



**COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM
NOTICE OF FUNDING AVAILABILITY (NOFA)**

The City of Carlsbad is announcing the start of the application cycle for the FY 2022-23 Community Development Block Grant Program. The CDBG program is a federally funded program and is administered by the city to provide decent housing, a suitable living environment, and the expansion of economic opportunities principally for lower income persons and households.

The city anticipates receiving \$527,154 in CDBG funds from the U.S. Department of Housing and Urban Development (HUD) for the 2022-2023 program year.

To view the full Notice of Funding Availability for the CDBG programs, please visit:
<https://www.carlsbadca.gov/services/depts/ns/grants/cdbg.asp>.

The completed application package, including appropriate attachments, must be submitted prior to 5 P.M. on Monday, February 21, 2022. Applications may be submitted electronically to nancy.melander@carlsbadca.gov. Paper copies may be mailed or delivered to the City of Carlsbad, Housing Services, Attn: Nancy Melander, at 1200 Carlsbad Village Drive, Carlsbad, CA 92008.

Potential applicants who have questions regarding the application should contact Nancy Melander by email at nancy.melander@carlsbadca.gov or by calling 760-342-2812.

The proposed timeline for the grant review process is as follows:

Process and Timeline for Allocation of Funding	
Jan. 19, 2022	Issue NOFA
Feb. 21, 2022	Applications Due
Mid- March 2022	Application review and recommendation by the CDBG Advisory Committee
15-day public review/comment Early- May, 2022	City Council approval of allocations and FY2022-23 Action Plan



**COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM
FY 2022-23 FUNDING PROPOSAL APPLICATION**

The following information must be completed by each qualified nonprofit organization interested in being considered for CDBG funding. Please type or print clearly. Attach additional sheets or information as necessary. **All information requested must be provided or the application will be considered incomplete and will not be further evaluated for funding consideration. The application must not exceed a total of twenty (20) pages, please reference the Checklist of Required Documents.** (Attachments D and E may also be required depending on the proposed project, but will not count towards the 20 page limit.) **The completed application package, including appropriate attachments, must be submitted prior to 5 P.M. on Monday, February 21, 2022.** Applications may be submitted electronically to nancy.melander@calsbadca.gov. Paper copies may be mailed or delivered to the City of Carlsbad, Housing Services, Attn: Nancy Melander, at 1200 Carlsbad Village Drive, Carlsbad, CA 92008.

Potential applicants who have questions regarding CDBG funding should contact Nancy Melander by email at nancy.melander@carlsbadca.gov.

→THEME: N/A

FUNDING APPLICANT

Name of Agency: _____

Address: _____

Federal DUNS Number: _____

PROPOSED PROGRAM/PROJECT

Title of Program/Project: _____

Location of Program/Project: _____

Person completing application: _____ Telephone No.: _____ email: _____

Financial Contact: _____ Telephone No.: _____ email: _____

Program Manager Contact: _____ Telephone No.: _____ email: _____

Executive Director Contact: _____ Telephone No.: _____ email: _____

Requested Funding Amount: \$ _____

Brief Description of Program/Project (Describe the work to be performed, including the activities to be undertaken or the services to be provided and the goals and objectives of the program/project):

I. ORGANIZATIONAL ABILITY/CAPACITY

- A. This agency is:
- | | |
|--|--|
| <input type="checkbox"/> Nonprofit | <input type="checkbox"/> For-profit |
| <input type="checkbox"/> Local public agency | <input type="checkbox"/> State public agency |
| <input type="checkbox"/> Other (Please specify.) _____ | |
- B. What is the purpose/mission of the agency?
- C. How long has this agency been in operation? Please include the date of incorporation?
- D. How long has this agency been providing the proposed program/project?
- E. Please submit an organizational chart for the agency as Attachment B.
- F. Please describe the agency's existing staff positions directly responsible for the proposed program/project and their qualifications and experience in implementing such a program/project. (Resumes may also be submitted as an optional Attachment C but not in lieu of a complete response.)
- G. Please indicate your agency's level of experience with the CDBG program.
- CDBG program:
- | |
|--|
| <input type="checkbox"/> No or little experience (up to 1 year of using CDBG funds) |
| <input type="checkbox"/> Some experience (2 to 3 years of using CDBG funds) |
| <input type="checkbox"/> Moderate experience (4 to 5 years of using CDBG funds) |
| <input type="checkbox"/> Considerable experience (more than 5 years of using CDBG funds) |
- H. If you have received federal funds, including CDBG funds, in previous years, have

program violation findings ever been made against your agency/organization?

☐ No

☐ Yes

If yes, please explain nature of finding(s) and how finding(s) has been addressed by your organization.

- I. 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. Describe the program's timeline with dates and times, including the earliest possible start dates, end dates, and milestones as applicable.

II. FINANCIAL CAPACITY/STABILITY

- A. Please complete Page 8 itemizing revenues and expenses (sources and amounts) for the proposed program or project in which CDBG funds would be used. Indicate how the requested CDBG funds would relate to the overall proposed budget.
- B. Did you receive any of the following sources of funding from the City of Carlsbad within the last two fiscal years (2020-2021 and 2021-2022) for the proposed program/project?

<u>Sources of Funding</u>	<u>No</u>	<u>Yes</u>
CDBG	<input type="checkbox"/>	<input type="checkbox"/>
Community Activities (or other General Fund monies)	<input type="checkbox"/>	<input type="checkbox"/>

If yes, please indicate amount and status of previously awarded funds (fully expended, funds remaining, program/project discontinued, etc.).

	<u>Amount Received</u>	<u>Status</u>
CDBG funds		
Community Activities/Other		

- C. Did you receive any federal funds, including CDBG funding from other cities?

☐ No

☐ Yes (Please list funds below)

<u>Program Source</u>	<u>Amount Received</u>
	\$
	\$

III. BENEFITS & BENEFICIARIES

A. How accessible or convenient is the proposed program/project to Carlsbad residents? (Please be specific such as direct services to client's home, transportation provided to and from facility, or relation to public transportation.)

B. What is the approximate percentage of your clients that have annual family incomes in each of the following ranges: (Percentages should add to 100%)

_____ % of clients are at 30 percent or below of the area median income
_____ % of clients are between 31 and 50 percent of the area median income
_____ % of clients are between 51 and 80 percent of the area median income
_____ % of clients are above 80 percent of the area median income

C. Please describe how low-and-moderate income persons will benefit from the proposed program/project. Include the need or problem to be addressed in relation to Consolidated Plan housing and community development priorities, as well as the population to be served or the area to be benefited. (Reference Consolidated Plan Priorities)

D. Please indicate the number of clients benefiting from the proposed activity and the percentage that are Carlsbad residents.

Persons of which _____ % are Carlsbad residents

E. Does your agency focus its activities on populations with special needs?

☐ No ☐ Yes (Please specify)

Please specify which special needs populations. (homeless individuals/families, persons with disabilities, persons with substance abuse problems, veterans, farmworkers and day laborers, seniors, children, etc.)

F. Does your organization charge recipients for the provided services?

☐ No ☐ Yes (Please specify) \$ _____

IV. IMPLEMENTATION OF ACTIVITY

A. Please submit a schedule for implementation as Attachment E if this proposal is for

construction, rehabilitation, property acquisition, and construction related activities, or a new public/community service program/project. Acquisition of property or construction related projects must also include an Attachment D for plans, scope of work, cost estimates, property listing, or other appropriate documents.

V. DOCUMENTATION

A. How will the beneficiaries' information be collected and documented?

B. How will the outcomes be measured, collected, and documented?

VI. PARTNERSHIPS, COLLABORATION, AND OUTREACH

A. Describe how you are collaborating with other agencies such as the County Continuum of Care and other non-profit organizations and/or agencies to form a cohesive approach in serving the low income and most vulnerable populations.

I, the undersigned, do hereby attest that the above information is true and correct to the best of my knowledge.

Signature

Title

Date

NOTE: Applications must include a resolution from your organization's Board of Directors authorizing the person signing above to submit funding applications and to enter into funding agreements if selected.

Information below to be completed by Housing and Homeless Services Department staff.

Date Received: _____

Date Reviewed: _____

Staff Person Completing Review: _____

National Objective: _____

Local Objective: _____

Eligibility Determination: _____

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CDBG PROJECT BUDGET

Organization: _____ Total organization budget \$ _____

Program/Project name requesting funds: _____

CDBG funds requested: \$ _____ Total program/project budget: \$ _____

Note: Indicate with an asterisk (*) funds that are volunteer time or in-kind contribution.

1. Sources of funding for program/project: (S)Secured or (A)Anticipated
- | | | |
|--|----------|------------|
| a. Funding requested from the City | \$ _____ | (S) or (A) |
| b. Other federal funds (if any) | _____ | (S) or (A) |
| c. State or local government funds | _____ | (S) or (A) |
| d. Donations and contributions | _____ | (S) or (A) |
| e. Fees or memberships | _____ | (S) or (A) |
| f. In-kind contributions / Volunteer time | _____ | (S) or (A) |
| g. Other funding _____ | _____ | (S) or (A) |
| h. TOTAL PROJECT FUNDING (project budget) | \$ _____ | (S) or (A) |
2. Uses of CDBG funds requested for the program/project: (1.a.)
- | | | |
|---|----------|---|
| a. Wages and salaries | \$ _____ | |
| b. Personnel benefits | _____ | |
| c. Materials and supplies | _____ | |
| d. Program expenses and evaluation | _____ | |
| e. Rent and utilities | _____ | |
| f. Insurance | _____ | |
| g. Mileage (____@ 56 cents/mile calendar year 2021) | _____ | - |
| h. Incentives and Special Events | _____ | |
| i. Indirect costs | _____ | |
| j. _____ | _____ | |
| k. _____ | _____ | |
| l. TOTAL REQUESTED FUNDING (same as 1.a.) | \$ _____ | |
3. Percentage of project budget represented by CDBG request _____ %
4. If your project will require future funding, please provide information about how the program will be funded.

**CITY OF CARLSBAD
CDBG FUNDING APPLICATION PACKAGE
CHECKLIST OF REQUIRED DOCUMENTS**

The following information is required of all CDBG applicants. **All applicants must provide all of the documents listed below even if they have been provided in the past.**

- ☐ Board of Directors' resolution authorizing submittal of application (1 Copy)
- ☐ Board of Directors' resolution designating official(s) authorized to enter into agreements on behalf of organization (1 Copy)

(Note: One resolution both authorizing submittal of applications and entering into agreements may be substituted for the above two documents.)

- ☐ List of Board of Directors (1 Copy)
- ☐ Financial Audit Report for the most recently ending Fiscal Year (1 Copy)
- ☐ Funding proposal application.

Application form format is to remain as it is provided in Request for Proposal package.

Application is not to exceed twenty (20) pages total, including attachments A, B, C below.

(Pages included after the first 20 pages in an application package will not be distributed or used for evaluation purposes.)

- ✓ Attachment A Executive Summary (required)
- ✓ Attachment B Organizational chart (required)
- ✓ Attachment C Resumes of identified key personnel (Optional)
- ✓ Attachment D Implementation schedule for construction, rehabilitation, property acquisition, other construction related, or new public/community service activities. (if applicable)
- ✓ Attachment E Acquisition of Property or Construction Related Projects: Architectural plans, scope of work, estimate of costs, listing of property to be acquired or other appropriate documentation. (if applicable)

Please note that the attachment of brochures or other information will **not be accepted** in lieu of completing each question on the Funding Proposal Application. Additionally, any other attachments, such as newspaper articles, not directly related to the application will **not be accepted**.