

CITY OF HOLLYWOOD
COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG)
SPECIAL ACTIVITIES BY A CBDO APPLICATION
SUBMISSION DEADLINE: February 11, 2021 at 3:00 p.m.



Special Activities by an Eligible Community-Based Development Organization (CBDO) - Activities being carried out by a non-profit organization that meets the criteria as a CBDO. Eligible CBDO activities include;

- a. Neighborhood Revitalization - Activities of sufficient size and scope to have an impact on the decline of a specific geographic location within the City (but not the entire City) designated in comprehensive plans, ordinances, or other local documents as a neighborhood or similar geographical designation;
- b. Community Economic Development Project - Activities that increase economic opportunity, principally for persons of low- and moderate-income, or that stimulate or retain businesses or permanent jobs, including projects that include one or more such activities that are clearly needed to address a lack of affordable housing accessible to existing or planned jobs;
- c. Energy Conservation Project – Activities that address energy conservation principally for the benefit of residents of the City of Hollywood. An activity carried out for the purpose of providing or improving permanent residential structures which, upon completion, will be occupied by low- and moderate-income households. If the structure contains two (2) dwelling units, at least one (1) must be so occupied; and if the structure contains more than two dwelling units, at least 51% of the units must be so occupied.

Congress established the Section 3 policy to guarantee that the employment and other economic opportunities created by Federal financial assistance for housing and community development programs should, if possible, be directed toward low- and very-low income persons, particularly those who are recipients of government assistance for housing. Activities funded under this category will be expected to reach out to LMI residents, businesses owned by LMI residents, and/or business that hire LMI residents to offer employment or other economic opportunities to the greatest extent feasible.

When using CDBG for Housing activities the Davis-Bacon and Related Acts can be triggered when eight single family houses are improved on contiguous lots. Davis-Bacon and Related Acts requires that all on-site employees (laborers and mechanics) be paid fair wages, benefits, and overtime (prevailing wage) weekly while working on government-funded construction projects at a minimum threshold of \$2,000.00.

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H.	Positions, Salaries, Job Descriptions and Professional development Opportunities
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L.	Letter of Other Sources of Funding Sought
M.	Certified Independent Audit
N.	CBDO Checklist
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A. APPLICATION GENERAL INFORMATION:

1. Name and Address of Entity/Organization:

2. Legal Status of Entity/Organization: CBDO Other (specify) _____

3. Date designated as a 501 (c) (3): _____ 4. Tax ID Number: _____

5. DUNS Number: _____

6. Contact Person/ Bus. Ph. / Mobile Ph. / e-mail/ Name of Organization's Registered Agent:

Agency Contact: _____

Business Phone: _____

Mobile Phone: _____

Email: _____

Agency's Registered Agent's Name and Email: _____

7. Name of Activity/ Project: _____

8. Activity Type: Special Activities by a CBDO

9. Activity/Project Summary to include program description, clientele to benefit from program, specific use of CDBG funds, etc. (*must be 250 words or less*):

10. Activity/Project Location (*list location of activity to include US Census Tract. If activity is held in multiple locations, list all locations and US Census tract numbers. If the activity is Citywide, indicate as such.*):

11. Grant Funds Requested: \$ _____

12. Total number of individuals served at requested funding level: _____

13. Lowest funding level acceptable to operate activity: \$ _____

14. Total number of individuals served at lowest funding level: _____

15. HUD NATIONAL OBJECTIVES:

Each activity must meet one of the National Objectives of the CDBG Program. Check the correct objective.

Low- and Moderate-Income Benefit (Check the appropriate benefit):

Area Benefit: The activity provides a benefit to low/moderate income persons by documenting that 51%

or more of the service area of the activity is occupied by low/moderate income households (as per the U.S. Census).

- Limited Clientele Activity: The activity benefits a limited clientele, at least 51% of whom are low/moderate income.

If Limited Clientele, The activity must meet one or more of the following criteria (Check the appropriate criteria(s)):

- It must benefit a clientele presumed to be low/moderate income e.g. abused children, elderly persons, homeless persons etc.;
- Data must be available to document that 51% of the clientele fall within the low/moderate income category;
- It must be limited exclusively to low/moderate income persons;
- The nature and location of the activity readily demonstrates that the clientele will primarily be low/moderate income persons.

Note: City Staff may modify the stated National Objective based on information provided within this application.

B. ORGANIZATIONAL CAPACITY & ACTIVITY SCOPE:

1. Briefly describe your track record and prior experience in the proposed activity and include the following information:
 - Unique qualifications or characteristics of staff, the facility or operations (*include specifics that separates your agency from others serving in the same capacity*).
 - Number of years of related experience of the organization or key staff.
 - Specific key staff assignments/tasks.
 - Summary of past client outcomes (*for the past three (3) years*).
 - Perceived challenges in meeting the goals of this proposal.
 - Illustrate how your agency has the capacity to overcome perceived challenges in meeting the goals of this proposal.
 - Provide a Year-End Report of accomplishments from previous funding year.

ATTACHMENTS A-G (REQUIRED):

- List of Board of Directors and position
- Organizational Chart (*operation of organization*)
- Resumes of Chief Administrator, Chief Fiscal Officers and Staff assigned to the proposed activity
- Organizational Business Plan
- Letter of Support from other agencies demonstrating that the “activity” as conducted by the applicant has impacted the documented need
- Florida Department of Corporations Current Filing (*print from www.sunbiz.org*)
- IRS 990 Forms with Schedules

C. PROJECT & ACTIVITY DESCRIPTION:

1. List the title of the activity: _____

2. Check the type of activity:

- | | | | |
|--------------------------|---|--------------------------|---|
| <input type="checkbox"/> | Neighborhood Revitalization | <input type="checkbox"/> | Business Stimulation/Retention |
| <input type="checkbox"/> | Affordable Housing | <input type="checkbox"/> | Job Training or Placement |
| <input type="checkbox"/> | Financial assistance to for-profit Businesses | <input type="checkbox"/> | Tech. assistance to for-profit businesses |
| <input type="checkbox"/> | Energy Conservation | <input type="checkbox"/> | Other _____ |

3. The word "activity" as used in this application denotes the action for which funds are being requested. The word "project" as used in this application denotes all of the activities that constitute the project. In some instances, the activity is the same as the project.

Is the activity for which funds are being requested part of a larger overall project?

(Check "Yes" or "No") Yes No

If "Yes", describe the project in detail and explain how the activity relates to the project. In addition, be very specific about how CDBG funds will be applied:

4. Describe the "activity", in detail, and be very specific about how the CDBG funds are proposed to be used. Be certain to include the following information:

- a. Identify and document the need or problem.
- b. Document the severity of the problem, clearly describing the need, to include statistics and reliable sources that is quantifiable and supported by appropriate data.
- c. Affected population and percentage of low- and moderate-income persons to benefit (*Area of service*).
- d. State whether organization participates directly or indirectly in the proposed activity and document the number of clients served directly and indirectly.
- e. If requesting funds for more than one (1) activity, indicate numerically which is priority and if separate applications are being submitted for each activity, but the activities are interrelated, include your agency name, number of interrelated activities, the title and type of activity:

5. Are CDBG funds proposed to be used for the payment of salaries?

(Indicate "Yes" or "No") Yes No

If "Yes", use the table below to provide the following information:

- Title of position to be charged for this proposal.
- Number of pay periods per year.
- Gross pay per period.
- Annual Gross.
- Total of salary to be charged as administration cost (CDBG funds) as part of this proposal.
- Percentage of the position annual gross (CDBG funds) to be charged as part of this proposal.
- Total salary not charged to this proposal Percentage of position annual gross not charged to this proposal.
- Percentage of the position annual gross not to be charged as part of this proposal.
- Job description of each position for which CDBG funds are being requested (attach).
- Summary of professional development opportunities and job growth (attach).

1	2	3	4	5	6	7	8
Job Title	# of Pay periods	\$ Gross pay per pd.	Annual Gross	\$ CDBG	% CDBG	\$ Non-CDBG	% Non-CDBG
Totals							

E. OUTCOME MEASUREMENT GOALS FOR PUBLIC SERVICES AND THREE-YEAR PLAN:

The City of Hollywood determines actual benefits of the funded activities by using Outcome Measurement Goals. The CDAB will review these goals closely in recommending funding to the Hollywood City Commission.

The Outcomes Measurement section measures the actual benefits or changes for individuals as a result of participating in program activities. Outcomes may relate to behavior, skills, knowledge, attitudes, values, condition, or other attributes. The purpose of this section of the application is to identify these outcomes in measurable terms.

Table 1 of this section is designed to allow the applicant to briefly describe the proposed activities initial, intermediate, and long-term outcomes.

Table 2 of this section is designed to allow the applicant to declare goals to be measured throughout the contract period.

A copy of this section will be forwarded to the CDAB Board and the Hollywood City Commission as back-up material.

Provide an outcome tracking table, using the attached tables as a model, being as brief as possible, using the guidelines below:

Resources – money, staff, staff time, volunteers, volunteer time, facilities, equipment, or supplies.

Inputs – resources dedicated to or used by the program.

Activities – what the program does with the inputs to fulfill its mission.

Outputs – direct products of program activities.

Benefits – new knowledge, increased skill, change in attitudes or values, modified behavior, improved condition, altered status.

Outcomes – benefits or changes for individuals of target populations during or after participating in program activities.

Initial Outcomes – first benefits or changes participants experience.

Longer-term Outcomes – ultimate benefits of the program.

Intermediate Outcomes – benefits that connect initial outcomes and Longer-term Outcomes.

Quantifiable Measurement Goals – a defined goal of measurement per quarter (i.e. proof of academic achievement, proof of new or increased skills- certifications, etc.)

SAMPLE:

OUTCOME MEASUREMENT TABLE 1 (Housing)

Program: ABC Organization – Housing Rehabilitation Program

Inputs	Activities	Outputs	Outcomes		
			Initial	Intermediate	Longer-term
Staff: 1 Lead Administrator, 1 Construction Manager, 1 General Contractor, and 1 Housing Counselor	The activity will rehabilitate 3 substandard owner-occupied residences.	3 Energy Efficient Affordable Housing Units.	3 energy Efficient affordable housing units	Sustainable Affordable Housing	Asset Investment

OUTCOME MEASUREMENT TABLE 1

Program:

Inputs	Activities	Outputs	Outcomes		
			Initial	Intermediate	Longer-term

Quantifiable Goals Table 2

First Quarter:

Second Quarter:

Third Quarter:

Fourth Quarter:

F. SECTION 3 COMPLIANCE PLAN. Congress established the Section 3 policy to guarantee that the employment and other economic opportunities created by Federal financial assistance for housing and community development programs should, if possible, be directed toward low- and very-low income persons, particularly those who are recipients of government assistance for housing. Activities funded under this category will be expected to reach out to LMI residents, businesses owned by LMI residents, and/or business that hire LMI residents to offer employment or other economic opportunities to the greatest extent feasible. In order to evaluate the applicant’s ability to adhere to Section 3 Compliance requirements, the CDAB requires each applicant under this category to submit a Section 3 Compliance Plan including the following;

Marketing Plan:

- Explain in detail how the organization will inform Section 3 compliant residents of employment or training opportunities in conjunction with the funded activity.
- Explain what procurement methods the organization shall use to select contractors (general or subcontractors) that will participate in the activity.
- Explain in detail what efforts the organization will undertake to avail contract opportunities to Section 3 compliant businesses.
- Explain in detail what training opportunities, if any, the organization will avail to Section 3 compliant residents.

Section 3 Goals:

- State the estimated number of new hires that will be generated by the activity.
- State the numerical goal for Section 3 compliant new hires related to the activity.
- State the numerical goal to contract with Section 3 complaint businesses related to this activity.

G. BUDGET JUSTIFICATION AND LEVERAGE OF FUNDS

1. Is the activity for which CDBG funds are being requested part of an overall project?

(Check “Yes” or “No”) Yes No

If "yes", **attach** an **itemized total project budget (Attachment I)**, and complete the following:

a. Total Project Cost: \$

b. Does the total project cost include funds from other federal, state or local programs?

(Check “Yes” or “No”) Yes No

If "yes", provide the name of the agency or agencies, program(s), amount(s), and year(s) awarded:

	<u>Agency</u>	<u>Program</u>
	<u>Amount</u>	<u>Year</u>
1.)	\$	
2.)	\$	
3.)	\$	

4.) \$

2. Was the "Prevailing Wage Rate" taken into account in the development of the budget?

(Check "Yes" or "No") Yes No

3. Has this project received City of Hollywood General Funds in the past three (3) years?

(Check "Yes" or "No") Yes No

If "yes", provide the name of the program(s), amount(s), and year(s) funded:

<u>Program</u>	<u>Amount</u>	<u>Year</u>
1.)	\$	
2.)	\$	
3.)	\$	
4.)	\$	

Disclose any previous awarded and unused CDBG funds and the reason.

FY _____ unused amount _____

Reason for unused funds: _____

4. Of the total project cost, what percentage has been, or will be financed with CDBG funds?

<u>CDBG Funding</u>	<u>Total Project Cost</u>	=	<u>Percentage</u>
\$ _____	\$ _____	=	_____ %

5. **Activity Budget**

a. **Attach an itemized activity budget (Attachment J), including any necessary supplemental information. The itemized activity budget must include** a detailed, line- item budget including a description of tasks and implementation costs. NOTE: Salary, fringes and related costs are allowed as long as the salaries are related to specific activity tasks. Narrative justification for each line item (including each salary item) must be provided. The narrative should justify each salary by describing the activity tasks associated with each salary.

b. Complete the following budget summary:

i. Total Activity Cost \$ _____

ii. Breakdown of Total Activity Cost:

- a) Activity Cost \$ _____
(Enter the total cost of the activity, excluding administrative expenses, for which funds are being requested)
- b) Activity Administration (if applicable)..... \$ _____
(Enter the amount of administrative expenses involved with the activity.)

iii. Total Funding Sources: \$ _____

iv. Breakdown of Total Funding Sources:

- a) Total CDBG Funds Requested\$ _____
(Enter the amount of CDBG funds requested for the activity.)
- b) Other Activity Funding\$ _____
(Enter the total amount of non-CDBG funds to be used for this activity.)
- c) Are CDBG funds being requested for travel?

(Check "Yes" or "No") Yes No

If "yes", explain the purpose of the travel and estimated mileage:

6. Are CDBG funds being requested for attendance to conferences or training events?

(Check "Yes" or "No") Yes No

If "yes", explain the purpose:

- 7. From a financial perspective, explain and justify the reason why CDBG funds are needed (i.e. financing gap, location, etc.)
- 8. Determine the amount, per person, by dividing the total funds requested by the number of persons directly benefitting (i.e. Funding Amount \$15,000.00, 125 clients served per month at a rate of \$10.00 per client for the program year).
- 9. Justify and document the reasonableness of cost for the amount of CDBG funds requested per unit of measurement as included in the activity description (250 words or less).

10. Program Income/Revenue

- a. Does the activity and/or project for which CDBG funds are being requested propose to generate program income and/or revenue, either directly or indirectly?

(Check "Yes" or "No") Yes No

If "yes", list the source(s) of all anticipated program income from the project/activity:

<u>Program/Activity</u>	<u>Projected Annual Income/Revenue</u>
1.)	\$
2.)	\$
3.)	\$
4.)	\$
TOTAL	\$

11. Matching Contributions

Applicants are strongly encouraged to provide matching funds. Matching contributions will positively impact the application. (City departments are exempt; matching contributions are optional.) Applications that include matching contributions must evidence attached that the matching contribution is available, or will be available, at the beginning of the fiscal year for which CDBG funds are applied.

a. Check the appropriate eligible form(s) of matching contribution for the activity:

- Cash contributions;
- Other federal, state, or local grants or programs;
- Fund-raising monies;

b. Detail all matching contributions to the activity. Include the source, the type of contribution (i.e., grants, loans, own source of funds, real estate, etc.) and the value:

<u>Source of Contribution</u>	<u>Type of Contribution</u>	<u>Value of Contribution</u>
1.)		\$
2.)		\$
3.)		\$
4.)		\$
TOTAL		\$

c. Explain the method utilized to establish the fair market value of land or real estate as a matching contribution:

d. Are the matching contributions selected above available now or to be made available at the beginning of the fiscal year for which funds are being applied?

(Check "Yes" or "No") Yes No

If "yes", evidence of availability must be attached. If "no", explain the availability of the matching contribution:

- e. Non-municipal applicants must describe all steps taken to secure other funding for the activity.

Attach at least one (1) letter demonstrating that the activity or project has been submitted to other agencies for funding within the last twelve (12) months prior to submission to the City of Hollywood Community Development Division (Attachment L). The agencies determination on those submissions must be included. If no other sources of funding have been sought, provide an explanation:

- f. Agency Accounting Information:

List the name, address, e-mail address and phone number of the Financial Advisor, Accountant, Bookkeeper or Certified Public Accountant who is responsible for financial records:

- g. Attach a copy of your most recent Certified Independent Audit and management letter which expresses the opinion that the agency's or organizations internal controls are adequate to safeguard assets.
- h. Will your agency receive and expend \$750,000.00 or more in Federal funds for the program year (FY 21-22)?

(Check "Yes" or "No") Yes No

H. AGENCY INSURANCE REQUIREMENTS

The City will require that the Agency or organization to provide a **Certificate of Insurance** which reflects current liability insurance, **naming the City as additional insured**; current workers' compensation insurance; current fidelity bond (applicable for persons authorized to receive or disburse funds); automobile insurance etc. Can you provide such documentation, if funded?

(Check "Yes" or "No") Yes No

If "no", explain:

I. MAINTENANCE BUDGET

The maintenance and repair of public facilities and improvements undertaken as a result of this application is generally ineligible as a use of CDBG funds. The following table enables applicants to describe the ongoing maintenance budget for an activity for five years following completion. If the application does not public facilities and improvements activities, insert N/A in each cell.

Year	Sources of Funds	Annual Budget	Uses of Funds
1		\$	
2		\$	
3		\$	
4		\$	
5		\$	

J. CBDO QUALIFICATIONS

1. The applicant is an organization within an identified geographic area of operation within the City and has as its primary purpose the improvement of the physical, economic or social environment of its geographic area of operation by addressing one or more critical problems of the area, with particular attention to the needs of persons of low and moderate income.

(Check "Yes" or "No") Yes No

2. The organization maintains at least 51 percent of its governing body's membership for low- and moderate-income residents of its geographic area of operation; and/or the owners or senior officers of private establishments and other institutions located in and serving the organizations geographic area of operation; and/or representatives of low- and moderate-income neighborhood organizations located in the organizations geographic area of operation.

(Check "Yes" or "No") Yes No

3. The organization is not an agency or instrumentality of the City of Hollywood and does not permit more than one-third of the membership of its governing body to be appointed by, or to consist of, elected or other public officials or employees or officials of an entity ineligible to be certified as a CBDO.

(Check "Yes" or "No") Yes No

4. The organization requires the members of its governing body to be nominated and approved by the general membership of the organization or by its permanent governing body.

(Check "Yes" or "No") Yes No

5. The organization is not subject to requirements under which its assets revert to the City of Hollywood upon dissolution.

(Check "Yes" or "No") Yes No

6. The organization is free to contract for goods and services from vendors of its own choosing.

(Check "Yes" or "No") Yes No

7. If funded, the City of Hollywood will require the organization to complete self-certification forms for resident board members, business owner/senior representative board members and non-profit neighborhood organization board members. Can you provide such documentation of funded?

(Check "Yes" or "No") Yes No

If "No", explain:

APPLICATIONS MUST BE SIGNED BY AUTHORIZED ENTITY/ ORGANIZATION REPRESENTATIVE:

I certify to the best of my knowledge, that the information provided in this application reflects accurate data regarding need and estimates of planned services. This application was considered and approved for submission by the Board of Directors on _____ **(date)** and the respective meeting minutes are included in this submission. By signing this application, the undersigned agrees that if the application is accepted, items or services for which prices are quoted will be provided, subject to final negotiation and acceptance by City of Hollywood, and subsequent contract award.

Signature of Authorized Representative	Date
Print Name	Title