**Wisconsin Department of Administration**

**Division of Energy, Housing and Community Resources**

**Community Development Block Grant CLOSE**

**Public Facilities (CDBG-PF)**

**Grant Application**

|  |  |  |
| --- | --- | --- |
| **PART 1 – GRANT REQUEST** | | |
| Grant Request Amount: $ | Other Funding, if applicable: $ | Total Project Cost: $ |
| Project Title: | | |
| Brief Project Description: | | |
| If Project receives CDBG funding:  Project Begin Date (MM/YY): / Project Completion Date (MM/YY): / | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PART 2 – APPLICANT INFORMATION** | | | | | | | | | | | | | | | |
| **APPLICANT** (Unit of General Local Government [UGLG]): | | | | | | | | | | | | | | | Population: |
| Applicant Type: City Village Town County | | | | | | | | | | | | | County: | | |
| Senate District #: | | | | | | | Assembly District #: | | | | | | | | |
| Joint Application? No Yes (If yes, list other unit[s] of government): | | | | | | | | | | | | | | | |
| Chief Elected Official (CEO): | | | | | | | | | | | | Title: | | | |
| Clerk: | | | | | | | | | | | | Title: | | | |
| Municipal Administrator (if applicable): | | | | | | | | | | | | Title: | | | |
| Treasurer/Finance Director: | | | | | | | | | | | | Title: | | | |
| UGLG Street Address: | | | | | | | | | | | | | | | |
| UGLG Mailing Address if different than above: | | | | | | | | | | | | | | | |
| City:: |  |  | | | Zip: | | | | | | | | | DUNS #: | |
| UGLG Phone: | | | | UGLG Fax: | | | | | | | | | | FEIN: | |
| UGLG E-Mail: | | | | | | | | Clerk E-Mail: | | | | | | | |
| If the UGLG contracted with a third party to complete this application, please provide the contract/invoice amount for application preparation services: $ | | | | | | | | | | | | | | | |
| **Chief Elected Official Signature:** | | | | | | | | | | | | | | | Date: |
|  | | | | | | | | | | | | | | | |
| **Application Contact** | | | | | | | | | | | | | | | |
| Name: | | | | | | | | | Title: | | | | | | |
| Firm/Company/Entity: | | | | | | | | | | | | | | | |
| Mailing Address: | | | | | | | | | | | | | | | |
| City: |  |  | | | | State; | | | |  |  | Zip: | | | |
| Phone: | | | Fax: | | | | E-Mail: | | | | | | | | |

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| **PART 3 – INITIAL ELIGIBILITY** |
| Provide or acknowledge the following to demonstrate initial application eligibility. *Contact the Bureau of Community Development if any answer in this section is “No”:*  **Yes No**   1. The Unit of General Local Government (UGLG) certifies that it is a non-entitlement community that does not receive CDBG funds directly from the Department of Housing and Urban Development (HUD). 2. UGLG’s *Citizen Participation Plan* is attached. 3. Documentation of the first public hearing notice, verifying that the notice was published in accordance with the UGLG’s *Citizen Participation Plan* in effect on the date of the first notice; and adequate advance notice was given for the public hearing in accordance with the UGLG’s *Citizen Participation Plan* in effect on the date of the first notice, ***and*** no less than the equivalent of a Class 2 Notice, is attached. 4. *Citizen Participation Public Hearing Certification* is attached. 5. Public Hearing Meeting Minutes [with attendees listed in the Minutes or on separate sign-in sheet(s) provided] are attached. 6. *Authorizing Resolution to Submit CDBG Application* is attached. 7. *Statement of Assurances* is attached. 8. *Lobbying Certification* is attached. 9. *Potential Fair Housing Actions* checklist is attached. 10. The UGLG acknowledges that if the project is funded, the UGLG will be required to complete the environmental review process ***before*** the UGLG begins construction and can receive grant funds. 11. The UGLG acknowledges that if the project is funded, professional services for grant administration will be properly procured in compliance with Federal, State, and local requirements. 12. the UGLG understands that the contract for professional services is between the UGLG and the professional services provider; the State is ***not*** responsible or a part of that relationship. 13. The UGLG acknowledges responsibility for ensuring that CDBG contract requirements are met. The fees paid for grant application preparation and grant administration may be published on DEHCR’s web page. 14. The UGLG certifies it is not debarred from receiving federal grant funds. 15. The UGLG understands that incomplete applications may be denied before review and denial of incomplete applications ***cannot*** be appealed.   **By initialing, the Chief Elected Official (CEO) certifies that the eligibility information noted above is complete and accurate.** |

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| **PART 4 – CDBG NATIONAL OBJECTIVE AND PROJECT BENEFICIARIES** | |  |
|  | 1. Will the proposed project benefit the entire community?  Yes  No   - How many total individuals will benefit from the project?  Of those who will benefit, how many individuals meet the qualification of LMI?   1. Which CDBG National Objective does your proposed project meet and which method was used to demonstrate National Objective compliance? (Answer using the checkboxes below.)   Benefit to Low- and Moderate-Income Persons  Area Benefit using HUD Local Government LMI Summary Data (only for projects having community-wide benefit or having primary benefit to multiple entire municipalities)  Area Benefit using HUD Census Block LMI Summary Data (for projects with a service area that is coterminous with one or more census blocks only)  Area Benefit using Income Survey Data (for projects for which an income survey was conducted to determine the LMI percentage of the service area)  Area Benefit using combination of HUD LMI Summary Data and Income Survey Data (for projects for which the LMI percentage calculation for the total service area was made by using the aggregate totals for the population and number of LMI persons from a combination of HUD LMISD for part of the service area and income survey data for the rest of the service area)  Limited Clientele - HUD presumed group:  (or if based on nature of project and location, provide justification below, and attach map detailing supporting information for service area)  Prevention/Elimination of Slum and Blight  Area Basis (Attach completed Slum and Blight Certification Form and supporting documents including map of service area)  Spot Basis (Attach completed Slum and Blight Certification Form and supporting documents including map of service area)  Urgent Local Need  HUD’s regulation found at 24 CFR 570.483 (d) and policy guidance in meeting a National Objective states that to qualify under the Urgent Local Need Objective the project activity must alleviate conditions that meet all of the following criteria:   * 1. Pose a serious and immediate threat to the health or welfare of the community; and   2. Are of recent origin or which recently became urgent, meaning that the conditions developed or became critical within 18 months preceding the certification; and   3. The local government is unable to finance the activity on its own, and other sources of funding are not available to carry out the activity.   Please note: Additionally, HUD’s guide to “*Meeting a National Objective*” states planning grants are not allowed under the Urgent Local Need objective and activities designated solely to prevent a threat will not qualify. Provide justification below. |
| ***For Urgent Local Need (ULN), briefly explain how the activity will alleviate conditions that:***   1. Pose a serious and immediate threat to the health or welfare of the community; and 2. Are of recent origin or which recently became urgent, meaning that the conditions developed or became critical within 18 months preceding the certification; and 3. The local government is unable to finance the activity on its own, and other sources of funding are not available to carry out the activity.   (ULN Justification: Limit your narrative to one (1) page with not less than a 11-point font.) Insert Text Here: |  |

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| **PROJECT DESCRIPTION NARRATIVE - Page 1 of 2** |
| 1. **Current condition of the problem:**   Insert Text Here   1. **Frequency with which the problem occurs:**   Insert Text Here   1. **Number of persons and/or families/households affected by the problem:**   Insert Text Here   1. **Effect(s) of the problem if left untreated/unaddressed:**   Insert Text Here   1. **Extent to which the completion of the proposed CDBG-PF project will address the problem:**   Insert Text Here   1. **Scope of work:**   Insert Text Here   1. **Extent to which CDBG funding is needed to complete the project.:**   Insert Text Here |

**PROJECT DESCRIPTION NARRATIVE - Page 2 of 2**

PART 4 – BUDGET AND OTHER FUNDS

###### APPLICANT: DATE: / /

Required: Attach a detailed itemization of project costs (e.g., engineer’s estimate or similar itemization of costs) to verify the costs listed in the Budget below. Attach documentation of Other Funds.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | Source(s) of Other Funds | | | | |  |
| Activity | CDBG Funds | UGLG Funds | | | Other Public Funds | Private Funds | Total |
| Acquisition - Land |  |  | | |  |  |  |
| Acquisition - Building |  |  | | |  |  |  |
| Building Improvements |  |  | | |  |  |  |
| Center/Facility Construction |  |  | | |  |  |  |
| Clearance - Site |  |  | | |  |  |  |
| Curb and Gutter |  |  | | |  |  |  |
| Electrical System Improvements |  |  | | |  |  |  |
| Environmental Remediation |  |  | | |  |  |  |
| Equipment |  |  | | |  |  |  |
| Fire Station |  |  | | |  |  |  |
| Relocation |  |  | | |  |  |  |
| Sanitary Sewer |  |  | | |  |  |  |
| Sidewalks |  |  | | |  |  |  |
| Storm Sewer |  |  | | |  |  |  |
| Streets |  |  | | |  |  |  |
| Wastewater Treatment Facility |  |  | | |  |  |  |
| Water |  |  | | |  |  |  |
| Hazard Mitigation |  |  | | |  |  |  |
| Broadband |  |  | | |  |  |  |
| Fixtures |  |  | | |  |  |  |
| Furnishings |  |  | | |  |  |  |
| Engineering (match only) |  |  | | |  |  |  |
| Administration |  |  | | |  |  |  |
| **Sub-Total(s):** |  |  | | |  |  |  |
| Detailed Itemization of Project Costs is attached to this application: | | | Yes | No | | | |

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| **Summarize any other funding being used for this project proposal:** | | | | | | | | | | | | |
|  |  |  |  |  | ***CHECK ALL THAT APPLY:*** | | | |  |  | ***Do***  ***I*** | ***Supporting cumentation ncluded?*** |
| Source: |  | Amount: $ |  | Status: |  | Pending |  | Committed |  | Other |  | Yes No |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  | Applied | Secured/Awarded | | | |  |  |
|  |  |  |  |  |  |  |  | | | |  |  |
| Source: |  | Amount: $ |  | Status: |  | Pending |  | Committed |  | Other |  | Yes No |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  | Applied | Secured/Awarded | | | |  |  |
|  |  |  |  |  |  |  |  | | | |  |  |
| Source: |  | Amount: $ |  | Status: |  | Pending |  | Committed |  | Other |  | Yes No |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  | Applied | Secured/Awarded | | | |  |  |
|  |  |  |  |  |  |  |  | | | |  |  |
| Source: |  | Amount: $ |  | Status: |  | Pending |  | Committed |  | Other |  | Yes No |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  | Applied | Secured/Awarded | | | |  |  |

For any source with a status of “Other” provide a brief explanation (No more than a one-sentence narrative per source). Insert Text Here:

Do you anticipate using CDBG funds to pay for any Grant Administration services associated with this project?

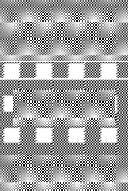
Yes No

If yes, were the services or will the services be competitively procured in compliance with state and federal CDBG requirements?

Yes No

If no, were the services or will the services be secured in compliance with the local procurement policy?

Yes No





|  |  |  |  |  |
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| **PUBLIC FACILITIES APPLICATION ATTACHMENTS AND SUPPORTING DOCUMENTATION CHECKLIST** | | | | |
| Topic | Documents | Required For All Apps | Included with this application submission? | |
| **YES** | **NO** |
| Citizen Participation |  |  |  |  |
| Adopted Citizen Participation Plan | **** |  |  |
| Citizen Participation Public Hearing Notice *(with proof of publication [if required] and/or posting [if required] and proof of adequate advance notice in accordance with the UGLG’s CPP in effect on the date of the first notice* ***and*** *no less than the equivalent of a Class 2*  *Notice)* | **** |  |  |
| Citizen Participation Public Hearing Certification Form | **** |  |  |
| Public Hearing Meeting Minutes (with the attendees listed in the Minutes or on a separate Sign-In Sheet provided) | **** |  |  |
| Policy for Non-Violent Civil Rights Demonstrations/Prohibiting the Use of Excessive Force and Barring of Entrances/Exits | **** |  |  |
| Financial | Detailed Itemization of Project Costs (supporting document for the Budget of this application) | **** |  |  |
| Service Area & Income Survey | Map of Project Area (*with project location, type of work being completed on each street (if applicable), and Service Area/beneficiary area boundaries marked*) | **** |  |  |
| Demographic Profile Sheet of beneficiaries in Service Area *(must*  *use form provided by DEHCR in the Application Attachments)* | **** |  |  |
| LMI Calculation Worksheet. if HUD LMI Summary Data (LMISD) for multiple census blocks or multiple local governments that make up the entire service area were used to calculate the LMI percentage for the service area; or if a combination of HUD LMISD and income survey data were used to calculate the LMI percentage for the service area (*if applicable*) |  |  |  |
| Map of Boundaries of Census Block(s) that make(s) up Service Area,  If HUD LMI CensusBlock data were used to determine the LMI percentage for the service area *(if applicable)* |  |  |  |
| Map of Income Survey Area (with survey area boundaries marked; residences surveyed marked; and responding, non-responding and  vacant residences marked or provided on a separate sheet) *(if applicable)* |  |  |  |
| Income Survey Results Income Tabulation Form *(if applicable: see Appendix C in Income Survey Guide)* |  |  |  |
| Income Survey Results Race/Ethnicity Tabulation Form *(if applicable: see Appendix C in Income Survey Guide)* |  |  |  |
| List of street addresses of service area/survey area (***and*** associated mailing address, if different than street address and the mailing address was used to distribute the income survey) *(if applicable)* |  |  |  |
| List of other contact information associated with the addresses of residents surveyed, if methods other than mailing or door-to-door/in-person methods were used (e.g., telephone, email, etc.) *(if applicable)* |  |  |  |
| List of assigned survey numbers for income surveys distributed/conducted with the response data tracking for each (date(s) survey was distributed/conducted or attempts were made; date surveyed/response received; and family size, income and race/ethnicity information for each) *(if applicable)* |  |  |  |
| Income Survey Letter and/or other related correspondence sent to  residents regarding the survey distribution and collection process *(if applicable)* |  |  |  |
| Fair Housing | Potential Fair Housing Actions Checklist *(Specifying the three (3) actions that the local community will undertake)* | **** |  |  |
| Fair Housing Ordinance | **** |  |  |
| Slum & Blight | Slum and Blight Certification *(if applicable)* |  |  |  |
| Slum and Blight supporting documentation *(for Area Basis only)* |  |  |  |
| Acquisition/ Relocation | Residential Anti-Displacement and Relocation Assistance Plan | **** |  |  |
| Acquisition/Relocation/Demolition Questionnaire | **** |  |  |
| Other | Authorizing Resolution to Submit CDBG Application | **** |  |  |

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|  | Statement of Assurances | **** |  |  |
| Lobbying Certification | **** |  |  |
|  |  |  |  |
|  |  |  |  |

**CITIZEN PARTICIPATION**

#### ATTACHMENTS AND SUPPORTING DOCUMENTATION

Attach this cover page, followed by the documents in the order listed below, to the end of the Application.

Attachments:

1. Adopted Citizen Participation Plan (CPP) (with date of adoption shown on Plan and with required components)
2. Citizen Participation Public Hearing Notice (with proof of publication [if required] and/or posting [if required] and proof of adequate advance notice in accordance with the UGLG’s CPP in effect on the date of the first notice ***and*** no less than the equivalent of a Class 2 Notice)
3. Citizen Participation Public Hearing Certification Form
4. Public Hearing Meeting Minutes with Attendees Listed in Minutes or separate Sign-In Sheet Provided
5. Policy for Non-Violent Civil Rights Demonstrations/Prohibiting the Use of Excessive Force and Barring of Entrances/Exits (with date of adoption/approval shown on policy and with required language)

**FINANCIAL**

#### ATTACHMENTS AND SUPPORTING DOCUMENTATION

Attach this cover page, followed by the documents in the order listed below, to the end of the Application **after** the Citizen Participation attachment(s).

Attachments:

1. Detailed Itemization of Project Costs (e.g., engineer’s estimate or similar itemization of costs to verify the costs listed in the Budget in Part 9 of this application) **– required for *all* applicants**

**SERVICE AREA & INCOME SURVEY**

#### ATTACHMENTS AND SUPPORTING DOCUMENTATION

Attach this cover page, followed by the documents in the order listed below, to the end of the Application **after** the Financial attachment(s).

Attachments:

1. Map of Project Area [with project location, types of work being completed on each street (if applicable), and boundaries of Service Area/beneficiary area boundaries marked] – applicable for *all* applicants
2. Demographic Profile Sheet of beneficiaries in Service Area [must use form provided by DEHCR in Application Attachments] **– required for *all* applicants**
3. LMI Calculation Worksheet, if applicable [if HUD LMI Summary Data (LMISD) for multiple census blocks or multiple local municipalities were used to calculate LMI percentage for service area; or if a combination of HUD LMISD and income survey data were used to calculate LMI percentage for service area]
4. Map of Boundaries of Census Block(s) that make(s) up Service Area, if applicable
5. Map of Income Survey Area [with survey area boundaries marked; residences surveyed marked; and responding, non-responding and vacant residences marked or provided on a separate sheet], if applicable
6. Income Survey Results Income Tabulation Form, if applicable
7. Income Survey Results Race/Ethnicity Tabulation Form, if applicable
8. Income Survey Form used to conduct the Income Survey, if applicable
9. List of addresses in the service area/survey area, if applicable [including the street address where the residence is located and mailing address if used to distribute the survey and it is different than the actual residential street address]
10. List of other contact information associated with the addresses of residents surveyed, if applicable [applicable if methods other than mailing and door-to-door/in-person methods were used to distribute/conduct the survey (e.g., telephone, email, etc.)]
11. List(s) of survey numbers for surveys distributed/conducted with the response data tracking for each, if applicable [including the date(s) the survey was distributed/conducted or attempts were made to distribute/conduct the survey for the address, date surveyed (i.e., date survey was returned or date survey interview was conducted), family size information, income level information, and race/ethnicity information]
12. Income Survey Letter and/or other related correspondence sent to residents regarding the survey distribution and collection process, if applicable

**FAIR HOUSING**

#### ATTACHMENTS AND SUPPORTING DOCUMENTATION

Attach this cover page, followed by the documents in the order listed below, to the end of the Application **after** the Service Area / Income Survey attachment(s).

Attachments:

1. Potential Fair Housing Actions Checklist (with three (3) actions selected)
2. Fair Housing Ordinance (with current Fair Housing state statute citations and language, and with date of adoption shown on ordinance)

**SLUM & BLIGHT**

#### ATTACHMENTS AND SUPPORTING DOCUMENTATION

Attach this cover page, followed by the documents in the order listed below, to the end of the Application **after** the Fair Housing attachment(s).

Attachments:

1. Slum and Blight Certification, if applicable
2. Slum and Blight supporting documentation (for Area Basis ONLY), please label attached document(s):

|  |
| --- |
| a. |
| b. |
| c. |
| d. |
| e. |

**ACQUISITION / RELOCATION**

#### ATTACHMENTS AND SUPPORTING DOCUMENTATION

Attach this cover page, followed by the documents in the order listed below, to the end of the Application **after** the Slum & Blight attachment(s).

Attachments:

1. Residential Anti-Displacement and Relocation Assistance Plan (RADRAP) (with date of adoption shown on Plan; must be current with required components, as specified on the *Sample Residential Anti-Displacement and Relocation Plan* in the provided attachments to the CDBG application)
2. Acquisition/Relocation/Demolition Questionnaire

**OTHER**

#### ATTACHMENTS AND SUPPORTING DOCUMENTATION

Attach this cover page, followed by the documents in the order listed below, to the end of the Application **after** the Acquisition/Relocation attachment(s).

Attachments:

1. Authorizing Resolution to Submit CDBG Application
2. Statement of Assurances
3. Lobbying Certification

#### 1(b) Public Facilities Application Specific Attachments

###### Acquisition, Relocation and Demolition Questionnaire

|  |
| --- |
| UNIT OF GENERAL LOCAL GOVERNMENT (UGLG) NAME: |
| **ACQUISITION, RELOCATION and DEMOLITION QUESTIONNAIRE**  for a Community Development Block Grant (CDBG) |

This questionnaire will be used by the Division of Energy, Housing and Community Resources to determine if you have adequately planned and budgeted for acquisition, relocation, down payment assistance, rehabilitation, and demolition activities related to your proposed CDBG project. 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

###### N/A).

The proposed CDBG project will involve the:

* 1. Voluntary Acquisition of:

|  |
| --- |
| Temporary easement(s) |
| Permanent easement(s) |
| Vacant land |
| Land and building(s) |
| *Will tenants be, or have they been, displaced?* |

* 1. Involuntary Acquisition of:

|  |
| --- |
| Temporary easement(s) |
| Permanent easement(s) |
| Vacant land |
| Land and building(s) |
| *Are any units occupied?* If yes, indicate whether:  Relocation assistance will be provided or has been provided  Residential occupant is low- and moderate-income |

* 1. Donation of:

|  |
| --- |
| Temporary easement(s) |
| Permanent easement(s) |
| Vacant land |
| Land and building(s) |
| Tenant(s) will be displaced or have been displaced  Tenant(s) is residential occupant and is low- and moderate-income |

* 1. Demolition of residential units or conversion/rehabilitation of residential unit to another use, and the:

|  |
| --- |
| Unit is occupiable |
| Unit rents or would rent at or below the Fair Market Rent |
| Unit will be replaced |
| **NOTE:** *If “yes” to any of the three questions above,*  *attach documentation required and listed in your Uniform Relocation Plan.* |
| Unit is not occupiable and evidence is attached |