The City of Westfield’s Community Development Department is seeking proposals for inclusion in its 2019-2020 Action Plan. The 2019-2020 Program Year will run from July 1, 2019 through June 30, 2020. Successful proposals must address the housing and community development needs presented in the City of Westfield’s Consolidated Plan and must meet the guidelines articulated in this Request for Proposals (RFP).

If you are interested in submitting a proposal for consideration, you must complete the attached application and submit it with all required documents by 4:00, Friday, March 11, 2019 to the following location:

Community Development Department  
Attention: Peter Miller, Director  
59 Court Street  
Westfield, MA 01085

Only those proposals submitted for eligible activities in accordance with the required format will be considered for funding. A summarized list of eligible activities is attached to the proposal form.

Two public hearings on the Annual Action Plan will be held on Tuesday, January 15th, 2019 at 11:00 am, and 6:00 pm at City Hall, Room 315.

**A Technical Assistance Workshop will be held on Wednesday, February 6, 2019 at 10:00 AM at Westfield City Hall, Room 315, at 59 Court Street.** Technical Assistance is also available by contacting Peter Miller, at the Office of Community Development and Planning.

Thank you for your interest in the Community Development Block Grant Program.
## RFP INSTRUCTIONS

<table>
<thead>
<tr>
<th>RFP INSTRUCTIONS</th>
<th>RFP PAGE #</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. General Information and Explanation of DUNS Number</td>
<td>PG 2</td>
</tr>
<tr>
<td>II. Income Guidelines</td>
<td>PG 3</td>
</tr>
<tr>
<td>IV. Eligibility &amp; Selection</td>
<td>PG 3-6</td>
</tr>
<tr>
<td>V. Community Development Needs from Consolidated Plan</td>
<td>PG 7</td>
</tr>
</tbody>
</table>

## PROPOSAL APPLICATION FOR CDBG FUNDING

<table>
<thead>
<tr>
<th>PROPOSAL APPLICATION FOR CDBG FUNDING</th>
<th>APPLICATION PAGE #</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Applicant Information</td>
<td>A-1</td>
</tr>
<tr>
<td>2. Leverage Resources</td>
<td>A-2</td>
</tr>
<tr>
<td>3. Project Eligibility Section</td>
<td>A-3</td>
</tr>
<tr>
<td>4. Impact on Consolidated Plan Needs</td>
<td>A-4</td>
</tr>
<tr>
<td>5. Activity Description</td>
<td>A-5</td>
</tr>
<tr>
<td>6. Organizational Capacity</td>
<td>A 6 &amp; 7</td>
</tr>
<tr>
<td>7. Budgets/Financials</td>
<td>A 7 &amp; 8</td>
</tr>
</tbody>
</table>
Community Development Block Grant (CDBG) Programs receive funds from the U.S. Department of Housing and Urban Development (HUD) to state and local governments, who in turn, allocate them to private non-profit community development corporations, community-based organizations, city departments, and private for-profit corporations, for activities that benefit low and moderate-income areas or low and moderate-income persons.

The City of Westfield's Community Development Block Grant (CDBG) Program is designed to expand opportunities for low and moderate-income citizens through the provision of public services, acquisition and improvements to public facilities, neighborhood improvements, housing and economic development opportunities.

Funding for the FY 2019-2020 Program year available under the CDBG Program is estimated to be in the amount of $345,000, of which approximately $50,000 may be available for public service activities.

Proposal Review
Once submitted, no proposal may be amended or substituted, unless the amendment has been requested or permitted by the City. The City, at its sole discretion, reserves the right to contact an applicant if additional information is required.

D-U-N-S Number- A Federal Requirement:
Every proposal must contain a D-U-N-S Number. How to obtain one is explained below
If you do not have a DUNS number you can register with Dun and Bradstreet at www.dnb.com and you will be issued a number.

---

**About the D-U-N-S Number**

Created in 1962, the Data Universal Numbering System or D-U-N-S® Number is D&B's copyrighted, proprietary means of identifying business entities on a location-specific basis.

*Assigned and maintained solely by D&B, this unique nine-digit identification* number has been assigned to over 100 million businesses worldwide.

A D-U-N-S® Number remains with the company location to which it has been assigned even if it closes or goes out-of-business.

The D-U-N-S® Number also "unlocks" a wealth of value-added data associated with that entity, including the business name, physical and mailing addresses, tradestyles ("doing business as"), principal names, financial, payment experiences, industry classifications (SICs and NAICS), socio-economic status, government data and more. The D-U-N-S® Number also links members of corporate family trees worldwide.

The D-U-N-S® Number is widely used by both commercial and federal entities and was adopted as the standard business identifier for federal electronic commerce in October 1994. The D-U-N-S Number® was also incorporated into the Federal Acquisition Regulation (FAR) in April 1998 as the Federal Government's contractor identification code for all procurement-related activities.
II. INCOME GUIDELINES

Every proposal that claims to benefit low and moderate income persons will be required to provide evidence that the beneficiaries of the program meet certain income guidelines. The majority (51%) of the programs beneficiaries must meet HUD income guidelines.

The following income limits by household size represent eligibility for assistance under the Community Development Block Grant. (Effective April, 2018- updated guidelines anticipated in Spring 2019).

<table>
<thead>
<tr>
<th>Family Size</th>
<th>80%</th>
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<tbody>
<tr>
<td>1</td>
<td>45,200</td>
</tr>
<tr>
<td>2</td>
<td>51,650</td>
</tr>
<tr>
<td>3</td>
<td>58,100</td>
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<tr>
<td>4</td>
<td>64,550</td>
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<td>5</td>
<td>69,750</td>
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<tr>
<td>6</td>
<td>74,900</td>
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<tr>
<td>7</td>
<td>80,050</td>
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<tr>
<td>8</td>
<td>85,250</td>
</tr>
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</table>

IV. ELIGIBLE ACTIVITIES INFORMATION

ELIGIBLE CDBG ACTIVITIES*
Activities that are eligible for CDBG funding include, but are not limited to:

- Economic Development activities, including microenterprise assistance and lending to for-profit businesses,
- Public services, such as employment assistance, crime prevention, substance abuse, child care, health care, transportation, youth programs, fair housing counseling, etc.,
- Acquisition of real property,
- Clearance and demolition,
- Rehabilitation of privately or publicly owned commercial, residential and industrial buildings,
- Housing rehabilitation,
- Construction, reconstruction or installation of public facilities including, but not limited to the creation of parks, playgrounds, streets and sidewalks, public buildings (except for buildings for the general conduct of government),
- Historic Preservation,
- Related relocation, clearance and site improvements, and
- Homeownership assistance.

*NOTE: The eligibility of listed activities may be limited by additional regulatory conditions.
See 24 CFR 570.201 – 207
ELIGIBLE ACTIVITIES

Before preparing a request for funding, first determine if the proposed activity or project is an eligible activity. A list of eligible activities is on page 3 of these RFP instructions. See also the Code of Federal Regulations at 24 CFR 570.201-207 for an extensive description. A proposed project must be both an eligible activity and meet at least one of the three national objectives (listed below) to be considered for funding.

NATIONAL OBJECTIVES FOR CDBG APPLICATIONS

The primary objective of the CDBG program is to benefit low and moderate-income persons who earn at or below 80% of the median income and/or reside in census tracts with at least 51% of the population at low and moderate-income levels. Priority will be given to those applications that meet national objective #1 as stated below. Without exception, all CDBG program activities must meet at least one of the National Objectives listed below:

- **National Objective 1:** Principally benefits low and moderate-income persons who earn at or below 80% of the median income (Code of Federal Regulations citation 570.208(a).)
- **National Objective 2:** Aids in the prevention or elimination of slums or blight (Code of Federal Regulations citation 570.208(b).)
- **National Objective 3:** Not available under this RFP

Section 570.208 of the Code of Federal Regulations lists the criteria to determine whether a CDBG-assisted activity complies with the national objectives stated above. The section related to National Objective 1 is summarized below.

BENEFIT TO LOW AND MODERATE INCOME PERSONS

The primary objective of the CDBG program is the development of healthy communities "by providing decent housing and a suitable living environment and expanding economic opportunities principally for persons of low and moderate income." [HUD requires that, at a minimum, 70% of the CDBG money be used for activities that benefit low and moderate income people.]

Projects which claim to benefit low and moderate-income (LMI) persons must be designed to include participation by such persons. A CDBG-assisted activity "benefits LMI persons" if it meets any one of the four following tests:

1. The **Housing Benefit Test** for measuring lower income benefit.
   1) Housing-related CDBG activities "benefit" LMI persons only if occupied by low and moderate-income individuals and families.
   2) In multifamily buildings (3 or more units), at least 51% of the units must be occupied by low and moderate-income individuals and families.
2. The **Job Creation or Retention Test** for measuring lower income benefit. The business receiving CDBG assistance must justify that the assistance will benefit low and moderate-income individuals. There are two possible ways it can meet this claim:

1) At least 51% of the jobs created or "retained" by the business as a result of the CDBG assistance must be either filled by or "available to" low and moderate income individuals. (Jobs are to be counted on a full-time-equivalent basis.)

2) "Available to" means either: the job does not require special skills or additional education; or, the business agrees to hire someone and train them for the job. In addition, the business and city must try to ensure that low and moderate income individuals get first consideration for filling the job.

3. The **Limited Clientele Test** for measuring lower income benefit. Some CDBG-assisted activities are either facilities or services that, by their special nature, serve people who might frequently be lower income people. Examples include shelters for abused spouses, or senior citizen centers. HUD calls these "limited clientele activities." To determine whether one of these activities principally benefits lower income people, one of the following tests must be met:

   (1) Only lower income people are allowed to use the facility or service.

   (2) The activity requires users to provide information about their family income and size, and at least 51% of the users are lower income.

   (3) The activity is one that HUD "presumes" that 51% of the users are lower income. For example, HUD "presumes" elderly, homeless, severely disabled, and illiterate adults -- among others -- are lower income.

4. The **Area Benefit Test** for measuring lower income benefit. Many CDBG activities can benefit all people in an area, no matter what their income is. Examples include: street improvements, neighborhood facilities, and fixing the fronts of stores in neighborhood commercial districts. Such projects must meet the "area benefit test" if they are to be counted as benefiting lower income people. To meet this test, at least 51% of the residents of the "area" must be lower income.

In all cases, all applications scored under the low and moderate-income criterion will include review and scoring of the following:

- LMI benefit activity selected
- How LMI persons will be determined
- The number of persons to be served
- The percent of qualifying LMI persons to be served
- How the low and moderate-income persons will benefit
PERFORMANCE MEASUREMENT STANDARDS

All applicants that are awarded funding will be required to complete a Performance Measurements Standards Form that will be incorporated into your subrecipient agreement.

To facilitate that process all applicants must include a S.M.A.R.T objective statement in this application.

Please prepare a S.M.A.R.T. objective statement about your proposed project in the space after the examples.

S-Specific (Who, What, Where?)
M-Measurable (How Many?)
A-Action-Oriented (How?)
R-Realistic
T-Time bound (By When?)

Below are some examples of S.M.A.R.T. objective statements.

ABC Tutors will provide after school MCAS tutoring for 25 low to moderate income students in grades 5-8 who reside in the North Common NRSA area. The program will run from October 2017 through February 2018. There will be no cost for the tutoring program.

Steve’s Development Company will renovate the former Holy Rosary School into 20 apartments that will be rented at affordable rents to homeless families who are currently being housed in hotels. The construction period will begin in July 2019 and will be completed in May 2020. Families will be selected through a lottery process of all eligible applicants.

J & J Language School will proved free ESOL classes for 50 low to moderate income individuals. Classes will be held on Monday and Wednesday evenings from 6:00-8:00 at the Arlington Neighborhood Community Center. The course will consist of 2 semesters (September-December 2017 and February-May 2018).
**Westfield CDBG RFP 2019-2020**

**IV. COMMUNITY DEVELOPMENT NEEDS**

**Housing and Community Development Priority Needs and Objectives**

These priority needs and objectives are more comprehensively described in the City’s Five Year Consolidated Plan, which can be accessed at:

http://www.cityofwestfield.org/DocumentCenter/View/2317

<table>
<thead>
<tr>
<th>Priority Needs</th>
<th>Objectives</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ECONOMIC DEVELOPMENT</strong></td>
<td>• Improve publicly or privately-owned commercial property</td>
</tr>
<tr>
<td></td>
<td>• Provide financial assistance to for-profit business ventures that hire/retain a low-moderate income labor force</td>
</tr>
<tr>
<td></td>
<td>• Increase job training programs to assist the labor force</td>
</tr>
<tr>
<td></td>
<td>• Provide technical and financial assistance to existing and potential micro-enterprises</td>
</tr>
<tr>
<td><strong>NEIGHBORHOOD REVITALIZATION/INFRASTRUCTURE</strong></td>
<td>• Provide greater physical access through removal of architectural barriers</td>
</tr>
<tr>
<td></td>
<td>• Improve infrastructure system by improving, streets/sidewalks and miscellaneous streetscape amenities</td>
</tr>
<tr>
<td><strong>COMMUNITY FACILITIES</strong></td>
<td>• Improve a wide range of public facilities benefiting low and moderate income individuals and families including neighborhood parks and open space</td>
</tr>
<tr>
<td></td>
<td>• Provide clean-up of contaminated sites and non-residential historic preservation</td>
</tr>
<tr>
<td><strong>HOUSING</strong></td>
<td>• Improve the overall quality of housing stock in the City of Westfield</td>
</tr>
<tr>
<td></td>
<td>• Increase homeownership and rental opportunities for low and moderate income households</td>
</tr>
<tr>
<td></td>
<td>• Increase availability of rental opportunities for special needs population</td>
</tr>
<tr>
<td><strong>PUBLIC SERVICES</strong></td>
<td>• Improve a wide range of services available ranging from outreach, homelessness prevention activities, and advocacy</td>
</tr>
<tr>
<td></td>
<td>• Provide access to a variety of services including services to frail and vulnerable populations, recreation, youth programs and educational opportunities for the low and moderate income population in Westfield</td>
</tr>
</tbody>
</table>
PROPOSAL APPLICATION FOR CDBG FUNDING
THE Westfield COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG)

JULY 1, 2019 THROUGH JUNE 30, 2020

Organization Name:
Project Name:
Project Address:
Exec Director Name:
Address:

Telephone : Fax:
Email Address: Website (if applicable :)
Employer (IRS) ID: DUNS #: 

Contact Name: Title:
Contact Telephone: Fax:
Contact Email:

PROJECT FUNDING REQUEST

CD Funds Requested: $ _____  Funding Leveraged from other Sources: $ _____

Check the category, which best describes the type of funding, requested:

☐ Housing  ☐ Public Facility  ☐ Infrastructure

☐ Economic Development  ☐ Public Service  ☐ Homelessness

BRIEF PROJECT DESCRIPTION:
Please provide a S.M.A.R.T. statement about your project—not your organization. Please use template from instructions ( pg. 6)
1. Leverage Section

The City encourages CDBG funds be utilized as **gap funding**. A gap is defined as the amount of funding necessary to run a program after all other funding sources have been identified, thus leveraging is very important in the application process.

**ACTIVITY BUDGET**

Please answer the following questions in the space provided. You may reference and attach an additional page if necessary.

Identify sources of leveraged funding for this activity. Include the status of these funds (i.e. cash on hand, grants received, grants applied for, planned fund-raising, etc.). Attach copies of funding commitment letters or other evidence of funding support.

### Leveraged funds

<table>
<thead>
<tr>
<th>Category Breakdown</th>
<th>Amount of Leveraged Funds</th>
<th>Source of Leveraged Funds</th>
</tr>
</thead>
<tbody>
<tr>
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<tr>
<td>Total CDBG Request</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Other Funds</td>
<td></td>
<td></td>
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<tr>
<td>Grand Total</td>
<td></td>
<td></td>
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</tbody>
</table>
2. PROJECT ELIGIBILITY SECTION

A. This project is located in Eligible Area
   □ Attach Map of Area

B. This project meets at least ONE of the HUD national objectives listed below:
   □ 1. Benefits low/moderate income individuals/households
   □ 2. Addresses the prevention or elimination of slums or blight

C. Check one statement that best describes HOW this project or activity meets one of the National Objectives above:
   □ L/M Area Benefit: the project meets the identified needs of L/M income persons residing in an area where at least 51% of those residents are L/M income persons. The benefits of this type of activity are available to all persons in the area regardless of income. Examples: street improvements, water/sewer lines, neighborhood facilities, facade improvements in neighborhood commercial districts.

   □ L/M Limited Clientele: the project benefits a specific group of people (rather than all the residents in a particular area), at least 51% of whom are L/M income persons. The following groups are presumed to be L/M: abused children, elderly persons, battered spouses, homeless, handicapped, illiterate persons. Examples: construction of a senior center, public services for the homeless, meals on wheels for elderly, construction of job training facilities for the handicapped.

   □ L/M Housing: the project adds or improves permanent residential units that will be occupied by L/M income households upon completion. Housing can be either owner or renter occupied units in either one family or multi-family units. Rental units for L/M income persons must be occupied at affordable rents. Examples: property acquisition for permanent housing, permanent housing rehabilitation, and conversion of non-residential units into permanent housing.

   □ L/M Jobs: the project creates or retains permanent jobs, at least 51% of which are taken by L/M income persons or considered to be available to L/M income persons. Examples: loans to pay for the expansion of a factory, assistance to a business which has publicly announced its intention to close w/resultant loss of jobs, a majority of which are held by L/M persons.

   □ MicroEnterprise Assistance: the project assists in the establishment of a microenterprise or assists persons developing a microenterprise. A microenterprise is defined as having five or fewer employees, one or more of whom owns the business.) This activity must benefit low/moderate income persons, area or jobs as defined in previous sections.

   □ Slum or Blighted Area: the project is in a designated slum/blight area and the result of this project addresses one or more of the conditions that qualified the area. (Not applicable for this RFP)
Spot Blight: the project will prevent or eliminate specific conditions of blight or physical decay outside a slum area. Activities are limited to clearance, historic preservation, rehabilitation of buildings, but only to extent necessary to eliminate conditions detrimental to public health and safety. Examples: historic preservation of a public facility threatening public safety, demolition of a deteriorated, abandoned building.

3. IMPACT ON PRIORITY NEEDS

Therefore, applications should provide a clear explanation of how the project impacts upon the Priority Needs.

Please identify the category and activity (only choose one of each) applicable to your proposal, using that table as your guide:

<table>
<thead>
<tr>
<th>Example:</th>
<th>Public Services</th>
<th>Activity: Youth Transportation</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑️Homeless</td>
<td>Activity_____</td>
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<tr>
<td>☑️Infrastructure</td>
<td>Activity_____</td>
<td></td>
</tr>
<tr>
<td>☑️Public Services</td>
<td>Activity_____</td>
<td></td>
</tr>
<tr>
<td>☑️Economic Dev.</td>
<td>Activity_____</td>
<td></td>
</tr>
<tr>
<td>☑️Housing</td>
<td>Activity_____</td>
<td></td>
</tr>
<tr>
<td>☑️Public Facilities</td>
<td>Activity_____</td>
<td></td>
</tr>
</tbody>
</table>

4. PROPOSED PROJECT ACCOMPLISHMENTS

Please briefly describe proposed accomplishment(s) if funding is awarded: (Accomplishments must be described in terms of households served, people served, businesses created, housing units created, jobs created or public facilities undertaken. Example: This program will serve 485 LMI individuals, this program will create 25 jobs, etc.)

Please answer the following questions:

A. What is the total estimated number of persons to be served by this project?

B. What is the total estimated number of LMI persons to be served by this project?
5. **ACTIVITY DESCRIPTION:**
   Please answer the following questions in the space provided

   A. Provide a detailed description of the proposed activity including how the activity will address the community need you have indicated. Identify whether the activity is new, ongoing, or expanded from previous years.

   B. Identify who will benefit from the proposed activity (e.g. homeless, youth, seniors, disabled, et cetera). If designed to benefit low and moderate income persons, describe the process you will use to identify these persons and ensure that the activity meets this objective. *(An LMI certification form is included in the RFP Packet).*

   C. Identify the accomplishments you intend to achieve with this activity. Provide an activity timeframe/schedule (include start, completion dates, and other significant stages).
6. ORGANIZATIONAL CAPACITY
Please answer the following questions in the space provided. Also attach organizational chart and list of board members.

A. Provide an overview of your organization including length of time in existence. List current officers and board members with terms.

B. Describe your organization’s experience in successfully conducting this type of activity. Identify any skills, current services, or special accomplishments that demonstrate your capacity for success.

C. Identify the person(s) responsible for program and financial management of the activity. Identify all other persons involved in this activity noting whether these positions are current or new, pending this award.
D. Identify any other agencies/partners in this activity and define the roles and responsibilities of these partners.

E. Demonstrate that the proposed activity is financially feasible and can be implemented in a timely cost effective manner within the proposed program year.

<table>
<thead>
<tr>
<th>Budget Line Item</th>
<th>Total Budgeted Amount</th>
<th>Requested CDBG Funds</th>
<th>MATCH (Balance Paid By)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: Personnel</td>
<td>$20,000</td>
<td>$5,000</td>
<td>DMH contract $15,000</td>
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<tr>
<td>TOTALS</td>
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</tbody>
</table>
1. Personnel:

   o Please complete the following table for all positions for which CDBG funds will be used:

<table>
<thead>
<tr>
<th>Position Title</th>
<th>Is this a current or proposed position?</th>
<th>Annual Salary</th>
<th>Annual Fringe Benefits</th>
<th>Total Annual Salary</th>
<th>X</th>
<th>% Time Spent on this CDBG Project/Program</th>
<th>=</th>
<th>Total Position Cost Requested from CDBG</th>
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</tbody>
</table>

   o Provide job descriptions and resumes (if the position is currently filled) for each position listed.
   o Provide an overview of the process the organization goes through to screen potential hires for open positions.
   o For fringe benefits, if using percentage of gross for calculation, provide justification of percentage used.

As part of this section, please indicate whether or not outside vendors or consultants will be identified by your organization to conduct program activities.

2. Contracts and leases:

   o Provide a copy of each contract or lease listed in the budget.

   If CDBG is a percentage of total cost for each line item, provide a formal allocation plan. Source and amount of matching funds must be provided. Please double check your calculations for accuracy; all costs must tie out exactly: do not round up or down.
A. THRESHOLD CERTIFICATION
You must submit one original application and two (2) copies in response to this RFP to the CDD offices no later than 4:00 pm on Friday, March 11, 2019.

Submission Checklist

- Submit an original and two (2) copies of the completed application. Applications must be typed.

- Complete all budget sheets and submit required financial documentation as follows:
  - Articles of Incorporation
  - Current List of Board of Directors
  - Evidence of Authorization to Request Funds & Designation of Authorized Official
  - Resumes of Program Administrator and Fiscal Officer
  - Organization Conflict of Interest Policy
  - Certified Organization Audit/Financial Statements of most recent year
    a. Copy of OMB A-133 Audit (Required if $500,000 or more in aggregate Federal funds expended), or
    b. Financial statements audited by a CPA (if not bound by the requirements of OMB A-133), or
    c. Profit and Loss Statement (only first time applicants or those who do not meet above criteria may submit)
  - IRS 501(c)(3) Designation Letter (if applicable)
  - Performance Measurements

- Submit your application so it will be received at the Community Development Department by 4:00 on Friday, March 11, 2019.
Federal regulations require we obtain this information to document assistance is being provided to low and moderate-income households. The Participant/Guardian should complete this form indicating all persons residing within their household, regardless of whether or not they are related. The Grantee should retain this form for monthly reporting requirements as well as for on-site monitoring visits.

INFORMATION PROVIDED ON THIS FORM IS KEPT CONFIDENTIAL AND IS NOT SHARED WITH ANY OTHER AGENCIES

PLEASE NOTE: ALL FOUR SECTIONS OF THIS FORM MUST BE COMPLETED TO RECEIVE REIMBURSEMENT

PARTICIPANT INFORMATION

1. PARTICIPANT STATUS:  
☐ FAMILY  ☐ INDIVIDUAL

Participant Name: ____________________________________________________________

Address: ____________________________________________ City, State, Zip Code: ________________

2. ETHNICITY (please select only one):  
☐ Hispanic or Latino  ☐ Not Hispanic or Latino

3. RACE (please select only one):  
☐ White  ☐ American Indian/Alaskan Native and White
☐ Black/African American  ☐ Asian and White
☐ Asian  ☐ Black/African American and White
☐ American Indian/Alaska Native  ☐ American Indian/Alaskan Native and Black/African American
☐ Native Hawaiian/Other Pacific Islander  ☐ Other Multi-Racial: _______________________________

4. HOUSEHOLD INFORMATION

1) Circle the number of family and non-family members living in your household below.

2) Circle the corresponding income level. (FY2017-18 Median Family Income) – Effective April, 2018

<table>
<thead>
<tr>
<th>Household Size</th>
<th>#1 (0% - 30%)</th>
<th>#2 (31% - 50%)</th>
<th>#3 (51% - 80%)</th>
<th>#4 (81% and above)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$0-$16,950</td>
<td>$16,951-$28,250</td>
<td>$28,251-$45,200</td>
<td>$45,201+</td>
</tr>
<tr>
<td>2</td>
<td>$0-$19,400</td>
<td>$19,401-$32,300</td>
<td>$32,301-$51,650</td>
<td>$51,651+</td>
</tr>
<tr>
<td>3</td>
<td>$0-$21,800</td>
<td>$21,801-$36,350</td>
<td>$36,351-$58,100</td>
<td>$58,101+</td>
</tr>
<tr>
<td>4</td>
<td>$0-$25,100</td>
<td>$25,101-$40,350</td>
<td>$40,351-$64,550</td>
<td>$64,551+</td>
</tr>
<tr>
<td>5</td>
<td>$0-$29,420</td>
<td>$29,421-$43,600</td>
<td>$43,601-$69,750</td>
<td>$69,751+</td>
</tr>
<tr>
<td>6</td>
<td>$0-$33,740</td>
<td>$33,741-$46,850</td>
<td>$46,851-$74,900</td>
<td>$74,901+</td>
</tr>
<tr>
<td>7</td>
<td>$0-$38,060</td>
<td>$38,061-$50,050</td>
<td>$50,051-$80,050</td>
<td>$80,051+</td>
</tr>
<tr>
<td>8</td>
<td>$0-$42,380</td>
<td>$42,381-$53,300</td>
<td>$53,301-$85,250</td>
<td>$85,251+</td>
</tr>
</tbody>
</table>

I certify the above information is true and correct to the best of my knowledge.

Participant/Guardian: ________________________________ Date: __________________________

(Original signature is required)