****[ ]

**Community Development Block Grant**

**WATER-RELATED INFRASTRUCTURE**

**APPLICATION**

For eligible activities administered by the Michigan Economic Development Corporation (MEDC)

on behalf of the Michigan Strategic Fund (MSF)

Michigan Strategic Fund

c/o Michigan Economic Development Corporation

Community Development Block Grant

300 North Washington Square, Lansing, MI 48913

CDBG@michigan.org

 **03.25.25**

**IMPORTANT**: Refer to the separate **Instruction** document when completing the Community Development Block Grant Infrastructure (CDBG) Application. The review of the proposed project will be based solely on the Unit of General Local Government’s (UGLG’s) responses and attachments. The MEDC will not seek clarifications. The numbered sections below coincide with the Instructions.

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| --- |
| 1. **Unit of General Local Government (UGLG) IDENTIFICATION Summary**
 |
|  | **Funding Source Totals** |
| Unit of General Local Government (UGLG) |  | CDBG | $  |
| Street/PO Box |  | UGLG | $  |
| City |  | Other | $  |
| County |  | Other | $  |
| State/Zip |  | Other | $  |
| Chief Elected Official Name |  | Other | $  |
| Chief Elected Official Title |  | **Total** | $  |
| Chief Elected Official Email |  |
| UGLG Project Contact (PC) Name |  | Refer to Section 1 of the Instructions:1(C) - UGLG’s SAM.gov UEI# 1(D) - UGLG’s Federal Tax ID # 1(E) - UGLG’s Fiscal Year End  |
| UGLG PC Title |  |
| UGLG PC Address |  |
| UGLG PC Telephone Number  |  |
| UGLG PC Fax Number |  |
| UGLG PC E-Mail Address |  |

|  |
| --- |
| 1. **state Government representation**
 |
| Senator Name |  | Senate District |  |
| Representative Name |  | House District |  |

|  |
| --- |
| 1. **federal Government representation**
 |
| Representative Name |  | Congressional District |  |

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| --- |
| 1. **authorized uglg official**
 |
|  |
| Name and Title |  | E-Mail Address |  |

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| --- |
| 1. **ELIGIBILITY REQUIREMENTS**
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1. Check all eligibility requirements that apply. To qualify, all must be applicable:

[ ]  The UGLG is a community where 51% of the individuals reside in low to moderate income households (Question 11A). A list of eligible communities can be found on the posted document titled HUD Low-Moderate Income -ACS 2020.

[ ]  The project will be completed by December 31, 2027

[ ]  The grant request for traditional infrastructure is between $500,000 and $2,500,000.

[ ]  The UGLG has clearly demonstrated that the proposed project benefits the entire Low- and Moderate- Income Community (Question 11B).

[ ]  The proposed project is located on property owned by the UGLG and/or only an easement is needed.

[ ]  The UGLG has a maintenance plan for the proposed project (Section 12, Attachment E).

[ ]  The UGLG has a set of project plans and specifications (Section 12, Attachment L)

[ ]  The UGLG does not have an open CDBG Grant or MSF CDBG Award (An open grant is defined as a grant where a final disbursement request has not yet been submitted)

Comments:

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| 1. **PRIORITIES**
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1. Check all priorities that apply:

[ ]  The need for the proposed project has been clearly defined (Question 10(C)) and supports and addresses the

 Health, Sanitation, and Security needs of the community

[ ]  The community is a Low to Moderate income Community

[ ]  51-55%

[ ]  56-60%

[ ]  61-65%

[ ]  66%-70%

[ ]  71% and above

[ ]  The community has leveraged local matching funds

[ ]  11-24

[ ]  25% and above

Comments:

|  |
| --- |
| 1. **ADMINISTRATION**
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1. Identify who will be responsible for administering the proposed project (Check One).

NOTE – Administrative contracts cannot be signed until authorized by the MEDC.

[ ]  **A MEDC CGA will administer the project**. The CGA has not yet been selected and the contract amount is unknown. The contract has not yet been signed, the MSF will fund the costs, and the administration line item on the CDBG budget (Attachment A) has been left blank.

[ ]  **A MEDC CGA on the staff of the UGLG will administer the project**. These costs are not eligible as match or CDBG reimbursement. The administration line item on the CDBG budget (Attachment A) has been left blank. Provide the name and contact information for the MEDC CGA person at the UGLG who will be responsible for administering the proposed project:

Name:

Business Address:

Phone #:

E-mail:

|  |
| --- |
| 1. **UGLG CAPACITY AND CONFLICT OF INTEREST**
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1. Does the UGLG have any unresolved CDBG grant issues and/or findings?

[ ]  Yes

[ ]  No

If yes, please provide the grant number and explain the issues and/or findings:

1. Conflict of Interest, check all that apply:

[ ]  Employees, agents, consultants, officers, elected or appointed officials of the UGLG will obtain a financial interest or benefit from a CDBG assisted activity or will have an interest in any contract, subcontract or agreement with respect thereto, or in the proceeds hereunder, either for themselves or for those with whom they have family or business ties, during their tenure or for one year thereafter.

[ ]  Officials and staff of the UGLG will be a party to contracts involving the procurement of goods and services assisted with CDBG funds.

[ ]  No conflicts.

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| 1. **OPTIONAL-UGLG FUNDING SOURCES**
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1. If applicable, please check the specific funding source(s) that the UGLG’s committed cash match will be comprised of. Please note that a local (UGLG) cash match is not required

**\*\*SPECIAL ASSESSMENTS ARE NOT ALLOWED\*\***

[ ]  General Fund

[ ]  Road, Water, and/or Sewer Funds

[ ]  DDA or other like district Funds

[ ]  Bonding (See instructions for limitations)

[ ]  Other. Describe other funds:

1. If applicable, please check the specific funding source(s) that the **“Other”** committed cash match will be comprised of:

[ ]  Other grants and/or loans where agreements are in place and the funds are immediately available

[ ]  Act 51 Funds that are immediately available

[ ]  Other public and/or private cash that is immediately available

[ ]  Other funds that are immediately available.

Describe ALL “Other” funds:

|  |
| --- |
| 1. **PROJECT SCOPE AND program requirements**
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1. Compliance Requirements. Check all that apply:

[ ]  The project will impact historic properties or archaeological sites and districts.

[ ]  The project will impact wetlands.

[ ]  The project is located in a floodplain and/or will impact a floodplain.

[ ]  The project is located in a coastal zone.

[ ]  The project will require local, state, and federal permits.

[ ]  The project will result in the acquisition of easements.

[ ]  The project will result in the demolition or conversion of residential dwelling units, both occupied and vacant.

[ ]  The project will result in temporary or permanent relocation of businesses, non-profit organizations, homeowners, or tenants.

[ ]  The project will result in special fees (i.e., tap in / hookup fees, special assessments).

[ ]  None of the above

Describe all that apply:

1. Provide a clear and concise description of the overall proposed project and include a description of all project related activities.

1. Based on the priority criteria selected in Section 6 (A), clearly describe the need for the proposed project. **NOTE: All information that the Applicant wishes to be considered for scoring purposes needs to be included in the narrative (Section 10-C) below. Any information submitted elsewhere in the application will be viewed as back-up documentation and will not be considered for scoring purposes**.

**Health, Sanitation, and Security:**

1. Lead and Copper Rule: The purpose of the Lead and Copper Rule (LCR) is to protect public health by minimizing lead and copper levels in drinking water. Lead and copper enter drinking water mainly from corrosion of lead and copper containing plumbing materials. The rule establishes action levels (AL) for lead and copper based on a 90th percentile level of tap water samples. An action level exceedance is not a violation but triggers other requirements to minimize exposure to lead and copper in drinking water, including water quality parameter monitoring, corrosion control treatment, source water monitoring/treatment, public education, and lead service line replacement. All community water supplies and non-transient noncommunity water supplies are subject to the LCR requirements.

[ ]  The proposed project activities trigger LCR requirements and the project includes any/all statutorily required replacement of lead or galvanized service lines.

[ ]  The proposed project does not trigger LCR requirements.

1. What is the square footage of the public space being improved or reactivated?

1. In the below space, provide an overall project schedule that includes the anticipated start and completion dates (attachments are not acceptable).

|  |  |  |
| --- | --- | --- |
| **Activities** | **Start Date** | **End Date** |
| Design Engineering  |  |  |
| Easement acquisition, if applicable |  |  |
| Bidding |  |  |
| Construction |  |  |

Comments regarding timeline (i.e. Design Engineering was completed prior to this Application; Design Engineering will be paid locally and will be completed prior to the Grant Agreement BUT ONLY with MEDC’s written authorization; easements will not be required, etc.):

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| 1. **NATIONAL OBJECTIVe**
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1. What percentage of the UGLG is comprised of low- and moderate-income persons? A list of eligible communities can be found on the posted document titled HUD Low-Moderate Income -ACS 2020 list.

1. Explain how the CDBG funded improvements will benefit the entire low- and moderate-income area.

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| --- | --- |
| **ATTACHMENT** | **TITLE (use templates when provided)** |
| [ ]  | **A** | Project Budget |
| [ ]  | **B** | Authorizing Resolution |
| [ ]  | **C** | Cost Estimates (preliminary) |
| [ ]  | **D** | Detailed Map, showing all project activities |
| [ ]  | **E** | Maintenance PlanIf no, explain:  |
| [ ]  | **F** | Community Development NarrativeIf no, explain:  |
| [ ]  | **Gi** | UGLG Public Participation Certification |
| [ ]  | **Gii** | ***Published*** Public Hearing Notice |
| [ ]  | **Giii** | Brief description of the public hearing |
| [ ]  | **H** | Certifications |
| [ ]  | **I** | Assurances |
| [ ]  | **J** | Anti-Displacement and Relocation Assistance Plan. If no, explain:  |
| [ ]  | **K** | Evidence of Need (See Section 6 Priority and Section 10, Question 10C) |
| [ ]  | **L** | Project Plans and Specifications (preliminary), see Section 5 Eligibility)If no, explain:  |

|  |  |
| --- | --- |
| **ATTACHMENT** | **TITLE** |
| [ ]  | **M** | Other Funding Sources including Local Bonds. If using bonds and/or other resources, evidence that the funds are available at the time of the application (Section 9, Question 9B)If not, local match will not consist of bonds and/or the proposed budget will not consist of Other Resources. |
| [ ]  | **N** | Joint Application. If applicable, identify any other applications related to infrastructure that includes a Federal or State agency as a source of funds.If not, UGLG has not submitted other applications for infrastructure funding to Federal or State agencies. |