



The City of Frederick  
Community Development Block Grant (CDBG)  
**Bricks and Mortar Application**  
**GY2020 APPLICATIONS**

The Community Development Block Grant (CDBG) program is designed to fund activities that primarily benefit low- and moderate-income residents of the City of Frederick. Eligible activities include, but are not limited to, programming or projects that address local housing, housing related supportive services, crime prevention, mental health, welfare, neighborhood revitalization, or recreation needs for capital projects benefitting low and moderate-income neighborhoods. The project could be something an organization undertakes on its own or in partnership with The City of Frederick. Funds would be available in late summer of 2020.

All construction projects trigger the Davis-Bacon Act which includes weekly payrolls and prevailing wage rates. Please review the link for information on the Davis Bacon Act <https://www.beta.sams.gov>. Construction projects must include the wage and job classification in their bids to ensure adequate funding for their project. This wage decision must be included as part of the application along with a bid to show the costs of this project; detailing all trades needed to complete this project. The contractor and sub-contractors are all subject to the Davis-Bacon Wage Act, must be paid the prevailing wage, using the most recent wage decision and submit weekly payrolls. Funds will be provided to successful applicants in the form of a zero-interest loan.

Funding for projects typically becomes available late August/early September; while no funds can be expended or contracts entered into prior to the award, preliminary project preparation is strongly encouraged; including request for bids, project timeline, understanding permit and licensing requirements to perform work in the City. Projects must be completed by April 30<sup>th</sup> of the following year to meet the CDBG timeliness test. At this writing, we are unsure of funding available for the GY 2020 awards but it is estimated to be approximately \$350,000. The amount of funding awarded for GY 2020 will be reduced or increased in proportion to any changes in allocation amounts. Please contact CDBG Program Administrator, Eileen Barnhard at 301-600-2842 or by email at [ebarnhard@cityoffrederick.com](mailto:ebarnhard@cityoffrederick.com) for questions.

**APPLICATION DEADLINE\*** 12:00 p.m. on Wednesday January 8, 2020

One (1) signed original, four (4) copies- three (3) hole punched of your application, and One (1) electronic copy must be submitted to:

**Please only include in the application what is required; do not submit additional pages.**

The City of Frederick  
Municipal Office Annex  
Department of Planning/Community Development  
140 W. Patrick Street  
Frederick, Maryland 21701

**\*If applying for more than one (1) activity a complete application must be submitted for each activity.**

**The City of Frederick Maryland  
COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG)  
GY 2020 APPLICATION Bricks and Mortar**

**SUMMARY INFORMATION**

Project Title \_\_\_\_\_

Legal Name of Submitting Organization: \_\_\_\_\_

Organization Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Tax ID # \_\_\_\_\_

DUNS # \_\_\_\_\_

Address of Project/Activity Location \_\_\_\_\_

Name and Title of Person Responsible for Project/Activity \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Census Tract \_\_\_\_\_

Funds Requested for this Project: \$ \_\_\_\_\_

Other cash contributions from other sources for Project/Activity: \$ \_\_\_\_\_

Total Project Budget: \$ \_\_\_\_\_

Total Number of Persons Who Will Directly Benefit From This Project \_\_\_\_\_

Have you received CDBG funding for this program or activity before?      Yes      No

Type of Organization:              Non-profit              Government              Other

Properties to be rehabilitated must be owned or currently leased with five years of lease in effect from the date of the award of funding; please attach deed or executed lease.

Leased Facilities must include letter of approval from landlord approving work to be undertaken and include any requirements the lessee may be subject to as part of the rehabilitation activity.

In the space below, provide a brief descriptive summary of how the requested funds are to be used: (75 words or less)

**ORGANIZATION CONTACTS AND CERTIFICATION**

**ORGANIZATION MAILING ADDRESS:** (name, street, city, zip code)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

State of Incorporation: \_\_\_\_\_ State Corporation Number: \_\_\_\_\_

Federal Tax ID Number: \_\_\_\_\_ **DUNS Number:** \_\_\_\_\_

Contact Person for this Application: \_\_\_\_\_

(Name and Title) \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email \_\_\_\_\_

Authorized Representative of  
Submitting Organization: \_\_\_\_\_

(Name and Title) \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email \_\_\_\_\_

**Certification:**

“I certify that I have reviewed this application and that, to the best of my knowledge and belief, all of the information provided in this application is true. I also certify that I am officially authorized to represent the submitting organization by its governing board in the filing of this application and this organization is in good standing with the State of Maryland.”

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
*Print Name and Title*



**Executive Summary**

In the box below, provide a brief summary of your project (75 words or less)

Describe WHAT you do, WHO you will serve, WHY the project is needed, WHERE you will do it, and WHAT you will fund with CDBG funds. (NOTE: More information is requested later; this space is for a brief overview of your project.)

**Project Need**

Activities should provide new or expanded services that respond to critical, identical unmet needs.

What unmet community need(s) will your project address, how did you determine that this need(s) exist, and how will your project address this need(s)? Is it an identified need in the 2020-2024 Consolidated Plan?

**PROJECT DESCRIPTION** (Complete in box below – do not include additional pages)

Describe in detail the project for which these funds will be used. Indicate how these funds will be used in collaboration with other agencies, if appropriate, and provide answers to the following questions in your response:

1. What is your service area? (e.g. Citywide; focused on youth attending specific schools; focused in certain areas of the City)
2. What unique or innovative features, if any, are associated with this project?
3. Will your project foster self-sufficiency of the client population services?
4. Describe any factors that make your proposal unique or innovative.
5. Please cite the **Eligible Activity** as described in HUD regulations at 24 CFR 570.201-206 to be undertaken.
6. Will you be applying for other grant/loans in order to finance this project?
7. What goal as stated in the 2020-2024 Consolidated Plan will this project address?  
If so, please provide the details such as the organization, amount, when you anticipate response or award and if that will work in conjunction with the timing requirements of CDBG?

**CONSTRUCTION PROJECT EXPERIENCE:**

For construction projects, please describe in detail your organization’s past experience in project management include the scope of work, oversight of project (staff or hired project manager), budget including cost over-runs or change orders, bid process and selection; timeline of project (did you meet your timeline, if not, why not), any unanticipated obstacles, project completion, were you satisfied with the outcome? If possible before and after photos of completed project. If you organization does not have any past construction experience, please describe in detail how you will manage your project to meet the objective for funding that is being requested. Include your plan for adherence to the Davis-Bacon Act (review of weekly payrolls, classification of trades/rates, dedicated staff to monitor weekly submissions and corrective action if needed.) If additional space is needed, please add one (1) additional page and label.

Do you have prior experience with construction projects similar to this proposed project? If so, have you completed them on time and at or below budget? If you encountered delays or not completed projects in a timely manner what have you done to get the project completed? (You may use a separate page if needed.)

**Location of Project:**

1. Please provide the actual street address (es) where the staff implementing this project will be physically located, locality map, census tract and digital photos (no more than five) of the property at the end of the application.
  
2. Please describe the primary service area(s) for this project; that is, the geographic area from which most of the clients will come (e. by streets, neighborhood, communities, or census tracts.)  
If the service/activity is citywide, please state that, but if the beneficiaries tend to come from certain neighborhoods, areas or parts of the city, please identify those areas.
  
3. CDBG funds must be spent entirely within the City of Frederick, and all of the people directly served with CDBG funds must be City residents. Will any people living outside of the City be directly served under this project?  
Yes\_\_\_\_\_ No\_\_\_\_\_ ( If “yes”, what other funds will be used to serve these people?):  
List street address, city/town or census tract of those served outside city limits.

4. **Project Goals:**

The activity should have clearly stated goals and evaluation criteria that are specific, measurable and realistic.

Please list the expected project goals and accomplishments. What specific, quantitative, and measurable performance measures will you use to determine if your expected outcomes have been achieved?



<b>Project/Program Goals</b>	<b>Service Delivery Process</b>	<b>Performance Measures</b>
“What do you want to achieve”	“How will you achieve it?”	“How will you know if you are successful?”

**5. Previous Project Implementation:**

Have you, or are you aware of others who have carried out or attempted this project in the City of Frederick before? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If “Yes” please explain?

**6. Beneficiaries:**

1. Estimate the total number of people who will directly benefit from the project: \_\_\_\_\_
2. Estimate the total number of low-and moderate-income as defined by HUD who will directly benefit from this project: \_\_\_\_\_
3. What percentage of the total people served are expected to be low-and moderate-income: \_\_\_\_\_%  
 Please identify your sources estimates: \_\_\_\_\_  
 Please be certain to use HUD’s definition of Low/Moderate Income persons for the Washington-Arlington-Alexandria, DC-VA-MD-WV area.
4. Describe how you will document that at least 51% of your beneficiaries will have low/moderate-incomes or moderate-incomes, as defined by HUD.

5. Please identify the primary beneficiaries this project will serve, and the number under each group. More than one group may be identified.
- If this project will not serve any of these populations, if not please identify which beneficiaries will be served.

<b>Special Needs Population</b>	<b>Number of Persons Served</b>
Persons who are homeless	
Persons with physical disabilities	
Persons with mental disabilities	
Elderly persons	
At-risk children and youth (Specify type of risk)	
Other (Specify type of risk)	
Persons with multiple special needs as listed above	

6. What is the estimated number of minority people/household to be served by this project? \_\_\_\_\_

7. Of the persons benefitting from this project/program falls into each of the following categories?

<b>Racial Category</b>	
White/Caucasian	
African/American	
Hispanic	
Asian/Pacific Islander	
American Indian/Alaska Native	
<b>TOTAL</b>	

8. **Organizational Experience and Capability**

Priority will be given to activities that have a clean plan of action that is consistent with the budget, and that demonstrate that the applicant has the capability to implement the proposed plan.

**Organizational Background:**

1. Date your organization was incorporated: \_\_\_\_\_
2. Date operations began: \_\_\_\_\_
3. Number of total paid staff in your organization: Full-time: \_\_\_\_ Part-time: \_\_\_\_\_
4. Number of paid staff currently with your organization that will work on the project:  
Full-time: \_\_\_\_\_ Part-time: \_\_\_\_\_
5. Number of new staff that will be hired to work on the project, if funded:  
Full-time: \_\_\_\_\_ Part-time: \_\_\_\_\_
6. Will a consultant (s) or contract staff be hired to help implement the project?  
Yes: \_\_\_\_\_ No: \_\_\_\_\_

If “yes” please explain the services the consultant or contract staff will offer (NOTE: if you are funded, any subcontracts entered into are subject approval by The City of Frederick and that CDBG funds are subject to Davis- Bacon wages.)

7. What is the amount of your current operating budget? \$ \_\_\_\_\_

List your major source(s) of funding:

_____	\$ _____
_____	\$ _____
_____	\$ _____

8. **Organization Mission and Activities:**

1. Describe your organization’s mission and how your proposed project fits in with your organization’s mission and current activities:

2. Describe your organization's most recent key accomplishments:

9. Community Development and Collaboration

The activity should be integrated with other community services and provided in collaboration with other service providers:

1. Will you enter into a partnership with any other organization(s) to undertake this project?

Yes: \_\_\_\_ No: \_\_\_\_.

If "yes" please list the organization(s) and its contribution(s). If "no", explain why not:

2. Is this proposed project coordinated with or a part of an ongoing housing or community development program? Yes: \_\_\_\_ No: \_\_\_\_\_. If "yes", explain how:

3. Describe how the services of the project will be coordinated with other services in the community:

#### 10. Action Plan

The activity should have a clear plan of action that is consistent with the budget demonstrates that the applicant has the capacity to implement the proposed plan.

1. Budget:

Please detail all the costs associated with the project (do not include your organization's staff time as it is not an eligible expense.)

2. In the past, the City has often provided partial funding for multiple projects instead of full funding for a few projects so that it could address numerous requests.

Please describe, in detail, the specific changes that you will make to your project or scope of services if your project is partially funded (e.g. Could this project be undertaken on a smaller scale, with fewer people served? How? Could additional funds be obtained from other sources?):

#### **PLEASE NOTE**

- (1) Funding recipients must provide recent audit prepared by an independent accounting firm.
- (2) Funding recipients may not purchase equipment with Federal funds.
- (3) Funding recipients are required to meet City of Frederick, MD's general insurance requirements

11. Timing:

Any CDBG funds awarded should be fully expended within a **10-month** period from the date of the contract signing. Please show how activities will be undertaken and funds spent to meet this time frame requirement:

<b>Calendar</b>	<b>Activities Undertaken and/or Results Achieved</b>	<b>Estimated CDBG \$ Drawn Down</b>	<b>Other Project Funds Drawn Down</b>
<b>First 3 Months</b>			
<b>Second 2 Months</b>			
<b>Third 3 Months</b>			
<b>Fourth 2 Months</b>			

**12. Key Staff and Resumes:**

1. Name the key people responsible for carrying out this project and provide their telephone numbers:

<b>Name</b>	<b>Title</b>	<b>Telephone #</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. For each of the staff people listed above, provide the following information:

<b>Name</b>	<b>Years with Organization</b>	<b>Job Responsibilities Relevant to Project</b>	<b>Percentage of Time</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**ATTACH:** Resumes of your chief administrative and chief financial officers, and key staff who will work on project (if known) at the end of the application. This information should enable the reviewer to determine the years of applicable experience and key accomplishments in areas relevant to the proposed activity for which funds are requested.

**13. LEVERAGING**

The activity should be supported by multiple funding sources and/or have well developed plans for seeking additional funding.

- List any prior CDBG funds received for this project , or for any other CDBG project, within the last five (5) years:

Project Name: \_\_\_\_\_  
 CDBG Funds Received \$ \_\_\_\_\_ Year prior funds received: \_\_\_\_\_

Project Name: \_\_\_\_\_  
 CDBG Funds Received \$ \_\_\_\_\_ Year prior funds received: \_\_\_\_\_

Project Name: \_\_\_\_\_  
 CDBG Funds Received \$ \_\_\_\_\_ Year prior funds received: \_\_\_\_\_

- Have you applied for funding from other sources for this project?

Yes \_\_\_\_\_ No \_\_\_\_\_.

If "No", why not?

If "Yes" to whom have you applied? (For *approved* funds, please provide a copy of the commitment letter. For *pending* funds, please provide the contact name and telephone number at that funding source.)

Funding Source: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Telephone Number: \_\_\_\_\_  
 Status of Funding: Approved: \_\_\_\_\_ Pending: \_\_\_\_\_ Denied: \_\_\_\_\_

Funding Source: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Telephone Number: \_\_\_\_\_  
 Status of Funding: Approved: \_\_\_\_\_ Pending: \_\_\_\_\_ Denied: \_\_\_\_\_

Funding Source: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Telephone Number: \_\_\_\_\_  
 Status of Funding: Approved: \_\_\_\_\_ Pending: \_\_\_\_\_ Denied: \_\_\_\_\_

- Identify the total cash funding for this project, and the form of assistance (i.e. loan, grant, contributions, etc.):

Source of Funds	Form of Assistance	Amount
CDBG Funds		\$
Other City/County Funds		\$



Other Funds		\$
		\$
		\$

**LEVERAGING - Continued**

4. Does this project need federal funds after GY 2017? Yes:\_\_\_\_ No:\_\_\_\_

If so, how much? \$\_\_\_\_\_ For how long?\_\_\_\_\_

Why is continued funding needed?

5. Continuation of Project

Explain, in detail, how you will continue this project once CDBG funds are no longer available. (Even if this is a first year request, please provide a well thought -out fund raising plan to be undertaken once CDBG funds are no longer available- regardless of whether funds are no longer available.)

a. What steps have you taken to secure other sources of funds for this project and to ensure the continuation of this project once CDBG funds are no longer available?

b. If applicable, please describe any modifications in the scope of activities from what was previously funded:

c. Evaluate the success of your project to date:

**LEVERAGING – Continued**

d. Total number of people and/or households directly served since this project began:

People \_\_\_\_\_ Households \_\_\_\_\_

Total number of low and moderate -income people and/or households directly served since project began:

(Please refer to the definition of low and moderate income.)

People \_\_\_\_\_ Households \_\_\_\_\_

e. Demographic breakout of people or household directly served since project began:

<b>Racial Category</b>	<b>Number of People</b>	<b>Number of Households</b>
White/Caucasian		
African-American		
Hispanic		
Asian/Pacific Islander		
American Indian/Alaska Native		

## ATTACHMENT CHECKLIST

Please complete and submit this checklist with a copy of the following.

Please label documents using the document name and numerical order below. Please place all attachments at the **end** of the application. On the checklist, indicate by an "X" if the document is attached.

- \_\_\_\_\_ Internal Revenue Service letter granting tax exempt nonprofit status 501(c) (3).
- \_\_\_\_\_ Board of Director's listing including names, titles, terms of office (if any), and addresses of all members.
- \_\_\_\_\_ Organizational chart or organizational structure.
- \_\_\_\_\_ Organization's total fiscal budget (current year)
- \_\_\_\_\_ Last year's audit.
- \_\_\_\_\_ Certificate of Good Standing
- \_\_\_\_\_ Resumes of chief administrative and chief financial officer's, and all key staff who will work on the proposed project.
- \_\_\_\_\_ **Two (2)** letters of community support.
  
- \_\_\_\_\_ Locality Map with proposed project labeled and census tract.
- \_\_\_\_\_ Drawing or Diagram of work to be performed.
- \_\_\_\_\_ Printed Digital Photos of Project Location (no more than five).
- \_\_\_\_\_ Project Specifications (Materials, List of trades, Timeframe, Permit Requirements)

**NOTE: All funded** CDBG construction projects require three (3) competitive bids, Section 3 to help foster local economic development and individual self-sufficiency. The Section 3 program requires that recipients of certain HUD financial assistance, to the greatest extent feasible, provide job training, employment, and contracting opportunities for low-or very-low income residents in connection with projects and activities in their neighborhoods.

Davis Bacon Wage Act Labor Standards Apply – a detailed scope of work with all trades must accompany the application.

Organizations who projects are approved for funding will be required to enter into a contract with The City of Frederick for implementation of the funded activity. This contract will contain provisions that will ensure compliance with all federal, state, and local laws and regulations. Upon execution of the contract and depending upon the type of activity, the organization will be required to submit other documents and information including, but not limited to: personnel rules and regulations, sample agency or organization timesheet; and proof of insurance coverage.