

HOUSING Pre-Application FY2021

Community Development Block Grant (CDBG) Program



Red River Regional Council

All Pre-Applications must be received by 3:00 p.m. on June 23, 2021. The Pre-Application and Red River Regional Council's (RRRC) Program Distribution Statement are available on the RRRC website, www.RedRiverRC.com. For questions or assistance please contact Stacie Sevigny at 701-352-3550 or Stacie@redriverrc.com.

1. Applicant Information

Applicant (City or County only):		Project Title:	
Applicant Address (Street/PO Box, City, State, Zip):			
DUNS Number:		Tax ID/FEIN Number:	
SAM Expiration Date (City/County must have current SAM registration. Contact RRRC staff for guidance):			
Local Government Contact Person/Title:	Phone:	Email:	
Other Contact Person (if applicable):	Phone:	Email:	

2. Engineer/Architect Information (if applicable)

Engineer/Architect:	Contact Name:
Phone:	Email:
Address (Street/PO Box, City, State, Zip):	

3. Use of Funds & National Objective

USE OF FUNDS (Check all that apply)	NATIONAL OBJECTIVE
<input type="checkbox"/> Removal of Architectural Barriers (Handicap Accessibility)	<input type="checkbox"/> Benefit to Low Income (Including Limited Clientele)
<input type="checkbox"/> Construction/Rehabilitation	<input type="checkbox"/> Elimination of Slum or Blight
<input type="checkbox"/> Purchase/Acquisition	<input type="checkbox"/> Alleviation of Urgent Need
<input type="checkbox"/> Special Assessments	
<input type="checkbox"/> Other (please specify):	

4. Brief Description of the Proposed Project (including the problem/need to be addressed; project area or location; how long issue/problem has existed; who the owner is of the property or building; and delineate the parts which are to be funded by CDBG and other funds):

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5. Proposed Project Cost & Funding Sources

PROJECT ACTIVITY COST		FUNDING SOURCES	
Construction Cost:	\$	CDBG Grant Funds:	\$
Grant Administration: (15% of CDBG amount; to be paid with local funds)	\$	Local Matching Funds: (Including grant administration & E/A services)	\$
Engineering/Architectural: (To be paid with local funds)	\$	Other matching funds:	\$
Other Costs:	\$	TOTAL:	\$
TOTAL:	\$	TOTALS SHOULD MATCH	

6. What is the source(s) and amount(s) of the other Matching Funds?

(If noted above, please indicate source **and** status of funds: i.e. under development, pending, secured)

SOURCE	AMOUNT
	TOTAL: \$

7. What is the source(s) and amount(s) of the Local Match?

(Please indicate source **and** status of funds: i.e. under development, pending, secured)

SOURCE	AMOUNT
	TOTAL: \$

8. Project Duration (Maximum is 18 months)

Anticipated Project Start Date:	Anticipated Project Completion Date:
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9. Project Specifics

Is/Will the Project:	Yes	No	N/A
Entirely within city limits?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Entirely outside city limits?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Features within and outside city limits? (If yes, please explain in Project Description)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Within a designated floodplain? (Applicants should consult local floodplain maps and/or contact ND State Water Commission. If yes, please explain in Project Description and include floodplain map with project area noted)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Take place within a structure or area listed on the National Register of Historic Places? (If yes, please provide documentation and explain in Project Description)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Benefit a church-owned property or organization with religious purpose or affiliation? (If yes, please explain in Project Description)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has any on-site construction and/or rehabilitation work been conducted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has an asbestos inspection been conducted by a state licensed inspector? (Rehabilitation/demolition of structures can require an asbestos inspection and remediation, if necessary. If yes, attach full copy of inspection)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has a lead-based paint inspection been conducted by a licensed inspector? (Lead-based paint inspection required for some projects. If applicable, attach full copy of report)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use the space below to further explain any of the above Project Specifics not already addressed in the Project Description under #4 on Page 2 of the pre-application:

10. Project Beneficiaries

	Persons	Families
a. Total number in project area:		
b. Total number of low and moderate income in project area:		
c. Total number of persons to benefit from project:		
d. CDBG dollars requested:	\$	
e. CDBG dollars per person to benefit:	\$	

The above numbers should be derived from either Census data or from a survey utilizing an appropriate methodology as outlined in the state’s Program Distribution Statement. Contact the RRRRC for assistance.

PRE-APPLICATION NARRATIVE

Applicants are encouraged to provide as much pertinent information as possible. Complete scoring and ranking criteria for Public Facilities projects can be found on the RRRC website: www.redriverrc.com

11. Project Need

Describe why you need to do this project. The greatest number of points will be given to proposals that meet both current and long-term benefits in addressing existing and future needs; address, directly or indirectly, health and safety issues; and will have a significant impact on meeting the needs.

12. Financial Need

Why is CDBG needed for this project? In describing that need, you may reference figures provided on Page 2 and include explanations as to why other sources of financing, including borrowing and anticipated future revenues, are inadequate. The greatest number of points will be given to proposals that prove the project cannot proceed (or the project would be significantly reduced) without CDBG; and the amount and terms proposed are reasonable and appropriate. Please describe any other projects undertaken in the last 5 years and include a description of how those projects were funded and may affect the applicant's ability to commit more to this project.

13. Appropriateness

Discuss how the proposed project represents a logical and cost-effective strategy for addressing the needs as documented considering the amount of funds requested, the terms proposed, and the number of people who will benefit. Can you document the sustainability and viability of the project and assure the housing can be and will remain occupied, affordable, and properly maintained? What other alternatives were considered and why is the proposal considered the best long-term solution? Are the cost estimates reasonable and well-documented? Have you received a CDBG grant in the past 5 years? If yes, for what project 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: