Physical Improvement Funding Application
2022Community Development Block Grant Program

PROJECT SUMMARY

Program Name:	
Organization/Agency:	
Street Address:	
City, State, Zip Code:	
Executive Director:	
Phone No.:	Fax No.:
Contact Name:	Contact Phone No.:
Contact e-mail:	
Federal IRS Tax Exempt #:	**DUNS #:**
Use of funds: ❑ Public Physical Improvement ❑ Housing Assistance ❑ Facility Improvement ❑ Economic Development	
Amount Requested:	
Attach current agency exclusion record from System for Award Management. See https://www.sam.gov	
HUD Eligible Activity:	
Matrix Code Reference:	
National Objective:	

PROJECT DESCRIPTION

Give the project location and describe the scope of the project.

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NATIONAL OBJECTIVE, PROJECT ELIGIBILITY AND BENEFIT

A)   Indicate which national objective this project will address, explain how this will be accomplished and how you will document compliance with this National Objective during the required period. (Listed in the instructions.)

B)   Program need: Describe the community need for this project and how the project fits into the community's long-range planning.

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C)   Identify who your project will benefit (target area neighborhoods, homeless, homeowners, low/mod individuals, unemployed or underemployed, etc.). Be specific and quantify the number of persons/households your project will assist or benefit. You will be required to document the number of persons (or households) that benefit from this project, verify that at least 51% of the beneficiaries are income eligible city residents and collect race/ethnic information. If your project involves housing, describe any housing problems that may be unique to your clients.

D)   Project Benefit:

   1)   If your project will provide benefit directly to a household or individual, use the following table to indicate the number of clients in the income brackets that you anticipate assisting with this project. Agency are required to document individuals' and households' incomes (Area Median Income-AMI).

	1 Person	2 Person	3 Person	4 Person	5 Person
Extremely Low Income	$16,050 or less	$18,350 or less	$20,650 or less	$22,900 or less	$24,750 or less
Low Income	$16,051 – $26,750	$18,351- $30,550	$20,651 - $34,350	$22,901 - $38,150	$24,751 - $41,250
Low-Moderate Income	$26,751 – $32,100	$30,551 – $36,660	$34,351 – $41,220	$38,151 - $45,780	$41,251 – $49,500
Greater than 80%	Over $42,750	Over $48,850	Over $54,950	Over $61,050	Over $65,950

Total number of clients you plan to serve:
Total number of clients with incomes greater than 80% AMI:
Total number of clients with incomes in the Low-Moderate Income range (50<80%):
Total number of clients with incomes in the Low Income range (30<50%):
Total number of clients with incomes in the Extremely Low Income range (0<30% AMI):

   2)   Please describe how your organization assesses and/or verifies that program beneficiaries meet income guidelines as defined by HUD and the national objective under which you are applying (LMI, Slum & Blight or Urgent Need).

3) Please describe how your organization determines that program beneficiaries are residents of the City of Bloomington.

4) If your project will provide an area benefit, please list the census tracts and block groups where the project is located. **For census information contact Matt Swinney 812-349-3580 or swinneym@bloomington.in.gov.**

PLANNING AND IMPLEMENTATION

A) Do you own or have site control of the property on which the project is to take place? ❑ **YES** ❑ **NO** ❑ **N/A.** If you answered **NO**, please explain below. Be prepared to provide a copy of your deed, purchase agreement or lease agreement.

B) Is the property currently occupied or will it be occupied between the time this application is submitted and the time the grant is awarded? ❑ **YES** ❑ **NO** ❑ **N/A**. If you answered **YES**, **please contact Matt Swinney at 812-349-3580 or swinneym@bloomington.in.gov**. It is possible the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 may affect your project.

C) Is the property zoned for your intended use? ❑ **YES** ❑ **NO** ❑ **N/A. You must verify this information and document it with a letter or email from Eric Greulich, Zoning Planner, Planning and Transportation Department. Greulich may be reached at 812-349-3526 or at greulice@bloomington.in.gov.**

1. If you answered **NO**, please explain below.

2. Describe any variances or approvals that may be required by any public board, commission, or council, the status of those approvals and a timeline to complete all necessary approvals. *NOTE: Any variances or approvals must be obtained prior to any funding being disbursed.*

D) Is the property already served by public utilities? Does this project require any additional public utility improvements in water, sanitary or stormwater? ❑ **YES** ❑ **NO** ❑ **N/A. You must verify this information and document it with a letter or email from Vic Kelson, Director of City of Bloomington Utilities or his designee. Kelson may be reached at 812-339-1444 or at kelsonv@bloomington.in.gov.**

Does this project involve subdividing a lot, construction of new sidewalks or other improvements within the public rights of way? ❑ **YES** ❑ **NO** ❑ **N/A. You must verify this information and document it with a letter or email from Eric Greulich, Zoning Planner, Planning and Transportation Department. Greulich may be reached at 812-349-3526 or at greulice@bloomington.in.gov.**

E) Has an environmental assessment been conducted on the proposed site? Describe any known or suspected environmental problems which may impact your project. Is any part of the parcel that includes this project in a floodway or floodplain? Does the project involve a historic property, an eligible historic property, located in any type of historic district, adjacent to a historic district or structure? ❑ **YES** ❑ **NO. You must verify this information and document it with a letter or email from Gloria Colom, Historic Preservation Program Manager, Housing and Neighborhood Development Department. Colom may be reached at 812-349-3507 or email gloria.colom@bloomington.in.gov.**

If this project has a residential component or is on the same parcel of land that has a residential structure, HUD's lead based paint regulations may affect your project. If the residential structure was built prior to 1978 you must assume there is lead based paint and you are required to comply with the lead based paint regulations, explain the necessary steps that must be completed and what work has been completed to date. **You must verify this information and document it with a letter or email from Mike Arnold, Neighborhood Compliance Officer, Housing and Neighborhood Development Department. Arnold may be reached at 812-349-3401 or email at arnoldm@bloomington.in.gov.**

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F)   Who is responsible for the contract administration, project design, work write-up, etc.? Describe their experience at administering this type of project. It is strongly recommended that a licensed architect or licensed engineer prepare construction designs, bid documents, inspect all work and approve all pay applications if the project is funded. The costs of architect, engineering and project management services **may** be reimbursed with CDBG funds as long as no formal agreements or expenses have been incurred before the CDBG applicant and the City have executed a CDBG funding agreement for the 2022 CDBG funds. The CDBG applicant will be required to follow the Department of Housing and Neighborhood Development's Subrecipient Procurement Procedures.

G)   Is the project ready to begin (other funding sources secured, planning approvals secured, construction documents ready for letting, etc)?   ❑ **YES** ❑ **NO.** If **NO**, please explain. Include a realistic detailed timeline for the entire project (when other funding is ready, planning approvals, construction documents ready, projected bid opening, construction timeline, construction completion, move-in date for occupants, appraisals, property transfer, etc.) **NOTE: Project should be completed within eighteen (18) months after the funding agreement has been executed.**

Is this a multi-year project? ❑ **YES** ❑ **NO.** If YES, describe the future phases of the project, including timeline, and how future phases will be funded.

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H) Is the estimated cost of the construction over $2,000? If so, you may be required to use a federal wage decision. ❑ **YES** ❑ **NO. If you answered YES, you must verify this information with Matt Swinney, Program Manager, Housing and Neighborhood Development Department who may be reached at 812-349-3580 or email at swinneym@bloomington.in.gov.**

I) Will additional funding (non-CDBG and non-HOME) be required to maintain or operate the project once it has been completed?   ❑ **YES** ❑ **NO** ❑ **N/A.** If YES, how will you secure this funding?

J) As a result of CDBG funding, will the project provide the organization with income (e.g. rental income, sale of real property, sale of merchandise, etc)? ❑ **YES** ❑ **NO.** If **YES**, please explain what the income will be used for? If real property is improved or purchased and later sold, you may be required to pay back all CDBG funds expended on the project. If $25,000 or more in CDBG funding is expended on the project, the City will record deed restrictions on the property for a minimum of five years. Reimbursing the City for CDBG funds expended, does not remove the deed restrictions.
❑ **YES** ❑ **NO.** If **YES**, please include a copy of the encumbrances and why they are needed.

K) If your agency received CDBG Physical Improvement funding in the past five years, describe the project, the dollar amount received, and the status of the project (completed, ongoing, under construction, etc.).

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FINANCIAL

A) Total estimated project cost: $_____ (a)

Total funds available: $_____ (b)
  (List all sources below)

Funding gap: $_____ (c) a - b = c

Amount requested on this application: $_____

B) List all funding sources for the project which you are Seeking**(S)** and/or Receiving**(R)**.

FUNDING SOURCES	FUNDING AMOUNT	(S) or (R)

C) Are you using or applying for any other federal funds or State of Indiana funds for any part of this project? If so, list those funding sources. You may be asked for your application to these sources (and their instructions, rules and requirements). If you receive CDBG funding, your funding agreement may include restrictions on what type of funds you will be able to use in conjunction with these CDBG funds on the specific project or program.

D) Describe any monetary or in-kind contributions to be contributed by your organization, including agency funds or staff or any other organization. If you will be using your own work force, what contingency plan do you have in place to meet your projected timeline if staff becomes unavailable?

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E)   What effect will partial funding have on your project?

F)   Complete the attached Project Cost Summary Worksheet.

PROJECT COST SUMMARY WORKSHEET

Project Categories	Project Costs	Portion to be paid with CDBG Funds
Professional Fees:		
- **Architect/Design Fee**		
- **Engineering**		
- **Environmental Review**		
- **Inspection visits and reports**		
Acquisition of Real Property		
Construction Costs		
Contingency Funds Available		
TOTAL COSTS		