

COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) APPLICATION

Better Places, Better Lives

CARLISLE BOROUGH PY 2023 CDBG PROGRAM

Date of Application:
APPLICANT INFORMATION
Applicant Name:
Mailing Address:
Type of Organization: municipal government
private non-profit - 501(c)(3) or 501(c)(4)
private for-profit
other
Applicant's Chief Executive Officer:
Staff Contact Person/Title:
Telephone: Email:
Applicant's Fiscal Year: from to
Applicant's Federal Employer Identification Number (FEIN):
Applicant's DUNS Number:



PROJECT INFORMATION						
Project Name:						
Project Site/Location:						
Is the project continua	ation of earlier project? YesNo					
Is the project part of p	phased improvements?Yes No					
Is the project a contin	uation of a project currently supported with CDBG funds? Yes No					
	art date is on date is					
Does this activity addr	ress the needs identified in the Borough's Consolidated Plan? Yes No					
What is the main urge	ency of this activity?					
	acquisition of property rehabilitation of housing units (single-family) rehabilitation of housing units (multi-family) construction of housing units public facility (such as a community center, recreational facility, streets, streetscape, curbs and sidewalks, sewer and storm water systems) public service (such as counseling, service coordination, crime prevention, recreation programs and training programs) economic development, direct assistance to a for-profit entity (Loans and grants to businesses for acquisition, renovations and rehabilitation, equipment and working capital) removal of architectural barriers (such as curb cuts, ramps, and accessibility improvements) removal of a blighting influence (rehabilitation, demolition, clearance) code enforcement in an LMI Revitalization Area					



•	ves is the proposed project intended to achieve?
	ncipally low-income and moderate-income (LMI) persons
 :	eliminate a condition of slum or blight
Meet com	munity needs having a particular urgency
If the national objective is to benefit pri	incipally LMI persons, how will LMI status be determined in
order to meet that objective?	
area-wide	project (51% or more of residents of the designated
service area is LM	I (51% established by census data or survey)
service or	benefit will be limited to those who are required to
document that the	ey are LMI
service or	benefit will be limited to those who are in a class of
persons who are p	oresumed to be LMI (disabled adults, elderly,
homeless, abused	children, battered spouses, etc.)
service is c	of such a nature and in such a location that it may be
reasonably presur	med that beneficiaries will be primarily LMI persons
Amount of Funding Requested on this A	application:
a. Amount of CDBG funds requested	\$
b. Amount of previous CDBG funds rece	eived \$
c. Amount of applicant contribution	\$
d. List of other sources of funds	\$
<u>.</u>	\$
	<u> </u>
e. Total estimated project cost	\$
13	•
Note: a+b+c+d must equal e	

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Attach a narrative of one to three pages that addresses the following points.
REQUIRED IN ALL APPLICATIONS
Why the borough funding is necessary
Attach a project budget
The timetable to complete the project base this schedule on September 1, 2023, award date.
NOTE: Project must be completed within 18 months! (May be earlier depending on HUD budget approval).
The housing or other community development unmet critical need that the proposed project addresses
Describe the problem or need for the project and how the project addresses one of needs
identified in the Consolidated Plan
How the project will have an identifiable and measurable impact on the need; include a
description of the anticipated outcomes
A map that locates the activities' locations, as well as any pictures of structures that funding
would be going towards.
Any false statement made knowingly and willfully may subject the signer to penalties under Section 1001 of Title 18 of the United State Code
Name of Authorized Official
Title
Signature of Authorized Date

INCLUDE AS APPLICABLE:

- If the <u>project is to benefit LMI persons</u>, explain if it will be a direct benefit to persons or families, or will it benefit an area where LMI persons/families reside? If a direct benefit, state the types and numbers of LMI persons you expect will be served by the project during the next year and the procedures to be used to verify and record LMI status of clients and the services provided to them. If the project will benefit an LMI area, describe the service area, and explain how you determined the area.
- If the project is intended to address <u>slum or blight</u>, describe the condition to be corrected and the method to be used (repair, demolition). Attach pictures.
- If the proposal is for an <u>economic development project</u>, state how many jobs will be created, and show how you will make them available to LMI persons; provide a proforma.
- If the project is a <u>housing rehabilitation</u> project, fully describe the proposed program
 including the type of properties to be rehabilitated (owner-occupied, rental, vacant-forresale), whether it is a grant or loan program, the terms of sale or and of repayment or
 of forgiveness loans and any proposed subsidies to buyers.
- If the project is for <u>property acquisition</u> or <u>new construction</u>, state the final use of property. Provide evidence of due diligence and site control or plans for the same.
- If the project is a public service, furnish proof that the project is a new service or a quantifiable increase of an existing service.
- If the project is c<u>ode enforcement</u>, provide information on the area experiencing deterioration and on the other improvement activities to be undertaken in the area in conjunction with the code enforcement.
- Provide available maps, drawings, sketches, plans, studies, photos, surveys, etc., as available that will show the location and scope of the proposed project and demonstrate the feasibility of the project.



P 717-249-0789 x 130 **F** 717-249-4071