



516 Cooper Avenue, Suite 101
Grafton, ND 58237
701-352-3550
www.RedRiverRC.com

Public Facilities Pre-Application

North Dakota Community Development Block Grant (CDBG) Program FY 2019

All Pre-Applications must be received by 3:00 p.m. on June 26, 2019. Pre-Applications submitted by e-mail must be followed by original. The Pre-Application as well as the Red River Regional Council (RRRC) Program Distribution Statement are available on the RRRC website, www.RedRiverRC.com.

For assistance please contact Stacie Sevigny at 701-352-3550 or Stacie@redriverrc.com.

Name of Applicant (City or County only): _____

Address: _____

Phone Number: _____

Contact Person: _____

Email Address: _____

DUNS Number: _____

Engineer/Architect: _____

Address: _____

Phone: _____

Contact Person: _____

Email Address: _____

1. Use of Funds:

- _____ Public Facilities – Construction, Low Income & Very Low Income (LI & VLI) Benefit
- _____ Public Facilities – Construction, Special Assessment of LI & VLI Benefit
- _____ Public Facilities – Construction, Removal of Architectural Barriers
- _____ Public Facilities – Construction, Urgent Need

2. Project Title:

3. Brief Description of the Proposed Project:

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4. Project Cost:

Project Costs:	\$
Grant Administration:	\$
Engineering/Architectural:	\$
Other Costs:	\$
TOTAL:	\$

5. Funding Sources:

CDBG Grant Funds:	\$
Local Matching Funds:	\$
Other Matching Funds*:	\$
TOTAL:	\$

*Please specify what the other sources of Matching Funds are and their status (i.e., secured or under development):

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6. How will the local share be funded?

- | | |
|--|---|
| <input type="checkbox"/> Cash on Hand | <input type="checkbox"/> State Revolving Loan Fund |
| <input type="checkbox"/> Revenue Bond | <input type="checkbox"/> State Drinking Water Revolving Loan Fund |
| <input type="checkbox"/> Special Assessment Bond | <input type="checkbox"/> Tax Increment Financing |
| <input type="checkbox"/> Community Facilities Loan Program
(USDA Rural Development) | <input type="checkbox"/> Other (please specify below) |

Other (please specify):

- 7. Estimated Start Date:** _____
Estimated Completion Date: _____

8. Project Location:

Project Street Address _____ **OR:**
Township _____ Range _____ Section _____

9. Is the Project:

- Entirely within the city limits?
 Entirely outside the city limits?
 Some features within and some features outside?

10. Will any proposed activities take place within a designated floodplain area? If so, please explain and provide a floodplain map with the project area noted.

11. Will any proposed activities take place within a structure or area listed on the National Register of Historic Places? If so, please explain.

12. Will any part of the project benefit a church-owned property or an organization with a religious purpose or affiliation? If so, please explain.

13. Project Beneficiaries:

_____ Number of persons in project area _____ Number of families in project area
_____ Number of LMI persons in project area _____ Number of LMI families in project area

The above numbers should be derived from census data or contact the RRRRC for assistance.

PRE-APPLICATION NARRATIVE

Scoring & Ranking

Complete scoring and ranking criteria for Public Facilities projects can be found on the RRRRC website:
www.redriverrrc.com

PROJECT NEED

The greatest number of points will be given to proposals that address an existing or imminent problem with significant impact on the health and safety of citizens, or which would eliminate architectural barriers that prevent persons with handicaps from receiving essential services.

14. In the space provided, describe why you need to do this project. (Attach additional pages if necessary.)

FINANCIAL NEED

The greatest number of points will be given to projects that can't be done without CDBG assistance.

- 15. Why is CDBG assistance needed for this project? In describing that need, you may reference figures shown on page 2 and include explanations as to why other local sources of financing, including borrowing and anticipated future revenues, are inadequate or not feasible in financing the project.**

- 16. Describe efforts you have made to identify other possible sources of grant or loan funds to help with this project, including state and federal agencies. Describe the results of those actions.**

LOCAL COMMITMENT

The greatest number of points will be given to those projects in which the applicant can demonstrate past and current efforts to address the described problem as well as other public facility, infrastructure, and safety issues.

- 17. Provide a brief statement as to why you cannot provide more matching dollars than what is being pledged.**

18. Describe whether the problem to be addresses by the proposed project was recent or unexpected, or, if long-term, what previous efforts have been undertaken to address the problem.

19. Describe other major projects or programs that have been undertaken by the proposed recipient of the grant during the past five years, and include a description of how those projects or activities were funded.

PROJECT APPROPRIATENESS

The greatest number of points will be awarded to projects that would address the best immediate and provide the best long-term solution to the problem; appears to be cost effective considering the number of people to benefit versus the cost as compared to other projects; cost estimates appear to be reasonable and are well documented; and project is ready to proceed in a timely manner, with construction beginning in a 12-month period.

20. In the space provided, please list:

Total number of persons to benefit from project:	
CDBG dollars requested (less administration):	\$
CDBG dollars per person to benefit:	\$

21. What other alternatives to the problem were considered and why is the proposed project considered the best long-term and immediate solution to the problem?

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22. Have you ever received a CDBG public facilities grant before? If so, for what project and in what year?

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Applicant Certification:

To the best of my knowledge and belief, data and statements in this application are true and correct.

Name (Mayor/Chairman):	Title:
Signature:	Date: