



**CITY OF BLUE SPRINGS
CDBG FUNDING ASSISTANCE REQUEST
PUBLIC SERVICES & NON-PROFITS
2023-2024 PROGRAM YEAR**

Applications are currently being accepted for funding assistance requests for the 2023-24 program year (October 1, 2023 – September 30, 2024). Public services and non-profit organizations may be eligible to receive CDBG (Community Development Block Grant) funds to support a new service or expansion of an existing service. Public service funds are generally limited to organizations providing assistance to low-moderate income clientele or serving a low-moderate income area. Non-profit capacity building is less limited, but still must meet a CDBG national objective (low-moderate area, clientele, or housing benefit; or slum/blight area benefit). **Complete applications must be emailed to celbert@bluespringsgov.com by 5 PM, Monday, May 1, 2023 for review and future consideration by the CDBG Advisory Committee.** The City may only allocate up to 15% of the total allocation (to be determined) for public services.

The following application is required to be submitted by public service agencies and non-profit organizations requesting CDBG funds to ensure that the request meets CDBG regulations. The information provided in the application will also allow staff to review and properly prepare recommendations to the CBDG Advisory Committee and City Council, and to prepare Annual Action Plan drafts.

CDBG funds utilized by public service agencies are required to provide services to low-moderate income persons and households or households that are presumed to be low-moderate income. Below are the maximum income limits for low-moderate income households (per HUD LMI Guidelines for Kansas City Metro Area, effective June 15, 2022):

Number of Persons in Household	Maximum Income
1	\$ 54,250
2	\$ 62,000
3	\$ 69,750
4	\$ 77,450
5	\$ 83,650
6	\$ 89,850
7	\$ 96,050
8	\$ 102,250

For more information on the CDBG program or to apply contact:
 Cara Elbert, Asst. Director Comm. Dev. / (816) 220-4504 / celbert@bluespringsgov.com /
 Community Development Department, City Hall, 903 W. Main St., Blue Springs, MO 64015



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PUBLIC SERVICE AGENCY OR NON-PROFIT INFORMATION

Agency or Non-Profit Legal Name: _____

DBA as (if applicable): _____

*Address: _____
*Address should be a physical address, a PO Box is acceptable for public services providing services in which the location may need to remain confidential for the protection of clients, such as domestic violence services and shelters)

CONTACT INFORMATION

Point of Contact Name / Title: _____

Email: _____ Phone: _____

ELIGIBILITY

CDBG funds are limited to eligible activities and objectives per Federal regulations and guidelines. Please check both the eligible activity and the national objective that most closely aligns with your funding request (for more information on definitions of eligible activities refer to: CDBG Matrix Code Definitions:

Eligible Activity (check the activity that most closely aligns with funding request):

- Senior Services, Youth Services, Services for Victims of Domestic Violence, etc., Fair Housing Activities, Health Services, Lead Based Paint Screening/Hazards, Rental Housing Subsidies, Neighborhood Cleanups, Other Public Services not listed, Services for Persons with Disabilities, Transportation Services, Employment Training, Tenant/Landlord Counseling, Abused & Neglected Children, Subsistence Payments (3 months max.), Security Deposits, Food Banks, Non-profit Capacity Building, Legal Services, Substance Abuse Services, Crime Awareness, Child Care Services, Mental Health Services, Homebuyer Down-payment Assistance, Housing Counseling, Housing Information & Referral Services

National Objective (check the objective that most closely aligns with funding request):

- LMI Area Benefit, LMI Job Creation/Retention, LMI Limited Clientele, Slum & Blight Area Benefit, LMI Housing, Another National Objective

NEEDS ANALYSIS

Please provide an explanation of what need(s) you are requesting to be addressed with CDBG funds. The explanation must reference the eligibility activity and national objective that will be met and what activities are proposed to be undertaken with the funds:

Please provide an estimate on the number and type of families/households or individuals that will benefit from the proposed activity with CDBG funds:

Provide an explanation as to why CDBG funds are needed for this activity and what other sources of funding are currently utilized and/or sought to help meet the demands for this activity:

FUNDING REQUEST

Based on the preceding Needs Analysis, how much CDBG funding are you requesting for the 2023-24 program year?:

Please provide a description of how CDBG funds will be utilized to meet the identified needs (e.g. service, supplies, training, salary, etc.):

Please explain the possible consequences if no CDBG funds are granted for the 2023-24 program year:

What is your organization's total annual budget?:

What is the dollar amount of your organization's total annual budget that is covered by federal funds (including CDBG funds)?:

Please check the following reason(s) for CDBG funding being needed:

- | | | |
|---|--|---|
| <input type="checkbox"/> Close funding gap | <input type="checkbox"/> Free up existing source | <input type="checkbox"/> Expand client base |
| <input type="checkbox"/> Match another funding source | <input type="checkbox"/> Contingency | <input type="checkbox"/> Other |

ADDITIONAL DOCUMENTATION

Additional documentation may be requested as part of the application review to confirm eligibility and the ability of the organization to meet federal regulations and compliance measures.

Applicants are strongly encouraged to participate in public hearings that will be held by the CDBG Advisory Committee and the City Council as part of the 2023-2024 Annual Action Plan approval process. Applicants will be contacted in advance of public hearings with more details regarding dates, times, locations, and subject matter to be discussed.

The submission of this application does not guarantee funding. The City Council may deny funding, approve partial funding, or approve funding in full. All approvals are subject to final review and approved by HUD. City staff will prepare final contracts after City Council has given final approval to the 2023-2024 Annual Action Plan and provide to the applicant for review and signature. Contracts will not be executed until HUD has approved the plan and executed a grant agreement for the program year. Additional documentation, including, but not limited to, E-Verify, W9, and DUNS Number will be required to be submitted with the final contract.

Regular reporting by the Organization is required for grant funding. Reporting (which may be monthly or quarterly, depending on activity) must include amount of grant funds expended during the time period, what funds were expended on, and outcomes of expenses (e.g. number of persons assisted, type of assistance provide, etc.) to ensure goals are being met and within compliance of CDBG regulations. Routine monitoring of additional records may be required by City staff and/or HUD staff. More details on required reporting will be provided to the organization upon funding approval.

I hereby submit application to the City of Blue Springs for CDBG Funding Assistance for the 2023-2024 Program Year. I certify that all information provided in the application and any and all attachments and supporting documents is true and correct to the best of my knowledge. I understand that all information provided as part of this application submittal is subject to verification by the City of Blue Springs and the U.S. Department of Housing and Urban Development (HUD). I agree to submit to the City, upon request, any additional documentation requested to verify eligibility for CDBG funding.

I certify that my organization, as listed below, if granted CDBG funding will provide the services as described herein, and agree to adhere to all relevant Federal, State, and local regulations and other requirements as established by the City of Blue Springs.

Organization Name: _____

SIGNATURES ACKNOWLEDGING STATEMENTS ABOVE

(all relevant signature lines to your organization must be signed below – please “N/A” those that do not apply – electronic signatures are acceptable)

Applicant Signature:

_____ Date: _____

Printed Name: _____ Title: _____

President or CEO Signature:

_____ Date: _____

Printed Name: _____ Title: _____

Board of Directors Chair/President Signature:

_____ Date: _____

Printed Name: _____ Title: _____

Blue Springs is an equal opportunity community and does not discriminate against any individual regardless of race, gender, sexual orientation, gender identification, ethnicity, family structure, physical ability, religious affiliation, age, color, language, national origin, veteran status, or ancestry.

Revised 04/12/2023