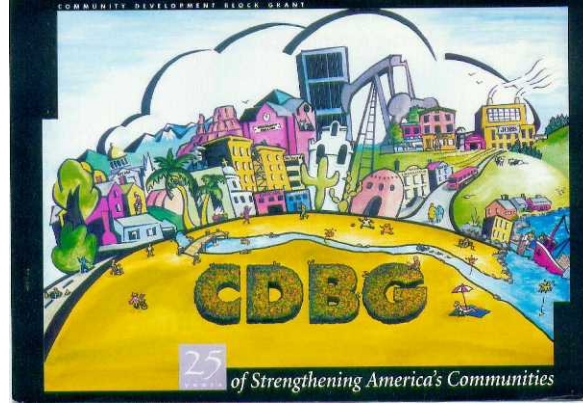


# Public Service Funding Application Packet



## Community Development Block Grant and Community Service Grant Programs



City of Allen  
Community Development Department  
305 Century Parkway  
Allen, Texas 75013  
214.509.4160



## **Application for Community Support Grants – Supplemental Information**

**March 27, 2019**

Applicants are eligible for grant funding from two different funding sources:

1. The U.S. Department of Housing and Urban Development's (HUD) Community Development Block Grant (CDBG) program, and
2. Community Support Grants (CSG) funded directly by the City of Allen.

In previous years the City has used identical criteria to evaluate all applications. The purpose of both funding sources is to benefit low-to-moderate income persons and eliminate slum and blight within the City of Allen. However, the City has more flexibility in how the CSG funds are allocated and monitored since it is funded directly by the City, versus the federally funded CDBG program.

As the City's neighborhoods continue to age there is a growing need for services that address deteriorated housing and property maintenance concerns. The CSG funds provide an opportunity to further address these growing needs. To that end, the City may award CSG grant funding to programs that exhibit a direct impact to the following target neighborhoods: Hillside, Windridge, Oak Hill, Collin Square and Timberbend, and/or any homeowner occupied residence citywide that is 25+ years old. Maps of the target neighborhoods are available at the following link: <https://cityofallen.org/1087/Home-Repair-Assistance-Program>. Agencies or organizations addressing property and home maintenance improvements in these neighborhoods such as weatherization and/or window replacement, roofing repair or replacement, accessibility modifications, exterior house painting, gutter installation, fence replacement, siding, fascia and exterior trim repair, and other general repair/improvement projects are of particular interest.

To facilitate this, the City may modify the reporting and documentation criteria as appropriate for selected CSG funded projects that address these needs. All eligibility criteria must be met to be considered for CDBG funds.

**CITY OF ALLEN  
PUBLIC SERVICES FUNDING  
PROGRAM POLICIES**

**Funding of Public Service Activities  
From the Community Development Block Grant (CDBG)**

**Background**

The City of Allen receives a yearly allocation through the U.S. Department of Housing and Urban Development (HUD) under the Community Development Block Grant (CDBG) program. A majority of the funds are allocated to provide housing assistance and improve public facilities in low-income neighborhoods. A portion of the funds are channeled to subrecipient public service agencies.

Activities funded through the Community Development Block Grant must be able to show direct and measurable results. In reporting to HUD on the use of these funds, the City must use verifiable statistics relating to ultimate beneficiaries. As a result, funded outside agencies must be able to assemble this information. Similarly, Community Development funds cannot be used to fund sectarian activities, as this would violate the principle of separation of church and state.

**Policy Statement**

It is the policy of the City of Allen that:

1. No more than 15% of the Community Development Block Grant will be allocated annually for public service activities as defined by HUD regulations. Public service activities are defined as “including but not limited to those (services) concerned with employment, crime prevention, child care, health, drug abuse, education, energy conservation, welfare or recreational needs.” Funds will be directed to activities that will result in providing a new or quantifiable increase in service that will primarily benefit low and moderate-income residents. As required by HUD, CDBG funds should not be used to maintain an existing level of service or be used to substitute for other available known sources of funding.
2. CDBG funds may be used to pay operating expenses for the specific activity or program identified in the application, including costs for personnel, materials, supplies, tests, fees, rent, utilities, and equipment directly related to delivery of the program or activity. Purchase of equipment is subject to other Federal restrictions.
3. Funding for activities that will benefit residents and others outside the jurisdiction of the City of Allen will generally not be made available.
4. The duration of CDBG funding of operating expenses for any program or activity is intended not to exceed three consecutive years. Agencies should pursue other sources of funding to replace the CDBG

funding after this time. However, upon recommendation, CDBG funding beyond three consecutive years may be approved if determined that funding is for essential services.

5. The maximum percentage of CDBG funds to total operating budget for a program will be limited to 75% of operating budget.
6. No more than five public service activities or programs will be funded annually with CDBG funds.
7. Priority for funding will be to those activities showing capacity to provide quantifiable benefits to the larger number of low income residents for each dollar requested, relative to other applications. Priority will also be to those activities serving a need identified in the City of Allen Consolidated Plan.
8. As a condition of receiving funds, the subrecipient will enter into a standard contract required by the City.
9. In addition to financial assistance, the City is committed to helping subrecipients implement reporting procedures in compliance with HUD requirements and provide other technical assistance as appropriate.
10. The primary purpose of providing these funds is to pay operating expenses, and should not be provided for the purpose of building up or maintaining an agency's cash reserves.
11. If the City terminates a subrecipient funding agreement due to agency failure to comply with contract terms or a grantee chooses to terminate the contract for any reason, the affected agency will be barred from applying for CDBG funds for one year from the date of contract termination.
12. Any agency allocated CDBG Public Service funds whose project is not underway by March 1<sup>st</sup> of the following year, will be ineligible to participate in the current year's funding process.

The City of Allen will follow its Citizen Participation Plan in conformance with all HUD requirements in giving notice annually of anticipated availability and proposed use of CDBG funds. Outside agency funding applications will be evaluated by the Funding Review Committee for eligibility and appropriateness of funding through CDBG, then forwarded with written evaluation and recommendations regarding same to the City Council for approval.

**PUBLIC SERVICES FUNDING  
COMMUNITY DEVELOPMENT BLOCK GRANT**



**PROGRAM GUIDELINES**

**GENERAL GUIDELINES:**

The City of Allen recognizes the need for services provided by local community agencies and for this reason makes funds available for public service agencies. These funds are granted to local agencies to address priority needs and objectives identified in the City of Allen Consolidated Plan.

Grants are for expenses incurred between October 1 and September 30. All funds must be spent no later than August 31<sup>st</sup>. Bills remaining to be paid after that date may not be paid with Public Services funds.

City of Allen Goals - Proposed projects which will assist in meeting the priorities and objectives identified in the Consolidated Plan will be especially welcomed and will be more likely to be funded.

National Objectives - All activities funded by the Community Development Block Grant (CDBG) must meet the following national objectives:

- Benefitting low-to-moderate income persons
- Eliminating or preventing slum or blight

Current income limits (as of 3/27/2019) are indicated below

(<https://www.huduser.gov/portal/datasets/il/il2018/2018summary.odn>):

FY 2018 Income Limits Summary										
Selecting any of the buttons labeled "Explanation" will display detailed calculation steps for each of the various parameters.										
FY 2018 Income Limit Area	Median Family Income <b>Explanation</b>	FY 2018 Income Limit Category	Persons in Family							
			1	2	3	4	5	6	7	8
<b>Dallas, TX HUD Metro FMR Area</b>	\$77,200	Very Low (50%) Income Limits (\$) <b>Explanation</b>	27,050	30,900	34,750	<b>38,600</b>	41,700	44,800	47,900	51,000
		Extremely Low Income Limits (\$)* <b>Explanation</b>	16,250	18,550	20,850	<b>25,100</b>	29,420	33,740	38,060	42,380
		Low (80%) Income Limits (\$) <b>Explanation</b>	43,250	49,400	55,600	<b>61,750</b>	66,700	71,650	76,600	81,550

**NOTE:** Collin County is part of the **Dallas, TX HUD Metro FMR Area**, so all information presented here applies to all of the **Dallas, TX HUD Metro FMR Area**. HUD generally uses the Office of Management and Budget (OMB) area definitions in the calculation of income limit program parameters. However, to ensure that program parameters do not vary significantly due to area definition changes, HUD has used custom geographic definitions for the **Dallas, TX HUD Metro FMR Area**.

Normally, each organization receiving CDBG funds must obtain written proof of income for each person or household assisted, to determine their eligibility. However, the following groups are presumed by HUD to meet this criterion, and no proof of income is required: abused children, battered spouses, elderly persons, severely handicapped persons, homeless persons, illiterate persons, and migrant farm workers.

***Refer to the PUBLIC SERVICES FUNDING HANDBOOK for more information.***

## **ELIGIBILITY REQUIREMENTS**

Organizations that submit an application must meet the following criteria:

1. Proposed project must benefit residents of the City of Allen.
2. Should be a non-profit, tax-exempt 501(c)(3) organization, in good standing with the State of Texas, and must have an active Board of Directors in compliance with IRS Section 501(c)(3).
3. If previously funded by the City of Allen, must have successfully fulfilled all prior contractual obligations, or explain reasons for non-compliance.
4. Must have been operating for at least two years prior to the application deadline.
5. Property taxes must be paid up to date.

**ELIGIBLE ACTIVITIES** - The following activities may be funded by the Community Development Block Grant, so long as they meet one or more of the national objectives stated above:

1. Acquisition, construction, reconstruction, rehabilitation, or installation of public facilities and improvements, including homeless shelters, convalescent homes, hospitals, nursing homes, battered spouse shelters, halfway houses, and group homes for persons with an intellectual or developmental disability.
2. Clearance, demolition, and removal of buildings and improvements, including movement of structures to other sites.
3. Provision of public services (including labor, supplies, and materials) which are directed toward improving the community's public services and facilities, including but not limited to those concerned with employment, crime prevention, child care, health, drug abuse, education, fair housing counseling, energy conservation, welfare, or recreational needs. In order to be eligible, a public service agency must be either a new service, or a quantifiable increase in the level of a service above that which has been funded by the City of Allen during the previous 12 months. The total amount of CDBG funds used for public services may not exceed 15 percent of the total CDBG grant.
4. Removal of material and architectural barriers which restrict the mobility and accessibility of elderly or handicapped persons to publicly owned and privately owned buildings, facilities, and improvements.
5. Rehabilitation of privately and publicly owned buildings and improvements for residential purposes. If the rehabilitation will disturb or paint over existing paint, costly lead-paint abatement may be required. Please discuss this issue with City staff before submitting your application.
6. Improvements to buildings to increase energy efficiency.
7. Removal of lead-based paint from residential structures.

INELIGIBLE ACTIVITIES - The following activities MAY NOT be assisted with CDBG funds:

1. The purchase of equipment, fixtures, motor vehicles, furnishings, or other personal property not an integral structural fixture is generally ineligible.
2. The construction of new permanent residential structures is not eligible, unless through a HUD-qualified non-profit organization. Purchase of land on which to build affordable homes, however, is an eligible activity.
3. CDBG funds may not be used for political purposes or to engage in partisan political activities, or for lobbying of local, state, and Federal legislators.
4. Long term subsistence payments (longer than three months) for such needs as rent and utilities.
5. Landscaping and tree trimming are not eligible expenses.
6. Mortgage payments for agency properties are not eligible, although rent payments may be eligible if the building is one in which services are provided directly to clients.
7. Social functions, parties, receptions, fund-raising benefits, refreshments, or beverages.
8. Licensing fees of any kind.
9. Underwriting, investments, stocks, bonds, or any financial obligation.
10. Interest and/or depreciation on loans, fines, penalties or costs of litigation.
11. Duplication of services or programs.
12. No more than 50% of the grant request may be for salaries. However, under unusual circumstances, exceptions may be approved by the Review Committee.

**RECORD-KEEPING REQUIREMENTS**

Successful applicants will be required to sign a contract with the City which will state all the requirements to be placed on the applicant. In general, the following will apply to all applicants:

1. Written records to justify all expenditures and client eligibility must be maintained for a period not less than four years after the full amount of the grant is expended. Your records will be reviewed by the City, and may also be reviewed by HUD. Undocumented expenditures must be repaid to the City.
2. You will be required to maintain the City's minimum insurance standards for the length of the contract. A copy of your insurance accord form must be provided to the City as evidence of insurance before any funds can be disbursed to you.
3. You must agree to administer the CDBG program in accordance with OMB Circular A-122, "Cost Principles for Non-Profit Organizations," and 24 CFR Part 84 of the Federal regulations.
4. You will be required to provide quarterly reports stating the total number of persons served, including their ethnic origin, and whether they are female heads of household. These figures are required to be reported by HUD. At the discretion of City staff the frequency of reporting may be reduced depending on the amount of individual funding allocations.

5. You will be required to obtain written proof of income for each person or household that you assist, unless your clients are abused children, battered spouses, elderly persons, severely handicapped persons, homeless persons, illiterate persons, or migrant farm workers.
6. You must have a written policy in place designed to ensure that your facilities are free from the illegal use, possession, or distribution of drugs or alcohol.
7. If any income is derived from the activities funded by CDBG, that income must be accounted for and returned to the City or used according to requirements stated in your contract.
8. In the event that HUD or the City should determine that CDBG funds were improperly spent, and that money should be reimbursed to the U. S. Treasury, your organization will be responsible for this reimbursement.

*Refer to the PUBLIC SERVICES FUNDING HANDBOOK for more information.*

### **INSURANCE REQUIREMENTS**

The agency shall procure and maintain for the duration of the grant agreement, insurance against claims for injuries to persons or damages to property which may arise from or in connection with the services performed or to be performed hereunder by the agency, its agents, representatives, employees, volunteers, officers, director, or subcontractors.

The agency shall maintain insurance with limits not less than \$500,000 per occurrence, \$1,000,000 aggregate and will be as broad as ISO Form Number GL 0002 (Ed 1/72) covering Comprehensive General Liability and ISO Form Number GL 0404 covering Broad Form Comprehensive General Liability, or ISO Commercial General Liability coverage (“occurrence”) form CG 0001). Coverage will include:

- A. Premises - Operations
- B. Broad Form Contractual Liability
- C. Broad Form Property Damage
- D. Personal Injury

The policy will be endorsed to contain the following provisions: The City, its officers, officials, employees, volunteers, Boards and Commissions are to be added as “Additional Insureds” with respect to liability arising out of any activities performed by or on behalf of the agency. The policy shall contain no special limitations to the scope of coverage afforded to the City. The agency’s insurance coverage shall be primary and any insurance or self-insurance shall be in excess of the agency’s insurance and shall not contribute with it.

Insurance shall be placed with insurers with an A.M. Best rating of no less than A:VI or, a Standard & Poors rating of A or better.

The agency shall furnish the City with a certificate of insurance which shows the coverage provided. The insurance policy will be endorsed to state the coverage shall not be suspending, voided, canceled, non-renewed, reduced in coverage or in limits except after thirty (30) days prior written notice by certified mail, return receipt requested, has been given to the City.



# PUBLIC SERVICES FUNDING - FY 2019-2020 COMMUNITY DEVELOPMENT BLOCK GRANT

## APPLICATION INSTRUCTIONS

Please use these instructions when completing the application that follows. Please provide one original and three copies of the application to the City of Allen, Department Community Development/Planning Division by **3:00 p.m. April 29, 2019**. The City of Allen City Hall is located at 305 Century Parkway, Allen, Texas 75013. Applications need to be typed using no smaller than a 10-point font.

### *Cover Page*

The contact person, mailing address, email address, and phone numbers are very important.

The contact person will be the point person that we call with questions, to set up visits, etc. Agency fiscal year is your operating year (i.e. June 30 year end, December 31 year-end).

### *Summary Funding Request*

If you are requesting funding from CDBG and any other source for the same program, please indicate the amount and source.

## *Part One: Agency Information*

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### Part 1A Mission Statement and Overview of Agency:

- a. History/Overview: Briefly describe agency history - i.e. length of time the agency has been in operation, date when accepted as a 501(c)(3) organization or other non-profit status from the IRS, purpose of the agency, target population (limited to 50 words).
- b. General Goals/Measurable Objectives: Describe the type of services provided, including the goals (general) and measurable objectives (specific by program). Example: Food Pantry, to provide food to those who need assistance in obtaining food. Goal: to ensure all citizens in the community are able to access and receive food when needed. Objective: Provide XX pounds of food to XX no. of people during the fiscal year (limited to 50 words).

### Part 1 B Non-Profit Status & Board Members:

a, b and c: Answer all questions and provide attachments as indicated. Provide a listing of board members and expiration terms. Board policies should be included in the Attachment Section. Note any significant changes in policies from previous year.

d. To receive CDBG funding the agency must be a tax exempt non profit as determined by the IRS. Please indicate what type of status the agency has if it is not a 501(c)3.

### Part 1C Other Programs of Agency:

- a. Describe programs provided, number and demographics of clients served, benefits by program, and license to operate (if appropriate). It may be appropriate to address staff qualifications in this section if they pertain to specific programs. If you operate several programs, provide a summary of clients served for each program in your narrative, with total percentages where indicated. **Do not include new programs or program increases reflected in this year's funding request.**

### **Part 1D Community Resources & Support:**

- a. Address all community support, volunteer base (how the agency uses volunteers to reduce overhead and provide more services if applicable) and volunteer hours.
- b. Other agencies that utilize your programs, and collaborate with your agency.
- c. Describe planned events or fundraisers, which have been held or will be held in the current year for all programs except the program the agency is asking for funding which is requested in Part 2D. Date is the date held or date anticipated to be held.
- d. Staff information is the capacity to deliver programs by your agency, including individual staff information such as professional awards or recognition, if applicable. The organizational chart is an attachment. List briefly the remaining items: each staff member and their job title/description, education/training and relation to a program. Include the number of FTE's and PTE's the agency has in the organization, and if all positions are currently filled.

### ***Part Two: Program Information***

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#### **2A Description of Program to Receive Requested Funding:**

- a. Describe the specific program for which funding is being requested. (The financial data for program request should be reflected in Part Three).
- b. Check the box indicating a new program, or a quantifiable increase in the level of service of an established program (this is per HUD guidelines and is important to the application).
- c. Indicate how the agency determined a need for a new program and why this is important to your agency's mission. Or, indicate how the agency has increased the level of services for an established program (i.e. by adding more services and/or increasing target population).

#### **2B Program Need:**

- a. Provide statistical data and other information to support the program for which you are requesting funding. Include national, state and local data, if pertinent. Include information about community support of the program as well as support outside of the community, if the agency offers the program extended beyond Allen (example: Lucas or Fairfield). If offered outside the Allen city limits, also include information about your efforts to obtain funding from those other areas.
- b. Percentages must add up to at least 80% within the Allen city limits.

#### **Part 2C Goals/Objectives and Evaluation of Program:**

- a. If an ongoing program, provide information on the effect this program has had on the clients served. Also, describe the methods used to evaluate the program. This must be some type of quantifiable measurement (HUD must have a way to measure the impact of a program based upon quantifiable measurements). For a new program, provide what effects this program is projected to have on the clients served.
- b. Include a copy of your evaluation/measurement form for the specific program which funded is being requested.

#### **Part 2 D Operational Strategy:**

- a. What is the agency's plan for supporting this program (3years) financially, operational, and collaboratively? What is your goal for this program for the next three years?

- b. Describe capacity to deliver the program. If special training or licensing is needed, what measures have been taken to ensure that, if the program receives funding, the program will be ready to deliver services. Provide a time line for either a new program or an ongoing program with emphasis on delivery of services.
- c. What other funding activities support this program? Are you leveraging the CDBG funds with other grant funding? Will your capacity to continue to deliver services depend on CDBG funding, or any other sources of funding?
- d. Fundraising events are for the specified program applied for including events already done and anticipated events in the current year. Provide the gross (before expenses of the fund raiser) and net (after expenses of the fundraiser).

**Example:** Valentine’s Dinner \$2000/gross, \$1500/net

**Part 2E Service History:**

Client population served:

Provide information on the prior year actual, current year's actual/estimate (indicate # months estimated) and next year's estimate of **unduplicated clients** (only counted once, the first time they come in during a contract year) to be served from **this program only**. Remember, if this is a continuing program, you must show a quantifiable increase in services. We will be looking for reasonableness. Also, you must be able to document this data. (If funded, this will be required with each reimbursement request.).

**Provide a copy of your application or intake form.** At a minimum HUD requires name, address, race, ethnicity, income and female head of household. Income is based on total income of the household and number of family members in the household for at or below 80% of the area’s median income.

***Part Three: Financial Information***

**3A Current Year Grant Funding for Agency:**

Provide a brief summary of funding received from grants, foundations or government entities (not fundraising) during the current year or that the agency is still receiving from a previous year, for all programs of the agency.

**Example:**

GRANT: PRIVATE OR PUBLIC	TOTAL FUNDED AMOUNT	AMOUNT SPENT TO DATE	GRANT CONTRACT PERIOD
1. ABC Grant/Public	\$30,000	\$20,000	10/1/2014-9/30/2015

**3B Estimated CDBG Expenditures:**

Provide itemized detail about the line items requested for CDBG funding. Please list in priority. If funded, this will be used for the contract with the City.

**3C Program Budget:**

Complete the Total Project Budget. This gives us information on your other sources of funding for the project/program. Make sure the detail line items requested from CDBG funding (3B) equals the total CDBG funding on the total budget sheet.

## ***Part Four: Additional Information***

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**Agency Certification:** Please have the certification signed by the appropriate agency official (the person who legally can sign for the agency).

**Optional Attachments:** If they are newspaper clippings, please copy onto letter size paper. Total application may not exceed 20 pages. (This does not include required attachments -- i.e., the IRS letter ruling, board policies, program evaluation tool, etc.).

**Required Attachments:** Submit all required attachments with the application. Incomplete applications will not be considered for funding.



**PUBLIC SERVICE FUNDING - FY 2019-2020**  
**COMMUNITY DEVELOPMENT BLOCK GRANT**  
**AND**  
**COMMUNITY SUPPORT GRANT**

**APPLICATION**

<b>AGENCY:</b>	<b>DATE SUBMITTED:</b>
<b>STREET ADDRESS:</b>	<b>AGENCY FISCAL YEAR:</b>
<b>MAILING ADDRESS:</b>	
<b>CONTACT PHONE:</b>	<b>FAX NUMBER:</b>
<b>CONTACT PERSON:</b>	<b>E-MAIL ADDRESS:</b>
<b>TAX ID NUMBER:</b>	<b>DUNS NUMBER:</b>

**Summary of Funding Request**

Program Name	CDBG/CSG Request (\$)	Other Sources (\$)

**(This box for City staff use only)**

Date Received: \_\_\_\_\_

HUD Matrix Code: \_\_\_\_\_

Summary of program request:  
\_\_\_\_\_

National Objective: \_\_\_\_\_

Number of clients to be served in this request: \_\_\_\_\_ \$ \_\_\_\_\_ / \_\_\_\_\_  
person

**Qualifying Criteria**

What national objective does your proposed program/project meet and how will you qualify this proposed program/project under the national objective? Describe how your organization verifies income for program participants:

***Part One: Agency Information***

**Part 1A Mission Statement and Overview of Agency:**

- a. Provide a history/overview of the agency and the mission. *(Please limit this to 50 words or less).*
- b. List the general goals and measurable objectives of your agency *(Please limit to 50 words or less).*

**Part 1B Non-Profit Status & Board Members:**

a.	1. How many members are on the Board?	
	2. How often does the Board meet?	
	3. What is the average attendance?	

- b. Who provides accounting and/or audit services to your agency?  
*(Provide latest financial audit, CPA Review and most recent Form 990)*
- c. Is your agency incorporated as a non-profit organization under the laws of the State of Texas? If so, please provide date of incorporation:
- d. Is your agency tax exempt under Internal Revenue code Section 501 (c)(3)?  Yes  No  
*(Attach copy of IRS letter for the tax exemption the agency received from the IRS)*

**Part 1C Other Programs of Agency:**

- a. Please list (bulleted) all **current** public service programs your agency operates. **(This is only for programs currently being delivered. Do not include new programs or program increases reflected in this year’s funding request.)** Report percentages of clients for the programs listed above that reside in the City of Allen.

**Part 1D Community Resources & Support:**

- a. Do you have a written volunteer policies and procedures?  **Yes**  **No**  
Indicate the total number of volunteers and volunteer hours you expect to receive next year.
  
- b. Indicate what other agencies utilize services your program offers for their clients. Describe any collaboration with other agencies in providing services (list any formal agreements such as contracts, letters of agreement, etc.).
  
- c. Describe any planned fundraising events and the **total anticipated outcome for the next year.**
  
- d. Provide staff information (include organizational chart, job title/description, education and training of staff). Indicate number of paid full time, paid part time and a total of FTE (full time equivalents).

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***End of Agency Information***

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## ***Part Two: Program Information***

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### **Part 2A Description of Program to receive requested funding:**

- a. Describe the specific program or programs for which funding is being requested. **Do not provide information about other programs for which funding is not being requested.** Indicate how this program will help your agency fulfill its mission statement.
  
- b.  New Program or  Quantifiable increase in the level of service of an established program
  
- c. Give specific reasons why this is a new program or why this is an increased level of service for the program which funds are being requested. *(Use bullet style.)*

### **Part 2B Program Need:**

- a. Describe the **need** for this specific program in Allen. Reference statistical data, studies, surveys or other information as necessary. Also include information on the target population, estimated number of clients for the upcoming fiscal year, and how they qualify to receive assistance. Include community support received from Allen and service areas outside of Allen. Describe your efforts to obtain support from those areas.
  
- b. Report percentages of clients for the program listed above that reside in the City of Allen.

### **Part 2C Goals/Objectives and Evaluation of Program:**

- 
- a. Describe the goals and objectives of this program in terms of both its impact upon individual clients and its impact on the Allen community as a whole. Show how it will alleviate its targeted needs.
  
  - b. Describe how the program's results will be measured and evaluated.  
**(Attach copy of evaluation tool for the funded program if available)**

### **Part 2D Operational Strategy:**

- a. What is your strategy for maintaining and improving this program during the next three years? Include such things as the acquisition and maintenance of property and equipment, the increase to existing programs, efforts to seek other funding, etc.



- b. Describe the specific capacity to deliver this program by the agency. This includes certification for the agency as well as training and education of the staff members pertaining to this program only. Do you need to increase staff, training or facility? Provide the time period and plan of action in outline form.
  
- c. Have other grant funds been applied to for this specific program?  Yes  No  
If these funds are not approved, what is your plan to insure success of the program?
  
- d. List any planned fund-raising activities that will support this program.

**Part 2E Service History:**

Below are HUD’s current Income Guidelines based on household size per person.

FY 2018 Income Limits Summary										
Selecting any of the buttons labeled "Explanation" will display detailed calculation steps for each of the various parameters.										
FY 2018 Income Limit Area	Median Family Income <a href="#">Explanation</a>	FY 2018 Income Limit Category	Persons in Family							
			1	2	3	4	5	6	7	8
<b>Dallas, TX HUD Metro FMR Area</b>	\$77,200	Very Low (50%) Income Limits (\$) <a href="#">Explanation</a>	27,050	30,900	34,750	<b>38,600</b>	41,700	44,800	47,900	51,000
		Extremely Low Income Limits (\$)* <a href="#">Explanation</a>	16,250	18,550	20,850	<b>25,100</b>	29,420	33,740	38,060	42,380
		Low (80%) Income Limits (\$) <a href="#">Explanation</a>	43,250	49,400	55,600	<b>61,750</b>	66,700	71,650	76,600	81,550

**NOTE:** Collin County is part of the **Dallas, TX HUD Metro FMR Area**, so all information presented here applies to all of the **Dallas, TX HUD Metro FMR Area**. HUD generally uses the Office of Management and Budget (OMB) area definitions in the calculation of income limit program parameters. However, to ensure that program parameters do not vary significantly due to area definition changes, HUD has used custom geographic definitions for the **Dallas, TX HUD Metro FMR Area**.

- a. Please use this information to complete the following chart.

**Unduplicated clients served by agency for the program for which funding is requested:**

	2017-18 (prior year) actual	2018-19(current year) actual/estimate	2019-20 (next year) projected
Total Clients (unduplicated)			
No. <=Low/Mod			
Percentage <=Low/Mod			

- b. Provide a copy of the agency’s application for services or intake form.

***End of Program Information***

## **Part Three: Financial Information**

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### **Part 3A Current Year Grant Funding for Agency:**

List all grants the received for all programs provided by the agency during this current year. Provide detail on expenses covered by each grant.

GRANT: PRIVATE OR PUBLIC	TOTAL FUNDED AMOUNT	AMOUNT SPENT TO DATE	GRANT CONTRACT PERIOD
1.			
2.			
3.			
4.			
5.			
6.			

### **Part 3B Estimated CDBG Expenditures for Funded Program or Agency:**

Indicate itemized expenditures by categories for this grant request. Be specific. This information will be used to prepare a contract for receiving any award. *List in order of priority.*

CDBG Budget:

**Item**

**Amount**

**TOTAL REQUEST:**

**Part 3C Budget:**

Provide current annual agency budget. Include estimated income statements and expense reports for **both** the agency and the program for which funds are being requested.

***Part Four Additional Information***

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**Agency Certification:**

I certify that all information reported in this application and attached is true, accurate and complete to the best of my belief and knowledge. I certify that I am authorized to make application on behalf of \_\_\_\_\_ (agency) and have been designated as such by the Board of Directors. I will provide written notice of any changes or additions to this information. I understand the agency may need to provide additional information during the application process and if funded. I understand a written agreement will be required between \_\_\_\_\_ (agency) and City upon award of funds.

Date: \_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_

**Attachments (Optional)**

You may attach optional materials such as testimonials, letters of support, brochures, outreach materials or other information in support of your application. **HOWEVER**, your application may not exceed 20 pages. (The *Required Attachments, see following, are in addition to the 20 page limit*).

Questions about the application or completed application packets can be directed to the following:

**City of Allen**  
**Attn: Erin Jones, Senior Planner**  
**305 Century Parkway**  
**Allen, TX 75013**  
**(214) 509-4176**  
[ejones@cityofallen.org](mailto:ejones@cityofallen.org)

## *Attachments (Required)*

- A. Board Members
- B. Board Policy
- C. By-Laws
- D. Financial Audits or Review and Management Letter, if Applicable
- E. Form 990
- F. IRS Letter of Tax Status
- G. Volunteer Policies
- H. Agreements of Collaboration (if Available)
- I. Staff Organizational Chart
- J. Program Evaluation Tool (if Available)
- K. Letters of Support (Optional)
- L. Intake Form