

COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM OVERVIEW

Town of Union CDBG Program

Contact

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Overview

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- ▶ Eligible Activities and Consolidated Plan Priorities
- ▶ Application Process
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- ▶ Submitting Requests For Payment
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- ▶ Reporting Procedures
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INTRODUCTION

What is the CDBG?

- ▶ Funds from the United States Department of Housing and Urban Development (HUD)
 - ▶ Allocated to the Town of Union (TOU) to help alleviate poverty and blight through:
 - ▶ Infrastructure
 - ▶ Public Services
 - ▶ Housing

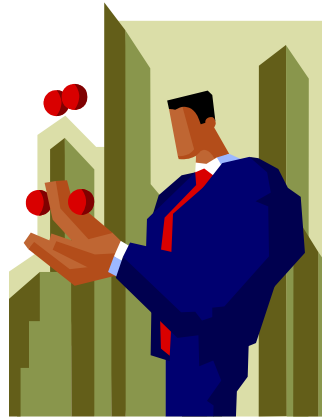


Community
Development
Block
Grant

Subrecipients

- ▶ “an entity that expends awards received from a pass-through entity to carry out a project...to perform a portion of the scope of work or objectives of the award agreement” (OMB Circular A-133)
 - ▶ Receive money from TOU to help fund programs or improve public facilities
 - ▶ Required to follow specific guidelines and regulations to receive money
 - ▶ Need to be responsible with the money received

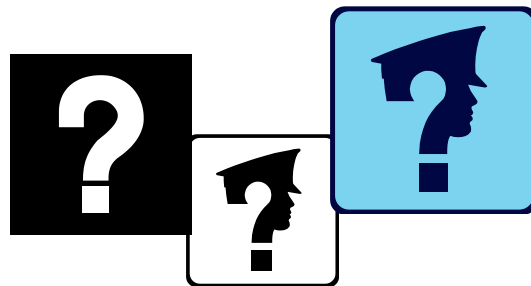




ELIGIBLE ACTIVITIES AND CONSOLIDATED PLAN PRIORITIES

Does your program qualify?

- ▶ Does your program meet a National Objective?
- ▶ Does your program offer a service that the Town has identified as a priority in the Consolidated Plan?
- ▶ Does activity comply with OMB circulars A-87 (governmental costs), A-122 (non profit costs), or A-21 (educational costs)?



Three National Objectives

- ▶ Activities meet a National Objective if they:
 - ▶ Directly benefit persons or areas of low and moderate income
 - ▶ Typically a 51% or more LMI requirement
 - ▶ Aid in the elimination of slums and blight
 - ▶ Are designed to meet community development needs having a particular urgency
 - ▶ Example: disaster relief



Low-Moderate Income Guidelines as of April 17, 2017

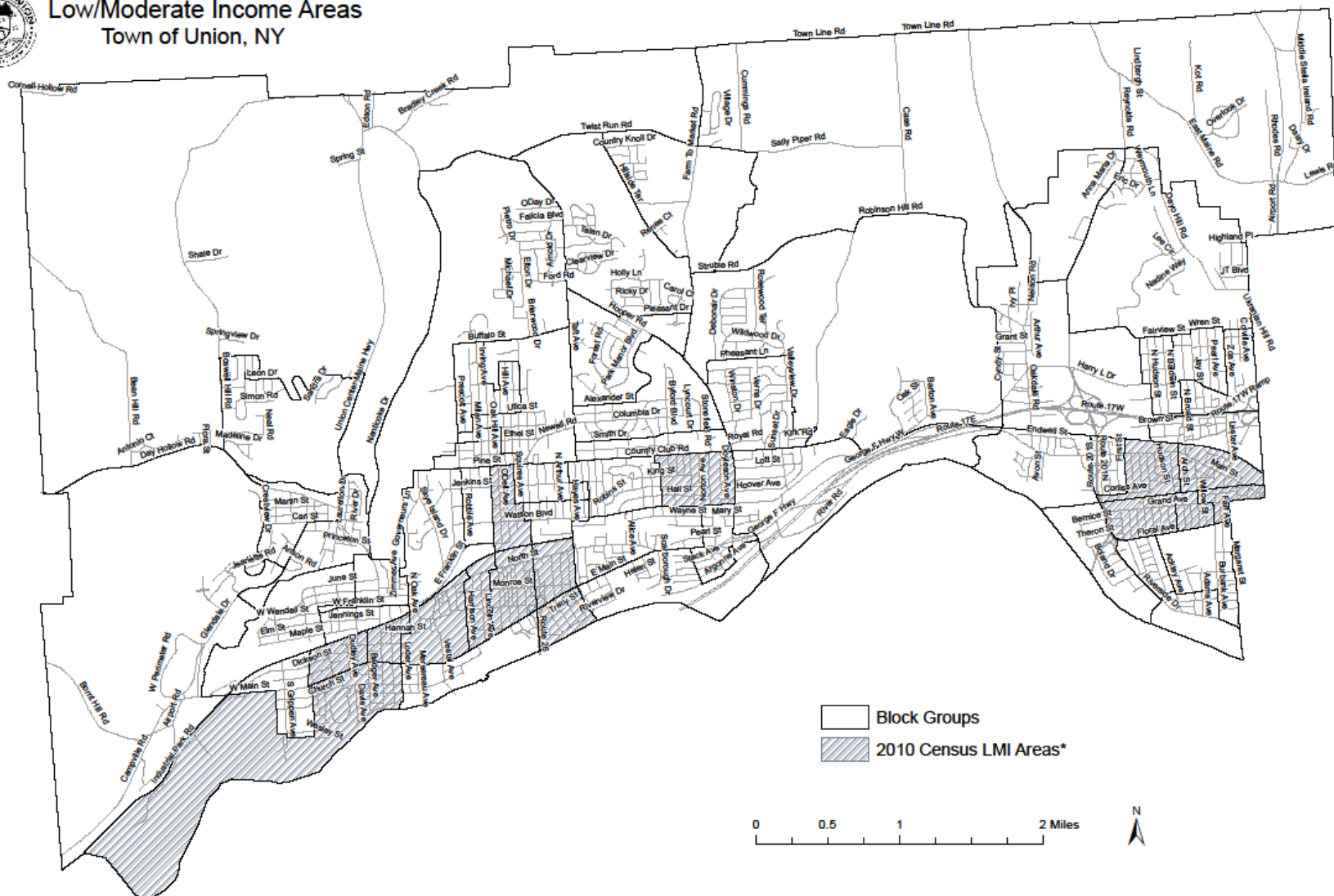
- Typically change every year around the same time; can be frustrating with overlap of CDBG applications

Maximum Income Family Size	1 Person	2 Persons	3 Persons	4 Persons	5 Persons	6 Persons	7 Persons	8+ Persons
Extremely Low Income (30% of Median) Section 8 Eligibility	\$13,800	\$16,240	\$20,420	\$24,600	\$28,780	\$32,960	\$37,140	\$41,320
Very-Low Income (50% of Median)	\$23,000	\$26,300	\$29,600	\$32,850	\$35,500	\$38,150	\$40,750	\$43,400
Low Income (80% of Median)	\$36,800	\$42,050	\$47,300	\$52,550	\$56,800	\$61,000	\$65,200	\$69,400





Low/Moderate Income Areas Town of Union, NY



*based on HUD income guidelines for low to moderate income



Consolidated Plan Priorities

- ▶ Refer to Consolidated Plan for detailed priorities, but generally include:
 - ▶ Residential Services
 - ▶ Special Needs support (e.g. elderly, disabled, homeless)
 - ▶ Blight elimination and infrastructure
 - ▶ Cultural/recreational amenities (parks, historic buildings, beautification)
 - ▶ Job creation/retention



Capital Improvement Projects Only

- ▶ Is it a public facility?
- ▶ Is it located in an LMI area or provide services to LMI clientele within a specified service area?
- ▶ Do you own the property or do you have a long term lease (defined as lasting at least 15 years?)
- ▶ Do you have the appropriate property insurance?



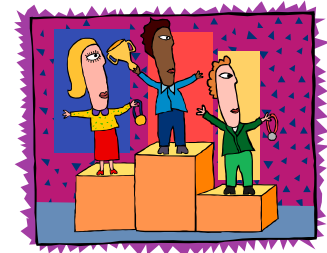
Prohibited Activities

- ▶ Political activities
- ▶ Governmental expenses/buildings
- ▶ Purchase of construction equipment
- ▶ Purchase of personal property
- ▶ Purchase of moveable equipment/furnishings
- ▶ Non-service operating and maintenance expenses
- ▶ New housing construction
- ▶ Client income payments



Rankings

- ▶ Applicants are assigned rankings according to several factors:
 - ▶ What percentage of town residents use the program/facility?
 - ▶ Does it provide a basic human necessity?
 - ▶ Shelter, food, etc.
 - ▶ Is it an unduplicated service?
 - ▶ Has it performed well in the past, is it a new program, or returning program?



Two Important Need-To-Do's

- ▶ All subrecipients must:
- ▶ Be Informed:
 - ▶ Read the appropriate rules and requirements
- ▶ Document as much as possible
 - ▶ Prevents problems from occurring
 - ▶ If doing something incorrectly, can easily be fixed
 - ▶ Helps with external audits as well as bookkeeping





APPLICATION PROCESS

Applications Available Online

- ▶ <http://www.townofunion.com>
 - ▶ Departments
 - ▶ Community Development
 - ▶ http://www.townofunion.com/depts_service_s_community_dev_forms_apps.html
- ▶ Public service and capital project applications must be submitted separately



Cover Sheet

- ▶ Follow the checklist
- ▶ At bottom, indicate whether certain documentation has been submitted previously
- ▶ Update Board of Directors listing if it has changed since your most recent application



Narrative Sheet

- ▶ Select National Objective from pull down menu
- ▶ Select Consolidated Plan Priority from pull down menu
- ▶ Provide a project/activity description in the space provided
 - ▶ Please do not attach additional descriptive material in the application



Project Proposal

- ▶ Indicate your costs and your potential funding sources (including the requested CDBG funds)
 - ▶ Costs should match the funding
 - ▶ Form does not calculate totals; be sure to check your math
- ▶ Indicate the total number of persons anticipated to be served and the number *of those* that are TOU residents (this prevents reporting duplicates)



Project Budget: Public Service Projects Only

- ▶ Fill out the salary and benefit information for individuals to be paid with CDBG funds
- ▶ Fill out other expenses at bottom
- ▶ If not enough available space, print additional form(s)
- ▶ Double-check your math
- ▶ **These items will be listed in the Subrecipient Agreement as the “line items” that the Town funds**



Attachments

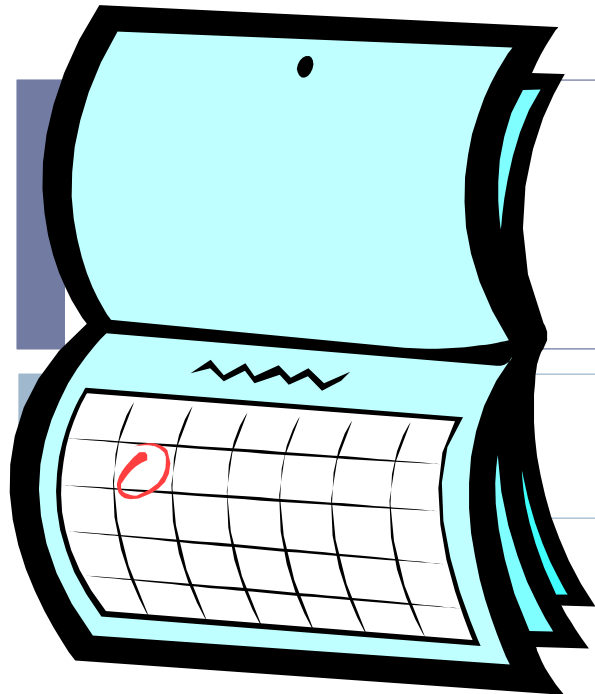
- ▶ Add all attachments that are required.
- ▶ Please do not add any more attachments than are requested with the application



Application Submission

- ▶ Two copies (one with original signatures) of your printed application must be delivered to:
 - ▶ Town of Union Department of Planning
Paul Nelson, Director
3111 East Main Street
Endwell, NY 13760-5990





TIMELINE



Application Process Dates

- ▶ **March 9th, 2018:** Applications available
- ▶ **April 23rd, 2018:** Applications Due
 - ▶ Applications must be delivered to the Town of Union Department of Planning by 4:00 PM
- ▶ **April 4th, 2018:** Initial Input Public Hearing
- ▶ **July 11th, 2018:** Draft Plan Public Hearing
- ▶ **August 8th, 2018:** Final Plan Approval
- ▶ Regardless of approval, you will be notified of final status



Contract Process (Fall 2018)

- ▶ If awarded funds in an amount different than what was requested you will be sent an update form
 - ▶ Please make corrections and send back
- ▶ Contracts (x3) written and mailed
 - ▶ Please read, sign, notarize, and mail back all three
- ▶ Final executed contracts mailed out



Federal Fiscal Year Quarters



- ▶ 1st Quarter: October 1st – December 31st
 - **DO NOT** make purchases or otherwise obligate or commit CDBG funds by signing contracts for goods, services, or construction prior to October 1st!
- ▶ 2nd Quarter: January 1st – March 31st
- ▶ 3rd Quarter: April 1st – June 30th
- ▶ 4th Quarter: July 1st – September 30th

- ▶ Please send in one voucher along with report each quarter where feasible



Final Reporting Date

- ▶ Your Final End of Year Report must be submitted to the Town by October 31, 2019
- ▶ It is preferable to send in your final report with your last voucher

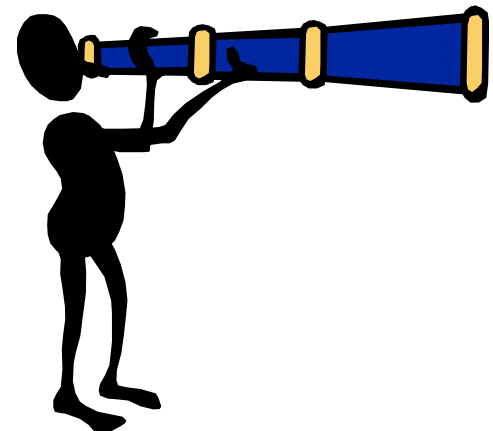




CAPITAL IMPROVEMENT PROCUREMENT PROCEDURES

Scope of Work

- ▶ Create a detailed scope of work
 - ▶ This will not be funded by CDBG
- ▶ Larger, more complicated projects necessitate more details, possibly from a licensed professional such as an Architect or Professional Engineer
- ▶ Capital projects under \$10,000 may be more likely to be approved for funding



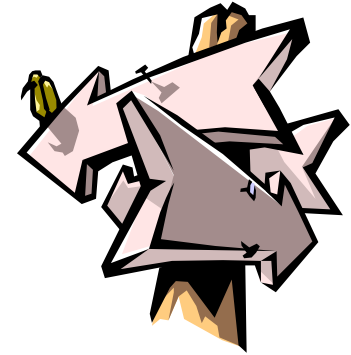
Conflicts of Interest

- ▶ It is important to avoid even the appearance of a conflict of interest
 - Someone affiliated with your agency may help create scope of work but may not bid on project
 - No one affiliated with creating the scope of work may bid on projects



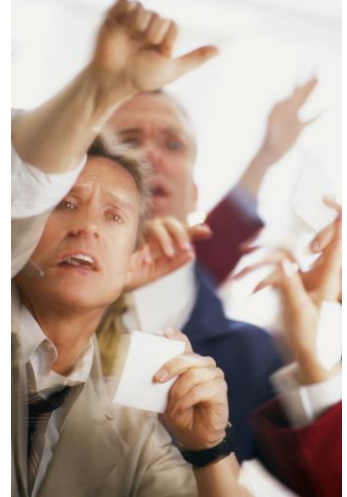
Types of Procurement Procedures

- ▶ Subrecipient's procurement process
 - ▶ Use as long as it meets TOU and Federal requirements
- ▶ Small Purchases
 - ▶ Only for projects < \$20,000
 - ▶ Request informal bids from contractors (minimum of 3)
- ▶ Competitive Sealed Bids
 - ▶ Required for projects > \$20,000
 - ▶ Must publicly advertise for bids (minimum of 3)
- ▶ Noncompetitive Proposals/Sole Source Procurement
 - ▶ Allowed only under special circumstances



Bid Process

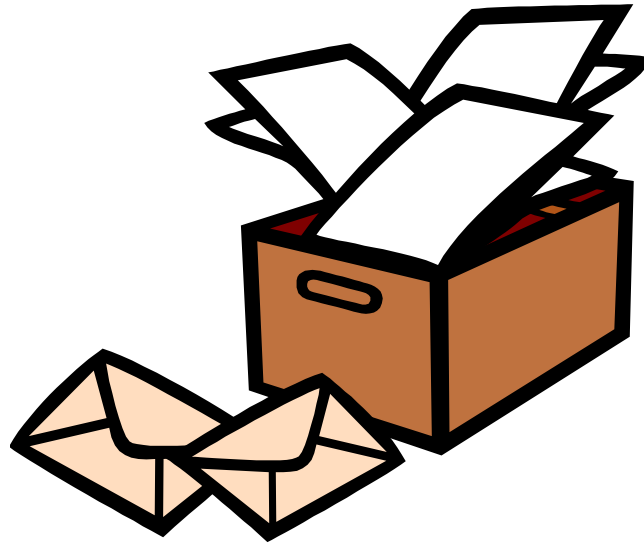
- ▶ Determine construction dates
- ▶ If the project >\$2,000, determine Davis-Bacon wage rates
- ▶ Seek bids according to procurement process used
- ▶ If the project >\$100,000, bid guarantees may be necessary
- ▶ Award contract and provide the town with documentation outlining the selection process



Before Construction Begins

- ▶ The contractor will need to set up a meeting time with the Community Development Coordinator at least one week before construction begins
- ▶ If the project >\$100,000, payment and performance bonds may be necessary





DOCUMENTATION STANDARDS

Project Documentation

- ▶ Project agencies must document Town of Union clients that utilize their service:
 - ▶ Address
 - ▶ Must provide proof
 - ▶ Ethnicity (Latino or non-Latino)
 - ▶ Race (One or more of 5 categories)
 - ▶ Income
 - ▶ Must provide proof unless Presumed Benefit



CDBG FUNDED PUBLIC SERVICE PROGRAM

Name of Applicant: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

ETHNICITY (select only one):

_____ Hispanic or Latino

_____ Not Hispanic or Latino

RACE (select one or more):

_____ American Indian or Alaska Native

_____ Asian

_____ Black or African American

_____ White

_____ Native Hawaiian or Other Pacific Islander

_____ Asian and White

_____ American Indian or Alaska Native and White

_____ Black or African American and White

_____ American Indian or Alaska Native and Black or African American

_____ Other or More than one race

Female Head of Household: ___ Yes ___ No No. of family members currently employed: _____

Family Income (please circle):

No. of family members living in household	Extremely Low (30% of Median)	Very Low (50% of Median)	Low (80% of Median)
1	Up to \$13,450	\$13,451- \$22,400	\$22,401- \$35,800
2	Up to \$16,020	\$16,021- \$25,600	\$25,601- \$40,900
3	Up to \$20,160	\$20,161- \$28,800	\$28,801- \$46,000
4	Up to \$24,300	\$24,301- \$31,950	\$31,951- \$51,100
5	Up to \$28,440	\$28,441- \$34,550	\$34,551- \$55,200
6	Up to \$32,580	\$32,581- \$37,100	\$37,101- \$59,300
7	Up to \$36,730	\$36,731- \$39,650	\$39,651- \$63,400
8	Up to \$40,890	\$40,891- \$42,200	\$42,201- \$67,500

In order to be considered eligible for the CDBG program, applicants must provide current proof of residency and income for all currently employed family members living in the household. Listed below are acceptable forms of documentation.

Acceptable Documentation for Residency

Cable Bill

Phone Bill

Utility Bill

Driver's License

Sheriff's Identification Card

Acceptable Documentation for Income

Unemployment Payment

Veteran's Administration Stub

Social Services Identification Card

Pay Stub

W-2 Form

Social Security Income Form

PLEASE REVIEW AND SIGN REVERSE SIDE OF FORM

Presumed Benefit

- ▶ Abused children
- ▶ Homeless
- ▶ Battered spouses
- ▶ Persons with HIV/AIDS
- ▶ Senior Citizens (Aged 62 and older)
- ▶ Illiterate adults
- ▶ Severely disabled adults
- ▶ Migrant farm workers

These clients are categorized as low income when reporting – see next page



**Presumed Benefit**

The following will qualify an individual as “presumed benefit” for purposes of reporting them to the Town of Union CDBG Program.

- 1) Referrals:
 - Any Medicare/Medicaid based agency referral
- 2) Residential Location:
 - SEPP apartments (Marian, Harry L, Nichols Notch, Hamilton House, Wells, Cardinal Cove), Northside Villa, Good Shepherd Village, Ideal Senior Living Center, United Methodist Homes – Hilltop Campus
- 3) Proof of Age:
 - Anyone with government issued ID that indicates they are 62 or older
- 4) Proof of Disability:
 - Proof of receipt of SSD or any other government issued paperwork that indicates the individual has a documented disability

Income Level:

Report individuals by the four income categories provided based on area median income:

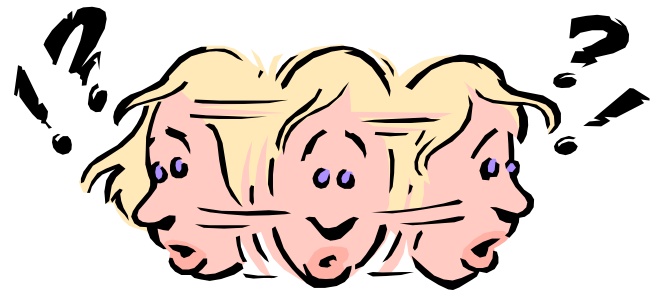
- Extremely low income (30% or less)
- Low income (31% to 50%)
- Moderate income (51% to 80%)
- Non low-to-moderate income (81% or greater)

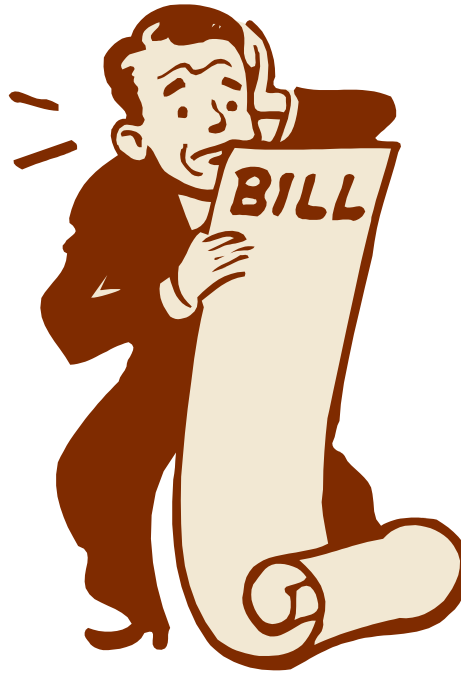
If the project is limited to assisting one or more groups of persons that are presumed benefit, the number of persons benefiting should be reported under the following income categories:

Abused children	<i>Extremely low income</i>
Battered spouses	<i>Low income</i>
Severely disabled adults	<i>Low income</i>
Homeless persons	<i>Extremely low income</i>
Illiterate adults	<i>Low income</i>
Persons with HIV/AIDS	<i>Low income</i>
Migrant farm workers	<i>Low income</i>
Elderly	<p>If CDBG funding is used for the acquisition of, construction of, conversion to, or rehabilitation of a senior center OR if CDBG funding is to pay for center-based senior services: <i>Moderate income</i></p> <p>If CDBG funding is for non-center based services: <i>Low income</i></p>

What If?

- ▶ The client elects not to provide proof of residency?
 - ▶ Assume they do not live in the Town.
- ▶ The client elects not to provide proof of income?
 - ▶ Assume they are non LMI.
- ▶ The client elects not to indicate their ethnicity/race?
 - ▶ The person taking the application must make their best educated guess.





SUBMITTING PAYMENT REQUESTS

Reimbursement



- ▶ CDBG funds are used to **reimburse** subrecipients for expenses incurred
- ▶ Only the Line Items included in the signed Subrecipient Agreement can be reimbursed and no new Line Items can be added
- ▶ Up to 5% of the approved budget may be shifted between line items, but only if submitted in writing and approved by the Planning Director. Larger requests require Town Board approval.
- ▶ If you use all your allocated funding for a specific line item in the 1st quarter, submit a letter stating you have sufficient funding to continue providing service

Small Claim Vouchers

- ▶ A filled out and signed small claim voucher must be submitted along with:

- ▶ Line item breakdown for reimbursement
- ▶ Timesheets
- ▶ Billing statements
- ▶ Other documentation




- ▶ Checks are generally mailed out twice a month, usually in the middle and end of each month

SMALL CLAIM VOUCHER

VENDOR #: _____



APPROPRIATION - CODE	AMOUNT
----------------------	--------

TOTAL 	

[illegible]

1. Charges against different departments **MUST NOT** be made on the same claim.
2. Failure to follow the instructions on this blank or those printed on orders issued to you may prevent payment of this claim.

I, _____ do hereby certify the following:

I am the person making the within claim; and

That the items of the said claim are, in all respects, correct; and

That the disbursements and services therein charged have been in fact made and rendered;

That no part has been paid or satisfied; and

That the same is justly due and owing; and

That there are no Federal or New York State taxes included in this bill.

Title

Capital Project Reimbursements

- ▶ A copy of the check paid to the contractor must be submitted with the voucher. The town may also require a statement from the contractor verifying that he has been paid for the work.
- ▶ Certified Payroll in instances where prevailing wage rates apply.
- ▶ A Project Completion Form provided by the Community Development Coordinator must be completed





ONSITE MONITORING

What is Onsite Monitoring



- ▶ Onsite monitoring is a field visit by the Community Development Coordinator to the subrecipient.
- ▶ Onsite monitoring is a “spot check” to ensure requirements are being met.
- ▶ Onsite Monitoring is NOT an audit.



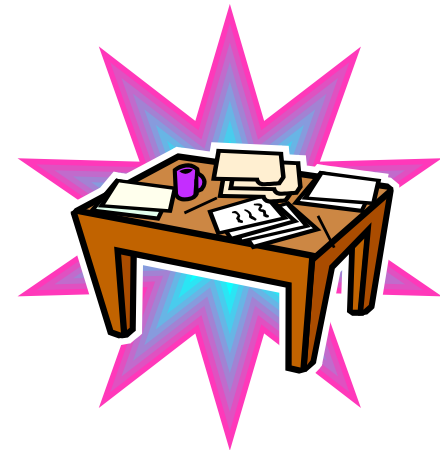
More Monitoring Information

- ▶ **When:**
 - ▶ Usually August/September
- ▶ **How long does it take:**
 - ▶ ~ 15 to 30 minutes
- ▶ **Where:**
 - ▶ At the subrecipient's location
- ▶ **Who needs to be present for the monitoring visit:**
 - ▶ Usually the grant writer (or the person who is most familiar with the application), financial representative/accountant, or project head.



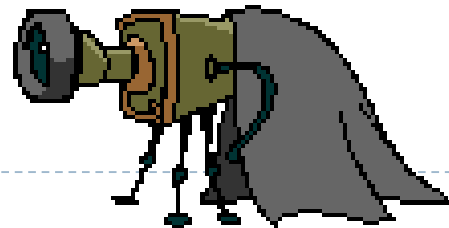
What You Need to Provide

- ▶ A description of your program
- ▶ A sample intake (enrollment) form
- ▶ Any financial or other records the coordinator wants to clarify



Capital Projects

- ▶ For capital projects, the purpose of the onsite visit is to take photos and double check the final product
- ▶ Monitoring visits may also occur for prevailing wage rate interviews and in progress photos for our records





REPORTING PROCEDURES

Summary Report

- ▶ Due along with every quarterly voucher submitted
- ▶ Indicate the number of “new” unduplicated clients served that period according to income and racial/ethnic categories



Final Report

- ▶ Final full summary report
- ▶ Due at the end of the FFY
- ▶ The sum total of all clients served that year according to categories



Race and Ethnic Data Reporting Form

INSTRUCTIONS

Program Title: _____

Grantee/Recipient Name: _____

Grantee Reporting Organization: _____

Reporting Period From (mm/dd/yyyy): _____

To (mm/dd/yyyy): _____

☐ **Final Year End Report**

L I N E	Racial Categories	Total Number of Race Responses	Total Number of Hispanic or Latino Responses
1	American Indian or Alaska Native		
2	Asian		
3	Black or African American		
4	Native Hawaiian or Other Pacific Islander		
5	White		
6	American Indian or Alaska Native <i>and</i> White		
7	Asian <i>and</i> White		
8	Black or African American <i>and</i> White		
9	American Indian or Alaska Native <i>and</i> Black or African American		
10	* Other multiple race combinations greater than one percent: [Per the form instructions, write in a description using the box on the right]		
11	Balance of individuals reporting more than one race		
12	Total:		
13	* If the aggregate count of any reported multiple race combination that is not listed above exceeds 1% of the total population being reported, you should separately indicate the combination. See detailed instructions under "Other multiple race combinations."		
Income Data			
14	Extremely Low Income (30% of Median Family Income)		
15	Very Low Income (31%-50% of Median Family Income)		
16	Low Income (51%-80% of Median Income)		
17	Non-Low Income (non-reporting or above the Low Income category)		
Other Demographic Data			
18	Of the total listed on Line 12, how many were Female Headed Households?		
19	Of the total listed on Line 12, how many were Elderly (Age 62 Or Older)		
20	Of the total listed on Line 12, how many were Severely Disabled Adults (Does Not Include Disabled Children)		



QUESTIONS AND ANSWERS



THANK YOU