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Deadline 12/11/2017



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City of Jersey City - DCD

Division of Community Development

2018/2019 CDBG - Public & Community Facilities

Projects

Open Programs Intro Requirements Library **Contact Admin**

Intro [hide this]

PLEASE READ THE 2018 HUD ENTITLEMENT LETTER LOCATED IN THE LIBRARY SECTION BELOW.

CDBG Public Facilities funds may be used for activities which include, but are not limited to: Under Regulations 24 CFR 570.202- Eligible rehabilitation and preservation activities

Acquisition of real property (including long term leases for period of 15 years or more)

Construction

Demolition

Reconstruction

Rehabilitation of residential and non-residential structures (including removal of architectural barriers to accessibility)

Construction of public facilities and improvements, such as water and sewer facilities, streets, neighborhood centers, and the conversion of school buildings for eligible purposes

Activities relating to energy conservation and renewable energy resources Installation

Each activity must meet one of the following national objectives for the program:

Benefit low- and moderate-income persons

Prevention or elimination of slums or blight

Address community development needs having a particular urgency because existing conditions pose a serious and immediate threat to the health or welfare of the community for which other funding is not available.

Generally, the following types of activities are ineligible but are not limited to the following:

Acquisition, construction, or reconstruction of buildings for the general conduct of government Political activities

Certain income payments

Construction of new housing (with some exceptions)

Costs of operating or maintaining public Facilities/ Improvements

Cost of purchasing construction equipment

Costs of furnishings and other personal items such as uniforms or

New Construction of public housing

Requirements [hide this]

Please review the 2018 RFP for CDBG- Public Facilities program located in the Library tab for application requirements and scoring methodology. Once the application is submitted for review it cannot be change

Library [hide this]

Description	File Name	Date Uploaded	File Type
2015-2019 City of Jersey City 5-Year Consolidated Plan	CityofJerseyCityC-Plan2015-2019.pdf	3/23/2017 7:38:41 AM	PDF
<u>Sample Grantee Risk Analysis</u> <u>Criteria</u>	SampleGranteeRiskAnalysisCriteria.xlsx	3/23/2017 7:39:21 AM	XLSX
Grant Evaluation Criteria Summary FAQ Sheet	GrantEvaluationCriteriaSummaryFAQSheet.pdf	3/23/2017 7:39:40 AM	PDF
Making Davis-Bacon Work Contractor Guide	MakingDavis-BaconWorkContractorGuide.pdf	3/23/2017 7:39:54 AM	PDF
<u>Davis-Bacon NJ Wage Rate</u> <u>Decision</u>	NJWageRateDecision-Building1-8-2016.pdf	3/23/2017 7:40:14 AM	PDF
CDBG Public Facilities Manual	Basically-CDBG-Chapter-6-Public-Facilities.pdf	10/13/2017 12:26:49 PM	PDF
Instructions CDBG Public Facilities	InstructionsCDBGRFPFY2018-2019.pdf	10/19/2017 9:21:39 AM	PDF



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Applicant View			Application St	atus: Not Submitted
			Apply Now/S	Start Application
Cover Sheet Application Questions Proj	ject Budget	Project Schedule	Attachments	Activity Log
Cover Sheet	(answe	ers are saved autor	natically when you n	nove to another field
Proposed Project Title				
Amount Requested Requested Amount		\$		
Total Cost of the Project		\$		
Applicant Information				
First Name Last Name				
LUSC NUTTIC				

Organization Information

Telephone Email

> (changes to this data will be reflected on all other applications for this organization)

Name of Applicant (Organization / Agency)	
Address 1	
Address 2	
City	
State/Province	Non-US Non-US

ZIP+4/Postal Code

State/Province

Country		United States ▼
Telephone		
Fax		
Website		
EIN (XX-XXXXXXX)		
DUNS Number		XXXXXXXX
(N)CAGE Code		
IRS Verification		
No current exempt IRS record wa You might try searching the list o revoked located at the <u>IRS Select</u>	of organizations whose fe	deral tax exemption was automatically
Official Contact Person (i.e., Execu CEO, etc.)	tive Director, Director,	
First Name		
Last Name		
Title		
Email		
	Next	
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Print Budget

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Cover Sheet

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Application Questions

(answers are saved automatically when you move to another field)

1. Ward

- Ward A
- Ward B
- Ward C
- Ward D
- Ward E
- Ward F

2. Project Location (Addresses, Block & Lot Numbers)

Maximum characters: 6500. You have 6500 characters left.

3. Type of Entity

- Non-Profit 501(c)(3)
- For-Profit Corporation
- City Dept. / Division
- Other:

4. Briefly describe the project for which you are seeking funds.
Maximum characters: 65000. You have 65000 characters left.
5. Consolidated Plan Priority to be Addressed (i.e., Streets, Sidewalks, Parks, etc. Please refer to the 2015-2019 5 Year Consolidated Plan in the LIBRARY tab).
Maximum characters: 255. You have 255 characters left.
6. Public Facility / Capital Improvements Priority to be Addressed.
// FERROR 1
Maximum characters: 65000. You have 65000 characters left.
7. Describe your agency's capacity for implementing the proposed project.
Maximum characters: 65000. You have 65000 characters left.
8. Provide a detailed description of your project. Be sure to specify boundaries of your service area, blocks
and lots and other information that will make the project location easily identifiable. In the ATTACHMENTS tab, please attach a map identifying the block and lot and interior and exterior photos for buildings and
photos of all proposed work areas.

Maximum characters: 65000. You have 65000 characters left.
9. Does the activity contain a commercial component? If so, please describe the nature of use.
Maximum characters: 65000. You have 65000 characters left.
10. Provide a detailed description of the proposed scope of work. If the project contains a commercial component not related to the organization's usual operations or programs, please explain.
Maximum characters: 65000. You have 65000 characters left.
Agency Description
11. Is this a Low / Moderate Area benefit activity?
 Yes - Please explain how this was determined and provide boundaries for the area in the subsequent question.
No - Please enter 'N/A' in the subsequent question.
Detailed Project Description
Note: If the proposed activity involves the rehabilitation of housing units. You must
complete the Rental/Ownership pro forma workbook.
12. List the need(s) which illustrate the reason for the project. Describe specifically the number of low and moderate income persons to benefit from the proposed activity.
Maximum characters: 65000. You have 65000 characters left.

13. Objectives should be specific, measurable, and time oriented. Outcomes are the changes that will occur as a result of the proposed project / activity. For example, 300 households will benefit from improved access to public facilities / services.			
Maximum characters: 65000. You have 65000 characters left.			
Scope of Work			
14. Applicant must have site control, contract, or authority to execute a long term (15-year) leasehold mortgage for any facility improvements exceeding \$20,000. Please select one of the options below to indicate your compliance with this requirement.			
If applicable, please also upload in the Documents tab the appropriate documentation. Contract of Sale (upload a copy)			
Contract of Sale (upload a copy)Municipal Conveyance of Property			
Deed of Ownership (upload a copy)			
Other - provide documentation and explain:			
This application does not exceed \$20,000.			
CDBG Eligibility Requirements			
15. Are there liens (mortgages) or other encumbrances (Deed Restrictions, etc.) on the property? If yes, please explain in the subsequent question. If not, please enter 'N/A' in the subsequent question.			
Yes			
O No			
16. If there are liens (mortgages) or other encumbrances on the property, please explain. Be sure to specif the mortgage company, amount owned, and terms. Provide details regarding all encumbrances.			
Maximum characters: 65000. You have 65000 characters left.			
17. Are there any potential impediments to this project? If yes, please explain.			

Maximum characters: 65000. You have 65000 characters left.
Assessment of Need(s)
18. Please describe any contingency, including environmental contamination, which might delay or preclude project completion. Environmental reviews are required prior to all rehabilitation and construction activities. The level of review varies. Note: All projects must comply with applicable laws, codes and regulations, including but not limited to lead based paint, historic preservation, environmental remediation, etc.
Maximum characters: 65000. You have 65000 characters left.
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Instructions Show/Hide

Sources of Funding

Please enter the estimated sources of funding. If a line item does not apply to the proposed project, enter 0 in the field. If there is a source of funding not listed, please type the source of funding in the "Other" field.

Enter \$ Amount
\$
\$
\$
\$
\$
\$
\$
\$
\$
\$

Uses of Funding

Please enter the estimated cost for each budget line item. If a budget line item does not apply to the proposed project, enter 0 in the field. If there is a budget line item not listed, please type the item in the "Other" field.

Item Description	Enter \$ Amount
Acquisition-Land	\$
Acquisition-Building	\$
Acquisition Other	\$
Rehab/Construction-Electric	\$
Rehab/Construction-Plumbing	\$
Rehab/Construction-Carpentry	\$
Rehab/Construction-Paint	\$
Rehab/Construction-Drywall/Wall Tile	\$
Rehab/Construction-Flooring	\$
Rehab/Construction-Windows/Doors	\$
Rehab/Construction-Cement/Masonry	\$
Rehab/Construction-General Repairs	\$
Rehab/Construction-Contingency	\$
Rehab/Construction-Permit Fees	\$
Professional & Consultant Services	\$
Financing Costs (Points, Fees, Interest)	\$
Carrying Costs to Occupancy/Sale (Utilities, Taxe	\$
Other:	\$
Other:	\$
Other:	\$

Total \$ 0.00

Project Budget Narrative (Discuss/justify the items and amounts you entered above.)

Please explain the approach used to create the project budget. Specifically, what resources were used to develop the various costs in the budget? For example, do you have existing quotes or estimates from contractors or professionals? Are costs based



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Site Information / Property History

Specify whether the Property is Vacant or Occupied, check the appropriate boxes, and provide additional information as applicable.

FOR ALL OCCUPIED PROPERTIES THAT HAVE BEEN VACANT LESS THAN 12 MONTHS - Upload in the Documents tab Rent and Occupancy Data (# of residents, businesses, churches, and non-profit organizations that have moved from your site(s) within the past 12 months or in current occupancy)

NOTE: A copy of your detailed relocation plan must be attached for all properties vacant less than 12 months or occupied properties that will require relocation.

Street Address(es)	Block(s) No.	Lot(s) No.	Vacant <12 months	Vacant >12 months	Occupied

Total	0	0		

Project Schedule

Put a check in the appropriate boxes for quarter(s) when task / activity will occur.

#	Activity Description	Apr-June '18	July-Sep '18	Oct-Dec '18	Jan-Apr '19	Apr-June '19	July-Sep '19	Oct-Dec '19
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

Total

Audit

SCHEDULE A - Budget for Rehabilitation / Housing / Economic Development Projects

\$

	•	•						
	CDBG Funds	(Other Sources	Total	(Other Sources	Other Sour	ces
Acquisition	\$	\$		\$ 0	\$		\$	
Clearance & Demolition	\$	\$		\$ 0	\$		\$	
Environmental Remediation	\$	\$		\$ 0	\$		\$	
Relocation	\$	\$		\$ 0	\$		\$	
Architectural / Engineering Fees	\$	\$		\$ 0	\$		\$	
Permit Fees	\$	\$		\$ 0	\$		\$	
Professional Services								
Appraisal	\$	\$		\$ 0	\$		\$	

\$0 \$

\$

Total	\$ 0	\$ 0 \$0	\$ 0 \$
Other (specify)	\$ \$	\$0 \$	\$
Sidewalk	\$ \$	\$0 \$	\$
Curbs	\$ \$	\$ 0 \$	\$
Water	\$ \$	\$0 \$	\$
Sewer	\$ \$	\$0 \$	\$
Site Improvement			
New Construction	\$ \$	\$0 \$	\$
Rehabilitation	\$ \$	\$0 \$	\$
Consultants (specify type)	\$ \$	\$0 \$	\$

SCHEDULE C - Other Sources of Funding Related to this Application

Code all listed fund sources as either (F) Federal Government, (S) State Government, (L) Local City/County Government, (LP) Local Private/Charity Agency, (TP) Third Party Payer or (PI) Program Income.

Source	Amount	Committed?	Code
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
Total	\$ 0		0

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Documents Requested *	Required	PUploaded Documents *	
Site Location Map	Required	-none-	Upload
Site Photos	Required	-none-	Upload
Rent and Occupancy Data Sheet (for occupied properties that have been vacant for less than 12 months)		-none-	Upload
Relocation Plan (for properties vacant less than 12 months or occupied properties that will require relocation		-none-	Upload
Redevelopment Plan (it activity is located in a designated redevelopment area)		-none-	Upload
Facility Operating Plan (if this is a new public facility)		-none-	Upload
Rental Proforma (Required if proposed activity involves rehabilitation of housing units)		-none-	Upload
Contract of Sale		-none-	Upload
Municipal Conveyance of Property		-none-	Upload

Deed of Ownership	Required	-none-	Upload
Other Specified Documentation for Site Control		-none-	Upload
Public Facility Plan	Required	-none-	Upload
The operating plan must detail your strategy for covering operating cost for the project.			
CDBG Public Facilities Budget <u>Download template: CDBG Public Facilities</u> <u>Project Budget</u>	Required	-none-	Upload
Board of Directors List and/or Organization Chart	Required	-none-	Upload
SAM Certificate	Required	-none-	Upload
501 (c) (3) Determination Letter (IRS)		-none-	Upload
Articles of Incorporation		-none-	Upload
By-Laws		-none-	Upload
Project Maps: Of the Project Area including the boundaries	Required	-none-	Upload
		-none-	Upload
Certificate of Good Standing		-none-	Upload
Most Recent Audited Financial Statements		-none-	Upload
Most Recent Tax Return (for-profit) or Form 990 (non-profit)		-none-	Upload

^{*} ZoomGrants $^{\mathtt{M}}$ is not responsible for the content of uploaded documents.

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