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**Town of Bridgton**

**Community Development**

**Block Grant**

**Public Service**

**Application**

July 1, 2021 – June 30, 2022

Applications due - 4:00 PM, January 12, 2021

**COMMUNITY DEVELOPMENT BLOCK GRANT**

**PROGRAM YEAR 2020-2021**

**APPLICATION**

****

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1. **APPLICATION INSTRUCTIONS**
2. **INTRODUCTION**

The Public Service Program provides funding to local public service agencies that provide a direct benefit to the citizens of Bridgton. The grant funds provide funding for operating expenses, equipment, and program materials for public service programs. Past funded programs include adult/child recreation scholarships, senior services, and domestic violence services. The CDBG funds should be seen as seed money for starting or expanding innovative programs. Our goal in funding a program is to help get it off the ground or successfully expand. *We strongly encourage new and innovative programs to apply for the 2020-2021 round of CDBG funding*. If you are planning to apply for funding of an eligible activity under the Community Development Block Grant Program for an agency, please note:

• Applications will only be accepted from non-profit organizations or Town of Bridgton departments.

• All requests submitted will be in competition for funding.

• Matching funds may be a deciding factor in a recommendation for funding.

• A separate proposal must be submitted for each proposed funding request*.*

**B. FEDERAL HUD REGULATIONS**

1. **National Objectives:**  To be considered for CDBG funding a program or project must meet the following National Objective:
	* + - 1. **Benefit to Low to Moderate Income (LMI) Persons**

To qualify for funding under the LMI category, the persons or households served must have income levels at or below 80% of the *area median income* (AMI) as set forth in the chart below. HUD requires stratified income data on beneficiaries. You will need to report which category beneficiaries fall into below 80% of AMI, 50% of AMI or 30% of AMI.

**2020 HUD Low to Moderate Income Guidelines for Bridgton, Maine\*\***

|  |
| --- |
| **2020 Income Limits: Cumberland County, *BRIDGTON*** |
| **Household****Size** | **Extremely Low Income**(HUD Designation Only 30%) | **Low Income** (HUD Designation Only 50%) | **Moderate Income**(HUD Designation Only 80%) | **Not Low/Mod**(HUD Designation Only) |
| **1** | 16,450 | 27,350 | $43,750 | $43,751 + |
| **2** | 18,800 | 31,250 | $50,000 | 50,001 + |
| **3** | 21,150 | 35,150 | $56,250 | $56,251 + |
| **4** | $23,450 | 39,050 | $62,500 | $62,501 + |
| **5** | $25,350 | 42,200 | $67,500 | $67,501 + |
| **6** | $27,250 | $45,300 | $72,500 | $72,501+ |
| **7** | $29,100 | $48,450 | $77,500 | $77,501 + |
| **8** | 31,000 | 51,550 | $82,500 | $82,501 + |

\*\* New income guidelines are expected prior to grant award. All CDBG recipients will be required to update any forms used to collect beneficiary information whenever new income guidelines are made available.

There are two approaches for meeting the Low to Moderate Income qualifications:

1. *Low to Moderate Income Limited Clientele* (LMC): an activity which provides benefits to a specific group of persons of which at least 51% of the beneficiaries of the activity qualify as LMI persons earning less than 80% of the area median income as defined in the table above. To qualify each individual must establish, by means of financial information on *household size and income,* that *at least 51%* of the clientele are persons whose household income does not exceed the LMI limit.

There are certain populations that HUD presumes to be low to moderate income. For programs serving these populations income data does not need to be collected, however race and ethnicity do. Populations include: *abused children, elderly persons, battered spouses, homeless persons, severely disabled adults, illiterate adults, persons living with AIDS, and migrant farm workers*.

1. *Low to Moderate Income Area Benefit* (LMA): an activity *which is available to benefit all the residents of an area* qualifying under HUD guidelines. HUD has identified neighborhoods eligible to receive CDBG funding based on income data provided by the census and American Community Survey. The eligible areas are shown on the map below and can also be found online at:

 <https://bridgtonmaine.org/community-development/>

Other service areas may be eligible on a case-by-case basis. After defining your service area, please contact the CD Staff to determine eligibility. The current map is based on the 2015 Census and the American Community Survey.

1. **List of Eligible Activities**: In addition to meeting a National Objective, each project must be an Eligible Activity, including:

Social services, or public services, include but are not limited to job training, childcare, educational programs, senior services, food services, and homeless services.

1. **List of Ineligible CDBG Activities**
2. Improvements to buildings for the general conduct of government.
3. General government expenses.
4. Political activities and lobbying.
5. Purchase of equipment, specifically for construction but also including fire protection equipment, furnishings and personal properties.
6. Operating and maintenance expenses.
7. New housing construction.
8. Income payments.
9. Supplanting or substituting expenses currently paid for by other sources.
10. **Program/Project Objectives:** Once a national objective and eligible activity have been identified, each proposal must address *one* of the following objectives:
	* + 1. **Creating Suitable Living Environments**
			2. **Providing Decent Affordable Housing**
			3. **Creating Economic Opportunities**

**C. CDBG GOALS & PRIORITIES**

1. **Goals**

* + - * **Public Facility Improvements-** *Improve accessibility and availability of public infrastructure-* This goal will be supported through a range of improvements to community centers, senior centers, food panties, parks, playgrounds, and similar public buildings.
			* **Public Infrastructure Improvements**-*Improve the quality of public infrastructure that primarily serves low to moderate income families.* This goal will be supported through improvements to and the creation of new sidewalks, storm drainage, road improvements, and utility improvements such as water and sewer lines.
			* **Affordable Housing**-*Promote activities that support affordable housing development and the rehabilitation of residential housing.* This goal will be supported through land acquisition, installation of infrastructure, and home repair programs such as energy efficiency, weatherization, and handicap accessibility.
			* **Economic Development**- *Assist businesses through job creation programs-* This goal will be supported through programs that assist businesses who are looking to expand and hire low to moderate income individuals.
			* **Public Services-** *Promote programs and activities that improve the quality of life for low and moderate income individuals.* This goal will be supported through programs such as homeless prevention, elder services, transportation, domestic violence prevention, support for food pantries, child care, health care, care for persons with mental illness, addiction and developmental disabilities, youth recreation, English language learners, and similar social service programs.
			* **Community Planning**-*Promote long range planning for the benefit of the community as a whole.* This goal will be supported through planning grants that aid in the identification of future CDBG and community development projects.

2. **Guiding Principles**

* **Project Description.** All projects should be clearly defined. The project description should explain the “who, what, when, and where” of the project. All applications will be reviewed with respect to the 2016-2020 Consolidated Plan and other HUD requirements. Plans can be found online at:

<http://www.cumberlandcounty.org/DocumentCenter/View/1618/2016-2020-Five-Year-Consolidated-Plan->

* **Need for the project.** Programs and projects will be evaluated based on how well they demonstrate a need for this project within the community. Proposals should clearly address gaps in or duplication of services.
* **Project Management.** Projects will be evaluated on past performance and/or the organizations ability to successfully execute the requirements of this program.
* **Readiness to Process.** Proposals must clearly demonstrate the organization’s ability to start the program as soon as the grant becomes available.
* **Implementation Schedule.** Proposals will be evaluated on their planned implementation schedule, and must clearly demonstrate the projects ability to meet set quarterly goals.
* **Demonstration of Need for CDBG Funds.** CDBG funds are a limited resource. All proposals will be carefully evaluated to determine if CDBG is the best funding source for this project. Proposals should clearly demonstrate an effort to secure funding from other sources before applying to CDBG.
* **Partnership and Collaboration.** Proposals should demonstrate collaboration with other organizations or Town Departments serving the same population. Partnerships and Collaborations with other organizations and Town Departments prevent an unnecessary duplication of services. Proposals should be coordinated with relevant Town Departments where appropriate and align with Town initiatives.

## D. APPLICATION GUIDELINES

1. **Social Service Application**: Provide an eligible social service that serves 51% low to moderate-income Bridgton residents. Please complete and submit Section II Social Service Application, the Application Budget Form, plus relevant attachments.

## 2. Funding Request Restrictions:

1. **Maximum Grant Request**

$25,000 Social Services

 3. **Submission Guidelines**

All applications must follow the formatting described below or be subject to penalty points:

1. Separate applications for each program requesting funds shall be submitted;
2. Applications must be typewritten;
3. White 8 ½ x 11” paper; with 1” margins;
4. Text must be Times New Roman 12pt for the narrative, single spaced with double spacing between paragraph, the Summary and Worksheet may use Times New Roman 11 pt;
5. All sections and narrative questions must be labeled, page numbering is encouraged;
6. Maps and larger sections must be shrunk to fit onto an 8 ½ x 11” paper;
7. The check listprovided must be completed and submitted with the application;
8. Page limits listed on the check list must be followed, additional pages may not be forwarded to the Committee for review;
9. Required and supporting documents shall be labeled and placed in an appendix. Extraneous information will not be considered;
10. Required documents must be attached:

Non-profit applications: verification of 501(c)3 status; agency organizational chart; most recent agency operating budget; most recent audit or if not available the most recent 990 financial statement.

1. Supporting Documents (subject to scoring)
	* 1. Memorandum of Agreement: describes the relationship between partner entities for this application, including specific details concerning the allocation of funds, shared goals, objectives, space, employees, and other resources. If awarded funds, the MOA will be attached to your contract.
2. Memorandum of Agreement: describes the relationship between partner entities for this application, including specific details concerning the allocation of funds, shared goals, objectives, space, employees, and other resources. If awarded funds, the MOA will be attached to your contract.
3. Letter of Support: describes relationship between applicant and the entity writing the letter and the reason for support, including impacts the applicant has on the community, strength and benefits of partnerships established with other organizations, etc.
4. These documents should be specific about how the organizations service is enhanced through the collaboration. In addition, the document should describe where the service and collaborator fits on the “continuum of care”.
	* 1. Letter of Support: describes relationship between applicant and the entity writing the letter and the reason for support, including impacts the applicant has on the community, strength and benefits of partnerships established with other organizations, etc.
		2. Project Timeline: describes when the program will occur with specific dates and times
5. One (1) original printed version of the application with original signatures **plus** one (1) full electronic version, submitted via email, USB drive, or CD;
6. All applications shall be complete, approved, and signed by the owner, the Board of Directors, or the Executive Director authorized by the Board.

## DEADLINES

**1.** Mandatory workshop: Applicants both internal and external are required to attend this meeting

## meeting: Wednesday December 9, 2020 at 9:00am

**Town of Bridgton**

 **3 Chase Street, Bridgton**

**2**. **Submission Deadlines** All applications, one electronic and one paper version must arrive by the deadline. Each applicant will receive a notification of application receipt from the Town of Bridgton Community Development Department.

**DEADLINE: Tuesday, January 12, 2021 by 4:00pm**

***Applications must be submitted electronically and in paper form to:***

 Town of Bridgton Community Development

 Attention: Courtney Kemp

3 Chase Street

Bridgton, Maine 04009

 ckemp@bridgtonmaine.org

 207-803-9960

 **No LATE APPLICATionS OR Sections will be accepted.**

**Points will BE deDucted fOR incomplete submissions.**

**3. *Open MIC Meeting****:* ***This is not a mandatory meeting however, Applicants are highly encouraged to attend and present your application to the committee and answer questions they may have.***

*MEETING:* ***Wednesday February 10, 2021 at 9:00AM***

 ***B***ridgton Meeting Room

  **3 Chase Street, Bridgton**

## F. Review Process AND SCORING

1. **Review Process**

The Bridgton Community Development Committee will review and score all applications based on the scoring categories. Community Development staff will prepare a list of the rated applications from highest score to lowest score, with our recommendation to the Town Manager, and Town Board of Selectmen for approval. A program time-line for the Community Development Committee is below and is available on the website:

**December 3, 2020 Applications are available**

**December 9, 2020 Mandatory Workshop**

**January 12, 2021 Applications DUE by 4:00PM**

Jan 2020- Feb 2020, Community Development Committee

 (CDC) reviews & scores all applications

February 10, 2021 Open Mic

February 25, 2021 CDAC recommends funding allocations

March 9, 2021 BOS reviews recommendations.

March 23, 2021 BOS provides final approval

April 13, 2021 County Commissioner Public Hearing

May 11, 2021 County Commissioners Approval

 May 15, 2021 Submission of Annual Action Plan to HUD

**2**. **Scoring Categories and Point Distribution**

 Applications will be rated and ranked on the basis of their responses to the application elements.

1. Project Description………………………………………………………........10 points
2. Need for the project…………………………………………………..……….20 points
3. Project management…………………………………………………..............10 points
4. Readiness to proceed………………………………………………….……....20 points
5. Project budget…………………………………………………........................10 points
6. Implementation schedule…………………………………….............................5 points
7. Demonstration of need for CDBG funds…………………………………….....15points
8. Partnership/Collaboration ………………………….........................................10 points

**3. Appeals Process on Scoring**

An applicant may appeal only the score that it receives. The appeal must be based on a factual error that was made and that, if corrected, would result in a grant award or a higher award. The appeal must be filed in writing within 10 calendar days of the date upon which the Community Development Committee publishes the scores. The appeal shall be filed in the Cumberland County office of Community Devolvement, Development Director Kristin Styles, 142 Federal Street, Portland, ME

The appeal shall identify the specific factual error or errors that are alleged and be accompanied by documentation that supports the allegation. If the County manager or his/her designee determines that, if granted, the appeal would result in a change to the appellant’s application score sufficient to result in a grant award or a higher grant award, the County Manager or his/her designee (“Hearing Officer”) shall schedule the matter for a hearing. The hearing must be held within five days of the date upon which the appeals period ends. The Hearing Officer shall issue a written decision within three days after the completion of the hearing. The date of the hearing and the date by which the written decision must issue may be extended by agreement between the appellant and the Town.

If an appeal is granted, the Hearing Officer’s decision shall state the additional points awarded to the applicant and be transmitted to the Community Development Committee within 3 days after the completion of the hearing with instructions to make the appropriate adjustments in the CDBG allocations that result from the scoring change.

The Community Development Committee shall not be required to meet to make any final adjustments to its allocation grant awards recommendations until all appeals have been decided.

**G. RESERVATION OF RIGHTS**

The Town of Bridgton reserves the right, at its sole discretion, to award all, a portion, or none of the available CDBG funding for this fiscal year, and may reject any and all proposals based on the quality and/or merits of the proposals, or when it is determined to be in the public interest to do so. Furthermore, the Town may extend deadlines and timeframes, as needed.

The Town of Bridgton reserves the right to substantiate any applicant’s qualifications, financial information, capability to perform, availability, past CDBG performance, and to verify that the applicant is current in its financial obligations to the Town.

The Town of Bridgton reserves the right to waive any informalities in proposals, to accept any proposal or portion thereof, and, to reject any and all proposals, should it be in the best interest of the Town to do so.

## H. Post Award and Sub-Recipient Criteria

All awards are subject to the Town’s receipt of its annual appropriation from the U.S. Department of Housing and Urban Development. All awards are subject to pre-contract negotiations with the recipient.

The Town of Bridgton is committed to monitoring the performance of grant recipients to ensure that Federal funds are used appropriately and in a manner to maximize low and moderate income public benefit. Grant recipients include Town of Bridgton departments, divisions, outside social service agencies, non-profit organizations and local businesses. Monitoring each grant recipient ensures that the goals and objectives identified within the Town of Bridgton’s HUD Action and Consolidated Plan are met. Copies of the monitoring reports are kept in the Community Development Office.

Recipients that do not comply with the Post-Award and Sub-Recipient Criteria listed below will forfeit their award of CDBG funds. The forfeited funds will be then returned to the CDBG program for reallocation.

* CDBG recipient shall not incur any costs or obligate any CDBG funding until a release of funds is received from the U.S. Department of Housing and Urban Development by the Town of Bridgton and a contract between the Town of Bridgton and the recipient is executed. Environmental Review and historic preservation at the State and local level are required before construction jobs can begin. This date will be July 1, 2020 unless otherwise notified.
* Program years begin when HUD has approved Cumberland County Annual Action Plan, projected to be July 1, 2020. Social Service Programs have one year to complete their program, ending June 30, 2021.
* CDBG recipients must sign the contract no later than July 1, 2020 or the award may be forfeited and the funds returned to the CDBG program for reallocation.
* CDBG recipients shall ensure recognition of the role of the Town of Bridgton Community Development Block Grant in providing services.
* All recipients must provide the following insurances:
	+ Liability Insurance of $400,000 with the Town of Bridgton listed as an additional insured
	+ Worker’s Compensation Insurance (if you have employees)
	+ Unemployment Insurance (if you have employees)
	+ Crime coverage or a fidelity bond
* CDBG recipients will be required to maintain accurate records documenting the targeted populations and/or areas being served by the program or project, and to provide quarterly reports to the Town demonstrating that eligibility requirements are being satisfied. The CDBG recipient must collect and track data elements associated with the program/project requesting funding.
* Recipients may be asked to provide a year-end summary reporting accomplishments and outcomes to be provided to HUD and the public. This includes a description of the impact or outcomes of the program or project. Quarterly updates may be requested and must be provided. If requested, funded recipients must comply.
* For social service programs, sub-recipients are required to:
	+ Collect and track data elements associated with the program/project requesting funding. These elements may include: number of persons/ households served, family size, race/ethnicity, income documentation, residency documentation, verification that an individual meets a HUD defined presumed benefit individual. Additional elements may be required to be collected and tracked depending upon the nature of the program.

**Please note**: number of persons served cannot be the unit of service provided. Sub-recipients must provide documentation of both 1) persons/households served and 2) units of service provided.

* + Submit performance reports to the Town on a quarterly basis. The reports are reviewed for accuracy, performance measures and compliance. In addition, on-site monitoring/auditing of social service agencies for ongoing compliance and eligibility is done by the Town on an annual basis to ensure income guidelines and residency are being met and goals are being reached.
* Payments: Invoices or requests for payments will be paid based on a fee per unit of service provided; *backup substantiating the invoice is required*. Quarterly funding requisitions will then be based upon the number of units provided and the cost for delivering that service.

**COMMUNITY DEVELOPMENT BLOCK GRANT**

**PROGRAM YEAR 2020-2021**

**II. SOCIAL SERVICE APPLICATION**

**COMPLETE APPLICATION CHECKLIST**

**Please submit each section of the application, including this checklist:**

[ ]  **A. Social Service Cover Page,** *limit 1 page*

[ ]  **B. Social Service Worksheet ,** *limit 2 pages*

[ ]  **C. Social Service Narrative,** *limit 7 pages*

[ ]  **D. Budget: Revenues and Expenditures,** attached separately, *limit 1 page*

*Budget worksheet MUST match budget listed on the Cover Page, Summary page, and in the narrative*

*Multi-year initiatives must submit 2 budgets, 1 per year, limit 1 page per budget*

[ ]  **E. Social Service Summary,** *limit 1 page*

[Complete this section in whole; this is information will be provided to the Board of Selectmen at time of recommendation or upon request]

**Required documents for non-profit organizations:**

[ ]  **Verification of 501(c)3 Status**, *limit 1 page*

[ ]  **Agency Organizational Chart** to show how the proposed program fits into the overall organizational structure; include program staff or positions, *limit 1 page*

[ ]  **Most Recent Agency Operating Budget *Summary***, *limit 1 page*

[ ]  **Most Recent Independent Auditors Report and identified findings** or *if an Audit is not available* the most recent 990 Financial Statement

[ ]  **Complete list of Board Members**

 **Supporting documents** (subject to scoring):

[ ]  **Project Timeline** may be included in narrative or attached separately

[ ]  **Partnership/Collaboration** **Memorandum of Agreement**, limit 2 pages: may be one MOA that is two pages long or two MOAs that are one page each.

[ ]  **Letter of Support**, if there is no MOA; a letter of support may be submitted. *Limit 2 pages: can be one letter that’s two pages long or two letters that are one page each.*

|  |  |
| --- | --- |
| **Signature of the President or Executive Director**  | **Date** |
|  |  |

**A. SOCIAL SERVICE COVER PAGE**, limit 1 page

**COMMUNITY DEVELOPMENT BLOCK GRANT**

**PROGRAM YEAR 2020-2021**

|  |  |  |
| --- | --- | --- |
| Application Type | [ ]  Standard Social Service  |  |
| Operating Agency |  |
| Program Name |  |
| Mailing Address |  |
| Address Services are Delivered |  |
| Executive Director |  | Phone | Email |
| Project Director |  | Phone | Email |
| Financial Contact |  | Phone | Email |
| Person who completed the Application  |  | Phone | Email |
| Amount of CDBG Funds Requested  | $ | Total Program Budget$ |
| DUNS Number |  | Tax ID  |

**B. SOCIAL SERVICE WORKSHEET,** *limit 2 pages*

1. **HUD National Objective**. Indicate which National Objective this program activity will address; choose one. Refer to National Objective description p. 3 for additional information.

[ ]  **Low and Moderate Income Clientele** (LMC): an activity which provides benefits to a specific group of persons of which at least 51% qualifies as LMI Bridgtoners.

 Does this activity benefit a population that HUD presumes to be low to moderate income, including *abused children, elderly persons, battered spouses, homeless persons, illiterate adults, severely disabled adults, persons living with AIDS, and migrant farm workers*? [ ]  No [ ]  Yes (please circle appropriate population)

[ ]  **Low and Moderate Income Area Benefit** (LMA): an activity *which is available to benefit all the residents of an eligible area/census tract*, plus housing authority properties.

 ***If you choose LMA, please provide a map and outline on the map the area that your program serves.***

1. **HUD Program Objectives**. Indicate which HUD program objective this program will address; choose one:

 [ ]  **Creating a Suitable Living Environment**

[ ]  **Providing Decent Affordable Housing**

[ ]  **Creating Economic Opportunity**

1. **Primary Goal.** Indicate the primary goal your program or project addresses; choose one. *Refer to the instructions p. 6 for additional information*.

[ ]  **Public Facility Improvements-** *Improve accessibility and availability of public infrastructure*

[ ]  **Public Infrastructure Improvements**-*Improve the quality of public infrastructure that primarily serves low to moderate income families*

[ ]  **Affordable Housing**-*Promote activities that support affordable housing development and the rehabilitation of residential housing.*

[ ]  **Economic Opportunity:** *Assist businesses through job creation programs*

[ ]  **Public Services-** *Promote programs and activities that improve the quality of life for low and moderate income individuals.*

[ ]  **Community Planning**-*Promote long range planning for the benefit of the community as a whole.*

1. **Beneficiaries.**

|  |  |
| --- | --- |
| 1. Describe the beneficiaries or clients served by the program.
 | A. |
| B. How many will be served by the proposed program? (unduplicated -per year)  | B.  |
| C. How many are *residents of Bridgton*?  | C.  |
| D. How many are *low to moderate income residents of Bridgton*? See income data in the instructions | D.  |
| E. What percentage of total clients are low to moderate income residents of Bridgton? *(To calculate = D/B \* 100; Must be > 51%)* | E.  |

1. **Units of Service.** Describe the type of unit of service provided by the program.

|  |  |
| --- | --- |
| 1. A. Describe the type of unit of service provided by the program.
 | A. |
| B. How many units of service will be provided by the program?  | B.  |
| C. What is the cost per unit of service? | C.  |
| D. Explain the relationship between the cost per unit of service and the total program budget. | D. |
| 1. What percentage of the total budget is CDBG?
 | E. |

1. **Program Objectives and Outcomes**. Please list below.

|  |  |
| --- | --- |
| **Program Objective**s | **Outcomes/ Community Impact**  |
|  |  |
|  |  |
|  |  |

1. **Employees.** *Program specific, not for the entire organization.*

|  |  |
| --- | --- |
| A. How many employees are currently employed in this program?  | A.  |
| B. How many employees will be employed in this program if it receives CDBG funding? | B.  |
| C. How many employees will be employed in this program if it does not receive CDBG funding? | C.  |

1. **Documentation**

|  |  |
| --- | --- |
| A. How will the beneficiaries’ information be collected and documented?  | A. |
| B. How will the units of service be tracked and documented? | B. |
| C*.* How will the outcomes be measured, collected, and documented? | C. |

***Please limit the Social Service Worksheet to 2 (two) Pages.***

**C. SOCIAL SERVICE NARRATIVE**

In a separate document please answer the following questions; you have ***seven*** total single-sided pages. Be as direct and specific as necessary. Please include question headings, but in order to save space please *do not* restate the question in your response.

**1. Program Description**

Describe the program being proposed. Make sure to explain the “who, what, when, and where”. Is this a new program or an expansion of an existing program?

**2. Need for the Project**

Describe the scope of the community problem or need the program addresses. Reference plans, reports, data, or past experience as applicable.

**3. Project Management**

Define who will manage the project and how they will manage it. Describe the applicant’s experience in delivering and managing this or similar programs. Please summarize current licensing and accreditations obtained.

**4. Readiness to proceed**

Describe the steps that have been completed or must be completed to initiate the project. These may include community support, staffing, securing an appropriate location, marketing, and networking.

**5. Budget for the Project**

Provide a narrative explaining the budget and expenses for the program. *Describe exactly what and who CDBG will pay for in this program*.

If this program was funded by CDBG in the previous year (Program Year 2019-2020) and if you are requesting an increase from last year’s allocation, you must explain why the increase is necessary and what expansion of service is being provided.

Please ensure that budget amounts listed in the narrative match the cover page, summary and budget worksheet.

**6. Implementation Schedule**

Describe the program’s timeline with specific dates and times, including start dates, end dates and milestones as applicable.

**7. Demonstration of Need for CDBG funds**

Describe any efforts made to seek funding for this project through sources other than CDBG. If successful, what other sources of funding will be used in this project. If CDBG is the only funding source, explain why no other funding is being used?

**8. Partnerships, Collaboration, and Outreach**

If applying as a partnership, please describe the nature of the partnership, who is involved, and what agreement there is among partners. *Partnerships are two or more organizations or businesses who will share valuable resources, work together toward a common goal, and increase efficiency in providing services.*

If applying as a single entity please describe collaboration between service providers; coordination of services; or outreach to the community.

Include any additional collaboration, coordination or outreach as relevant to ensure there is no duplication of services.

 **D. BUDGET: REVENUES AND EXPENDITURES**, limit 1 page.

 Complete separate Excel budget form.

**E. SOCIAL SERVICE SUMMARY,** *limit 1 page,*

|  |  |  |
| --- | --- | --- |
| **Application Type** | [ ]  Standard Social Service  |  |
| **Operating Agency** |  |
| **Program Name** |  |
| **Funds Requested** | $ |
| **Program Summary** |
|  |
| **HUD National Objective***Refer to Section II.B.1* | [ ] Low to Moderate Income Limited Clientele, will this serve a population HUD presumes to be low income? [ ] Yes [ ]  No [ ] Low to Moderate Income Area Benefit, if chosen describe service area: |
| Service area:  |
| **HUD Program Objective** *Refer to Section II.B.2* | [ ]  Creating Suitable Living Environment[ ]  Providing Decent Housing[ ]  Creating Economic Opportunity  |
|  |
| **Beneficiaries/ Clients Served -** *Refer to Section II.B.4* |
|  Client Description |  |  |
|  Number of Clients Served |  |  |
|  Number of LMI Bridgtoners |  |  |
|  LMI Bridgton Percentage |  |  |
|  |
| **Units of Service -** *Refer to Section II.B.5* |
|  Type of Unit of Service  |  |  |
|  Number of Units Provided |  |  |
|  Cost per Unit of Service | $ | $ |
|  |
| **Outcomes -** *Refer to Section II.B.6* |
|  |
|  |
| **Budget** *- Refer to Section II.D Budget* |
| $ | CDBG Request (Must match CDBG Request on Cover Page and Budget Worksheet) |
| $ | Total Program Budget (Must match Total Budget on Cover Page and Budget Worksheet) |
| % | Percentage of CDBG Request of Total Budget [50% or less indicates at least a 1 to 1 match] |
|  |
| **Leveraged Funds** *– Refer to Section II.D Budget – all columns must be complete, enter a ‘zero’ if needed.*  |
| $ | Federal  | $ | Other grants |
| $ | State  | $ | Endowment |
| $ | County  | $ | Private Funds |
| $ | Town *(not CDBG)* | $ | Gifts in kind |