



**State of Alaska**  
**COMMUNITY DEVELOPMENT BLOCK GRANT - CORONAVIRUS**  
**(CDBG-CV) CFDA 14.228**  
**FFY 2020 Application**

**DUE NO LATER THAN FRIDAY, February 4, 2022 @ 4:30 PM**

**APPLICANT (BOROUGH OR CITY) INFORMATION**

Name: \_\_\_\_\_ DUNS#: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: AK Zipcode: \_\_\_\_\_

Contact Person and Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

☐ **CO-APPLICANT or JOINT APPLICANT (if applicable)**

Name: \_\_\_\_\_ DUNS#: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: AK Zipcode: \_\_\_\_\_

Contact Person and Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**PROJECT INFORMATION**

Project Title: \_\_\_\_\_

Community Development Activities to (check all that apply):

- ☐ Prevent coronavirus
- ☐ Prepare for coronavirus
- ☐ Respond to coronavirus

**CDBG-CV BUDGET REQUEST:**

\$ \_\_\_\_\_

**CERTIFICATION**

*I, the undersigned, certify that I am authorized to represent the applicant, that to the best of my knowledge and belief, data in this application is true and correct, that the document has been duly authorized by the governing body of the applicant, that the community is empowered by statute to perform the functions and provide the services encompassed by the proposed project, and that the applicant will comply with all applicable State and Federal laws and regulations in implementing the proposed project if it is selected for funding.*

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Date Received by DCCED: \_\_\_\_\_

## CRITERION #1 / Maximum Points Available 15

### Project Description & Selection / Citizen Participation Plan

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#### A. Project Description

What are you going to do? Describe how your project **prevents, prepares for, or responds to coronavirus**. Also describe the project as completely and in as much detail as possible by first identifying existing conditions, the nature of the proposed project, and what additional needs the project will address in your community. (*See page 14 of the Application Instructions*). Although it's not required, photos are encouraged.

**B. Selection Process/Citizen Participation Plan**

How and why did the community decide on this project? Describe the public participation process used and how and when residents, especially low and moderate-income residents, had the opportunity to comment. Does the project demonstrate community consensus? Identify the other projects considered for CDBG-CV funding and explain why this project was selected as the priority. *(See pages 14-15 of the Application Instructions for guidance and information on special funding rules for expediated public notice and holding a virtual hearing in lieu of in-person public hearings.)*

**C. Mandatory Public Hearing for FFY 2020 CDBG-CV Application**

Attach copies of minutes of at least one public hearing, held prior to submission of this application. Your minutes must show the following:

- ✓ CDBG-CV program was explained
- ✓ Public had opportunity to comment
- ✓ There was a call for alternate proposals
- ✓ Selected project has community consensus

***This is a federal requirement. This application cannot be considered for funding without minutes showing that the public had an opportunity to comment and suggest a variety of possible projects.***

**Date of Public Hearing/Community Meeting:** \_\_\_\_\_

*\*Must be held prior to submission of the application.*

Did you give adequate notice to residents about the public hearing?

☐ Yes ☐ No

Did you provide reasonable access to handicapped residents and any technical assistance needed for low and moderate income residents?

☐ Yes ☐ No

Did you attach a copy of the public notice for this meeting?

☐ Yes ☐ No

**Do your minutes reflect the following?**

Did you explain the CDBG-CV program and explain that the CDBG-CV grant can fund community development projects to prevent, prepare for, and respond to coronavirus?

☐ Yes ☐ No

Did you give an example of a proposed project that is currently needed in the community and explain why it should be chosen for the CDBG-CV project?

☐ Yes ☐ No

Did you ask if there were any comments on the proposed project?

☐ Yes ☐ No

Did you call for alternative proposals and discuss all proposals fully to clearly identify what projects are needed and why they are important to the community in preventing, preparing for, and responding to the coronavirus?

☐ Yes ☐ No

If there are no alternative proposals, is this clearly stated in the minutes of the meeting?

☐ Yes ☐ No ☐ N/A

**Meeting Minutes**

Did you attach the minutes of this public hearing to the application as required?

☐ Yes ☐ No

***NOTE: You must be able to answer "YES" to all questions and attach a copy of the meeting minutes that document all these public hearing requirements were met. If not, your application will not move forward.***

## CRITERION #2 / Maximum Points Available 25

### Project Plan / Readiness

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**A. Identify major project activities and dates for completion of those activities:**

CDBG-CV funds will not fund planning grants. Keep in mind funds will not be available until the grant negotiation and environmental review processes are complete. **The project must be ready to go and 80% expended by June 2023.** (See pages 16-17 of the Application Instructions.)

Proposed Project Start Date: \_\_\_\_\_

Project Completion Date: \_\_\_\_\_

Proposed Activity Timeline	Start Date	Completion Date

Explain the timeline provided above, as well as the goals, objectives, and expected outcomes for implementing the proposed project.

**B. Indicate whether you have the following to ensure the success of the project:**

- |   |                              |                             |                              |
|---|------------------------------|-----------------------------|------------------------------|
| 1. Final Engineering Documents (Design)                   | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 2. State Fire Marshal Approval of Plans                   | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 3. U.S. Army Corps of Engineers Permit                    | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 4. Other Required Permits (See Appendix G)                | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 5. Cooperative/Joint Agreements (See Appendices E & F)    | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 6. Operation and Maintenance Budget (after CDBG-CV funds) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |

Describe the efforts the community has undertaken to ensure the success of the project. Describe project agreements that are in place and the resources dedicated to the project. If applicable, explain the plan and budget for operating and maintaining your project after the CDBG-CV funding ends.

- C. Identify other expected or awarded state, federal, public, or private funding involved with this project**  
 Each applicant that has other expected or awarded sources of funding (including as a subrecipient) is to provide the following information about each agency and the activity it would fund. Please attach documents in the form of grant award letters or application cover pages. (See pages 16 and 20 of the *Application Instructions*.)

Agency (Include CFDA# if Federal)	Contact Name Phone, and Email	Use of Funds or Activity	Total Funding Requested
<b>TOTAL OTHER EXPECTED OR AWARDED FUNDING</b>			0.00

Describe the other expected or awarded sources of funding listed in the table above and explain how they will help meet your project goals.

**D. Site Control:** If the proposed project involves the use of real property you must provide evidence in the form of a deed, lease, or easement showing that the community has obtained an enforceable right to use that parcel of land or facility.

a. Provide the legal description of the property:

b. Attach a map which identifies the property. Map attached? ☐ Yes ☐ No

c. Indicate which document you have that proves ownership or your legal right to use the property.

	Copy Attached?		
<input type="checkbox"/> Deed:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<input type="checkbox"/> Lease:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<input type="checkbox"/> Easement:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

d. If you do not have one of the above documents, what steps do you need to take in order to obtain the right to use the property? For example, do you need to purchase the land? ... Negotiate and execute a lease with another entity? ... Finalize ANCSA 14(c)(3) reconveyance? Please explain the situation as you know it and your anticipated timeframe to prove site control.

e. Have you contacted your DCCED Regional Office and asked for assistance with site control? ☐ Yes ☐ No

f. Has this property been occupied over the last 12 months? ☐ Yes ☐ No

g. Will there be anyone displaced from the property for this project? ☐ Yes ☐ No

**E. Environmental Review:** Every successful applicant for CDBG-CV funds must obtain appropriate environmental clearances for their proposed activity. The Department will make a determination regarding the environmental requirements of each project and notify each grantee about appropriate procedures after notification of award. After this application is submitted, **all project activity must stop** until the environmental review requirement is met. **Please indicate that you are aware of this requirement.**

☐ Yes ☐ No



### **CRITERION #3 / Maximum Points Available 25**

## **Project Impact**

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Be specific and describe how this project 1) prevents, prepares for, and responds to the coronavirus and 2) provides a substantial or direct benefit to low and moderate-income persons, as well as any additional benefits the project will have on the community. Be specific. Attach additional pages if necessary.

## CRITERION #4 / Maximum Points Available 25

### Duplication of Benefits/Budget

Refer to pages 19-23 of the Application Instructions for detailed instructions on how to prepare your budget to receive the highest possible score.

#### A. Duplication of Benefits

**Successful applicants for CDBG-CV funds must establish policies and procedures that include the following components:**

1. Requirement that any person or entity receiving CDBG-CV assistance (including subrecipients and direct beneficiaries) must agree to **repay** assistance that is determined to be duplicative. This may be documented through a subrogation agreement or similar clause included in the agreement with the person or entity. The grantee should establish a protocol to monitor compliance based on risk of duplication of benefits for each activity.
2. Develop a method of assessing whether the use of these funds will duplicate financial assistance that is already received or is likely to be received (such as insurance proceeds) by acting reasonably to evaluate the need and the resources available to meet that need.

\$ _____	Total Project Cost
(\$ 0.00 _____)	Subtract Other Awarded and Expected Funding from the Project Planning/Readiness Section on page 7
(\$ 0.00 _____)	Subtract Total Cash or In-Kind Funding on page 11
\$ 0.00 _____	<b>CDBG-CV Request</b> (The unmet need available for this project)
	<i>*This amount should match page 13 "Total CDBG-CV Request" and the CDBG-CV Request Total on the cover page.</i>

#### B. General Information about preparing your budget is provided below:

##### 1. Budget

- ✓ *At least 80% of all CDBG-CV funds must be expended by June 2023.*
- ✓ *All CDBG-CV costs for this application must be for activities that prevent, prepare for, or respond to Coronavirus and do not result in a duplication of benefits for identical items.*
- ✓ *For CDBG-CV funding, costs may be reimbursed back to January 21, 2020. Please explain in your budget narrative if any of your budget items include costs to be reimbursed for items already expended.*

## 2. Cash or In-Kind funds

*Cash or in-kind funds are **not** required for CDBG-CV; however, they are encouraged to show overall support for project completion.*

Please provide the following information about sources of cash or in-kind support utilized for this project. **Attach documentation** such as letters of commitment, bank account balance sheets, property appraisals, etc. for all funds listed. ***Please make sure cash/in-kind costs are not duplicates of funding for identical costs requested in your CDBG-CV budget.***

Source of Cash or In-Kind Support	\$ Amount	Cash	In-Kind
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL CASH OR IN-KIND FUNDING</b>	0.00		

Describe any cash or in-kind funds listed in the table above and explain how they will help meet your project goals.

### 3. Are you applying for funding for construction?

☐ Yes ☐ No

If so, there are two ways to pay for construction labor: (See pages 21-22 in application handbook.)

- Force-Account

*Force-account labor means the applicant will hire construction workers, those workers will be on the applicant's payroll, and they will be paid prevailing wages for that area. The applicant will either manage the project in-house or hire a project manager. **If you are using force-account construction labor, you must complete the Force Account Labor and Fringe Benefits table below.***

- Contractual

*A contracted project means the applicant will go out to bid and hire a construction firm to construct the project. The workers in this case will be on the contractor's payroll and will be paid Davis Bacon wages.*

#### Force Account Labor and Fringe Benefits, NOT Contractual:

Include only labor and fringe benefits to be paid with CDBG-CV funds.

Position	Wage Rate	No. of Hours	Gross Wages	FICA	ESC	Workers Comp.	Other	Total Labor Cost
Total			0.00	0.00	0.00	0.00	0.00	0.00

**NOTE:** Acceptable fringe benefits include, but are not limited to, FICA @ 7.65% (includes Social Security @ 6.2% and Medicare @ 1.45%); ESC (list the current rate for the employer's share that has been computed by DOL); and Workers Compensation (%varies).

#### 4. CDBG-CV Line Item Proposed Budget

Fill in the chart below to indicate how CDBG-CV project funds will be allocated. Round off figures to the nearest whole dollar and check addition on all cost totals and sub-totals. These dollar amounts should match the total CDBG-CV request on the cover page and on the Duplication of Benefits calculations on page 10.

Cost Category	CDBG-CV Request
1. Labor	
2. Fringe Benefits	
3. Materials	
4. Freight	
5. Equipment Rental	
6. Contractual	
7. Insurance	
8. Other	
9. Administration**	
<b>TOTAL CDBG-CV Request*</b>	<b>0.00</b>

*\*The cost items must be explained in the budget narrative. Maximum total CDBG-CV request is \$850,000.*

*\*\*Administration cost cannot be more than 5% of the total CDBG-CV budget request.*

Your budget numbers should be supported by documentation. Show how you calculated your budget and demonstrate that the project is fully funded. The following are some examples of budget documentation:

- ✓ Construction cost estimates
- ✓ Quotes for materials and freight
- ✓ Equipment rental cost rates
- ✓ Grant award letters or cover sheets for in-kind funding
- ✓ Letters of commitment or municipal resolutions showing commitment of funds
- ✓ Grant award letters or cover sheets for in-kind funding

**C. Budget Narrative:** Please provide an explanation for each budget item listed and specify how it will be used. Provide a copy of the city/borough's approved indirect cost rate for Administration, if applicable. Administrations cost cannot be more than 5% of the total CDBG-CV budget request. Add additional pages if necessary.

## Administrative Capabilities

**A.** Identify who will be responsible for the day-to-day management of this project.

**B. Describe the applicant's ability to manage CDBG-CV funds and comply with Federal/State accounting and reporting requirements.**

C. List other grant(s) which the applicant has administered in the past; the amount of funds involved; and whether the projects were successfully completed.

**D.** Does the applicant have the cash resources to administer a cost reimbursable grant agreement?

**E.** Attach one copy of the applicant's most recent audit including management letters and any other reports received with the audit. If findings are identified, describe how they have been resolved or describe the current status. If an audit has not been done, a copy of the entity's most recent certified financial statement must be submitted.

**F.** If applicable, note any tax liens or judgments and explain how they have been addressed.

**G.** Please attach the printout from <https://sam.gov/content/home> of your active DUNS and CCR# (including co-applicant)



## H. Appendices Checklist

Will your application be received by **February 4, 2022 at 4:30 p.m.** in the Fairbanks DCCED office?  
***This is a firm deadline.***

☐ Yes ☐ No

Have you included the Authority to Participate form (Appendix A), completed and signed by an authorized signer?

☐ Yes ☐ No

Have you completed and included the Determining Benefit to Low and Moderate-Income Persons form (Appendix B1)?

☐ Yes ☐ No

Have you included the Statement of Assurances and Certification (Appendix C)?

☐ Yes ☐ No

Have you included minutes of a Public Hearing held prior to submission of the application which demonstrates community support for this project?

☐ Yes ☐ No

Have you included a Joint Application Agreement, if applicable (Appendix E)?

☐ Yes ☐ No ☐ N/A

Have you included a Cooperative Agreement, if applicable, (Appendix F)?

☐ Yes ☐ No ☐ N/A

Have you included the Applicant/Recipient Disclosure/Update Report, HUD Reform Act, Section 102 (Appendix H)?

☐ Yes ☐ No

Have you included the ADA certification (Appendix I)?

☐ Yes ☐ No