



## Office of Community Development

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Princess A. Erfe, *Community Development Administrator*

### **GREENWICH COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) PROGRAM APPLICATION FORM/REQUEST FOR PROPOSALS (RFP) FOR 2010 CDBG FUNDS**

The Greenwich CDBG program is currently accepting proposals from interested persons and/or organizations for a possible CDBG grant award in Year 2010. The CDBG Entitlement for the Town of Greenwich for Year 2010 is estimated at nine hundred thousand (\$900,000)+/- dollars. Please note that, per Federal Regulations, no more than 15% of the Entitlement plus program income (from previous year) can be allocated for public service activities.

For an application to be considered for funding, the following qualifications must be met:

- The proposed activity must comply with HUD regulations in meeting one of the national objectives of the CDBG program
- The proposed activity must be listed as an “eligible” activity in the CDBG regulations
- The proposed activity must address a priority set out by the 2005-2009 Consolidated Plan

Applications that are deemed eligible for CDBG funding assistance will be evaluated based on the following sets of criteria:

- Benefit to low- and moderate-income persons
- Benefit to target population
- Activity need and justification
- Activity management
- Activity implementation
- Efforts to secure other sources of funding
- Financial stability – matching contribution
- Financial capacity
- Application completeness
- Other criteria - cost reasonableness and effectiveness, prior experience with CDBG related activities or other grant programs, organizational strength (record-keeping methods, filing system, financial systems, existence of written procedures for financial management and personnel, when applicable relocation of existing residents will be minimized)

**Low- and Moderate-Income Guidelines:** At least 51% of the funded activity participants or beneficiaries must meet the low or moderate-income guidelines determined by HUD for the Stamford-Norwalk CT HMFA. The current income guidelines/limits are as follows:

PERSON(S)	1	2	3	4	5	6	7	8
30% of Median	\$25,700	\$29,350	\$33,050	\$36,700	\$39,650	\$42,550	\$45,500	\$48,450
Very Low Income	\$42,800	\$48,900	\$55,050	\$61,150	\$66,050	\$70,950	\$75,850	\$80,700
Low-Income	\$55,600	\$63,550	\$71,500	\$79,450	\$85,800	\$92,150	\$98,500	\$104,850

Adjusted by HUD and effective March 19, 2009

**Eligible applicants:** A unit of government or a non-profit 501(c)(3) organization.

**Proposal Deadline:** Proposals for Year 2010 CDBG funding consideration must be completed by applicants in writing and the signed hard copy must be submitted to and received by the CDBG Office no later than May 1, 2009.

**Mailing Address:** Princess A. Erfe, Community Development Administrator  
Office of Community Development  
Greenwich Town Hall  
101 Field Point Road  
Greenwich, CT 06830

**Questions:** Contact the CDBG Office at 203-622-3791 or [perfe@greenwichct.org](mailto:perfe@greenwichct.org).

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## **APPLICATION SCHEDULE AND DEADLINES**

**April 1, 2009** – RFP applications for 2010 funds are available to the public.

**May 1, 2009** – RFP applications are due back to the CDBG office by 4 PM. RFP applications sent via mail must be postmarked by May 1, 2009. Applications postmarked or hand-delivered after May 1, 2009 will not be accepted.

**May 28, 2009** – Public hearing before the Community Development Advisory Committee (CDAC) will be held at 7 PM at the Town Hall Meeting Room, 101 Field Point Road, Greenwich, CT 06830. The CDAC members will form sub-committees who will carry out site visits to all applicants prior to determining the proposed funding recommendations which will be submitted to the to the First Selectman.

**July 23, 2009** – Public hearing before the First Selectman will be held at 7 PM at the Town Hall Meeting Room, 101 Field Point Road, Greenwich, CT 06830. The First Selectman will make his final funding recommendations which will be submitted to the BET and the RTM.

**September 15, 2009** – Public hearing before the Board of Estimate and Taxation (BET) will be held at 6:30 PM at the Cone Conference Room, 101 Field Point Road, Greenwich, CT 06830. The BET will vote to accept or reject the 2010 CDBG Budget (including funding recommendations).

**October 26, 2009** – Public hearing before the Representative Town Meeting (RTM) will be held at 8 PM at the Central Middle School, 9 Indian Rock Lane, Greenwich, CT 06830. The RTM will vote to accept or reject the PY2010 Annual Plan (including funding recommendations).

**November 13, 2009** – The Final Annual Action Plan will be submitted to HUD.

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**COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG)  
APPLICATION FORM/REQUEST FOR PROPOSALS  
(RFP) FOR 2010 CDBG FUNDS**

APPLICANT AGENCY/ORGANIZATION NAME:

Executive Director's Name(s):  
Board Member Names:

TYPE OF ORGANIZATION:

APPLICANT MAILING ADDRESS:

APPLICANT LOCATION ADDRESS:

CONTACT PERSON (Designate a contact person who will manage the project/program):

Name:  
Title:  
Phone #:  
Fax #:  
E-mail Address:

PROPOSED PROJECT NAME:

AMOUNT OF CDBG \$ REQUESTED:

BRIEF DESCRIPTION OF THE PROPOSED PROJECT:

I CERTIFY ALL INFORMATION PROVIDED IS CORRECT TO THE BEST OF MY KNOWLEDGE.

\_\_\_\_\_  
Print Name and Signature (Director, Executive Officer, etc.)

\_\_\_\_\_  
Date

**PART 1. GENERAL INFORMATION**  
**ORGANIZATION**

1. Provide in the space below (or on a separate page) a brief description of your organization. Indicate if your organization has prior experience in carrying out a federally funded project/activity.

2. Identify the “core” programs of your organization. Use the space below or on a separate page. Core programs can be considered as services for which the greatest portion of your operating dollars is allocated. Example: A homeless shelter’s “core” program might be its basic overnight shelter service, while its counseling or job placement services are “support” programs.

3. Check “YES” or “NO” to the following questions.

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| A. Does your organization have a Board of Directors?   | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| B. Is your organization exempt under IRS Code 501(c)(3)? If yes, provide documentation.  | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| C. Are your organization’s services available to Greenwich residents?  | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| D. Does your organization have an EEO Policy? (Include a copy)   | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| E. If a housing provider, does your organization have a written Fair Housing Policy including accessibility (504) requirements? (Include a copy) | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| F. Does your organization have a written Procurement Policy? (Include a copy)  | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| G. Is your organization considered a Faith-Based Organization?   | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| H. Include a copy of your written Policy on Personal Property Maintenance, Protection and Disposal   |                              |                             |
| I. Include a copy of your written Policy on Record Keeping   |                              |                             |
| J. Include a copy of your most current audited Financial Statements  |                              |                             |

NOTE: Requested documentation must be submitted to the CDBG Office.

**PART 2. PROPOSED PROJECT/ACTIVITY**  
**GENERAL DESCRIPTION**

1. In the space below or on a separate page, provide a description of the proposed project/activity you are applying to receive CDBG funding. Include in your description: User/Client Population (# served, elderly, children, etc); Client/User Fees and/or Rents (if any) for proposed service; Membership Requirements (if any); Other Restrictions (if any, example income limits, etc). Cite studies and/or statistics that document community need for your proposed project/activity. Omission of requested information will be a cause to reject application.

2. Has your organization received CDBG funding for 3 or more consecutive years?  YES  NO

3. Has the proposed project/activity received CDBG funding for the most recent 3 consecutive years or more?  YES  NO

4. Check the box that best describes the proposed project/activity.  
 **Public Service Activity (i.e. administrative/programs costs).**  
 **Rehabilitation Activity.**  
 **New Construction Activity.**  
 **Real Property Acquisition Activity (i.e. land/building).**  
 **Acquisition of Equipment/Supplies Activity.**  
 **Planning/Consultant Services Activity.**  
 **Other (explain).** \_\_\_\_\_

5. Check the box that applies to the proposed project/activity.  
 **New “core” program.**  
 **Expansion of existing “core” program.**  
 **Support of Existing “core” program (with no expansion).**  
 **New “support” program.**  
 **Expansion of existing “support” program.**  
 **Existing “support” program (with no expansion).**  
 **Other (explain).** \_\_\_\_\_

6. Is the proposed project/activity located on property owned by a church or entity having a primarily religious purpose?  YES  NO

7. How many persons or families (unduplicated #s) will the proposed project/activity serve? Indicate one as follows: #\_\_\_\_\_ Week  
#\_\_\_\_\_ Month  
#\_\_\_\_\_ Year

8. How many persons or families (unduplicated #s) in question 7, above will qualify as CDBG income eligible (using the CDBG table below)? #\_\_\_\_\_ Week  
#\_\_\_\_\_ Month  
#\_\_\_\_\_ Year
9. How many persons or families (unduplicated #s) are Greenwich residents and qualify as CDBG income eligible (using the CDBG table below)? #\_\_\_\_\_ Week  
#\_\_\_\_\_ Month  
#\_\_\_\_\_ Year

\* Failure to answer question 7- 9 may disqualify the application for the CDBG grant.

**CDBG INCOME LIMITS (2009 STAMFORD-NORWALK MFI = \$122,300)**

PERSON (S)	1	2	3	4	5	6	7	8
30% of Median	\$25,700	\$29,350	\$33,050	\$36,700	\$39,650	\$42,550	\$45,500	\$48,450
Very Low Income	\$42,800	\$48,900	\$55,050	\$61,150	\$66,050	\$70,950	\$75,850	\$80,700
Low-Income	\$55,600	\$63,550	\$71,500	\$79,450	\$85,800	\$92,150	\$98,500	\$104,850

10. What kinds of client records does or will your organization require from applicants/users of the proposed project/activity? Check more than one box, if necessary.  Name  
 Address  
 **Income**  
 Other
11. Of the categories listed, check (below) which best describes the low and moderate (L/M) client benefit of the proposed project/activity. Indicate that you have provided documentation with the application evidencing the below qualification. Examples: Client intake forms (no names), proposed rents, etc. Note: Failure to provide such documentation may disqualify the application for the CDBG grant.
- Area Benefit.** Activity meets needs of L/M income persons residing in an area where at least 51% of the residents are L/M income. Note: An Area Benefit activity is available to all persons in the neighborhood or community regardless of income. However, the area where the activity is located must qualify as an L/M neighborhood (per the 2000 Census).  
Documentation Attached:
- Limited Client Benefit.** Activity benefits a specific group of people who qualify as L/M income persons. The activity must meet one (1) of the criteria (below). If your proposed project/activity qualifies under one of the subcategories, check the applicable number.  
Documentation Attached:
- (1) Project/activity maintains client records on income and family size records documenting that such persons qualify as L/M income.
  - (2) Project/activity has income eligibility requirements that limit the activity exclusively to L/M income persons.
  - (3) Project/activity is of such a nature and location that it may be concluded the clientele are primarily L/M income persons.
  - (4) Project/activity clientele are presumed (by HUD) to be principally L/M income persons (i.e. homeless, handicapped, etc).

**PART 3. PROJECT/ACTIVITY FUNDING**

1. Have you previously requested CDBG funds for this project? yes no  
 For another project? yes no

2. What is the total cost of the proposed project/activity? Attach a copy of your organization’s budget and a budget summary for the proposed project/service. Use it to estimate all costs directly related to the proposed project/service. If approved, you may be required to further itemize the costs. Rehabilitation/construction project/activities must include copies of contractor and/or architect/engineer estimates. Have you applied for funding from any other source(s) for this project? Include any letter(s) of commitment for ongoing funds or approved funds from other source(s) to assist with the proposed project/service that you are requesting.

If yes, what funding source?	Amount Requested	Amount Approved	Amount Pending	Amount Denied

3. What is/are the current source(s) of funding for the project/service? What is/are your organization’s major source(s) of revenues to operate programs?

4. Are future requests for CDBG funds anticipated? If yes, briefly explain.

5. Attach a brief narrative on how (if) you will finance the proposed project/activity if the CDBG grant award is less than the amount requested. If there are cost overruns, will you  
request additional CDBG funds? solicit funds from other sources?  
supplement from existing funds? decrease the project/service scope?  
other option(s), please explain \_\_\_\_\_

6. Describe your organization’s fiscal management, including financial reporting, payment procedures, accounting systems, and audit requirements. Provide your agency’s most recent financial audit or certified financial statement.

7. Attach an explanation on how the proposed/activity will affect your administrative budget (example: additional personnel, maintenance, office space, etc.). Include an explanation on long-term plans for funding/sustaining the proposed project/activity.

8. Attach a timetable (schedule) for the proposed project/activity, including anticipated dates (start to end).

**PART 4. ORGANIZATION EFFECTIVENESS AND EFFICIENCY**

1. How many staff members will be directly associated with the proposed project/service?

	Professional	Support	Volunteer
Full-Time Staff			
Part-Time Staff			

Include a list of those involved in completing the project/service. The list must include: Each person’s name and a brief summary of job duties in relation to the proposed project.

2. If your organization has an elected or appointed board, complete the questions below.

NAME OF BOARD/COMMITTEE: \_\_\_\_\_

List the names of the individuals on the board and the position they may hold on the board.

a. Number of voting board members as of December 31, 2008 \_\_\_\_\_ Vacancies? \_\_\_\_\_

b. How many board members reside within the Town of Greenwich? \_\_\_\_\_

c. How are the board members chosen?

d. Does your organization provide any board training and/or orientation? \_\_\_\_yes \_\_\_\_no  
If so, how often is training provided?

e. How long is a term? \_\_\_\_\_ How many consecutive terms may be served? \_\_\_\_\_

**PART 5. DUPLICATION/COORDINATION/COOPERATION**

1. Has the organization attempted to coordinate the project/service with other agencies to avoid duplication of services? \_\_\_\_yes \_\_\_\_no If yes, please explain.

2. Identify other agencies in Greenwich (including non-profit and government) that provide services similar to your proposed project/service. How do the programs differ? How do they overlap? Is there collaboration with the other agencies?

3. Identify other agencies in Greenwich that provide services directed toward the same target beneficiaries of your proposed project/service. Do you provide interagency referrals to other agencies serving the same target beneficiaries?

**PART 6. DISCLOSURE OF INTERESTS**

To assist the Town of Greenwich in determining whether there may be a potential conflict of interest related to the expenditure of Community Development Block Grant funds we request the following information be provided by applicants:

ORGANIZATION NAME:

Organization is:

- 1. Corporation ( )
- 2. Non-Profit 501C3 ( )
- 3. Partnership ( )
- 4. Sole Owner ( )
- 5. Association ( )
- 6. Other ( ) \_\_\_\_\_

**DISCLOSURE QUESTIONS**

If additional space is necessary, please attach a separate sheet.

1. State the names of each "employee" of the Town of Greenwich having a financial or personal interest in the above-mentioned "organization" or project proposed.

Name, Job Title and Town Department

2. State the name(s) of any current or prior elected or appointed "official" of the Town of Greenwich having a potential "financial interest" in the organization or project.

Name/Title

NOTE: If the applicant has provided names in question 1 or 2, please provide details regarding any known potential conflicts of interest in an attached narrative.

## **PART 7. OTHER CDBG PROGRAM INFORMATION**

CDBG grant recipients are subject to applicable CDBG (HUD) regulations, as well as certain State and local requirements. Organizations who receive a CDBG grant award will be required to enter into a written contractual agreement with CDBG (Town of Greenwich) containing terms and conditions of the grant (example: scope of service, time of performance, and federal, State, and local requirements). Said requirements include but are not limited to the following:

1. Environmental Compliance. CDBG recipients for rehabilitation/acquisition are required to provide documentation to CDBG evidencing environmental compliance before CDBG funds can be released. An inspection of the proposed/activity site must be undertaken to identify if any hazardous material is present (i.e. asbestos, lead, lead-based paint). CDBG recipients are responsible for follow-up abatement action pursuant to the standards of the EPA, if such hazardous material is identified.  
Check here  if you understand the environmental requirements. If needed, attach a brief narrative, and include any information on the environmental conditions of the proposed project/activity site.  Attachment.
2. Historic Properties. CDBG funded rehabilitation/acquisition projects/activities are subject to the National Historic Preservation Act of 1966, as amended, and must undergo a historic review to determine if they are located on properties and/or in districts listed on (or eligible for) the National Register of Historic Place. If yes, a determination is required as to what affect the proposed project/activity will have on the property, and applicable follow-up compliance action.  
Check here  if you understand the historic preservation requirements. If needed, attach a brief narrative, including any information on the historic significance of the proposed project/activity site.  Attachment.
3. Federal Labor Compliance. Rehabilitation/construction projects/activities, exceeding a cost of \$2,000, (and for housing rehabilitation of 8 units or more) must be undertaken by the CDBG recipient in accordance with the Davis Bacon Act (federal wage rates) and other related federal labor standards.  
Check here  if you understand the federal labor requirements. If needed, attach a brief narrative, and include applicable (if any) on how you will carry out your federal labor compliance responsibilities.  Attachment.
4. American with Disabilities Act of 1990 (ADA) and Section 504 of the Rehabilitation Act. The ADA requires that publicly funded projects/activities must be undertaken in a manner that does not discriminate against persons with disabilities (mental and/or physical). CDBG applicants are encouraged to review their proposed project/activity to consider how it complies, or will be affected by the ADA. For example: Applications requesting CDBG funds for playground equipment must include handicap accommodations.  
Check here  if you understand the ADA requirements. If needed, attach a brief narrative, and include applicable (if any) on how you will carry out your ADA responsibilities.  Attachment.
5. Competitive Procurement. Organizations receiving CDBG funds for eligible professional services and/or construction, etc. must procure said services through a competitive

solicitation/bidding process. For construction projects, the grantee will be required to prepare bid documents containing written technical specifications of the work to be performed, applicable federal conditions imposed on the contractor, HUD forms, etc.

Check here  if you understand the procurement requirements. If needed, attach applicable information.  Attachment.

6. Insurance. The Town of Greenwich requires that CDBG recipients provide evidence and maintain such evidence (at their own expense) of insurance coverage for their agencies CDBG funded projects/activities, in the types and amounts listed below. CDBG recipients may use part of the CDBG grant to recover insurance cost, provided permission is first obtained from CDBG to do so. Additional information on insurance requirements is available by contacting CDBG.

Check here  if you understand the insurance requirements.

- General Liability Insurance, with minimum coverage for combined bodily injury and property damage liability of \$2,000,000 general aggregate, \$1,000,000 per occurrence.
- Comprehensive Automobile Liability with minimum coverage of \$1,000,000 combined single limit for bodily injury and property damage, including where applicable, coverage for any vehicle, all owned vehicles, scheduled vehicles, hired vehicles, non-owned vehicles and garage liability.
- Excess Liability with minimum coverage of \$5,000,000 in umbrella form. Note: The CDBG recipient may request a reduction of the \$5,000,000 insurance excess liability coverage to a minimum of \$2,000,000. The Town of Greenwich will review each request on a case, by case basis.
- Additional Insured. The “Town of Greenwich”, must be named on the Certificate of Insurance as “additional insured” (except for Workmen's Compensation coverage).
- Workers Compensation and Employer’s Liability, with minimum coverage as provided by Connecticut General State Statutes.
- Insurance coverage must be prepared (to the satisfaction of the Law Department) on Certificates of Insurance forms prescribed by the Town of Greenwich, completed and signed (3 copies with original signature) by the certified insurance agent of the CDBG recipient.
- A letter from the agent/broker certifying that the Town of Greenwich has been endorsed onto the General Liability Policy as an “additional insured” is also mandatory. The letter must follow exactly the format as prescribed by the Town and must be signed (original signature) by the same authorized representative who signed the Insurance Certificates.

Note: Please do not submit any insurance certifications with the application for CDBG funding. The insurance certifications are to be provided only if you are awarded the CDBG grant (beginning in year 2009).

7. Maintenance of Records and CDBG Monitoring of Compliance. Recipients of CDBG funding must maintain records to accurately portray the agency’s actions and the activities carried out, as verified by on-site inspections. The following are required records that must be maintained on site, by recipients of CDBG funding:

A. Data as Required by Federal Regulations. On the extent to which each racial and ethnic group and single headed household (by gender of household head) has applied for, participated in, or benefited from any program funded in whole or in part with CDBG funds.

B. For Direct Benefit Activities. The agency's records must show that the agency has written documents to support such records. (i.e. CDBG income eligibility).

C. For Area Benefit Activities. The agency must maintain records that include a description of the area and services provided to the area and the race and the ethnicity of the service area.

D. Communications – Under Section 504. CDBG funded agencies are required to take appropriate steps to ensure effective communication with clients and members of the public to ensure to the extent possible, that persons with disabilities receive the benefits and services of the program/activity receiving CDBG assistance. The steps taken do not require the agencies to take any actions that the agencies can demonstrate would result in a fundamental alteration in the nature of a program or activity or as undue financial and administrative burdens.

- Does the agency have means of communicating with applicants, participants and the public who have hearing, speech or vision impairments?
- Where the agency communicates with the public and clients by telephone, does the agency also have telecommunication devices for the deaf (TDD)?

E. Program Accessibility. Where CDBG funds assist a program or activity, the agency is required to maintain housing and non-housing facilities that are accessible and usable by persons with disabilities. The extent to which facilities must be accessible depends on whether the facility is new, altered or existing.

F. Record Keeping. The CDBG funded agency must maintain data on the disability status of program participants and beneficiaries.