Hudson County
Division of Housing and Community Development

Community Development Block Grant (CDBG)

REQUEST FOR FUNDING APPLICATION

Project Name: _____

Applicant: _____

Section 1: Application

(1) Name of Organization: _____

(2) Address: _____

_____

_____

(3) Contact Person: _____

Title _____ Phone _____

(4) Type of Application:

☐ Not-for-Profit ☐ Municipality ☐ Other Public Agency

Please Specify: _____

(5) Federal ID Number: _____

(6) Proposed Activity (check applicable box)

☐ Economic Development ☐ Housing ☐ Housing for Homeless/HIV-AIDS
☐ Public Facilities ☐ Public Improvements ☐ Public Services
☐ Youth (Public Services) ☐ Seniors (Public Services) ☐ Anti-Crime (Public Services)

(7) Requested CDBG Funds: $ _____ Total Project Cost: $ _____

(8) Terms of Assistance: ☐ Grant ☐ Loan (if Loan, specify term) _____

(9) Name of Proposal: _____

Primary address of proposed activity: _____

Census Tract: _____ _____

Block Group: _____ _____

- Refer to Exhibit 1 (Census Tract and Block Group Information) pg. 13.

(10) Proposal Description (Please be brief, and use only the space provided).

_____

_____

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_____

(11) Has this project received CDBG funding in the past? ☐ Yes ☐ No

Section 2: Project / Program Description

1. Identify location of Project/Program:_____

_____

- Submission of **Location Map is required** as *'Attachment A'*.

2. Project Objective:
   - ☐ Create a Suitable Living Environment
   - ☐ Provide Decent Housing
   - ☐ Create Economic Opportunities

3. Project Outcome:
   - ☐ Improving the Availability or Accessibility of Units or Services
   - ☐ Improving the Affordability of Housing and other Services
   - ☐ Improving sustainability by promoting viable communities

4. Is this activity new, or ongoing? ☐ New ☐ Ongoing ☐ Expansion of ongoing activity

5. Please provide a brief description of the proposed project or program below, and using **only** the space provided.

Section 3: Documentation of Community Need

Please answer each of the questions below. **One** additional sheet may be added if necessary.

1. Provide evidence of the need for this program, serving low/moderate income households, individuals, or areas within Hudson County. Specific information should be included related to the needs of the population, area of the County being served, and connection to the proposed activity.

2. Identify the populations that will benefit from the proposed activity, and provide clear data demonstrating that the proposed activity will serve an identified need in the community.

3. Provide an explanation of how this activity is not a duplication of other projects/programs in the area, how this activity will fill current gaps in the system, and also where efforts have been made to coordinate and develop partnerships with programs providing similar services in the area.

4. Describe how this activity will address issues related to affordable housing in the targeted areas, if applicable.

Section 4: Proposed Performance Goals

Please answer each of the questions below. One additional sheet may be added if necessary.

1. Following the guidelines below, establish quantitative and qualitative goals that can be used to judge the effectiveness of the proposed activity.

   a. Set numerical performance goals (i.e. how many persons served, units built, and time frames).
   b. Set qualitative goals outlining intended accomplishments (i.e. Number of persons with; improved language skills, increased income, educational attainment, participation in organized events, use of community facilities, etc).
   c. Explain why specific measurements were chosen to measure performance.
   d. Provide a schedule showing how your agency will measure its progress in achieving these goals on a quarterly basis.

Section 4:
Limited Clientele Ethnic Breakdown
*To be completed **only** by Public Service project Applicants, serving 'Limited Clientele'*

Ethnicity	**# Total**	**Hispanic or Latino**
White		
Black / African American		
Native Hawaiian / Other Pacific Islander		
American Indian / Alaskan Native & White		
Asian		
American Indian / Alaskan Native		
Asian & White		
Black / African American & White		
American Indian / Alaskan Native & Black / African American		
Other Multi-Racial		
Total		

**** Provide your best estimates. This information is mandated for purposes of project set-up with HUD.***

Section 5: Applicant Capacity

Please answer each of the questions below. Additional sheets may be added if necessary.

1. Describe the applicant and/or administrator of the proposed project/program by answering the following:

a. Brief history of organization including length of existence.

b. Identify current services offered and special accomplishments and skills that will demonstrate your organization's ability to undertake the proposed activity.

c. List any previous experience the organization has had that would be relevant to the proposal.

d. List prior experience with funding from the Hudson County Division of Housing and Community Development.

e. Describe how your organization will handle the record keeping required by this type of funding (i.e. proof of income eligibility).

2. Identify the staff that will be assigned to this project or program, and answer the items below:

a. Are the identified positions currently staffed, will a new staff member be hired, or will additional staffing considerations be obtained through contracting.

b. Estimate the amount of time that the identified staff will spend on tasks related to this activity on a weekly basis.

c. Identify the key staff roles related to this activity, and the expertise they will bring in order to implement this proposal.

3. *(Development Projects Only)* Identify the development team responsible for the professional and construction work related to this project including; the proposed contractor, and/or subcontractors.

Section 6: Feasibility

Please answer the following questions in the space provided below.

1. Project Readiness:

   a. How quickly will the project begin, once funds are awarded.

   b. Identify community demand for proposed project (i.e. Letters of support from individuals interested in renting development properties, letters of support from community members, community organizations, elected officials, etc.)

   - **Municipal applications must be executed by the Mayor of the Municipality.**

2. Regulatory Concerns:
   To your knowledge, will any of the following State, Federal, and HUD regulations/ licensing requirements be necessary: (Check all applicable)

□ Historic Preservation
□ Floodplain Management
□ Wetland Protections
□ Coastal Zone Management
□ Sole Source Aquifer
□ Noise Abatement Control
□ Airport Clear and Accident Potential Zones
□ Endangered Species Act
□ Wild and Scenic Rivers Act
□ Clean Air Act
□ Farmland Protection Act
□ Environmental Justice
□ Explosive and Flammable Operations
□ Toxic Chemicals and Radioactive Materials
□ Other: (Describe) _____

3. Site Control *(Development Proposals Only):*

   a. Describe, and provide documentation of site control for the building/site.

   b. Agency's site control is by (check applicable box):

   □ Lease
   □ Deed
   □ Option to Purchase
   □ Letter of intent from owner to seller is attached to this application

4. Location Selection and Neighborhood Impact:

   a. How the location was selected, what is planned, and will this activity result in a positive impact for the neighborhood.

   b. Substantiate the selection of this location for the activity.

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Section 6: Feasibility, Cont'd

Section 7: Leveraging (Budgets)

PROPOSED BUDGET FOR CONSTRUCTION PROJECTS

Complete the following proposed budget, timetable and expenditures projection

Budget Line Items	Total Budget	CDBG Budget*
Uses of Funds		
Construction Fees and Charges		
Architectural/Engineering Fees	$	$
Consultant Fees	$	$
Financing Fees	$	$
Other	$	$
Construction		
Demolition Costs	$	$
Construction Costs	$	$
A/E Supervision Fees During Construction	$	$
Other (specify) _____	$	$
Contingencies		
Other (specify) _____	$	$
Total Uses	$	$

*Note: Total CDBG funding must equal the Requested CDBG funding.

Sources of Funds	
Requested CDBG*	$
Other (specify) _____	$
Other (specify) _____	$
Total Sources	$

*If the full amount of requested CDBG funding is not awarded, are other funding sources available to compensate for those CDBG funds not awarded?Yes ____ No ____

Explain:

_____

_____

CONSTRUCTION PROJECT TIMETABLE

Activities	Projected Dates
Advertise for A/E Firm	_____
Award A/E Contract	_____
Advertise for Construction Bids	_____
Award Construction Contract	_____
Preconstruction Meeting	_____
Commence Construction	_____
Complete Construction	

Section 7: Leveraging (Budgets)

PROPOSED BUDGET FOR NON - CONSTRUCTION PROJECT

Complete the following proposed budget, timetable and expenditures projection

Budget Line Items	**Total Budget**	**CDBG Budget***
Uses of Funds		
Personnel Costs*	$	$
Consultant Services	$	$
Contract Services	$	$
Office Supplies	$	$
Office Rental	$	$
Equipment Rental and Purchase	$	$
Phone	$	$
Copying/Printing	$	$
Fuel/Electric	$	$
Other (specify) _____	$	$
Other (specify) _____	$	$
Total Uses	$	$

*Note: Total CDBG funding must equal the Requested CDBG funding.

Sources of Funds	
Requested CDBG*	$
Other (specify) _____	$
Other (specify) _____	$
Total Sources	$

*If the full amount of requested CDBG funding is not awarded, are other funding sources available to compensate for those CDBG funds not awarded? Yes ____ No ____

Explain:

_____

_____

_____

Section 7:

Leveraging

Program Administration Requirements

Complete if funds are being used to cover administrative costs associated with the implementation of the Community Development Block Grant Program.

Description of Program Administration Expenses (ie. rent, supplies, etc.)

Job Description

To be completed by all applicants proposing to use CDBG funds for salaries

- ***Please make additional copies, as needed per staff member represented.***

Applicant: _____

Project Name: _____

Basic Staff Description

Total staff/personnel costs associated with Hudson County CDBG Funds: $ _____

Individual's Name: _____

Title: _____

Salary: $ _____

Job Description: _____

_____

_____

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Attachment Checklist

Check all that have been included in your application

Attachments and other documentation should be included at the end of the application, and noted in the applicable section.

- ☐ Project/Program Location Map
- ☐ Letters of Coordination / Participation / Memorandums of Understanding
- ☐ Letters of Funding Commitment /Interest
- ☐ Articles of Incorporation
- ☐ By-Laws
- ☐ Mission Statement
- ☐ Most Recent Audited Financial Statement
- ☐ Current List of Board of Directors, Names, Titles, terms of office, sector represented, organizational affiliation
- ☐ Evidence of IRS 501(c)(3) Status
- ☐ Evidence of Site Control & Site Plan

Application Certification

I hereby certify that all of the above and attached information is accurate to the best of my knowledge and approve the submission of this application for Hudson County Community Development Block Grant Funds.

Municipal applications must be executed by the Mayor of the Municipality.

Typed Name	Title
Signature	Date

Please submit one original and one copy of this application & attachments to:
Hudson County Division of Housing and Community Development,
257 Cornelison Avenue, 2nd Floor
Jersey City, NJ 07302
If you have any questions concerning the application contact:
Susan Mearns, Division Chief, at (201) 369-4520.

Exhibit 1

Census Data

- In the County of Hudson a project is eligible under the **low/mod-income area benefit** if at least **47.6%** of the persons residing in an area are low/mod-income persons.

Listed below are the Census Tracts/Block Groups where at least 47.6% of the residents in a census tract/block group are low/mod-income persons.

Municipality	Eligible Census Tract	Block Groups	Low/Mod Persons	Low/Mod Universe	Low/Mod Percentage
Guttenberg	015000	2	1586	3277	48.4%
	015100	1	879	1480	59.4%
Harrison	013600	2	602	1266	47.6%
	013700	2	492	972	50.6%
Hoboken	018500	2	411	740	55.5%
	019000	3	2115	2770	76.4%
	019300	2	524	882	59.4%
Kearny	013200	3	629	1189	52.9%
Secaucus	019600	2	442	929	47.6%
Weehawken	018000	1	989	1991	49.7%
	018200	2	893	1706	52.3%
West New York	015200	3	1719	2924	58.8%
	015300	1	797	1299	61.4%
	015300	2	629	1106	56.9%
	015300	3	1137	2093	54.3%
	015500	1	600	1106	54.2%
	015500	2	1125	1764	63.8%
	015500	3	781	1381	56.6%
	015600	1	1051	1681	62.5%
	015600	2	1205	2021	59.6%
	015700	1	805	1677	48.0%
	015700	2	1128	1993	56.6%
	015800	2	4045	6107	66.2%
	015900	1	1124	1627	69.1%
	015900	2	1120	1575	71.1%
	015900	3	984	1593	61.8%
	015900	4	489	947	51.6%
	016000	1	555	1062	52.3%
	016000	2	1260	1974	63.8%
	032400	1	728	1375	52.9%
	032400	2	855	1462	58.5%
	032400	3	1183	2083	56.8%
	032400	4	580	992	58.5%

* There are no low/mod census tracts in the Borough of East Newark.
** Numbers reported above are based on FY00 census figures on low/moderate income, updated by the Department of Housing and Urban Development (Spring 2007).

Exhibit 2

CDBG & INFRASTRUCTURE IMPROVEMENT ACTIVITIES
HUDSON COUNTY CDBG PERFORMANCE MEASURE INDICATORS

Please note that not all of the questions need to be answered at this time. However, upon the submission of periodic progress reports and/or upon the completion of the project activities this information will be required.

FOR INFRASTRUCTURE IMPROVEMENT ACTIVITIES:
Describe the activities in detail and the number of persons anticipated to be assisted.

Be aware that upon completion of the project the following information will be required:
- Number of persons actually assisted:
  - with new access to service or benefit;
  - with improved access to service or benefit (for existing/on-going activities);
  - where the activity was used to meet a quality standard or measurably improved quality, report number of households that no longer have access to substandard services only.

For Activities that address the elimination of SLUM AND BLIGHT.
Describe the activities in detail and the number of parcels/acres anticipated to be involved.

Be aware that upon completion of the project the following information will be required:
- The actual numbers of parcels/acres that were improved;
- A description of the resultant redevelopment.

For Activities involving COMMERCIAL FACADE IMPROVEMENTS AND BUSINESS BUILDING REHABILITATION.
Describe the activities in detail and the number of parcels/facades/buildings anticipated to be involved.

Be aware that upon completion of the project the following information will be required:
- The actual number of parcels/facades/buildings involved;
- The amount of private funds leveraged.

For Activities involving BROWNFIELDS REDEVELOPMENT.
Describe the activities in detail and the number of parcels/acres anticipated to be involved.

Be aware that upon completion of the project the following information will be required:
- The actual number of parcels/acres that were remediated;
- A description of the resultant redevelopment.

Exhibit 2

SOCIAL & PUBLIC SERVICE ACTIVITIES
HUDSON COUNTY CDBG PERFORMANCE MEASURE INDICATORS

Please note that not all of the questions need to be answered at this time. However, upon the submission of periodic progress reports and/or upon the completion of the project activities this information will be required.

FOR SOCIAL & PUBLIC SERVICE ACTIVITIES.
Describe the activities in detail and estimate the number of persons to be served by the activity

Be aware that upon completion of the project the following information will be required:

- Number of persons actually assisted:
  - with new access to service or benefit;
  - with improved access to service or benefit (for existing/on-going activities);
  - where the activity was used to meet a quality standard or measurably improved quality, report number of households that no longer have access to substandard services only.

For Activities involving assistance to HOMELESS PERSONS.
Describe the activities in detail noting specifically the number of homeless persons that are projected to be assisted with access to overnight shelters or other emergency housing support.

Be aware that upon completion of the project the following information will be required:

- The number of homeless persons actually assisted.

Exhibit 2

HOUSING ACTIVITIES
HUDSON COUNTY CDBG PERFORMANCE MEASURES INDICATORS

Please note that not all of the questions need to be answered at this time. However, upon the submission of periodic progress reports and/or upon the completion of the project activities the information will be required.

For Activities involving the REHABILITATION of RENTAL UNITS.
Describe the activities in detail and estimate the total number of rental units anticipated to be rehabilitated.

Be aware that upon completion of the project the following information will be required:

- The total number of housing units rehabilitated and provide the following information:
  - Of the total number of units rehabilitated
    - The number of units that are affordable
    - The number of units that are Section 504 accessible;
    - The number of units brought from substandard to standard condition (HUD's Housing Quality Standards or local code);
    - The number of units meeting International Building Code Energy Standards and of those the number meeting Energy Star standards;
    - The number of units brought into compliance with HUD's lead safe housing rule.
  - Of the Affordable units:
    - The number of units subsidized by Federal, state or local program (specify which Federal program);
    - The number of years of affordability guaranteed.
  - The number of units rehabilitated for persons with HIV/AIDS:
    - Of those, the number of units for the chronically homeless;
    - Of those, the number made Section 504 accessible.
  - Number of units rehabilitated for homeless persons and families:
    - Of those, the number of units for the chronically homeless;
    - Of those, the number of units made Section 504 accessible.

For Activities involving the REHABILITATION of OWNER OCCUPIED UNITS.
Describe the activities in detail and estimate the total number of owner occupied units anticipated to be rehabilitated.

Be aware that upon completion of the project the following information will be required:

- The total number of housing units rehabilitated and provide the following information:
  - The number of units brought from substandard to standard condition;
  - The number of units brought to International Building Code Energy Standard and of those, the number meeting Energy Star standards;
  - The number of units brought into compliance with HUD's lead safe housing rule;
  - The number of units subsidized by federal, state or local program (specify which federal program).

For Activities involving assistance to HOMELESS PERSONS.
Describe the activities in detail noting specifically the number of homeless persons that are projected to be assisted with access to overnight shelters or other emergency housing support.

Be aware that upon completion of the project the following information will be required:

- The number of homeless persons actually assisted.

Exhibit 2

ECONOMIC DEVELOPMENT ACTIVITIES
HUDSON COUNTY CDBG PERFORMANCE MEASURE INDICATORS

Please note that not all of the questions need to be answered at this time. However, upon the submission of periodic progress reports and/or upon the completion of the project activities the information will be required.

For Activities that result in the CREATION of NEW JOBS.
Describe the activities in detail and the total number of new jobs anticipated to be created.

Be aware that upon completion of the project the following information will be required:

- The actual number of jobs created;
- Employer sponsored health care benefits: Yes/No;
- Type of jobs created (use the Economic Development Administration job classification below);
- Employment status before taking job created;
- Number of unemployed ____ (N/A for projects awarding funding on a "made available to" basis).

For Activities that result in the RETENTION OR THE SAVING of EXISTING JOBS.
Describe the activities in detail and the total number of jobs anticipated to be retained or saved.

Be aware that upon completion of the project the following information will be required:

- The actual number of jobs retained or saved;
- Employer sponsored health care benefits: Yes/No;
- Type of job created (use the Economic Development Administration job classification below);
- Prior employment status before taking job created;
- Number of unemployed ____ (N/A for projects awarding funding on a "made available to" basis).

For Activities that involve ASSISTANCE TO BUSINESSES.
Describe the activities in detail and the total number of businesses anticipated to be assisted.

Be aware that upon completion of the project the following information will be required:

- Number of new businesses established;
- Number of businesses that expanded;
- Number of businesses that relocated;
- The DUNS number(s) of those businesses;
- The two-digit NAIC industry classification (if needed w/ DUNS).

For All Activities that assist business, DOES THE BUSINESS PROVIDE A GOOD OR SERVICE TO MEET NEEDS OF A SERVICE AREA OR NEIGHBORHOOD?
If yes, describe the activities in detail and the goods or services provided.

Economic Development Administration Job Classifications are as follow:

►Officials and Managers
►Professionals
►Technicians
►Laborers (unskilled)
►Office and Clerical
►Craftsperson (skilled)
►Operatives (semi-skilled)
►Sales Workers
►Service Workers and Others

Exhibit 3

HUDSON COUNTY - COMMUNITY DEVELOPMENT BLOCK GRANT
HOUSEHOLD SIZE AND INCOME LIMIT

FY2010 FAMILY INCOME LIMITS

Effective May 20, 2010

Income Limits	1 Person	2 Persons	3 Persons	4 Persons	5 Persons	6 Persons	7 Persons	8 Persons
30% of Median Family Income Extremely Low	$ 15,050	$ 17,200	$ 19,350	$ 21,450	$ 23,200	$ 24,900	$ 26,600	$ 28,350
50% of Median Family Income Very low-income	$ 25,050	$ 28,600	$ 32,200	$ 35,750	$ 38,650	$ 14,500	$ 44,350	$ 47,200
80% of Median Family Low-income	$ 40,050	$ 45,800	$ 51,500	$ 57,200	$ 61,800	$ 66,400	$ 70,950	$ 75,550