



CDBG-CV2 APPLICATION



Section 1:

Project Name:

Name of Agency or Municipality:

Address of Project Site:

Type of agency: ☐ 501(c)(3) ☐ Gov't./Public ☐ For Profit ☐ Faith-Based ☐ Other

Federal Tax ID #(FEIN):

DUNS #:

SAM (System for Award Management) Renewal Date:

If making multiple submissions, please prioritize this project/application:

Chief Official's Name and Title:

Address 1:

Address 2:

Phone:

Email:

Contact Person's Name and Title:

Address 1: _____

Address 2:

Phone:

Email:

Funding Request:

Total CDBG-CV funding requested (column B on budget form): \$ _____

Funds committed to project from other sources (column C on budget form): \$ _____

Total project cost (column E on budget form): \$ _____

Public Service Projects - Is your agency applying for CDBG-CV funding for a new program or to afford a quantifiable increase in the program's service of at least 40%? Yes ☐ No ☐ (CDBG funding may not be used to replace other lost government funding).



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Section 2:

Project Narrative: On a Word document, please describe the project, and how it fulfills the CDBG-CV purpose of responding to, preparing for, and/or preventing COVID-19. Please provide detail on all required aspects as outlined on the application checklist.

Project Fundability Determination

CDBG-CV funds must benefit low- and moderate-income persons. *Choose only one:*

- ☐ The project will serve a group of persons who are presumed eligible for assistance because they are in one of the following categories: seniors; severely disabled adults; homeless; battered spouses; abused/neglected children and youth; illiterate adults; migrant farm workers; persons with HIV/AIDS; and persons who use food banks or meals programs.
- ☐ The project will serve specific persons or households (i.e.: housing assistance). We will verify the incomes of individuals or households before approving their participation.

Project Eligibility Determination

The following project categories are eligible via Lehigh County's CDBG-CV program. Please designate which category is applicable to this application.

- Food Security – providing funding towards the purchase, storage, and distribution of food to banks and pantries.
- Financial and Legal Counseling – Foreclosure, unemployment compensation, legal and Fair Housing counseling
- Housing Stabilization – funding for security deposits, 6 months of rental, mortgage, and utility assistance, mortgage arrears, case management, emergency expenses, and housing search for LMI households.
- Technology Adaptations – funding for purchase and implementation of technology to address alternative service delivery needs
- Administration – funding to develop plans for municipalities and agencies to prepare, prevent, and/or respond to COVID-19.

Category: _____



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CDBG-CV Budget Guidelines

- CDBG-CV is gap filler funding. Subrecipients must not use CDBG-CV funds to pay a cost if another source of financial assistance is available to pay that cost (special attention to FEMA assistance, SBA loans, etc). Subrecipient must prevent duplication of benefits.
- CDBG-CV must not supplant local government funding. CDBG-CV funds are not able to cover costs that were previously budgeted, or to be paid, by the Subrecipient's general government funds.
- CDBG-CV does not require a match.
- CDBG-CV funds may pay for COVID-eligible activities regardless of the date (i.e. Subrecipients can request reimbursement for COVID costs already incurred).
- CDBG-CV reimbursed materials and supplies must be procured according to your organization's formal, written procurement guidelines. If guidelines are informal, Lehigh County procurement guidelines must be followed.
- Indirect costs will be reimbursed by applying the organization's federally negotiated indirect cost rate. Non-profits may request up to 10% of indirect costs in lieu of a federally negotiated indirect cost rate.

Budget Narrative

On a separate document, provide an explanation of how the estimated cost of each category listed on the budget form was calculated. Please take into consideration recordkeeping responsibilities and other supportive services when creating the project budget. Please address whether or not there is match. If there is match, please note the source(s) and if secured at time of CDBG-CV application submittal.

LINE ITEM BUDGET FORM



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Funding to prepare, prevent, or respond to COVID-19



EXHIBIT A - CERTIFICATION

I, _____, hereby certify that all parts of this application and all required attached documents are accurate to the best of my knowledge. I am also certifying that:

- The proposed project will not result in permanent involuntary displacement of any family, individual, business, non-profit organization or farm, or any of their personal property.
- If selected to receive Community Development Block Grant (CDBG) funding, the project will be operated in accordance with all applicable laws and regulations, including the CDBG Entitlement Grant Regulations at 24 CFR Part 570, Civil Rights Acts, the Fair Housing Act and the Americans with Disabilities Act.
- You attest that your organization has agreed to adhere to the regulations set forth by the Fair Housing Act. Title VIII of the Civil Rights Act of 1968 (Fair Housing Act), as amended, prohibits discrimination in the sale, rental, and financing of dwellings, and in other housing-related transactions, based on race, color, national origin, religion, sex, familial status (including children under the age of 18 living with parents or legal custodians, pregnant women, and people securing custody of children under the age of 18), and handicap (disability).
- I am authorized by the municipality or organization identified within to submit this application. *
- Reimbursement of Funds – The applicant agrees to reimburse the County of Lehigh for any expenditures paid to the applicant that are found to be ineligible under the CDBG program guidelines.

Name _____

_____ Date

Title _____

If uploading the CDBG application via the Lehigh County website, please include a resolution and a signed version of this document via attachment.



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Checklist of Required Documents

All applicants must include: (Check each as included in application)

1. ☐ Application cover sheet - Section 1
2. ☐ Project Narrative, Eligibility, and Beneficiaries – Section 2
3. ☐ Budget Narrative
4. ☐ Line Item Budget Form
5. ☐ EXHIBIT A – Certification – Signed

Application Submittal

Email the application and all attachments to lauriemoyer@lehighcounty.org. A response will be remitted when the email is opened by Lehigh County. If a response is not received within 48 hours, call 610.871.1964. Applications can also be mailed to:

Laurie Moyer
County of Lehigh
Government Center
Room 519
17 South 7th Street
Allentown, PA 18101-2401