



PROPOSAL FOR CDBG FUNDING
City of Joliet Community Development Block Grant (CDBG)
Entitlement Program
PROGRAM YEAR 2023
October 1, 2024 THROUGH September 30, 2025

Organization Name:

Project Name:

Project Address:

Applicant Address:

Contact Email:

Telephone:

Fax:

Employer (IRS) ID:

DUNS #:

Contact Name:

Title:

Amount of CDBG Request:

Website (if applicable):

Certification: To the best of my knowledge and belief, data in this application are true and correct, the document has been duly authorized by the governing body of the applicant (unless a department of the City), and the applicant will comply with all regulations applicable to the City of Joliet Community Development Block Grant program. An original and one copy of this application are being submitted. Please do not reformat this form – no additional attachments except for those specifically requested in this RFP. The following documents must be attached to the original application and the copy (Except City departments):

1. Articles of Incorporation/Bylaws
2. Current List and Addresses of Board of Directors
3. Evidence of current annual report filed with Secretary of State
4. Evidence of current filing of IRS 990
5. One of the three types of Financial Statements (a. or b. for past recipients)
 - a. Copy of OMB A-133 Audit (Required if \$750,000 or more in aggregate Federal funds expended),
or
 - b. Financial statements compiled by a CPA (if not bound by the requirements of OMB A-133), or
 - c. Most recent Profit and Loss Statement (only first time applicants may submit)
6. IRS 501(c)(3) Designation Letter, unless a department of the City.

Signature of Executive Director:

Date:

Type or Print Name:

BRIEF PROJECT DESCRIPTION:

Please provide a one sentence statement describing your project - not your organization.

- Check One: Project is ongoing and was previously allocated HUD funds
 Project is ongoing and has not been allocated HUD funds
 Project is a new service or activity

Organization Type (Check all that apply) Non-Profit Public Agency Institution of Higher Learning
 For-Profit Faith-Based City Department



1. FINANCIAL SECTION (Please note CDBG funds are paid out on a reimbursement basis for actual costs expended. We will not make advance payments.)

- a. Complete the Budget Summary chart below. More detailed budgets may be attached (and are strongly recommended) in support of the proposal.
- b. 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.

BUDGET SUMMARY

Category Breakdown	CDBG	Leveraged Funds	Source of Leveraged Funds	Total Funds
TOTAL CDBG REQUEST				
Total Leveraged Funds				
Grand Total				\$

4. PROJECT BENEFICIARIES/NATIONAL OBJECTIVES

a. This project is located in or serves residents in the following Census Tract(s): (See Map at: <https://hud.maps.arcgis.com/home/webmap/viewer.html?useExisting=1&layers=c5fb10b8f3b44affaaf686bde7d35a91>)

b. Check statement that best describes how this project or activity meets the Benefit to Low and Moderate Income Persons National Objective:

- L/M Area Benefit: Area Benefit - An Area Benefit activity is an activity that is available to benefit all the residents of an area that is primarily residential. In order to qualify as addressing the national objective of benefit to LMI persons on an area basis, an activity must meet the identified needs of LMI persons residing in an area where at least 51% of the residents are LMI persons. The benefits of this type of activity are available to all residents in the area regardless of income. Examples include: street improvements, neighborhood facilities, fixing the fronts of stores in neighborhood commercial districts, or a recreation program for residents of a particular neighborhood.
- L/M Limited Clientele (Specific Group): my 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 Limited Clientele (Income Verification): my project will provide a service to populations other than listed above, and I will verify the income of each participant/individual served. (The City of Joliet will provide a HUD approved income verification form.)

Every proposal will be required to explain how the beneficiaries of the proposed activity meet the income guidelines set forth below. The Neighborhood Services Division can assist you in working with these requirements.

INCOME GUIDELINES

The following guidelines represent income limits by household size and maximum annual income as determined by HUD for assistance under the Community Development Block Grant 2022 Action Plan .

2022 Joliet/Will County CDBG Income Limits

Income Limit	Size of Family							
	1	2	3	4	5	6	7	8
Extremely Low 30% AMI	21,900	25,000	28,150	31,250	33,750	36,250	38,750	41,250
Low 50%	36,500	41,700	46,900	52,100	56,300	60,450	64,650	68,800
Moderate 80%	58,350	66,700	75,050	83,350	90,050	96,700	103,400	110,050

5. PROPOSED PROJECT ACCOMPLISHMENTS Identify the accomplishments you intend to achieve with this activity. (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 remember that there is a maximum of \$1,000.00 per LMI Person served. (14 people would mean a maximum of \$14,000.00 allocation.)

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?

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.

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 Treasurer/grant manager, 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/collaborators in this activity and define the roles and responsibilities.

e. Explain how the proposed activity can be implemented in a timely cost effective manner within the proposed program year. Attach 2-3 estimates for facility improvement projects.

f. Describe collaboration with other Joliet, or Will County, agencies not yet addressed in this application

REQUIRED STATEMENT OF APPLICANT

The undersigned acknowledges the following:

1. That, to the best of its knowledge and belief, all information provided is true and correct and all estimates are reasonable.
2. That the City of Joliet may request or require changes in the information submitted, and may substitute its own figures, which it deems reasonable for any or all figures provided. That the applicant will participate in required interviews for project assessment and cooperatively assist in the review process.
3. That, if the project(s) is recommended and approved by the Mayor and City Council, the City reserves the right to reduce and/or cancel the allocation if federal funds are cancelled, reduced, or rescinded.
4. The City of Joliet reserves the right to reject any submittals received.
5. By submission of this application, the organization agrees to abide by the federal regulations applicable to this program.
6. That, if the project(s) is funded, the organization agrees to abide by the City’s locally established policies and guidelines.
7. That past program and financial performance will be considered in reviewing this application.
8. That, if the project(s) is funded, the City (or a designated agency) may conduct an accounting system inspection to review internal controls, including procurement and uniform administrative procedures, prior to issuance of payments.
9. That, if the project(s) is funded, the City will perform an environmental review prior to the obligation of funds, and the applicant will not begin the activity until notification from the City that the environmental review process has been completed.
10. That, if the project(s) is funded, a written agreement that includes a statement of work, records retention and reporting, program income procedures, local and federal requirements, circumstances that would trigger grant suspensions and terminations, and reversions of assets would be required between the organization and the City.
11. That the applicant agrees to abide by the City of Joliet’s Conflict of Interest policy. Items of concern would include staff members serving on the Board of Directors, staff members’ families serving on the Board of Directors, staff or Board members receiving benefits from the program, and other matters that may give the appearance of a conflict of interest.

PENALTY FOR FALSE OR FRAUDULENT STATEMENT

U.S. Code Title 18, Section 1001, provides that a fine of up to \$10,000 or imprisonment for a period not to exceed five years, or both, shall be the penalty for willful misrepresentation and the making of false, fictitious statements, knowing same to be false.

By signature below, the applicant acknowledges the above in its name on this _____ day of _____, 2024.

Name of Organization

BY: _____ (Signature)

Organizational Role _____

Printed Name _____