall complete Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
3. The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

(Name of Local Government)

(Signature of Chief Elected Official)

(Date)

(Signature of Clerk)

(Date)

ATTACHMENT 4: STATEMENT OF ASSURANCES

I, _____, _____, of _____
(Name of chief elected official) (Title) (Community Name)

in _____ County certify that the _____
(Community name)

[Initial each item]

- 1.____ Has authorized its Chief Elected Official or Administrator (City, Village, Town or County) to submit the application, sign contracts, and conduct other business related to the proposed activity if funded.
- 2.____ Has identified its housing and community development needs, including those of low- and moderate-income persons and the activities to be undertaken meet such needs.
- 3.____ Will conduct and administer its program in conformance with the Civil Rights Act of 1964 and the Fair Housing Act, and affirmatively further fair housing.
- 4.____ Will minimize displacement as a result of activities associated with CDBG funds, and will follow an adopted residential anti-displacement and relocation assistance plan.
- 5.____ Will not use special assessments or fees to recover the capital costs of CDBG funded public improvements from low- and moderate-income owner occupants.
- 6.____ Will comply with 24 CFR 570.608 regarding notification, inspection, testing, and abatement procedures concerning lead-based paint.
- 7.____ Has adopted and will enforce a policy prohibiting use of excessive force by law enforcement agencies within its jurisdiction against any individuals engaged in nonviolent civil rights demonstrations in accordance with Section 519 of Public Law 101144.
- 8.____ Has a policy of enforcing applicable state and local laws against physically barring entrance to or exit from a facility or location which is the subject of nonviolent and civil rights demonstrations.
- 9.____ Will not enter into a contract with any entity that is debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation.
- 10.____ Is currently in compliance with terms and conditions of all past and/or active CDBG awards and/or contracts.

- 11.____ Will not use CDBG funds to directly assist a business, including a business expansion, in the relocation of a plant, facility, or operation from one labor market area (LMA) to another LMA if the relocation is likely to result in a significant loss of jobs in the LMA from which the relocation occurs, in accordance with 24 CFR 570.210.
- 12.____ Acknowledges that the project cannot commence prior to the grant award and certain procedures must first be taken, including but not limited to:
- Completing the environmental review process;
 - Requesting federal wage rates if applicable;
 - Establishing base employment levels for job related projects;
 - Enter into a development agreement with the participating business; and
 - Develop a system for tracking job retention and/or creation for LMI persons if applicable.
- 13.____ Will comply with all the provisions of the Community Development Block Grant Program and will maintain documentation of compliance with the above certifications; including but not limited to Section 3 reporting, employee self-certifications, Davis Bacon wage data, and environmental review.
- 14.____ Acknowledges that job creation/retention under the terms of the grant agreement is required. Failure to create jobs or provide documentation may result in a repayment of CDBG funds.

I certify that to the best of my knowledge and belief, the information being submitted to DOA is true and correct.

Signature of Chief Elected Official

Date

Signature of Clerk

Date

ATTACHMENT 5: POTENTIAL FAIR HOUSING ACTIONS

According to 24 CFR 570.487(b), the Grantee must take some action to affirmatively further fair housing during the contract period. **Circle the number of at least three (3) of the actions below.** If your project is funded, the action circled will be included in your contract timetable and you will implement it during that period. **Fair housing actions may include, but are not limited to the following:**

1. Enact, strengthen, or advertise a local fair housing law;
2. Make area-wide zoning revisions to facilitate the dispersal of multi-family housing outside of minority-concentrated areas;
3. Initiate or fund any studies examining current housing opportunities for minority persons, handicapped persons, and families with children and have these studies form the basis of an affirmative action program providing greater housing opportunities for minorities, handicapped persons and families with children;
4. Send letters from the chief elected official of the local government to those in the business of selling, renting, or financing housing, encouraging them to adhere fully to the fair housing law;
5. Have the local governing body or chief elected official publicly endorse the principle of fair housing and of adherence to the fair housing law in the form of a proclamation, resolution, or similar publicized statement of importance;
6. Improve community facilities and public services in racially integrated neighborhoods to help preserve their mixed character;
7. Display a fair housing poster or provide fair housing information at an appropriate public place;
8. Initiate a public education program on fair housing, involving, for example, representatives of fair housing groups, human relations' bodies and minority organizations, the real estate industry, and government, through the local media. This could include talks on the community's housing opportunities;
9. Fund a fair housing organization (such as a local housing authority) to conduct studies and/or to aggressively investigate rental and/or realtor practices;
10. Suggest the use of affirmative marketing and advertising practices by private developers as a condition for obtaining local licenses and permits; and
11. Enlist the participation of local associations (realtors, real estate brokers, home builders, and mortgage lenders) in approved voluntary programs to promote affirmative fair housing marketing and to review mortgage credit and underwriting criteria that may have an adverse impact on minorities, women, handicapped persons, and families with children.

Grantee Name: _____ Date Action to be completed: _____

Office of Fair Housing and Equal Opportunity: <http://www.hud.gov/offices/ftheo/>
Fair Housing ads and other materials: <http://www.fairhousinglaw.org/>

ATTACHMENT 6: DAVIS BACON/FEDERAL LABOR STANDARDS LAW

1. Will CDBG-PFED funds be used to pay for construction costs?

No Yes

If yes, Davis Bacon applies to the project. Submit a copy of the construction bid that clearly indicates Davis Bacon rates were used in developing project costs.

2. Will CDBG-PFED funds be used to pay for equipment?

No Yes

If yes, provide copies of the cost estimates for each piece of equipment to be financed with CDBG-PFED funds on the letterhead of the company, from which it will be purchased. This cost estimate must break out the cost of each item to be purchased and the installation cost of the item.

3. Will CDBG-PFED funds be used to pay for equipment installation costs?

No Yes

If yes, Davis Bacon may apply to the project, depending on the outcome of a four part test. The Division of Energy, Housing, and Community Resources's labor standards officer will determine the applicability based on the four factors below:

- 1. The cost of the equipment itself compared to the cost of the installation.*
- 2. The existence of a high absolute cost of equipment installation.*
- 3. The necessity for structural modifications to accommodate the equipment installation.*
- 4. The necessity for updated electrical, plumbing or gas lines to facilitate equipment installations.*

4. If CDBG-PFED funds will be used solely to pay for working capital, then Davis Bacon does not apply to the project.

ATTACHMENT 7: FEDERAL EQUAL EMPLOYMENT OPPORTUNITY (EEO-1) REPORT

All employers with 15 or more employees are covered by Public Law 88-352 and are required to keep employment records. Certain employers are required by law to file annual EEO-1 (Standard Form 100) reports based on its number of employees and federal contracting activities. Following are the thresholds for filing annual EEO-1 Reports. Please mark the appropriate box that the business falls under:

- Private employer with 100 or more employees.
- Private employer with fewer than 100 employees but is owned or affiliated with another company so the group legally constitutes a single enterprise and the entire enterprise employs a total of 100 or more employees.
- Private employer with 50 or more employees that is a prime contractor or first-tier subcontractor with the federal government and has a contract, subcontract, or purchase order amounting to \$50,000 or more (Does not include this CDBG-PFED project).
- Exempt from filing an EEO-1 Report.

These reports are due no later than September 30. Please submit a copy of the business's most recent EEO-1 Report it has filed with the Federal government, unless it is exempt.

ATTACHMENT 8: ACQUISITION, RELOCATION AND DEMOLITION QUESTIONNAIRE

UGLG/Community: _____ Project: _____

Program: _____ Date Submitted: _____

This section will be used by the Division of Housing, Energy, and Community Resources to determine if you have adequately planned and budgeted for acquisition, relocation, down payment assistance, rehabilitation and demolition activities. Requirements are referenced in the Uniform Relocation and Real Property Acquisition Policies of 1970, as amended (URA) and Section 104(d) of the Housing and Community Development Act (Barney Frank Amendment).

Answer the following Acquisition, Relocation, Demolition, and Conversion questions; Yes, No, or NA:

1. Voluntary Acquisition of
 - Permanent easement
 - Vacant land
 - Land and building
 - Will tenants be, or have they been, displaced?*

2. Involuntary Acquisition of
 - Permanent easement
 - Vacant land
 - Land and building
 - Are any units occupied? If yes,*
 - Relocation assistance will be provided or has been provided
 - Residential occupant is low- and moderate-income

3. Donation of
 - Permanent easements
 - Vacant land
 - Land and building
 - Tenants will be displaced or have been displaced
 - Tenant(s) is residential occupant and is low- and moderate-income

4. Demolition of residential units or conversion/rehabilitation of residential unit to another use
 - Unit is occupiable
 - Unit rents or would rent at or below the Fair Market Rent
 - Unit to be replaced
 - If "yes" to any of the three questions above, attach documentation required and listed in your Uniform Relocation Plan.*
 - If "no",*
 - Unit is not occupiable and evidence is attached

Please note: CDBG projects are subject to State and Federal acquisition/relocation/demolition requirements. If you answered "yes" to any of the questions above, please contact the Acquisition/Relocation Specialist in the Bureau of Community Development to discuss the applicability of these requirements to the proposed project.

ATTACHMENT 9: ENVIRONMENTAL REVIEW RECORD CHECKLIST

All recipients of CDBG assistance must prepare an Environmental Review Record (ERR), which is a file containing all the environmental information to the project.

I. Please identify who WILL prepare and complete the ERR:

II. Check which category the project falls under:

- Exempt
- Categorically Excluded Not Subject to 58.5
- Categorically Excluded Converted to Exempt
- Categorically Excluded
- Subject to an Environmental Assessment

III. Provide the date of or expected date of the Certification Letter from the Department:

For additional information on the ERR process, please consult the Implementation Manual or contact Doug Brethauer at (608) 267-2712 or at DOAEnvironmentalDesk@wisconsin.gov.

ATTACHMENT 10: EMPLOYMENT PROFILE CERTIFICATIONS AND FORMS

BUSINESS JOB CREATION COMMITMENT LETTER (sample)

To be completed by business owner/ UGLG

Date: _____

Dear _____ (Chief Elected Official of Applicant Community):

This letter will confirm my/our commitment to move forward with the development of (Project Name).

This project includes _____
(list activities) and the creation/retention of _____ (number) full-time FT positions.

We/I will spend no less than \$_____ on the total development of this project. All on-site and off-site project costs should be included in the summary below. The financing is proposed as follows:

Private Lender	\$ _____
Equity	\$ _____
Community Development Block Grant	\$ _____
Other	\$ _____
Other	\$ _____
TOTAL	\$ _____

Development of the project will allow the current employment of _____ to increase to _____ 24 months after project completion for a net gain of _____ new full-time FTE positions. Of these new jobs, it is our goal to employ at least 51 percent persons from low- and moderate-income households (LMI) and _____ percent minorities, recognizing that some persons may qualify to meet the goal for both categories. Also, any commitment to a job training program should be indicated, if applicable.

We/I understand that the goal of the Community Development Block Grant Program is to benefit persons of LMI households. An LMI household is defined as 80 percent of the median household income for the employee’s specific family size for the county area in which the project will be located. The project is defined as all line items listed in the application and includes all aspects necessary to the successful completion. Local officials have provided the business with the low- and moderate-income figures for _____ County.

In order to meet the national objective of the Community Development Block Grant Program, 51 percent of the jobs created and/or retained by the project must be taken by or made available to persons of LMI households. Therefore, the undersigned business agrees to maintain the following job creation and/or retention documentation for each employee interviewed, or for existing employees if jobs are claimed as retained:

- name, address and social security number
- household size;
- household income range; and
- employee signature.

The following efforts will be used by the business to ensure that LMI persons receive first consideration for open positions in the company. (Check all that apply)

- _____ List positions on Job Center of Wisconsin
- _____ List positions with the local Workforce Development Board
- _____ List positions with the local Wisconsin Works (W2) Agency
- _____ List positions with the local Technical College
- _____ List positions with the local Veterans Services office
- _____ List positions with the local Community Action Agency

If 51 percent of the jobs created and/or retained are not taken by persons of LMI households, the business will provide documentation to demonstrate that it followed acceptable procedures that, under normal circumstances, would result in at least 51 percent of the jobs being taken by persons of LMI households.

The business also understands that an acceptable alternative to the above described record keeping requirements is for the business to work through a state or federal employment agency, such as the local Department of Job and Family Services, to hire persons of LMI households. Such programs must screen the applicants and, upon completion of the hiring process, provide a final certification stating that at least 51 percent of the jobs were taken by persons of LMI households. **The business understands that there will be no exceptions or waivers to this requirement.**

As explained in the application, I/we would not proceed with this at this time without Community Development Block Grant assistance.

If the funding from Community Development Block Grant is approved, I/we are prepared to move forward quickly on this project, with completion no more than 12 months after approval of the Community Development Block Grant funds. I/we expect the project to commence on _____ and complete it by _____. I know of no reason why this project cannot go forward immediately {note any reasons for lack of immediate commencement}.

I certify that I have the authority to make this commitment on behalf of the company/business, and that we have the resources to finalize the financing package identified above and shown in the community's application for funds.

I also certify that _____ will provide the required job creation/retention documentation as outlined in the application instructions. I further certify that I have this authority to make this commitment on behalf of _____ (Business).

Sincerely,

Chief Executive Officer or Authorized Company Representative
(Signature)

(Typed Name and Title)

(Witness)

ATTACHMENT 10A: JOB CREATION TABLE

Job Title	Job Description			Determining Full-Time Equivalent Jobs			# of FT jobs	# of Jobs Available to LMI
	Avg. Hourly Wage	Special Skills Required? ¹	Post HS education required? ²	# of Employees (a)	Hrs/Wk per Employee (b)	Wks/Yr per Employee (c)		
				FT				
				PT				
				FT				
				PT				
				FT				
				PT				
				FT				
				PT				
				FT				
				PT				
				FT				
				PT				
				FT				
				PT				
TOTAL								

¹ Jobs made available to LMI persons must not require special skills that can only be acquired with substantial (i.e. one year or more) training or work experience.

² Education beyond high school must not be a pre-requisite for LMI positions, unless the business agrees to hire unqualified persons and train them.

ATTACHMENT 10B: JOB RETENTION TABLE

Job Title	Job Description			Current Employment				Retained Jobs	
	Avg. Hourly Wage	Special Skills Required? ¹	Post HS education required? ²	# of Employees (a)	Hrs/Wk per Employee (b)	Wks/Yr per Employee (c)	# of FT jobs	FT jobs to be Retained ⁴	# of Retained LMI jobs ⁵
				FT					
				PT					
				FT					
				PT					
				FT					
				PT					
				FT					
				PT					
				FT					
				PT					
				FT					
				PT					
				FT					
				PT					
TOTAL									

¹ Jobs made available to LMI persons must not require special skills that can only be acquired with substantial (i.e. one year or more) training or work experience.

² Education beyond high school must not be a pre-requisite for LMI positions, unless the business agrees to hire unqualified persons and train them.

⁴ In order for jobs to be considered *RETAINED*, there must be clear and objective evidence that permanent jobs will be lost without CDBG assistance.

⁵ To meet the LMI income jobs standard, 51 percent or more of the retained jobs must be either:

1. Known to be held by LMI persons at the time CDBG assistance is provided (attach ATTACHMENT 12c- Applicant/ Employee Self-Certification form for each employee for whom job retention is claimed), and/or
2. Jobs not known to be held by LMI persons, but which can be reasonably expected to “turn over” to LMI persons within two years. See page 10 for documentation to include.

ATTACHMENT 10C: EMPLOYEE SELF CERTIFICATION

STATE OF WISCONSIN COMMUNITY DEVELOPMENT BLOCK GRANT EMPLOYEE SELF CERTIFICATION

Dear Applicant/Employee:

(Enter Business or UGLG name) is collecting the following information as a result of participating in the U.S. Housing and Urban Development's (HUD) Community Development Block Grant (CDBG) program. To meet federal regulations, (Enter Business or UGLG Name) is required to collect statistical data on your family income, race/ethnicity, and employment status. This information is reported to HUD and eventually used by the U.S. Congress to measure the effectiveness of the CDBG program. Your name and personal information will be kept private, and your income, race and unemployment status information only shared with the federal government anonymously. **It is only through your cooperation that your community can benefit from this federal program.**

INSTRUCTIONS:

Please answer questions 1, 2, and 3, then sign and date the form certifying the information is correct. Your information can only be accepted if the form is completed in full.

1.) Please indicate your current family income in the following table. "Family" means all related persons in your household.

Please Circle # of Persons in your Family	FAMILY INCOME CATEGORY			
	Please check your family income in the same row as the number of persons in your family.			
1	___ \$0 - \$0	___ \$0 - \$0	___ \$0 - \$0	___ Greater than \$0
2	___ \$0 - \$0	___ \$0 - \$0	___ \$0 - \$0	___ Greater than \$0
3	___ \$0 - \$0	___ \$0 - \$0	___ \$0 - \$0	___ Greater than \$0
4	___ \$0 - \$0	___ \$0 - \$0	___ \$0 - \$0	___ Greater than \$0
5	___ \$0 - \$0	___ \$0 - \$0	___ \$0 - \$0	___ Greater than \$0
6	___ \$0 - \$0	___ \$0 - \$0	___ \$0 - \$0	___ Greater than \$0
7	___ \$0 - \$0	___ \$0 - \$0	___ \$0 - \$0	___ Greater than \$0
8 or more	___ \$0 - \$0	___ \$0 - \$0	___ \$0 - \$0	___ Greater than \$0

2.) Please check the box that identifies your race.

Single Race:

- White
- Black/African American
- Asian
- American Indian/Alaskan Native
- Native Hawaiian/Other Pacific Islander
- Other

Multi-Racial Identifiers:

- American Indian/Alaskan Native and White
- Asian and White
- Black/African American and White
- American Indian/Alaskan Native and African/American
- Other Multi-Racial

3.) Please answer these questions:

- Do you consider yourself as being of Hispanic ethnicity? Yes No
- Are you currently unemployed or were you unemployed prior to employment with this company? Yes No
- Are you a female head of household? Yes No

Date Hired: ___ / ___ / ___

I certify that the information provided above is correct to the best of my knowledge

_____ / ___ / ___

EMPLOYER/LOCAL GOVERNMENT USE ONLY (ALL SECTIONS ARE MANDATORY)

Position Details

Full Time Part Time (FTE: _____) Employer-Sponsored Healthcare Plan Offered

Position Class

<input type="checkbox"/> Official/Manager	<input type="checkbox"/> Professional	<input type="checkbox"/> Office/Clerical
<input type="checkbox"/> Sales	<input type="checkbox"/> Technician	<input type="checkbox"/> Craft Worker/Skilled
<input type="checkbox"/> Operative/Semiskilled	<input type="checkbox"/> Laborer/Unskilled	<input type="checkbox"/> Service Worker

Job Category Definitions

1. **Officials or Managers** - Occupants requiring administrative personnel who set broad policies, exercise overall responsibility of execution of these policies, and individual departments or special phases of a firm's operations. This includes: Officials, Executives, middle management, plant managers and superintendents, salaried supervisors who are members of management, purchasing agents and buyers, and kindred workers.

2. **Professional** - Occupants requiring either college graduation or experience of such kind and amount as to provide a comparable background includes: accountants and auditors, airplane pilots and navigators, architects, artists chemists, designers, dietitians, editors, engineers, lawyers, librarians, mathematicians, natural scientists, registered professional nurses, professional and labor relations workers, physical scientists, physicians, social scientists, teachers, and kindred workers.

3. **Technicians** - Occupants requiring a combination of basic scientific knowledge and manual skill which can be obtained through about 2 years of post-high school education such as is offered in many technical institutions and junior colleges, or through equivalent on the job training. This includes: computer programmers and operators, drafters, engineering aides, junior engineers, mathematic aides, licensed practical or vocational nurses, photographers, radio operators, scientific assistants, surveyors, technical illustrators, technicians (medical, dental, electronic, physical science) and kindred workers.

4. **Sales** - Occupants engaging wholly or primarily in direct selling. This includes: advertising agenda and sales workers; insurance agents and brokers; real estate agents and brokers; sales workers; demonstrators and retail sales workers; and sales clerks, grocery clerks and cashiers; and kindred workers.

5. **Office or Clerical** - Includes all clerical-type work regardless of level of difficulty, where the activities are predominantly non-manual though some manual work not directly involved with altering or transporting the products is included. This includes: bookkeepers, cashiers, collectors (bills and accounts), messengers and office helpers, office machine operators, shipping and receiving clerks, stenographers, typists, and secretaries, telegraph and telephone operators, and kindred workers.

6. **Craft Worker (skilled)** - Manual workers of relatively high level having a thorough and comprehensive knowledge of the processes involved in their work. Exercise considerable independent judgment and usually receive an extensive period of training. This includes: the building trades, hourly paid supervisors and lead operators (who are not members of management), mechanic and repairers, skilled machining occupations, compositors and typesetters, electricians, engravers, job setters (metal), motion picture projectionists, pattern and model makers, stationary engineers, tailors, and kindred workers.

7. **Operatives (semi-skilled)** - Workers who operate machines or other equipment or perform other factory-type duties of intermediate skill level which can be mastered in a few weeks and require only limited training. This includes: apprentices (auto mechanics, plumbers, electricians, machinists, mechanics, building trades, metal working trades, printing trades, etc.), operatives, attendants (auto service and parking), blasters, chauffeurs, delivery workers, dress makers and sewers (except factory), dryer's furnaces workers, heaters (metal), laundry and dry cleaning, operatives, milliners, mine operatives and laborers, motor operators, oilers and greasers (except auto), painters (except construction and maintenance), photographic process workers, boiler tenders, truck and tractor drivers, weavers (textile), welders and flame metals workers, and kindred workers.

8. **Laborers (unskilled)** - Workers in manual occupations which generally require no special training perform elementary duties that may be learned in a few days and require the application of little or no independent judgment. This includes: garage laborers; car washers and greasers; gardeners (except farm) and ground keepers; stevedores; wood choppers; laborers performing lifting, digging, mixing loading, and pulling operations; and kindred workers.

9. **Service Workers** - Workers in both protective and non-protective service occupations. This includes attendants (hospital and other institutions, professional and personal service, including nurses aides and orderlies), barbers, chairworkers and cleaners, cooks (except household), counter and fountain workers, elevator operators, firefighters and fire protection guards, door keepers, stewards, janitors, police officers and detectives, porters, waiters and waitresses, and kindred workers.

ATTACHMENT 10D: PAYROLL REPORTS

For applications in which a company is citing either maintained or retained employees, please include the payroll from the company's most recent pay period in order to document current employment levels. The payroll should indicate whether each employee is part-time or full-time. Social security numbers and other sensitive identifiers should be redacted.

ATTACHMENT 11: ESTIMATED PROPERTY VALUATION INCREASE FROM THE PROPOSED PROJECT

STATE OF WI TAXES	CURRENT YEAR (without project)	FIRST YEAR (after project completion)	SECOND YEAR	THIRD YEAR
Employee Income Taxes				
Commercial Activity Taxes				
LOCAL TAXES				
Municipal Corporate Income Taxes				
Real Estate Property Taxes				
Tangible Personal Property Taxes				

Are you applying for local tax exemptions? If so, indicate the expected percentage and term.



**WISCONSIN DEPARTMENT OF
ADMINISTRATION**

SCOTT WALKER
GOVERNOR
SCOTT A. NEITZEL
SECRETARY

Division of Energy, Housing and
Community Resources
101 E. Wilson Street, Floor 5
P.O. Box 7970
Madison, WI 53707-7970

ATTACHMENT 12
DESIGNATION OF CONFIDENTIAL AND PROPRIETARY INFORMATION

Information cannot be kept confidential unless it is a trade secret. Trade secret is defined in s.134.90 (1)(c), Wis. Stats. as follows: "Trade secret" means information, including a formula, pattern, compilation, program, device, method, technique or process to which all of the following apply:

1. The information derives independent economic value, actual or potential, from not being generally known to, and not being readily ascertainable by proper means by, other persons who can obtain economic value from its disclosure or use.
2. The information is the subject of efforts to maintain its secrecy that are reasonable under the circumstances.

We request that the following pages not be released:

Section	Page #	Topic

In the event the designation of confidentiality of this information is challenged, the undersigned hereby agrees to provide legal counsel or other necessary assistance to defend the designation of confidentiality and agrees to hold the state harmless for any costs or damages arising out of the state's agreeing to withhold the materials.

Failure to include this form in the Application may mean that all information provided as part of the Application will be open to examination and copying. The state considers other markings of confidential in the Application to be insufficient. The undersigned agrees to hold the state harmless for any damages arising out of the release of any materials unless they are specifically identified above.

Company Name	
Authorized Representative	
	Signature
Authorized Representative	
	Type or Print
Date	

This document can be made available in alternate formats to individuals with disabilities upon request.

ATTACHMENTS & SUPPORTING DOCUMENTATION

Applicants must include the following attachments with their application submission:

1. Authorizing Resolution (for Application Submission)
2. Citizen Participation Plan (CPP)
3. Adopting Resolution of the Citizen Participation Plan
4. A copy of the Citizen Participation Public Hearing Notice
 - a. (Proof of minimum 14-day advance notice)
5. Citizen Participation Public Hearing Certification Form
6. A copy of the Fair Housing Ordinance (Draft and date authorized)
7. Adopting Resolution of the Fair Housing Ordinance
8. Statement of Assurances
9. A copy of the Relocation Plan/Anti-Displacement Policy
10. Acquisition/Relocation/Demolition Questionnaire
11. Lobbying Certification
12. A copy of the Non-Violent Demonstration Policy (Draft and date authorized)
13. A copy of the Excessive Use of Force Policy (Draft and date authorized)
14. Fair Housing Actions (Specifying the three actions that the local community will undertake)
15. Proof of the Local Match Commitments
 - a. (I.e. copies of the signed award letters, signed loan paperwork, resolutions committing funds, and bank account statements)
16. Three years of business' historical financial statements
17. Balance Sheets – Cash Flow Statements – Income Statements – Assumptions
18. Most recent business' quarterly financial statements (if year-end was more than 90 days since submission)
19. Three years of business' financial projections
20. Balance Sheets – Cash Flow Statements – Income Statements – Assumptions

CDBG – PFED APPLICATION CHECKLIST			
1.	Applicant is an eligible Unit of General Local Government (UGLG)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2.	The proposed project meets a National Objective	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<ul style="list-style-type: none"> If the project will retain jobs, have you included 51% low- and moderate-income self certification forms? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<ul style="list-style-type: none"> If the proposed project addresses an urgent local need, have you attached the relevant supporting documents? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.	The proposed project activities are eligible for CDBG funding	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4.	Amount of CDBG funds requested is within program limits (\$500,000 or 50% of project costs, whichever is less)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5.	Applicant can demonstrate a match of 50% of project costs	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<ul style="list-style-type: none"> If the applicant cannot meet the minimum match requirement, have you requested the match requirement be waived and provided documentation of the need for waiver? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6.	Project will start within 6 months of award date and be completed within 24 months	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7.	A copy of the Citizen Participation Plan is attached	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8.	Copies of the public hearing notice(s), meeting minutes, and sign-in sheet(s) are attached	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9.	Authorizing Resolution signed by Chief Elected Official attached	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.	Statement of Assurances signed and attached	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11.	Lobbying Certification signed and attached	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12.	Potential Fair Housing Actions Form attached	<input type="checkbox"/> Yes	<input type="checkbox"/> No
13.	Project Need Narrative completed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
14.	Community demographic and distress data provided	<input type="checkbox"/> Yes	<input type="checkbox"/> No
15.	Information on local funding sources and match funds is provided and relevant supporting documents are attached	<input type="checkbox"/> Yes	<input type="checkbox"/> No
16.	Information on water and sewer rates provided	<input type="checkbox"/> Yes	<input type="checkbox"/> No
17.	Proposed project budget completed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
18.	Application includes information to demonstrate the project is consistent with local comprehensive or community/economic development plans	<input type="checkbox"/> Yes	<input type="checkbox"/> No
19.	Application includes information to demonstrate the project will occur in conjunction with another publically funded project or other collaborative efforts with community stakeholders	<input type="checkbox"/> Yes	<input type="checkbox"/> No
20.	Prior CDBG assistance form completed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
21.	All Business Beneficiary forms are completed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
22.	3 years historical financial statements (balance sheet, income statements, cash flow)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
23.	Most recent quarterly financial statements (not more than 90 days old)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
24.	Projected financial statements for the current and next three years (balance sheet, income statements and cash flow including all assumptions)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
25.	Estimated taxes from the proposed project	<input type="checkbox"/> Yes	<input type="checkbox"/> No
26.	All attachments are clearly labeled and cross-referenced in body of application	<input type="checkbox"/> Yes	<input type="checkbox"/> No
27.	Designation of confidential and proprietary information	<input type="checkbox"/> Yes	<input type="checkbox"/> No