



## **2009 Community Development Block Grant Application**

**Agency:**

**Project name:**

**Amount requested:**

**Project description  
in one sentence:**

### **Important Dates**

Mandatory Technical Assistance Workshop for All CDBG Applicants  
Friday, January 23, 2009 at 10:00 a.m.  
Charles W. Cansler YMCA, 616 Jessamine Street, Knoxville, TN 37917

### **Application Deadline**

**Tuesday, February 17, 2009 at 12 NOON.**  
City of Knoxville - Community Development Department  
400 Main Street, Room 520, Knoxville, Tennessee 37902  
Mailing Address: P.O. Box 1631, Knoxville, TN 37901

**Please refer to the CDBG Application Instructions document for information about this funding program, eligible activities, how to fill out this application, submission requirements, and important deadlines. It is important that you follow these instructions fully in order for your application to be considered. Thank you for your interest in the City of Knoxville's CDBG program.**



1. Project name:  
Project address:
  
2. Agency:  
Chief official of agency:  
Title:  
Complete mailing address:  
Phone number:  
Agency website address:
  
3. Project manager:  
Complete mailing address:  
Phone number: Fax number:  
Email address:
  
4. Agency tax ID number:
  
5. Type of organization:  Non-profit  Public agency
  
6. Is your agency a faith-based organization?  Yes  No
  
7. Which Priority Need category or categories from the City's Consolidated Plan will this project address?  
 Neighborhood Stabilization  
 Housing Rehabilitation  
 Homeownership Opportunities  
 Assistance to Homeless  
 Job Creation and Training  
 Crime Prevention and Safety
  
8. Eligible activity category for 2009-10 funding:  
 housing improvement projects, including emergency home repair and minor home repair  
 planning and design technical assistance to non-profit and community organizations  
 management of the homeless information and tracking system.
  
9. National objective: *(See application instructions, pages 6-8.)*  
 Low and moderate income persons  
Subgroup:  
 Area benefit activities. List census tracts & block groups: \_\_\_\_\_  
 Limited clientele activities  
 Housing activities  
 Job creation or retention  
  
 Prevention or elimination of slums or blight

10. Agency description: Please provide a description of your agency's goals and mission, incorporation date, clientele served and services offered. *(Limit to ½ page.)*
  
11. Project description: Clearly explain what will be accomplished with CDBG funding, and who will benefit from the project. How long has this project been in existence? *(Limit to one page.)*
  
12. Clearly explain why this project is necessary in the community, using statistics and research data as appropriate. *(Limit to one page.)*
  
13. Clearly identify the project's quantifiable performance goals (ex: 50 homes renovated, 800 square feet of sidewalk installed, 20 children will each receive 50 hours of child care).
  
14. How many total persons will be served by this project? *(See page 7 of instructions and EZ map.)*  
 \_\_\_\_\_ = number of persons in the Empowerment Zone who will be served by this project.  
 \_\_\_\_\_ = number of extremely low-income persons who will be served by this project.  
 \_\_\_\_\_ = number of low-income persons who will be served by this project.  
 \_\_\_\_\_ = number of moderate-income persons who will be served by this project.
  
15. Have you held public meetings or otherwise incorporated input from your local community or clientele into planning this project? *Do not include general comprehensive plan, city council meetings, or board of director meetings unless the sole intent of the meetings was to gain input for this project.*
  
16. What obstacles could delay project start-up or completion?
  
17. Is there a minimum amount of CDBG funding you need for the project to be viable? If so, how much? Please be specific. If the project is not awarded this amount of CDBG funding, how will it be affected?
  
18. Have you received CDBG funds from the City of Knoxville for this project in the past? If so, why is continued funding necessary?
  
19. Do you intend to request CDBG funds for the same project in future years? (Please limit your response to yes or no.)
  
20. If your agency has received CDBG funds from the City of Knoxville since 2005, list the project names and award amounts.

21. Is your agency receiving city general funds, Empowerment Zone, or other non-CDBG monies from the City of Knoxville during your current fiscal year? If so, list amount, funding type and purpose of funding.
22. Describe the project manager's experience administering CDBG funding.
23. If this is a housing improvement related project, does the project manager have experience working with federal lead based paint regulations? Describe.
24. Please check each item that already exists within your agency's structure:
  - Annual financial audit (date of your agency's most recent audit: \_\_\_\_\_)
  - Client eligibility verification
  - Client demographic data collection
  - Staff salary tracking by funding source
  - Purchasing or procurement policy
  - Conflict of Interest Policy
25. List the names and titles of all persons with the authority to sign contracts or other legal documents for your agency.
26. Is your agency in compliance with requirements of the Tennessee Charitable Solicitations Act (properly registered and current with annual renewals)?
27. Is your agency properly registered with the State of Tennessee as a nonprofit corporation and in compliance with annual reporting requirements?
28. If your agency is required to pay city and/or county property taxes, are all taxes paid?

## **PUBLIC SERVICE PROJECTS ONLY**

Public services for this year's eligible activities include homeless management information services. If this is not an application for a public service project, please leave this page blank.

1. Are you required to have a license to provide this service? If so, are you currently licensed?
  
2. How many City residents received this service during your last fiscal year?
  
3. How many more City residents will be served if you receive CDBG funding?
  
4. How long would clients receive services from your agency under this project?
  
5. Does your agency charge for this service? If so, how much, and can the fees be waived for CDBG supported clients?
  
6. Does your agency have experienced staff who will provide the service, or will you hire and train new staff?
  
7. What is the CDBG cost per client for this project? (*divide the amount of CDBG funding requested by the number of people served*)
  
8. How do you determine client eligibility?
  
9. How have you worked with other agencies to decrease service duplication and increase effectiveness?

I have reviewed this application and agree that the description, performance goals, budget, and other aspects of the described project are reasonable and accurate to the best of my knowledge, and the governing body of my agency authorizes its submission.

I understand that the City of Knoxville may verify any or all statements contained in this application, and that any intentionally false information or omission may disqualify my agency from consideration for Community Development Block Grant funding in the current and future years. I also understand that, upon submission, this application becomes the property of City of Knoxville and will not be returned to my agency in whole or in part.

\_\_\_\_\_  
Authorized signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (typed or printed)

\_\_\_\_\_  
Title

**Required Exhibits** (See attached forms.)

1. Project budget
2. Assurance of Compliance Under Title VI of the Civil Rights Act of 1964
3. Project timeline
4. Assurance of Audit Requirements
5. Assurance of Compliance with Conflict of Interest Policy

**Required Attachments**

1. All agencies: Current agency or department budget
2. Non-profit agencies: 501(c)(3) tax exemption letter
3. Non-profit agencies: List of board of directors (include board appointment dates, term expiration dates, and whom each board member represents)
4. Area benefit projects: Map with project benefit area clearly delineated

**Optional Attachments**

1. Agency brochures or fliers outlining services available
2. Site map and/or photographs
3. Letters of support
4. Other relevant documentation

**EXHIBIT 1**  
**PROJECT BUDGET**

Budget Line Items	Total Line Item Cost	Amount of CDBG Funds Requested	Other Funds
Project Total:			

**EXHIBIT 2**

**CITY OF KNOXVILLE**

**Assurance of Compliance Under Title VI of the Civil Rights Act of 1964**

**Name of applicant:** \_\_\_\_\_

HEREBY AGREES THAT it will comply with Title VI of the Civil Rights Act of 1964 Act of 1964(P.L. 88-352) and all requirements imposed by the City of Knoxville, and any directives or regulations issued pursuant to that Act and the Regulations, to the effect that, no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subject to discrimination under any program or activity for which the Applicant received financial assistance from the City of Knoxville; and HEREBY GIVES ASSURANCE THAT it will immediately take any measures necessary to effectuate this agreement.

This Assurance is given in consideration of and for the purpose of obtaining any and all City administered federal financial assistance, grants and loans of City funds, reimbursable expenditures, grant or donations of City property and interest in property, the detail of City personnel, the sale and lease of, and the permission to use, City property or interest in such property or the furnishing of services without consideration or at a nominal consideration, or at a consideration which is reduced for the purpose of assisting the recipient, or in recognition of the public interest to be served by such sale, lease, or furnishing of services to the recipient or any improvement made with City financial assistance extended to the Applicant by the City.

BY ACCEPTING THIS ASSURANCE, the applicant agrees to compile data, maintain records, and submit reports as required to permit effective enforcement of Title VI. If there are any violations of this assurance, the City shall have the right to recommend corrective actions or to seek administrative enforcement of this assurance, up to and including termination of federal funds.

This assurance is binding on the applicant, its successors, transferees, and assignees as long as it receives assistance from the City. In the case of real property, this assurance is binding for as long as the property is used for a purpose for which assistance was intended or for the provision of services or benefits similar to those originally intended. In the case of personal property, this assurance applies for as long as the recipient retains ownership or possession of the property. The person or persons whose signatures appear below are authorized to sign this assurance on the behalf of the applicant.

**Authorized signature:** \_\_\_\_\_

**Name (typed or printed):** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date signed:** \_\_\_\_\_

**Applicant address:** \_\_\_\_\_



**EXHIBIT 4**

**Assurance of Audit Requirements**

**Subrecipients** of Community Development Block Grant (CDBG), Emergency Shelter Grants (ESG), and /or HOME funding **that expend \$500,000 or more** in total Federal financial assistance in a year are responsible for obtaining an **independent audit** in accordance with the Single Audit Act of 1984 and OMB Circular A-133 as referenced in 24 CFR 84.26. The computation of the total of such assistance includes all Federal funds received by the entire entity. For purposes of determining the amount of Federal assistance expended, all Federal assistance shall be considered, including that which is received directly from a Federal agency, or passed through a state or local government, or through non-profit organizations, or any combination thereof.

**If a subrecipient expends less than \$500,000** per year in Federal financial assistance, it is exempt from Federal audit requirements. However, the subrecipient must still have records available for review by HUD, the grantee (City of Knoxville,) or GAO, and there also may be separate state or local laws prescribing additional audit requirements.

I hereby attest that \_\_\_\_\_ (name of agency) expended  
\$ \_\_\_\_\_ in the past fiscal year in Federal financial assistance as defined above and, therefore, an  
audit   **IS**     **IS NOT**   required. Our most recent fiscal year ended \_\_\_\_\_.

Signed,

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Printed or Typed)

\_\_\_\_\_  
Title

If applicable, a copy of the most recent audit, dated \_\_\_\_\_ is attached.

**EXHIBIT 5**

**CITY OF KNOXVILLE**

**Certification of Compliance with the City of Knoxville Conflict of Interest and Procurement Policies**

**Name of applicant:** \_\_\_\_\_

**HEREBY TAKES NOTICE OF AND WARRANTS** that it is not in violation of, or has not participated, and will not participate, in the violation of any of the following Conflict of Interest and Procurement Policies:

**I. City of Knoxville Requirements**

(A) City of Knoxville Code of Ordinances Section 2-1048. Conflict of Interest.

It shall be unlawful for any employee of the city to participate, directly or indirectly, through decision, approval, disapproval, recommendation, preparation of any part of a purchase request, influencing the content of any specification or purchase standard, rendering advice, investigation, auditing or otherwise, in any proceeding or application, request for ruling or other determination, claim or controversy or other matter pertaining to any contract or subcontract and any solicitation or proposal therefore to the employee's knowledge there is a financial interest possessed by:

- (1) The employee or the employee's immediate family;
- (2) A business other than a public agency in which the employee or a member of the employee's immediate family serves as an officer, director, trustee, partner or employee; or
- (3) Any other person or business with whom the employee or a member of the employee's immediate family is negotiating or has an arrangement concerning prospective employment.

(B) City of Knoxville Code of Ordinances Sec. 2-1050. Gratuities and Kickbacks Prohibited.

*Gratuities.* It is unlawful for any person to offer, give or agree to give to any person, while a city employee, or for any person, while a city employee, to solicit, demand, accept or agree to accept from another person, anything of a pecuniary value for or because of:

- (1) An official action taken, or to be taken, or which could be taken;
- (2) A legal duty performed, or to be performed, or which could be performed; or
- (3) A legal duty violated, or to be violated, or which could be violated by such person while a city employee.

Anything of nominal value shall be presumed not to constitute a gratuity under this section.

*Kickbacks.* It is unlawful for any payment, gratuity or benefit to be made by or on behalf of a subcontractor or any person associate therewith as an inducement for the award of a subcontract or order.

**II. 24 CFR 576.57(d). Conflict of interest.**

No person who is an employee, agent, consultant, officer, or elected or appointed official of the grantee, nonprofit recipient that receives emergency shelter grant amounts and who exercises or has exercised any functions or responsibilities with respect to assisted activities, or who is in a position to participate in a decision making process or gain inside information with regard to such activities, may obtain a personal or financial interest or benefit from the activity, or have an interest in any contract, subcontract, or agreement with respect to

thereto, or the proceeds thereunder, either for him or herself or for those with whom he or she has family or business ties, during his or her tenure, or for one year thereafter. HUD may grant an exception to this exclusion as provided in 24 CFR 570.611 (d) and (e).

**III. OMB Circular A-110. Codes of Conduct.**

The recipient shall maintain written standards of conduct governing the performance of its employees engaged in the award and administration of contracts. No employee, officer, or agent shall participate in the selection, award, or administration of a contract supported by Federal funds if a real or apparent conflict of interest would be involved. Such a conflict would arise when the employee, officer, or agent, any member of his or her immediate family, his or her partner, or an organization which employs or is about to employ any of the parties indicated herein, has a financial or other interest in the firm selected for an award. The officers, employees, and agents of the recipient shall neither solicit nor accept gratuities, favors, or anything of monetary value from contractors, or parties to subagreements. However, recipients may set standards for situations in which the financial interest is not substantial or the gift is an unsolicited item of nominal value. The standards of conduct shall provide for disciplinary actions to be applied for violations of such standards by officers, employees, or agents of the recipient.

**Applicant address:**

**Authorized signature:** \_\_\_\_\_

**Date signed:**