

City of Shoreline
Community Development Block Grant (CDBG)
CAPITAL/FACILITY APPLICATION
for 2014

(involving acquisition, rehabilitation and improvement of real property)

DEADLINE: Friday, May 24, 2013 4:00 p.m. Submit electronically to: HS@shorelinewa.gov

Limit your answers to the space provided.

Eligible Projects

1. Minor home repair including plumbing, carpentry, electrical repairs and special aids for disabled access.
2. Housing - property acquisition, site clearance and assemblage to create multi-family rental housing (five or more units) especially those targeted to families with children and older adults.
3. Public infrastructure projects that promote pedestrian safety, including curb cuts and sidewalk replacement.
4. Community facilities that primarily serve low or moderate income persons such as senior centers, community clinics and emergency shelters.
5. Projects serving special needs populations.

Required Attachments

1. Proof of CDBG eligibility (see question 18)
2. Project/program budget for capital and/or operating funds.
3. Map showing project site and service delivery area.
4. Current Bylaws; Articles of Incorporation (Non-Profit only)
5. Copy of Non-Profit IRS Letter of Designation (Non-Profit only)
6. Organizational Chart
7. A copy of most recent Audit. If an audit is not available, then financial statements that include General Ledger and Balance Sheet detail for a one year period is acceptable.

Incomplete Applications Will Be Returned. Submit Early To Allow Time For Resubmission if Needed.

For technical assistance completing the application and city priorities, please contact George Smith at 206-801-2252 or gsmith@shorelinewa.gov.

For CDBG eligibility questions, please contact Bethany Wolbrecht-Dunn at 206-801-2331 or bwolbrec@shorelinewa.gov.

Instructions and Project Scoring

The questions are self-explanatory, however, number 15 requires the applicant to describe consistency with one or more adopted city plans or policies. The documents applicants should consult may be found at the following locations.

Comprehensive Plan: <http://shorelinewa.gov/index.aspx?page=964>. For housing projects, Element 3, Housing, contains all the relevant policies. If a project is located within an area that has a Subarea Plan, describe consistency with that plan element as well.

2012-2017 Economic Development Strategic Plan: <http://www.shorelinewa.gov/Modules/ShowDocument.aspx?documentid=10807>

2013-2015 Council Goals: <http://shorelinewa.gov/index.aspx?page=73>

Scoring

An Ad-hoc Allocations Committee will be convened by the City Manager to review the applications and make recommendations to the City Manager for funding. The criteria and relative points for each criterion to be used in scoring are shown below.

1. LOCAL NEEDS: 0-25 Points

- a. Does the applicant adequately state the need and how this proposal will positively affect that need?
- b. Will this project strengthen the City of Shoreline's infrastructure and or community facilities?
- c. If a housing project, will it serve families with children or older adults, the two priority areas within housing?

2. ACCESSIBILITY: 0-15 Points

- a. Is the project/program accessible in terms of affordability, transportation, physical structure and service delivery?
- b. Does the proposal or project reduce programmatic barriers to services and supports? (e.g., language/ interpretation, provide childcare, transportation, alternate service hours, etc.)

3. ALIGNMENT WITH CITY PLANS: 0-20 Points

Is the project or the services provided consistent with one or more of the following city plans or policies: Comprehensive Plan; 2012-2017 Economic Development Strategic Plan; and 2012-2014 Council Goals.

4. COLLABORATION: 0-10 Points

Is the agency working with other agencies, cities, etc. that are relevant for the project? Is the collaboration documented by a written MOU or other written agreement?

5. FEASIBILITY: 0-15 Points

- a. Does the applicant provide evidence that the project will succeed?
- b. Is the applicant stable and does the agency have the capacity to implement the program/project?
- c. Has the agency identified all of the resources necessary to complete the project?
- d. Does the budget demonstrate adequate resources to operate the facility/program once the project is complete?
- e. Can the project expend CDBG funds within 18 months of grant award?

FUNDING: 0-15 Points

- a. Is the request reasonable, given the type of project requested? Were accurate estimates obtained for proposed work?
- b. If this is a regional project, is the request to Shoreline reasonable, relative to what others are contributing?
- c. Has the applicant clearly stated how CDBG funds will be used?
- d. Does the applicant identify other funding sources, the amounts expected and the timing of funding awards?

1 Applicant Information

Agency Name _____

Agency Address _____

City, State, ZIP _____

Contact Person

Contact Name _____

E-mail _____

Phone _____

2 Agency Budget

Approved 2013: _____

Proposed 2014: _____

3 Agency Purpose or Mission Statement

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4 Title of Proposed Project

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5 Type of Project

- Minor Home Repair
 Housing
 Public Infrastructure
 Community Facility
 Special Needs Population

6 Project Cost

CDBG Funds Requested _____

Total Project Cost _____

Has this project been funded with CDBG in prior years? Yes No

Describe the specific use of CDBG funds: _____

Source of project cost estimates: _____

Will CDBG funds be expended by May 31, 2014? Yes No**7 List all sources of public and private funds.**

Funding Source	Amount Requested	Amount Awarded

8 Project Location (if different from Agency Address)

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9 This applies to multi-family housing applicants only. All other applicants skip to the next question.

New Construction Rehabilitation Other (describe): _____

Are there any time limits on tenancy? Yes No If yes, describe below:

Number of units by size: ___ One bedroom ___ Two bedroom ___ Three bedroom ___ Studio

Number of units by affordability: ___ <30% AMI ___ 50-80% AMI ___ Above 80% AMI Lot size _____ ft²

Describe the ownership structure:

Estimated number of people served annually: _____

Number of stories _____ Square footage _____ Number of parking stalls: Residential _____ Commercial _____

Describe demographic, social and economic characteristics of the target population:

Does the project contain any non-residential space? Yes No

If yes, describe the proposed use and whether a tenant has been identified, expected revenue and form of legal ownership of the non-residential space.

Will this project provide services (e.g., childcare, case management, transportation)? Yes No

If yes, describe and indicate if provided directly or through other arrangement. If case management (CM) is provided describe the model used and how it leads to housing stability and self sufficiency for the client. Indicate whether CM is provided directly or through other arrangement.

Does the project contain any on-site amenities? Yes No

If yes, describe how the amenities address the needs of the population you intend to serve and whether the amenities will be available for public use.

Do you have a commitment for rental assistance for housing units in the project? Yes No

If yes, indicate type and source of rental assistance: _____

Number of units, by size, receiving rental assistance: _____

Describe the financial plan for long-term operation of the housing, including how maintenance and repair will be financed.

Describe the rent structure and how it is determined.

10 **Need:** Describe how the project's design and implementation will meet the needs of the target population.

11 Notification: Does the project fall under the City's Development Code (SMC 20.30.120) for neighborhood notification?

Yes No

12 Infrastructure or Community Facility projects only (all other applicants skip this question): How will the project strengthen the City of Shoreline's infrastructure and or community facilities?

13 Accessibility: Describe how the project is accessible to users in terms of affordability, access to public transportation and design accommodations for people with physical or mental disabilities.

14 Neighborhood Accessibility: Briefly describe local services and amenities adjacent to or in walking distance of the property or project (not applicable if serving scattered sites).

15 Alignment with City Plans: Describe how the project or the services provided are consistent with one or more city plans: Comprehensive Plan; 2012-2017 Economic Development Strategic Plan; 2013-2015 Council Goals.

16 Collaboration: Does the project or program involve a formal, written collaboration with other entities to complete the project or program?

Yes No

If yes, list the entity(ies) and describe the features of collaboration and how they will benefit the program or project and the population served.

17 The following questions address project feasibility and readiness.

A. Describe your organization's experience in successfully completing similar projects.

B. Describe the qualifications of key personnel responsible for the implementation of the project and their specific responsibilities.

C. Briefly describe the capital funding plan and time table for securing funding. If all funds to complete the project or program are not raised during this public funding cycle, what is the plan for proceeding?

D. Do you have site control for the project? Yes No N/A If yes, indicate type of control and date control expires.

E. Are there any known issues or circumstances that may delay this project? Yes No If yes, please explain below:

18 National Objectives for the CDBG Program: Projects must meet one of two national objectives established for the CDBG Program. In Step One, check the applicable space to indicate which national objective your project meets. In Step Two, select how your project meets the objective and attach any required documents. Contact the City to which you are applying for assistance if you are not sure which national objective your proposed project meets.

1 CHOOSE ONE NATIONAL OBJECTIVE

- National Objective #1 - Activities Benefiting Low- and Moderate-Income Persons** – this is the most common objective chosen. Proceed directly to Step Two (A).
- National Objective #2 - Activities Which Aid in the Prevention or Elimination of Slums or Blight** – Consult the City to which you are applying, then proceed directly to Step Two (B).

2 HOW WILL YOUR PROJECT MEET THE NATIONAL OBJECTIVE?

If you selected Activities Benefiting Low- and Moderate-Income Persons, select one of three below:

A **1. Area Benefit:** The project must serve an area which is primarily residential and predominantly low- and moderate-income

Required Attachment: Attach a map indicating the proposed project location and boundaries of the area that will directly benefit from the proposed project. With the attachment, briefly describe how the boundaries of the service area were determined. Please contact the City to which you are applying for technical assistance.

2. Limited Clientele: The project must be limited to serving a predominantly low- and moderate-income clientele (choose one of a, b, c or d)

(a) Agency Maintains Client Information Verifying at least 51% Low/Moderate Benefit

Attach a copy of intake form used to verify client income and household size.

What is the annual percentage of low/moderate income persons served? _____ %

(b) Presumed Benefit: The facility will *exclusively* serve:

elderly persons (over age 62)

battered spouses

illiterate adults (not ESL)

persons living with AIDS

homeless persons

migrant farm workers

abused children

severely disabled adults

(c) Nature/Location: Facilities which due to their nature or location can reasonably be assumed to serve predominantly low- and moderate-income persons (i.e. food banks, clothing bank, facilities serving residents of public housing)

(d) Barrier Removal (outside of Area Benefit (1) areas): Projects which reconstruct or rehabilitate existing facilities or public infrastructure in order to remove material or architectural barriers to the mobility of seniors or severely disabled adults.

3. Job Creation or Retention: An activity designed to create or retain permanent jobs where at least 51 percent of the jobs, computed on a full time equivalent basis, involve the employment of low- and moderate-income individuals. Do not select this category before consulting with the City.

B If you selected Activities that Aid in the Prevention or Elimination of Slums or Blight and you consulted with the City to which you were applying, select one of the following:

Area-wide Basis: The proposed project must be located in and serve an area which meets a State or local definition of a slum, blighted, deteriorated or deteriorating area. The area must have a substantial number of deteriorated or deteriorating buildings throughout the area or public improvements in a general state of deterioration. The proposed project must address one or more of the conditions which contributed to the deterioration of the area. Projects using this objective require the City Council to pronounce an area as having slum or blighted conditions. Do not select this category before consulting with the City.

Provide a map indicating the proposed project location and boundaries of the slum or blighted area and a description of the conditions which qualified the area to be designated by the State or local government.

Spot Basis: The proposed project must be designed to eliminate specific conditions of blight or physical decay outside of a slum or blighted area. Do not select this category before consulting with the City.