

NYS COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

PUBLIC FACILITIES/OTHER PUBLIC WORKS PROPOSAL

APPLICANT NAME:

CFA APPLICATION #:

Each applicant must submit a community development proposal in its entirety. Section A of the proposal must be clear, concise and labeled accordingly. Complete Section A on letter sized paper in a 12 point font size without exceeding 6 pages. Complete Section B in the charts below. Both sections must be converted to one PDF document and uploaded in the CFA.

SECTION A.

1. For public facilities, describe the existing facilities (i.e. community and senior rooms and centers, day care centers, clinics) in or near the project area (20 miles), the population served, and the services provided.
2. For other public works improvements, such as sidewalks, streets, parking, open space, and publicly owned utilities, describe the existing infrastructure or public works including the existing conditions or lack of infrastructure and why the infrastructure is necessary.
3. If there is an existing facility or public works in the project area for the same or similar purpose, explain the need for the proposed project in relation to the benefiting population, existing facility and services and public works.
4. Describe the facilities and/ or public works improvements including the number of persons proposed to benefit from the project.
5. Explain how the project will be implemented including:
 - A description of the benefits and services resulting from the project;
 - Evidence of long-term financial support for the facilities and services;
 - A description of the supportive services plan or long-term maintenance plan;
 - A description of the type of labor to be employed (municipal or non-municipal);
 - A description of the source of the cost estimates.
6. For public facilities, if the capacity to operate the facilities does not exist among current municipal employees, explain how such capacity will be obtained including the ability to plan for future capital expenditure needs.
7. Describe the status of site control.
8. Provide the name of the owner(s) of the facilities and who will operate them.

SECTION B.

Public Facilities: Beneficiaries From Activity		
Median Income**	# Of:	
Source Of Data: <input type="checkbox"/> Income Survey Census: <input type="checkbox"/> Tract <input type="checkbox"/> Block Group	HH	Persons
0-30% of HAMFI		
31-50% of HAMFI		
51-80% of HAMFI		
81% and Above		
Totals		

** HAMFI – HUD Adjusted Median Family Income

Will this project include demolition activities? Yes No if yes, provide the following:

Demolition Activities	
Building Type	# To Be Demolished:
<input type="checkbox"/> Public Facilities	Facilities:
<input type="checkbox"/> Residence	Units:
<input type="checkbox"/> Commercial	Spaces: