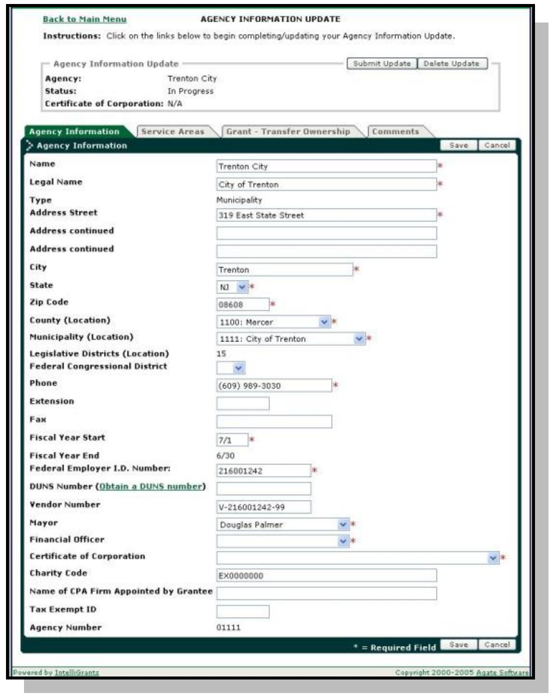
Revised 07/03/2019

New Jersey Department of Community Affairs
Grant Application Instructions – Small Cities CDBG Program

Before you get started, make sure that—

- Your **Agency Information** is up-to-date, including your—
  - Board of Directors list, if applicable
  - DUNS number
  -
  - Federal Congressional District
  - ZIP code including four digit extension



Back to Main Menu AGENCY INFORMATION UPDATE

Instructions: Click on the links below to begin completing/updating your Agency Information Update.

Agency Information Update | Submit Update | Delete Update

Agency:	Trenton City
Status:	In Progress
Certificate of Corporation:	N/A

Agency Information | Service Areas | Grant - Transfer Ownership | Comments

Agency Information | Save | Cancel

Name	Trenton City *
Legal Name	City of Trenton *
Type	Municipality
Address Street	319 East State Street *
Address continued	
Address continued	
City	Trenton *
State	NJ *
Zip Code	08608 *
County (Location)	1100: Mercer *
Municipality (Location)	1111: City of Trenton *
Legislative Districts (Location)	15
Federal Congressional District	
Phone	(609) 989-3030 *
Extension	
Fax	
Fiscal Year Start	7/1 *
Fiscal Year End	6/30
Federal Employer I.D. Number:	216001242 *
DUNS Number (Obtain a DUNS number)	
Vendor Number	V-216001242-99
Mayor	Douglas Palmer *
Financial Officer	*
Certificate of Corporation	*
Charity Code	EX0000000
Name of CPA Firm Appointed by Grantee	
Tax Exempt ID	
Agency Number	01111

* = Required Field | Save | Cancel

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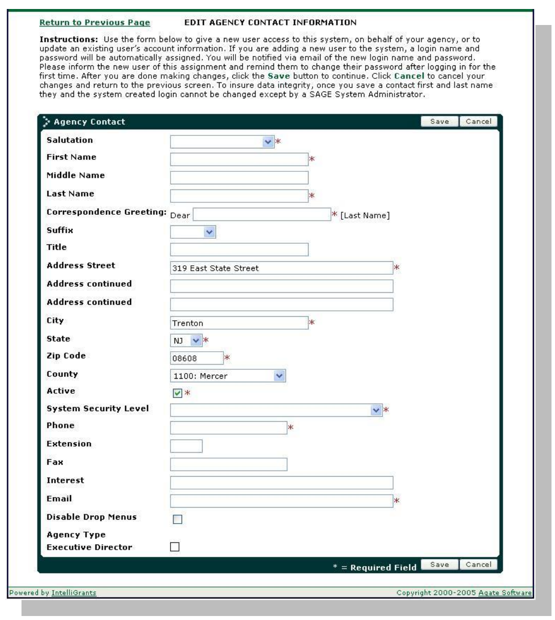
…and that—

- Staff members in your agency who will be working on this application have been added to SAGE as **Agency Contacts.**

DO NOT add outside consultants as Agency Contacts.



Return to Previous Page EDIT AGENCY CONTACT INFORMATION

Instructions: Use the form below to give a new user access to this system, on behalf of your agency, or to update an existing user's account information. If you are adding a new user to the system, a login name and password will be automatically assigned. You will be notified via email of the new login name and password. Please inform the new user of this assignment and remind them to change their password after logging in for the first time. After you are done making changes, click the Save button to continue. Click Cancel to cancel your changes and return to the previous screen. To insure data integrity, once you save a contact first and last name they and the system created login cannot be changed except by a SAGE System Administrator.

Agency Contact | Save | Cancel

Salutation	*
First Name	*
Middle Name	
Last Name	*
Correspondence Greeting:	Dear * [Last Name]
Suffix	
Title	
Address Street	319 East State Street *
Address continued	
Address continued	
City	Trenton *
State	NJ *
Zip Code	08608 *
County	1100: Mercer
Active	*
System Security Level	*
Phone	*
Extension	
Fax	
Interest	
Email	*
Disable Drop Menus	
Agency Type	
Executive Director	

* = Required Field | Save | Cancel

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These two tasks must be performed by your SAGE **Agency Authorized Official** or SAGE **Agency Administrator**.

Refer to the **DCA SAGE User Manual** for instructions on updating your Agency Information and adding Agency Contacts. To download the User Manual, click the hyperlink on the SAGE login page or in Quick Links in your Start Menu.

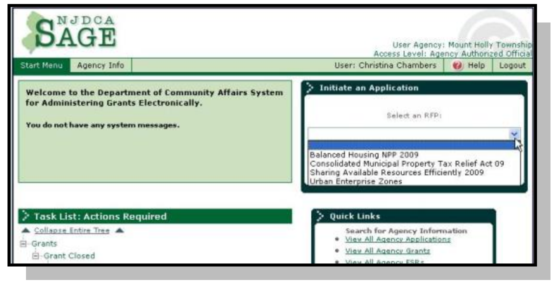
Getting Started

Initiating a new application

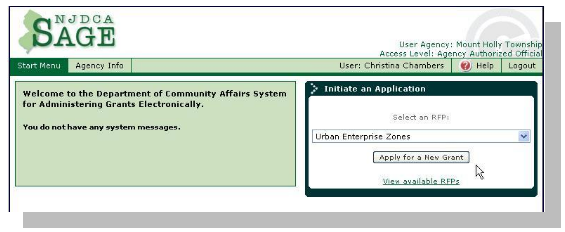
This task must be performed by your SAGE **Agency Authorized Official** or SAGE **Agency Administrator**.

At the **Start Menu**…

In the **Initiate an Application** box…



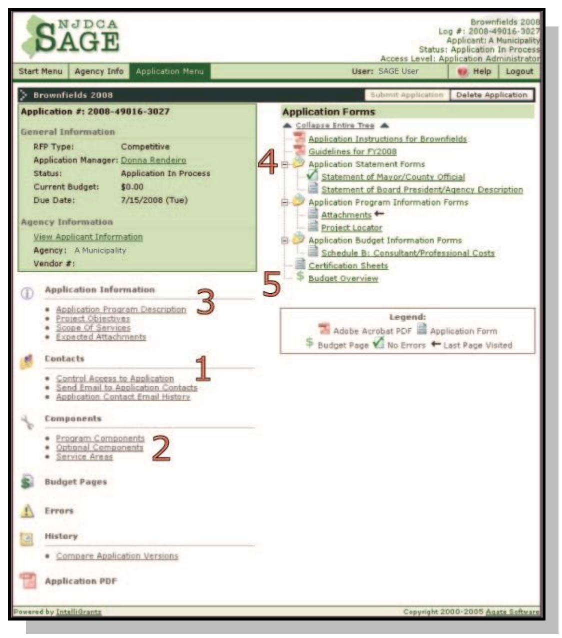
- Select the appropriate RFP (Grant Program) from the pull down list



- Click **Apply for a New Grant**
- Click **OK** at the confirmation pop up box

  You will be brought to the **Application Menu**

Completing the Application

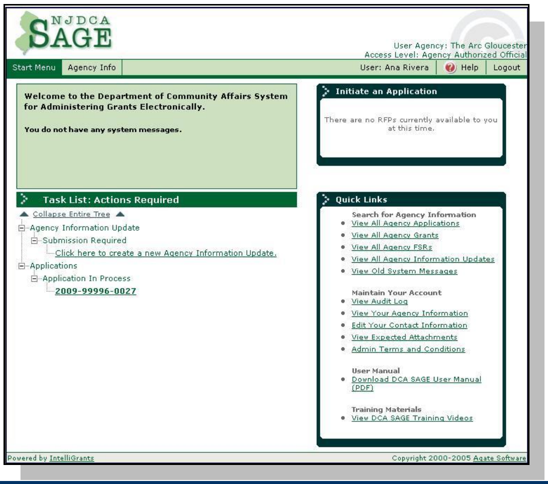


Work on the **Application Menu** in this order—

1. Application Contacts
2. Components
3. Application Information
4. Application Forms
5. Budget

After an application is initiated, it will appear on the initiator's **Task List** under **Application In Process**. When additional staff members are added to the application as Main Contacts, the application will appear on their Task Lists, too.

To access the application, click its application number hyperlink.



1. Application Contacts

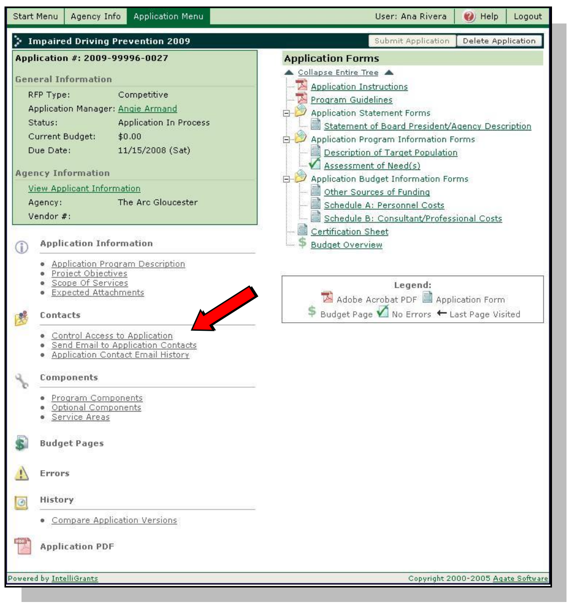
(*If the initiator of the application will be the* ***only*** *person working on it, proceed to step* ***2 Components***.)

If additional staff members and/or consultants will be working on this application, you must add them as **Application Contacts**. Only the Application Contacts and the Agency Authorized Official have access to the application.

Adding Staff Members as Application Contacts

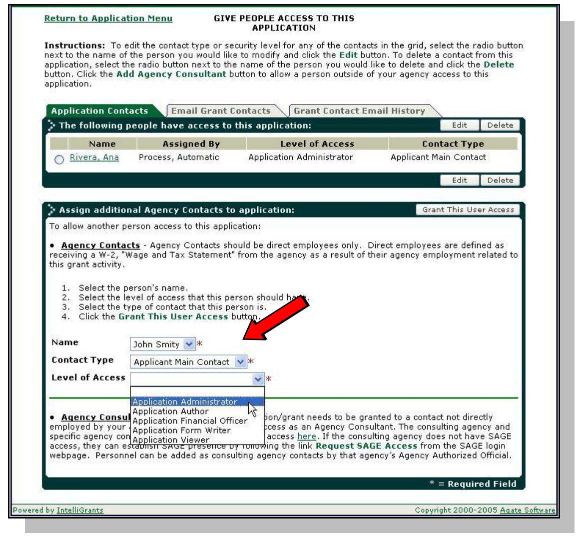
If other members of your staff will be working on this application, in the Application Menu under **Contacts**—

- Click **Control Access to Application**



In the **Assign additional Agency Contacts to application** section—

- Select a **Name** from the pull down list
- In the **Contact Type** field, select whether this person will be a Main Contact or a Staff Member (Main Contacts see the application on their Task Lists).
- Select the appropriate **Level of Access** from the pull down list.
- Click **Grant This User Access**.
- Continue to add staff members (or a consultant, see below), if desired.



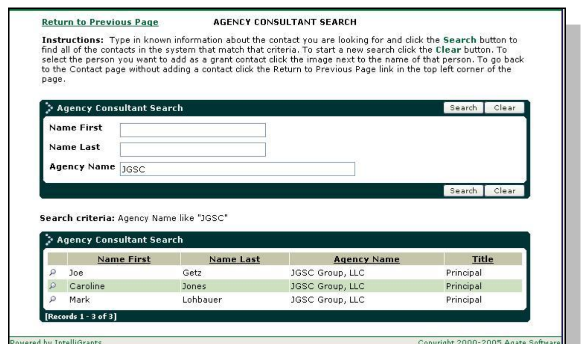
When finished, you may return to the **Application Menu** or add a consultant as an Application Contact, see below.

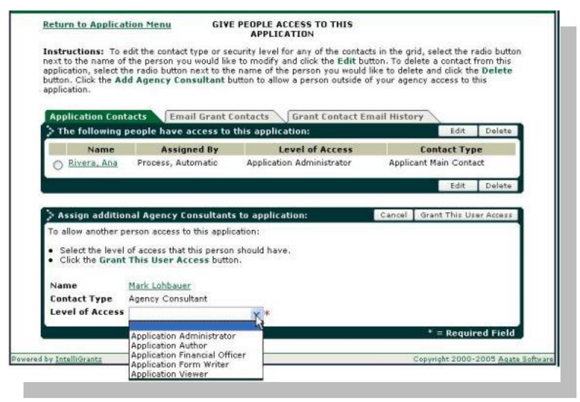
Adding Consultants as Application Contacts

If you will be using an outside consultant to work on this application, at the bottom of the **Assign additional Agency Contacts to application** section—

- Click the **Agency Consultants** hyperlink
  - At the **Agency Consultant Search** screen, enter all or part of the consultant's name and/or the consulting firm's name (check alternate spellings)
  - Click **Search**
  - Select a consultant by clicking on their magnifying glass.
  - Select the **Level of Access** you want to give to the consultant
  - Click **Give this User Access**

When finished, return to the **Application Menu**.





If the consulting firm you want to use is not on the list, it means that they are not registered in SAGE. They can apply for SAGE access by clicking Request SAGE Access at the SAGE login screen. They will receive their SAGE User Name and Password within about two business days.

After the consulting firm has been approved by DCA, go back into **Assign additional Agency Contacts to application** section and **Add** them to the Application Contact list.

DO NOT add outside consultants as Agency Contacts.

2. Components

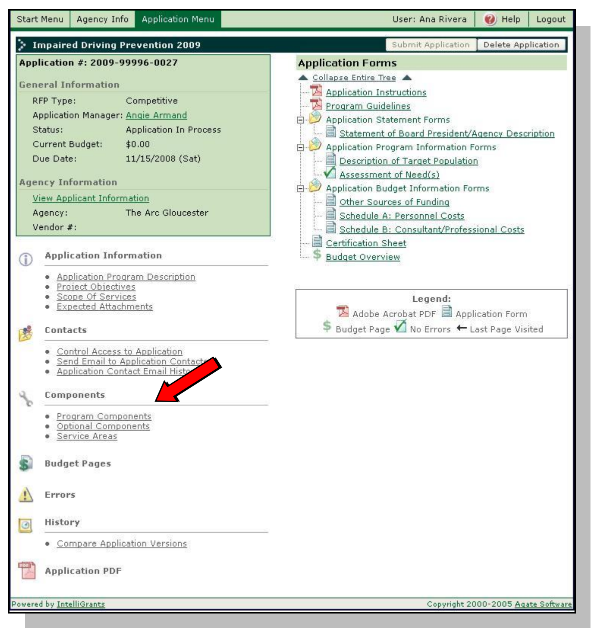
Each year the Small Cities CDBG Program sends out an **RFP** through SAGE. Applicants respond by submitting applications in SAGE to the DCA Small Cities CDBG Program on or before the established deadline. Applicants are also required to follow requirements in The Final Plan for New Jersey's Administration of the Small Cities CDBG Program (Final Plan), which establishes the distribution of the allocation, matching requirements, the evaluation criteria, threshold requirements, rated criteria, eligible activities, recaptured funds and the list of eligible municipalities and counties.

A **Component** is a Program Type; there are three programs or funds that start the application process through SAGE: Housing Rehabilitation, Innovative Development and Public Facilities. The Innovative Development Program and the Emergency Housing Repair Program require the submission of a pre-application, which can be downloaded from the Program's website. The Program will invite applicants to submit full applications if the pre-applications are fundable. Applicants may only submit one application for each program type. However, the Program reserves the right to limit the number of awards made per year in accordance with the Program's Final Plan.

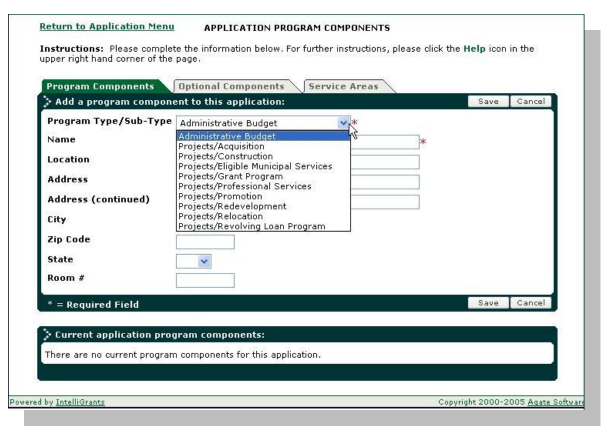
Please refer to the Program's webpage at http://www.nj.gov/dca/divisions/dhcr/offices/cdbg.html for further guidance and the program's handbooks on the following grant compliance items: grant management, grant management plan and professional services, citizen participation plan (initial public hearing), environmental review record (ERR), and civil rights including fair housing.

Program Components

- Click **Program Components** on the left side of the **Application Menu**



- In the **Program Type/Sub-Type** field, select a Component from the drop down list
- In the **Name** field, enter a name for the Component
- For **Location**, specify the municipality (city and county) of the program
- In the **Address** fields, provide the address of the program's day-to-day administrator



If your program has multiple components, repeat the steps above until you have selected and described each component that will be a part of your program.

When finished, select the **Service Areas** tab, or return to the **Application Menu**

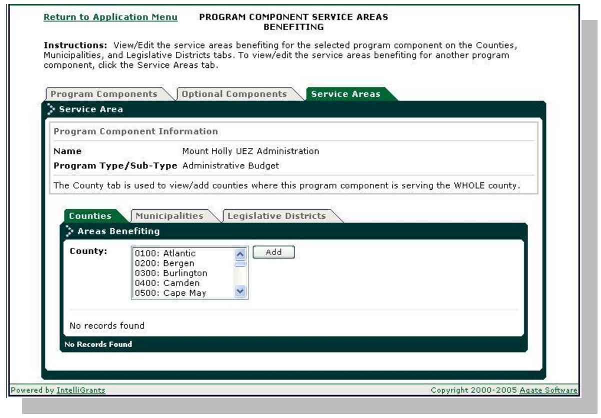
Service Areas

In this section, indicate the areas (counties and/or municipalities) that will benefit from *this* program – which may or may not be the area that your agency serves as a whole.

- Click on **Service Areas**

If your program/project has multiple Components, you will get a list of the Components you chose.

Assign a Service Area for ***each*** Component.



Counties

If the Program or Component benefits the ***whole county*** or counties—

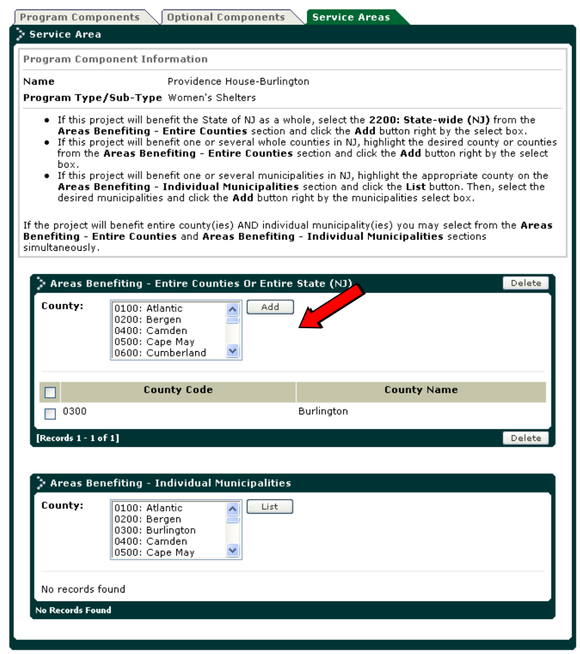
- Use the top box, **Areas Benefiting - Entire Counties Or Entire State (NJ)**
- Select the county or counties* that will benefit
- Click **Add**.

State

If the Program or Component benefits the ***entire State of NJ***—

- Use the top box, **Areas Benefiting - Entire Counties Or Entire State (NJ)**
- Scroll down to the bottom of the **Counties** list and select **2200: State Wide (NJ)**
- Click **Add**

*Use **Ctrl click** to select several counties at the same time



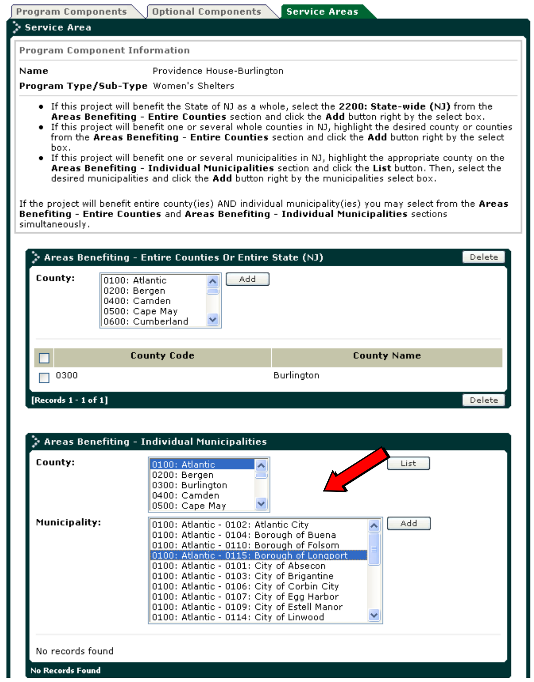
Municipalities

If the Program or Component will benefit one or more municipalities (not a whole county)—

- Use the bottom box, **Areas Benefiting - Individual Municipalities**
- Select the **County** where the project will be located from the drop-down list and click **List** – a second drop-down list will display all of the municipalities in the selected County
- Select the **municipality** or **municipalities*** that will benefit from this program
- Click **Add**.

Return to the **Application Menu**

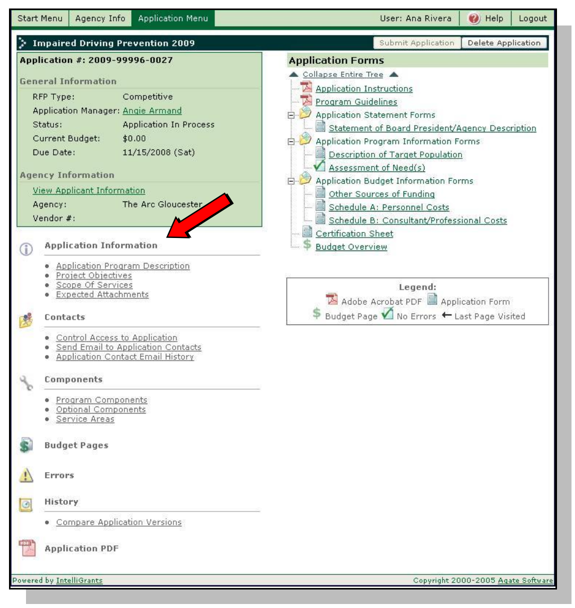
*Use **Ctrl click** to select several municipalities at the same time



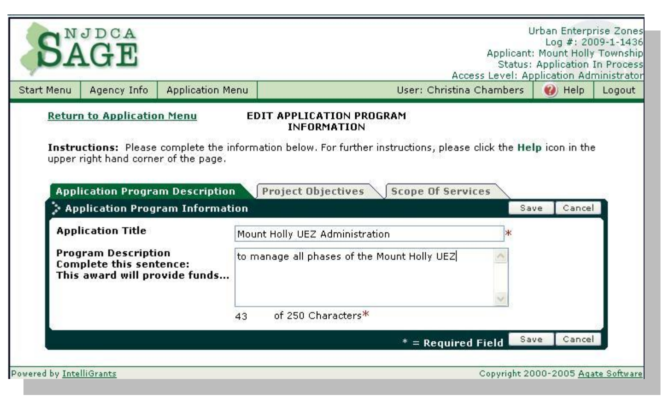
3. Application Information

Application Program Description

- Under **Application Information**, click on **Application Program Description**



- Click **Edit**
- Enter your **Application Title** – what you are calling the program/project.
- Enter your **Program Description**.
  - Your description should start with either the word "to" or "for" and briefly describe how you will use the funds requested in this application.



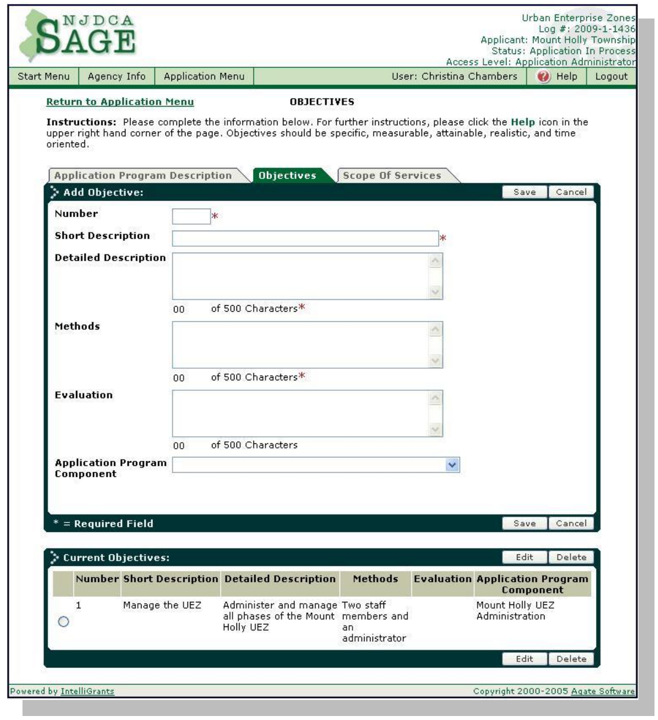
- If this application results in an award, the **Program Description** you enter here will be used in your award letter.
- Your entry in this field should be no longer than a standard sentence.

- **Save**

When finished click the **Objectives** tab or return to the **Application Menu**

Project Objectives *(Do not create more than three)*

An Objective is a distinct, quantifiable element that must be achieved in order to attain the goals of a program or project.



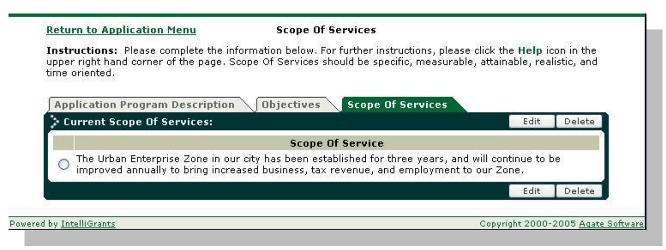
- Click on **Objectives** and enter the appropriate information—
  - **Number** – You may use your own numbering system to group or prioritize your objectives.
  - **Short Description** – Provide an abbreviated version of the objective.
  - **Detailed Description** – Use this field to elaborate on the **Short Description** you entered in the previous field.
  - **Method(s)** – List the methods(s) to be used to attain the objective(s) described in the **Detailed Description** section.
  - **Evaluation** – Briefly describe how you will determine the success of the objective.
  - **Application Program Component** – Use the drop down menu to select the Program Component that corresponds to this Objective (not necessary if your program has only one Component).
  - **Save**.

    Your objective will appear under **Current Objectives** at the bottom of the screen. You will get a blank screen to enter a new Objective, if desired. Add as many Objectives as needed. Be sure to **Save** each Objective.

When finished, click the **Scope of Services** tab or return to the **Application Menu**.

Scope of Services

A Scope of Services is a description of what will be accomplished if a grant is awarded. **Refer to models in the Appendix.**



- Click on **Scope of Services**
  - Enter your scope of services in the text box; be brief.
  - Click **Save**

When finished, return to the **Application Menu**

4. Application Forms

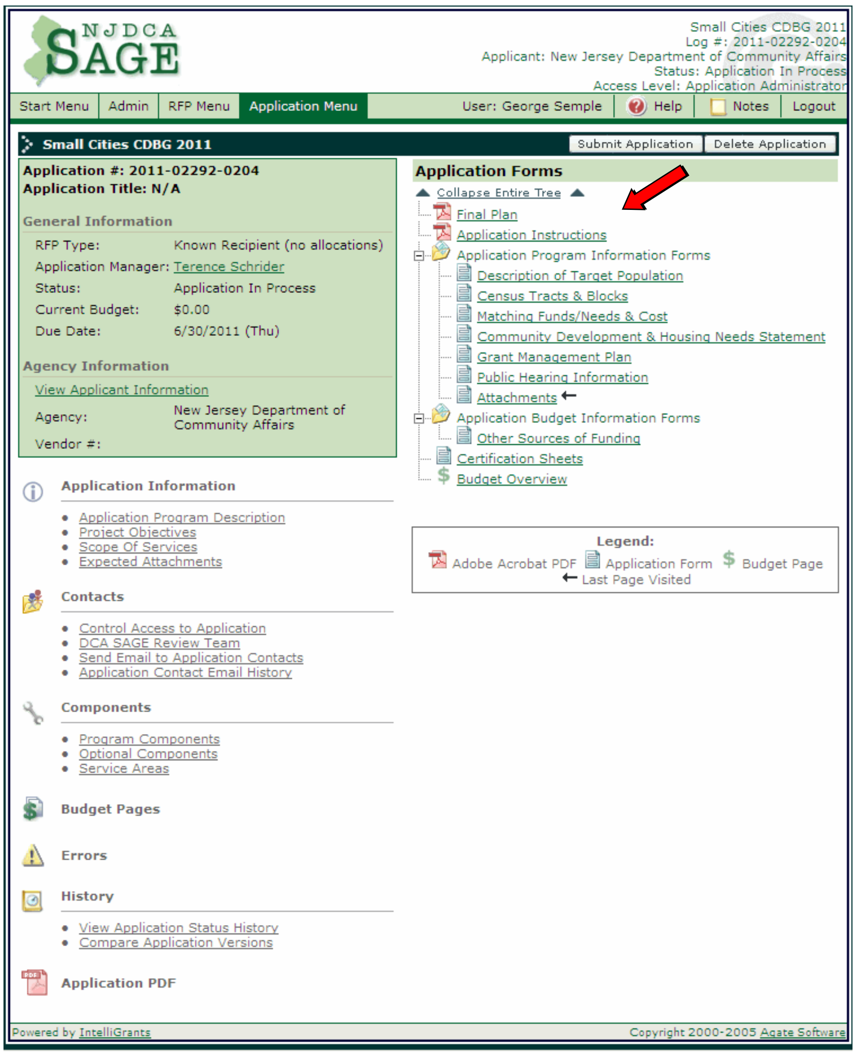
The forms in your application are customized for the Small Cities CDBG Program and the type of program you have chosen. Complete each required application form and **Save**. You may return to the **Application Menu** to select another form (or exit the application) or click the **Next** button (at the upper right of the form) to work on the next form on the list. You do not need to complete the forms in order, and more than one Application Contact can work on the forms.

APPLICATION FORMS (upper right side of the application)

Final Plan: The Final Plan for the Administration of the Small Cities CDBG Program is an overview of the Program's different funds and explains the application requirements and how applications are rated and ranked. Examine this carefully to achieve the highest score and rank.

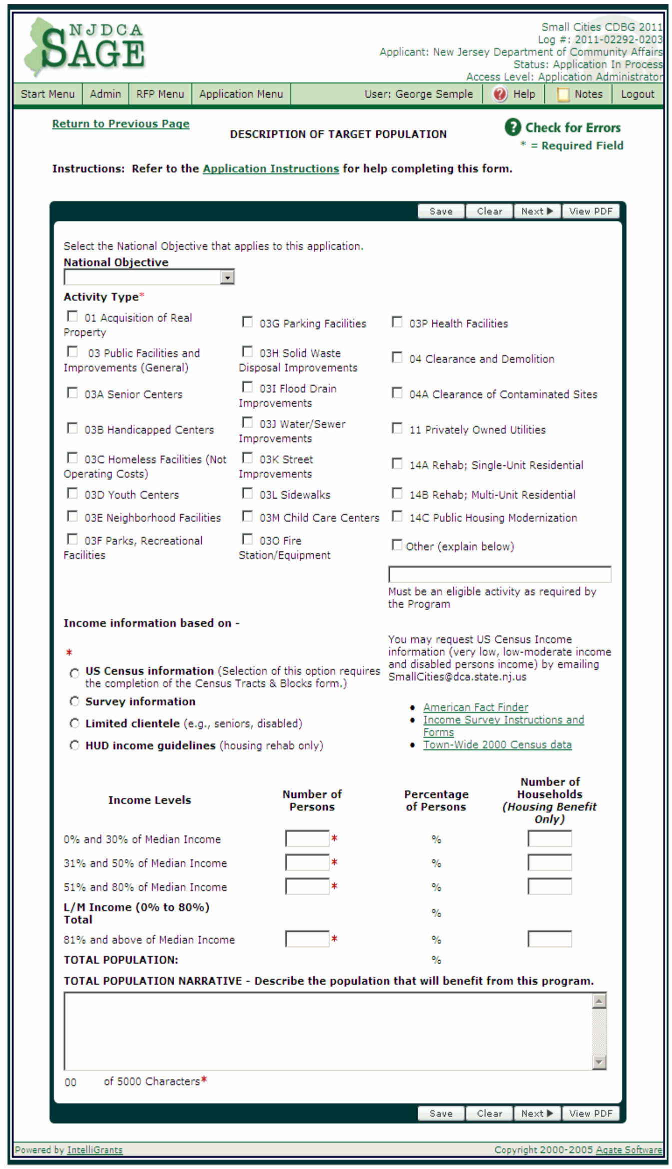
Application Instructions: (this document)

Program Handbooks on grant compliance items: http://www.nj.gov/dca/divisions/dhcr/offices/cdbg.html.



Description of Target Population

National Objective



Select the most appropriate national objective from the drop down box. You may select only one national objective: Low and Moderate Income Benefit, Slums and Blight Elimination, and Urgent Need

Refer to the Appendix for compliance with a national objective.

- Click on the radio button for the type of **activity** —

01 Acquisition of Real Property
03 Public Facilities and Improvements (General)
03A Senior Centers
03B Handicapped Centers
03C Homeless facilities (Not Operating Costs)
03D Youth Centers
03E Neighborhood Facilities
03F Parks, Recreational Facilities
03G Parking Facilities
03H Solid Waste Disposal Improvements
03I Flood Drain Improvements
03J Water/Sewer Improvements
03K Street Improvements
03L Sidewalks
03M Child Care Centers
03O Fire Station/Equipment
03P Health Facilities
04 Clearance and Demolition
04A Clearance of Contaminated Sites
08 Relocation
11 Privately Owned Utilities
14A Rehab; Single-Unit Residential
14B Rehab; Multi-Unit Residential
14C Public Housing Modernization
Other (explain below)

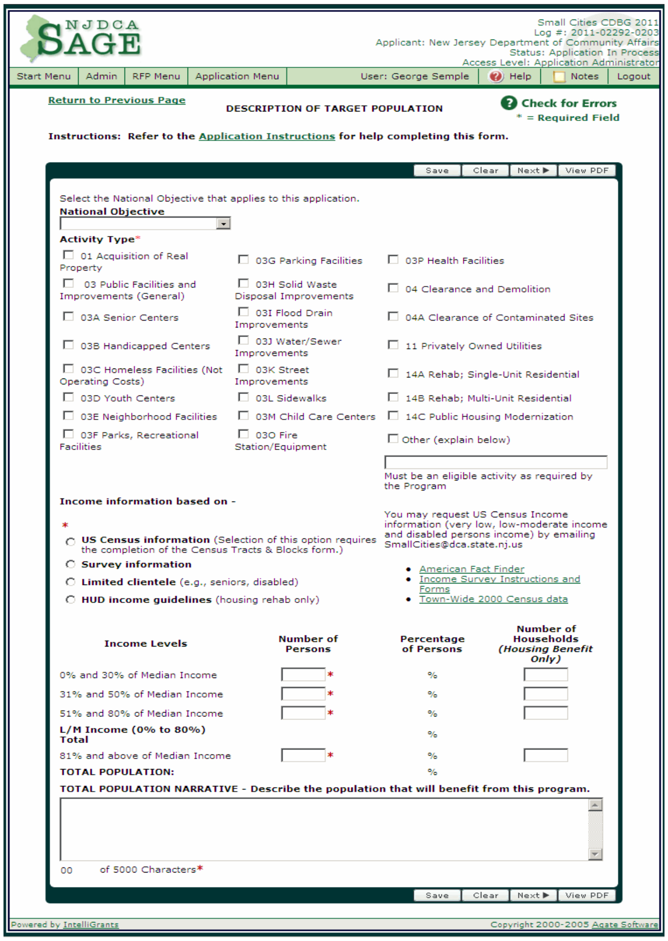
Income information based on -

• Select the radio button for the source of the information; select one.

• Enter information in the **Number of Persons** column. The system will calculate the percentage.(continued)

Description of Target Population (continued)

Income Levels



NJDCA SAGE

Small Cities CDBG 2011
Log #: 2011-02292-0203
Applicant: New Jersey Department of Community Affairs
Status: Application In Process
Access Level: Application Administrator

Start Menu | Admin | RFP Menu | Application Menu | User: George Semple | Help | Notes | Logout

Return to Previous Page

DESCRIPTION OF TARGET POPULATION

Check for Errors
* = Required Field

Instructions: Refer to the Application Instructions for help completing this form.

Save | Clear | Next ▶ | View PDF

Select the National Objective that applies to this application.

National Objective

Activity Type*

- 01 Acquisition of Real Property
- 03 Public Facilities and Improvements (General)
- 03A Senior Centers
- 03B Handicapped Centers
- 03C Homeless Facilities (Not Operating Costs)
- 03D Youth Centers
- 03E Neighborhood Facilities
- 03F Parks, Recreational Facilities
- 03G Parking Facilities
- 03H Solid Waste Disposal Improvements
- 03I Flood Drain Improvements
- 03J Water/Sewer Improvements
- 03K Street Improvements
- 03L Sidewalks
- 03M Child Care Centers
- 03O Fire Station/Equipment
- 03P Health Facilities
- 04 Clearance and Demolition
- 04A Clearance of Contaminated Sites
- 11 Privately Owned Utilities
- 14A Rehab; Single-Unit Residential
- 14B Rehab; Multi-Unit Residential
- 14C Public Housing Modernization
- Other (explain below)

Must be an eligible activity as required by the Program

Income information based on - *

- **US Census information** (Selection of this option requires the completion of the Census Tracts & Blocks form.)
- **Survey information**
- **Limited clientele** (e.g., seniors, disabled)
- **HUD income guidelines** (housing rehab only)

You may request US Census Income information (very low, low-moderate income and disabled persons income) by emailing SmallCities@dca.state.nj.us

- American Fact Finder
- Income Survey Instructions and Forms
- Town-Wide 2000 Census data

Income Levels	Number of Persons	Percentage of Persons	Number of Households *(Housing Benefit Only)*
0% and 30% of Median Income	*	%	
31% and 50% of Median Income	*	%	
51% and 80% of Median Income	*	%	
L/M Income (0% to 80%) Total		%	
81% and above of Median Income	*	%	
TOTAL POPULATION:		%	

TOTAL POPULATION NARRATIVE - Describe the population that will benefit from this program.

00 of 5000 Characters*

Save | Clear | Next ▶ | View PDF

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• Enter the **Number of Households** column (Housing Benefit only)
If your National Objective is:

- Low/Mod Housing Benefit: Provide the estimated number of persons served AND the estimated number of Households in the appropriate boxes.

- Low/Mod Area Wide – Census – (LMA): Provide the estimated number of persons served. This information is based on US Census data which can be obtained using the hyperlink to the NJ Income Calculator.

- Low/Mod Area Wide – Survey – (LMA) Provide the estimated number of persons served. This information is obtained from your Income Survey. Instructions and forms are located at the Income Survey Instructions and forms hyperlink in SAGE

- Low/Moderate Limited Clientele – (LMC): Provide the estimated number of persons to be served. If you are serving senior citizens, use the American FactFinder hyperlink in SAGE and find the number of persons over 65 in your service area. If you are serving disabled persons, use the NJ Disabled Persons Calculator hyperlink in SAGE. For other limited clientele categories, contact the Small Cities Program staff.

- Slums/Blight Area Benefit (SBA) – Provide the estimated number of persons served. This information is based on US Census data which can be obtained using the hyperlink to the NJ Income Calculator. (You must provide income information, even though benefit is not based on income. See the **Documentation of Needs & Costs** section for instructions regarding documentation of Slums/Blight objective.)

- Low/Mod Job Benefit (if applicable) – Provide the estimated number of full time equivalent jobs, both retained and to be created.

- Urgent Need (URG): Provide the estimated number of persons served. This information is based on US Census data which can be obtained using the hyperlink to the NJ Income Calculator.

Target Population Narrative

• Describe the population that will benefit from this program; please be brief.

Census Tracts and Blocks

You must identify all the Census Tracts and/or Blocks that fall within your Service Area. This section of the application will only appear for public facilities and innovative development type applications.

- Enter the number of the **Census Tract** that is in your Service Area. Use the format "nnnn.nn" (e.g., input Census tract 0450.00)
- Click the radio button for **Entire Tract** if your Service Area covers the entire Tract
- Click the radio button for **Partial Tract** if your Service Area includes one or more **Block Groups** within the Tract, but not the entire Tract
- If you selected **Partial Tract**, enter the **Block Group #** for each block that is within your Service Area
- Click **Save**
- Click **Add** to enter additional Census Tracts and Blocks, if needed
- Enter County Code in the box provided from the US Census (e.g., input 027)

Matching Funds/Needs & Costs

Matching Funds

Applicants must match a portion of the grant. The size of the match is determined by the Applicant's Municipal Distress Index (MDI). (Refer to the attached table of Eligible Municipalities and Counties with Municipal Distress Index, MDI) Matching requirements not met in the form of a cash contribution must be consistent with the budgetary guidelines established by the Program. Costs to complete compliance items may be applied towards matching funds. (See Add Budget Detail in Budget Overview Section for details.)

MDI Rank	Matching Share
0 to 100	5%
101 to 200	10%
201 to 300	15%
301 to 400	20%
401 and above	25%

Documentation of Needs and Costs (No Form, see also Attachment Section). Each of the following (a. through e.) must be addressed and then mailed or uploaded in the attachment section.

a. The problem your proposed project will address. How long the problem has existed and how it developed. Be specific.

b. The extent to which the proposed project provides a long-term solution to the problem you have identified. Indicate the source of operating expenses for new facilities (e.g. senior centers, community centers).

c. Deficiencies with a certification from a qualified person or persons who is /are not employed in any manner by the applicant. This person must address the specific problem or problems that you have identified and intend to correct with the Small Cities funds requested. Projects that clearly address a severe situation affecting the health or safety of the residents of the service area must provide evidence in this section.

   The certification of deficiencies must be included in this section or it will not be given credit. Do not include letters of support from local residents or others with this item.

d. Document costs with a certification from a person qualified in the field, such as an architect or engineer. The cost estimate must appear on the letterhead of the qualified person's firm and bear an original signature of the person. This documentation must be included in this section.

Since the Davis-Bacon and NJ Prevailing Wage Acts apply to projects assisted with Small Cities funds, whoever provides the cost estimates must certify that prevailing wage rates were used in developing the estimate.

e. Provide photographs that describe the proposed project.

Community Development and Housing Needs Statement

Applicants must provide a **Community Development and Housing Needs Statement** consisting of three components -- community development needs, housing needs and applicable land use plans. The following must be addressed then mailed or uploaded in the attachment section.

Community Development Needs

In preparing this component of the Statement the applicant must address at least the following categories:

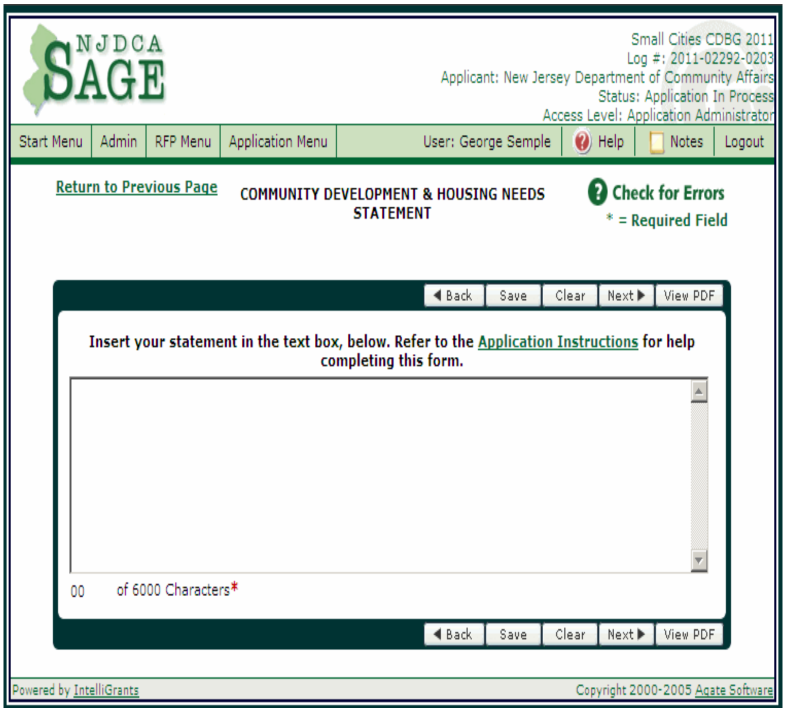
a. Non-residential development (e.g., commercial, major employers, business recruitment strategies)
b. Parks and recreation facilities and open space areas
c. Infrastructure (e.g., water supply, wastewater, transportation network)
d. Public buildings (e.g., senior/community centers, schools, libraries)

If there is no need for improvement in any category, the applicant must provide supporting evidence. Where there are particular needs -- even if they are not addressed through this Small Cities application -- the applicant must describe each need identified, the source of the information provided, the affect on people of low or moderate income, and identify actions taken or proposed to address the need.

Housing Needs

In preparing this component of the Statement, the applicant must address at least the following categories: rental housing, manufactured housing, existing owner-occupied housing stock, and impediments to new affordable housing development. If there is no need for action to improve conditions in any one category, the reason for that conclusion must be indicated. Where needs are identified, each must be described, information sources and the affect on people of low or moderate income indicated, and actions taken or proposed to address the need presented. The applicant must also indicate the date of the most recent housing element or comparable study and the applicant's current COAH status.

Community Development and Housing Needs Statement (continued)



<u>Status of Planning</u>

In this component of the Statement, the applicant must address the status of planning by the applicant and by each participating unit of government (in cases where more than one municipality is included within the scope of the proposed program). Information presented must include the following:

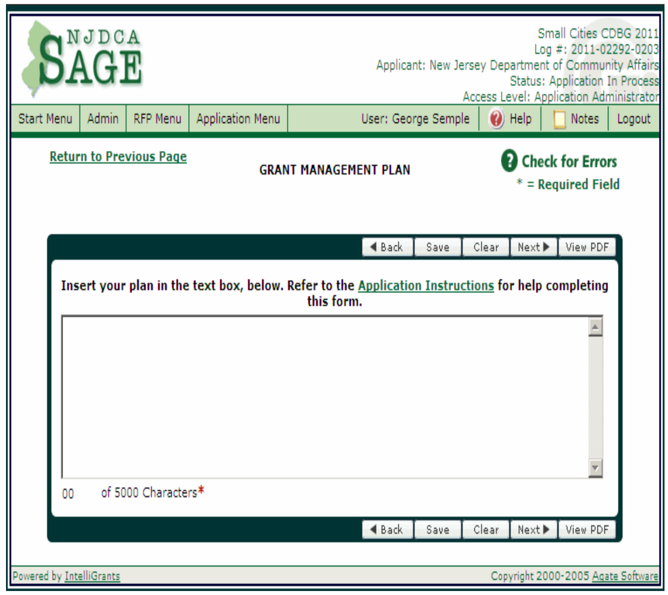
- the date of the most recent master plan adoption or re-evaluation;
- the relationship of local/county plans to higher level plans (e.g., Pinelands Plan, State Development and Redevelopment Plan, county cross-accepted plans, endorsed plans, center designation); and
- the relationship of the proposed project to the plans identified **(most important part of this section)**.

Grant Management Plan

The Small Cities Community Development Block Grant Program requires a great deal of administrative oversight. The federal statute and implementing regulations as well as all other applicable laws require careful attention by qualified people selected by the grantee. Because administration is so important in implementing a Small Cities project, the grantee must submit a GRANT MANAGEMENT PLAN to the Department for approval. The GRANT MANAGEMENT PLAN must:

1. Identify one person, either an employee or elected official, as Project Director. The Project Director shall be responsible for overseeing all grant activities and must certify that Monthly Fiscal and Program Progress Reports are accurate.
2. Identify one person as Project Coordinator with overall responsibility for day to day administration of the grant and liaison with the Small Cities Program. The Project Coordinator may be an employee or consultant hired by the Grantee for this purpose, but may not be the Project Director or Chief Financial Officer for that unit of local government (i.e., the grantee).
3. Identify the person serving as Chief Financial Officer for the grantee who will be responsible for fiscal administration of this grant.

Grant Management Plan (continued)



4. Persons serving in any of the above administrative positions may not serve in any other official capacity related to this grant.
5. Identify all other persons having any responsibility for implementing the grant. Such persons may include housing inspectors or cost estimators, engineers, architects, Lead Paint Inspectors, and Labor Standards Compliance Officer (the Project Coordinator normally has responsibility for labor standards compliance, but exceptions are allowed in certain cases).
6. Identify all administrative tasks required to implement the grant, estimating the time it will take to complete them and specifying which person(s) identified above has direct responsibility for each task.
7. Provide a schedule which indicates when each task is to be undertaken and completed.
8. Provide names, qualifications, addresses (including e-mail), cell, and telephone/fax numbers of all persons identified above. Where a consultant is involved, all individuals participating in grant activities must be identified.
9. The Grant Management Plan must be approved by Resolution at an official meeting of the governing body, as well as any changes made in the future. Both the Grant Management Plan and Resolution must be submitted to your DCA Program Manager for approval.

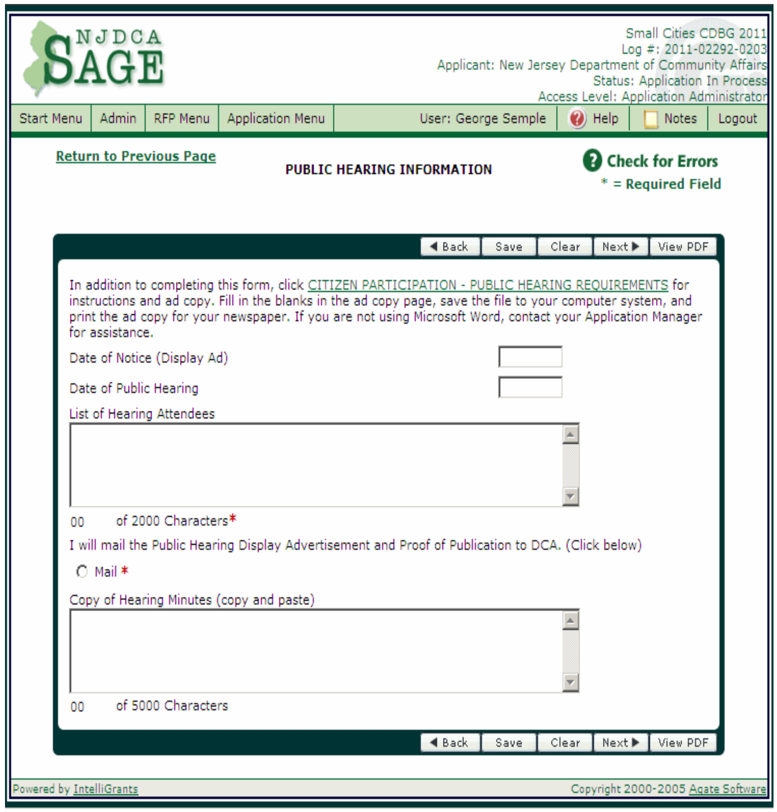
Public Hearing Information

All applicants must hold at least one public hearing prior to the submission of any application, **even if the application has been submitted before.** The purpose of this hearing is to discuss community development and housing needs and to develop proposed activities for Small Cities funding. If an award is made, a second public hearing will be required to review program performance.

Public Hearing (continued)

The first public hearing must be held at least 20 days before the application is submitted to the Department.

Each hearing must be held at a time and in a location convenient for actual or potential beneficiaries and with accommodations for the handicapped. If the area includes a significant number of non-English speaking residents, the advertisement and conduct of the hearing must facilitate their participation.



The hearing advertisement must appear at least 7 days prior to the hearing, **as a Display (non-legal) advertisement**, within a paper of general circulation serving the applicant's jurisdiction.

Federal regulations require that such advertisements must include at least the following information:

1. The amount of funds expected to be available for the current fiscal year;
2. The range of activities that may be undertaken with CDBG funds;
3. The estimated amount of the CDBG funds proposed to be used for activities that will meet the national objective of benefit to low and moderate income persons
4. A description of any proposed activities likely to result in the displacement or relocation of people; and
5. The name and address of the local official to whom written statements may be submitted regarding the applicant's proposal.

The Public Hearing Announcement must also inform citizens that comments regarding the application may be submitted to the New Jersey Department of Community Affairs, Small Cities Program, 5th Floor, PO Box 811, Trenton, NJ 08625-0811, during the ten days following the hearing. The model hearing notice that must be used is included in the Citizen Participation Plan Handbook on the Program's webpage at http://www.nj.gov/dca/divisions/dhcr/offices/cdbg.html.

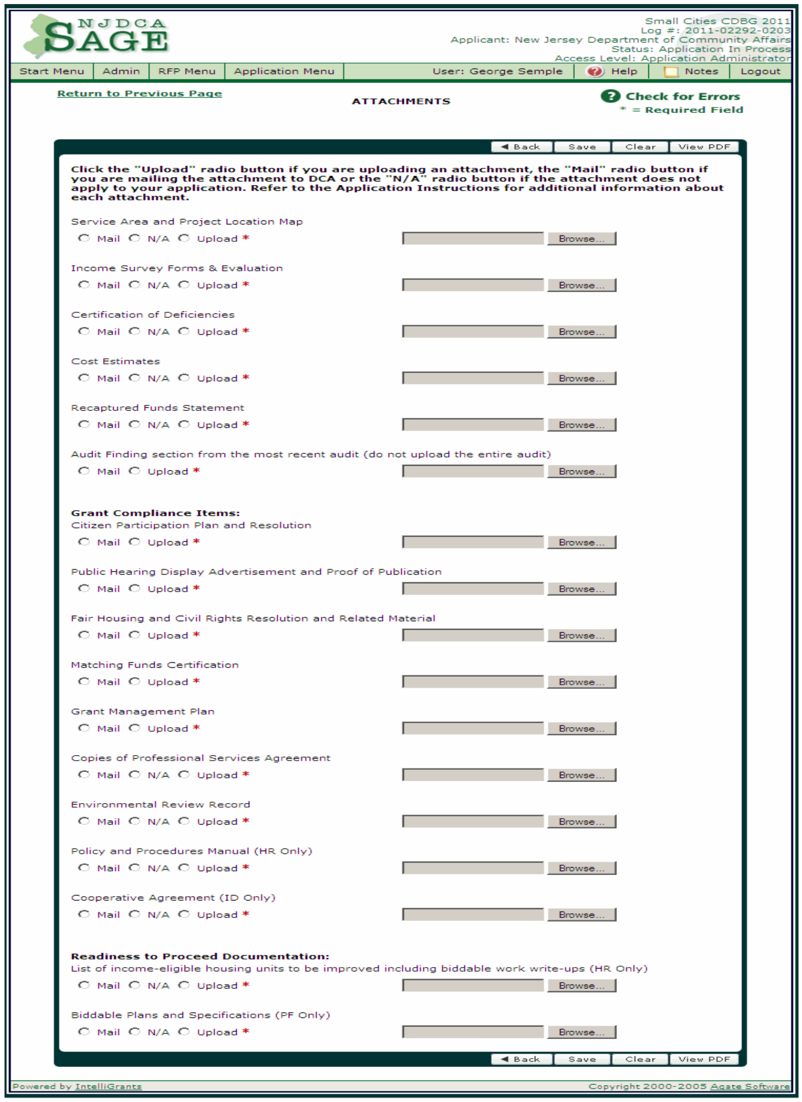
Copies of the published notice, proof of publication, and hearing minutes must be included as part of the application.

Applications that do not include evidence of compliance with public hearing requirements will be rejected.

Attachments

Click the appropriate radio button for each item, indicating whether you will mail or upload the attachment or that the attachment is not applicable to your organization.

If a resolution is required, and it has not been signed prior to the deadline for submission, a memorandum (indicating the date the resolution will be submitted and signed by the appropriate Official of your agency) must be forwarded to the Small Cities Program.



Service Area and Project Location Maps – Label a map of the project location or target area.

Income Survey Forms & Evaluation – Refer to the Income Survey Forms and Instruction on the Small Cities web page –

Certification of Deficiencies – Refer to Matching Funds/Needs & Cost

Cost Estimates – Refer to Matching Funds/Needs & Cost

Audit Finding – section from the most recent audit (<u>do</u> <u>not</u> upload the entire audit)

Recaptured Funds Statement – 1. list the total amount of program income recaptured from prior Small Cities Program grants (e.g., housing rehabilitation, economic development); 2. describe any activities carried out with recaptured funds; 3. indicate the amount of funds spent on each activity and the balance of funds currently available. Documentation must include a bank or accounting statement certified by the CFO.

Attachments (continued)

Grant Compliance Items:

Citizen Participation Plan and Resolution

Public Hearing Display Advertisement and Proof of Publication

Fair Housing and Civil Rights Resolution and Related Material

Matching Funds Certification

Grant Management Plan

Copies of Professional Services Agreements

Environmental Review Record

Policy and Procedures Manual (HR Only)

Cooperative Agreement (ID Only)

Readiness to Proceed Documentation:

List of income-eligible housing units to be improved including cost write-ups (HR Only), must provide at least three or more to receive points,

Biddable Plans and Specifications (PF Only)

Application Budget Information Forms

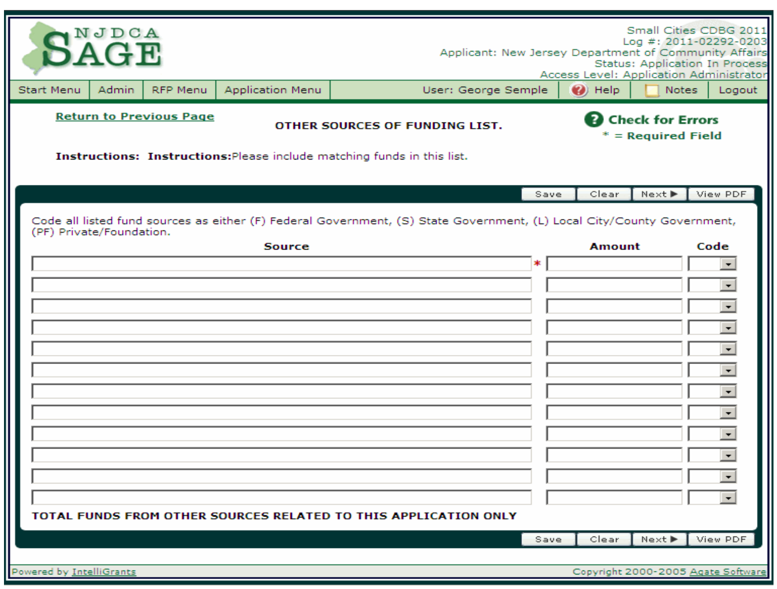
Other Sources of Funding

List the activities in this project that will be funded in whole or in part from sources, either public or private, other than the Small Cities Program. Include funds that are specifically committed to this project including matching funds.

Other Sources of Funding List

Verify the commitment of other funds with documentation from each source stating the amount, terms, conditions and duration of the commitment relating to this project.

.



Certification Sheets

Required fields are marked with an asterisk (*). If you have no information for a field or it doesn't apply to your agency or program, enter **N/A** or **0** (zero).

Contact your Application Manager if you have questions about the type of information required in any of the forms.

Certification Sheets

- Items 1 through 5—

  Select **Yes** or **No** to each item listed, or, if an item does not apply to your organization, select **N/A.**

  If you answered **No** to item 5, enter your explanation in the text field provided

- Items 6 and 7 apply to **non-government** agencies only

  Item 6

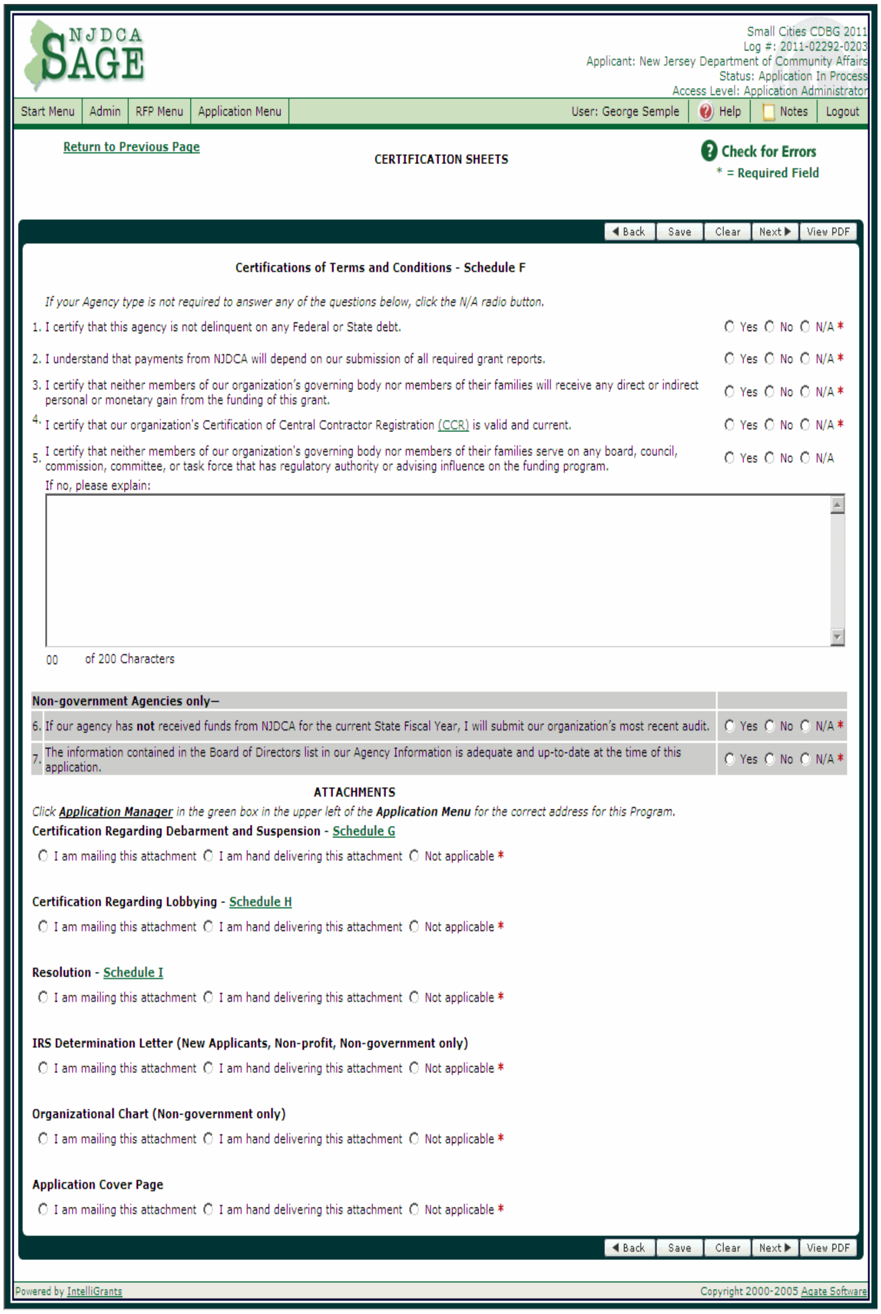
  If you ***have*** received a grant from DCA within the current fiscal year, click **N/A**

  If you ***have not*** received a grant from DCA within the current fiscal year, click **Yes**

  Item 7

  The Board of Directors list in your Agency Information must be current

  If you need to modify the list, follow the procedures outlined in **Mid-year changes to your Agency Information Update** in the **DCA SAGE User Manual**



NJDCA SAGE

Small Cities CDBG 2011
Log #: 2011-02292-0203
Applicant: New Jersey Department of Community Affairs
Status: Application In Process
Access Level: Application Administrator

Start Menu | Admin | RFP Menu | Application Menu | User: George Semple | Help | Notes | Logout

Return to Previous Page

CERTIFICATION SHEETS

Check for Errors
* = Required Field

Back | Save | Clear | Next | View PDF

Certifications of Terms and Conditions - Schedule F

If your Agency type is not required to answer any of the questions below, click the N/A radio button.

1. I certify that this agency is not delinquent on any Federal or State debt. ○ Yes ○ No ○ N/A *
2. I understand that payments from NJDCA will depend on our submission of all required grant reports. ○ Yes ○ No ○ N/A *
3. I certify that neither members of our organization's governing body nor members of their families will receive any direct or indirect personal or monetary gain from the funding of this grant. ○ Yes ○ No ○ N/A *
4. I certify that our organization's Certification of Central Contractor Registration (CCR) is valid and current. ○ Yes ○ No ○ N/A *
5. I certify that neither members of our organization's governing body nor members of their families serve on any board, council, commission, committee, or task force that has regulatory authority or advising influence on the funding program. ○ Yes ○ No ○ N/A

If no, please explain:

00 of 200 Characters

Non-government Agencies only–

6. If our agency has **not** received funds from NJDCA for the current State Fiscal Year, I will submit our organization's most recent audit. ○ Yes ○ No ○ N/A *
7. The information contained in the Board of Directors list in our Agency Information is adequate and up-to-date at the time of this application. ○ Yes ○ No ○ N/A *

ATTACHMENTS

*Click **Application Manager** in the green box in the upper left of the **Application Menu** for the correct address for this Program.*

Certification Regarding Debarment and Suspension - Schedule G

○ I am mailing this attachment ○ I am hand delivering this attachment ○ Not applicable *

Certification Regarding Lobbying - Schedule H

○ I am mailing this attachment ○ I am hand delivering this attachment ○ Not applicable *

Resolution - Schedule I

○ I am mailing this attachment ○ I am hand delivering this attachment ○ Not applicable *

IRS Determination Letter (New Applicants, Non-profit, Non-government only)

○ I am mailing this attachment ○ I am hand delivering this attachment ○ Not applicable *

Organizational Chart (Non-government only)

○ I am mailing this attachment ○ I am hand delivering this attachment ○ Not applicable *

Application Cover Page

○ I am mailing this attachment ○ I am hand delivering this attachment ○ Not applicable *

Back | Save | Clear | Next | View PDF

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Certification Sheets (continued)

ATTACHMENTS

- Click the appropriate radio button for each item, indicating whether you will mail or hand deliver the attachment or that the attachment is not applicable to your organization.
- When you click the link to **Schedules G**, **H**, and **I**, each form is displayed as an Adobe PDF document. **Print** each of the forms from this window. Forward each signed document to DCA. Go to http://www.adobe.com if you need Adobe PDF instructions.
- If a resolution is required, and it has not been signed prior to the deadline for submission, a memorandum (indicating the date the resolution will be submitted and signed by the appropriate Official of your agency) must be forwarded to your DCA Grant Program.

Budget Overview (right side of the application)

Budget Pages

This is an overview of the budget setup from the left side of the application. The budget pages can be accessed from the right and left sides of the application. Click on the Budget Detail to review the table and make sure that all figures are correct, or enter the information.

Using the following guidelines, prepare a budget for your Small Cities project that includes Small Cities and matching funds. If your project is funded, this information may be used to prepare a grant agreement.

NOTE: If an award is made, it may be necessary to explain why consultant and contract service fees exceed guidelines established by the Department. The **maximum** amounts permitted are as follows:

<u>BUDGET GUIDELINES</u>

Public Facilities

- 12% of programmatic costs for engineering or design (including inspection services); and
- 6% of the grant award for a full administrative consultant services agreement (including preparing the Environmental Review Record and other compliance documents and reports to the Department; assuring labor standards compliance; and participating in monitoring visits by the Department). Credit towards matching funds can be granted for compliance items and related administration costs, limits set by the Program, that have been incurred before an award date if the application is funded.

Housing Rehabilitation

- $2,700 per unit of programmatic costs for Case Management and Housing Inspection Services.
- $14,850 of the grant award for a <u>full</u> administrative consultant services agreement (including preparation of the Environmental Review Record, preparation of the Rehabilitation Policy & Procedures Manual, monthly fiscal and program reporting, satisfy other federal assurances, final performance report, and on-going technical assistance including monitoring visits).

Note: Lead evaluation & clearance fees are considered programmatic costs (at least two proposals shall be obtained).

Credit towards matching funds can be granted for compliance items and related administration costs, limits set by the Program, that have been incurred before an award date if the application is funded.

Budget Overview (continued)

The fee schedule is applied as a maximum standard when preparing grant agreement budgets. The assumption is hourly consultant charges are $150 per hour. Add-ons for consumables, travel, and equipment are not permitted.

Consultant Fee Schedule:

Administrative	Hours
Citizen Participation (includes resolution, notice & hearing)	5
Rehabilitation Policy & Procedure Manual (includes preparation & resolution)	5
Environmental Review Record & Release (add 12 Hours for floodplain)	20
Housing & Community Development Needs Statement	4
Grant Management Plan	4
Action to further Fair Housing & Civil Rights	4
Quarterly Progress & Fiscal Reporting	24
DCA Monitoring Visits (2)	8
General Administrative Services (including meetings with local officials, recordkeeping & file maintenance)	20
Final Closeout Report	5
Program	Hours
Housing Rehabilitation Case Management	10 (Per Unit)
Housing Inspections	8 (Per Unit)

Hours for specific tasks may be increased if there are compelling reasons to do so. The following are examples of compelling reasons:

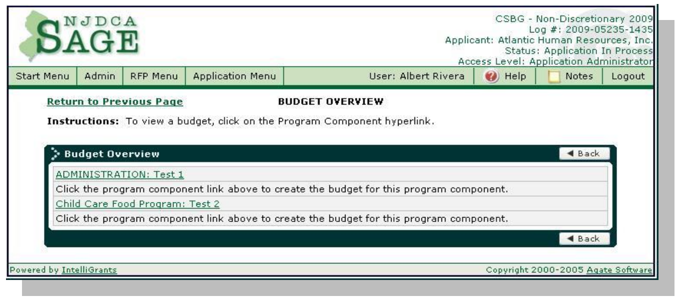
- Environmental Review Record requires unusual compliance activity necessitating additional time to complete;
- The Policy & Procedure Manual must be fully created for a first-time grantee necessitating more consultant staff time.
- Unanticipated additional time must be spent marketing the program to homeowners.

Budget Overview (continued)

To create your Project/Program budget in SAGE—

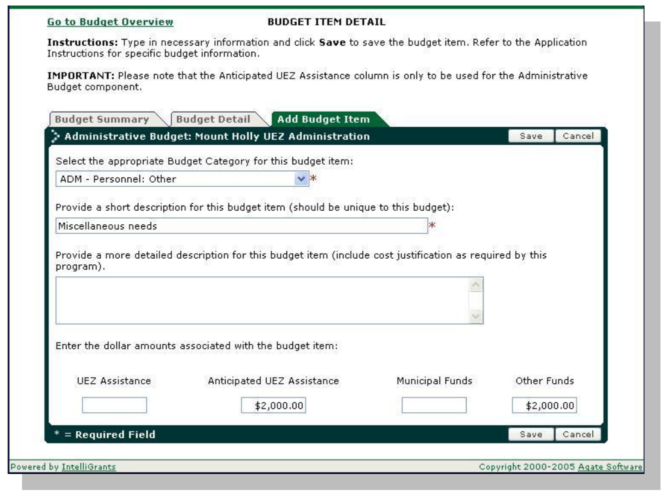
- Click on Budget Overview at the bottom of the **Application Forms** list.

  Each of the **Program Components** you selected will be displayed as a hyperlink on the **Budget Overview** page.



- Click on the appropriate Program Component hyperlink; it will take you to the **Budget Detail** page for that component.

- Click the **Add a Budget Item** tab.
- Select a **Budget Category** from the drop down list in the top field.
- Fill in the **Provide a short description for this budget item** field.
- Fill in the **Provide a more detailed description of this budget item** field.
- Enter the amount(s) you are requesting in the appropriate field(s).
- If your program requires matching funds, enter the amount in the field.

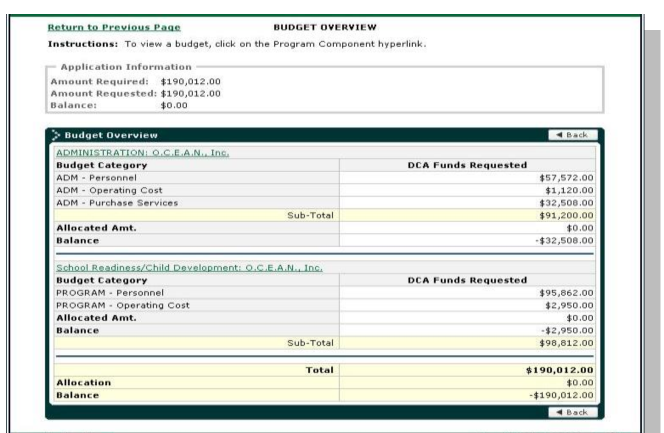


- **Save**. Continue adding Budget Items until you have added all the items for this component of your program

If your program has more than one **Program Component**—

- Click Go to Budget Overview at the top left of the page.
- Select another Budget Component hyperlink and create its budget, following the instructions above.
- Continue this process until you have created the Budget for each Program Component.

SAGE will create the budget for each component and accumulate the totals into the combined program budget..



Procurement Material

If your program will use SCP funds for grant management, engineering, architectural, lead evaluation, and inspections services the materials for documenting compliance with competitive contracting must be uploaded for funding consideration.

Grantee shall upload the following in Certifications Sheets section of the SAGE application, see bottom for two locations to upload files:

1) Municipal resolution committing to Competitive Contracting procurement process N.J.S.A. 40A:11-4.1 thru 40A:11-4.5 (no threshold will apply) and
   a. commit to the process of competitive contracting
   b. strives to obtain three or more proposals, and
   c. proceeds with the RFP evaluation process if at least two or more proposals are received

2) A copy of the notice of the availability of request for proposal documentation shall be published in an official newspaper of the contracting unit <u>at least 20 days</u> prior to the date established for the submission of proposals.

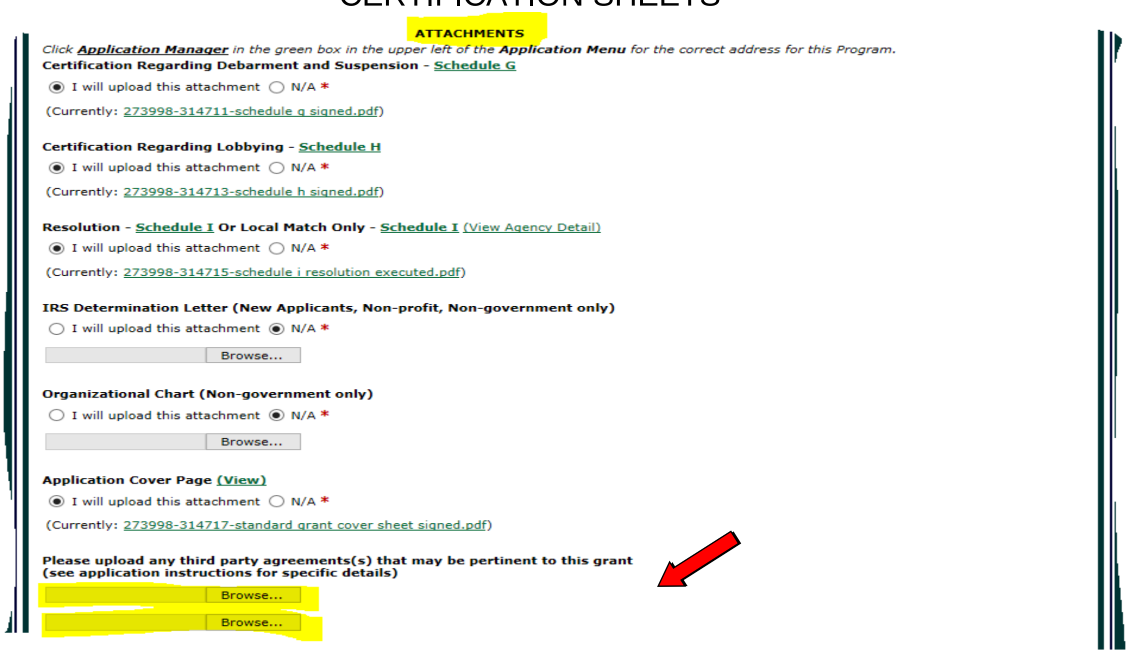
3) A copy of the Request for Proposal (RFP) for services that includes a notice that cost will be one of the evaluation factors.

4) A copy of the purchasing agent or counsel or administrator report evaluating and recommending the award of a contract. The report shall be made available to the public at least 48 hours prior to the awarding of the contract.

5) A copy of the resolution of the governing body of the contracting unit awarding the contract within 60 days of the receipt of the proposals.

6) A copy of the notice published in the official newspaper of the contracting unit summarizing the award of a contract.

CERTIFICATION SHEETS


ATTACHMENTS

*Click **Application Manager** in the green box in the upper left of the **Application Menu** for the correct address for this Program.*

Certification Regarding Debarment and Suspension - Schedule G
I will upload this attachment N/A *
(Currently: 273998-314711-schedule g signed.pdf)

Certification Regarding Lobbying - Schedule H
I will upload this attachment N/A *
(Currently: 273998-314713-schedule h signed.pdf)

Resolution - Schedule I Or Local Match Only - Schedule I (View Agency Detail)
I will upload this attachment N/A *
(Currently: 273998-314715-schedule i resolution executed.pdf)

IRS Determination Letter (New Applicants, Non-profit, Non-government only)
I will upload this attachment N/A *
Browse...

Organizational Chart (Non-government only)
I will upload this attachment N/A *
Browse...

Application Cover Page (View)
I will upload this attachment N/A *
(Currently: 273998-314717-standard grant cover sheet signed.pdf)

Please upload any third party agreements(s) that may be pertinent to this grant (see application instructions for specific details)
Browse...
Browse...

Submission Requirements

Attachments

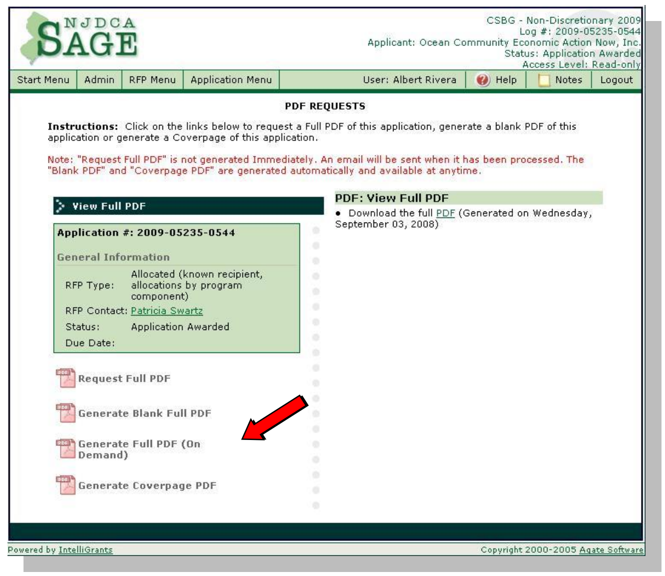
Attachments are additional documents that must be submitted with the application. Some attachments can be uploaded electronically; some must be signed and mailed. Click the **Expected Attachments** hyperlink on the left side of the **Application Menu** (under **Application Information**) for a list of the documents that must be forwarded to the Small Cities Program. Refer to the Appendix for more information on Submission Requirements.

Address

Click the **Application Manager** hyperlink in the green box at the top left of the **SAGE Application Menu** for the correct address.

***Printing the Application** (optional)*

- Click **Application PDF** (lower left of the Application Menu)
- Click **Generate Full PDF**



A full version of the application will be produced overnight, which can be printed or saved for your records. You will receive an email when the file is ready, and you can retrieve it from the same screen. Go to http://www.adobe.com if you need Adobe Acrobat instructions.

Printing the Application Cover Sheet

- Click **Application PDF** (lower left of the Application screen)
- Click **Generate Coverpage PDF**
- **Print** the document

Submitting the Application

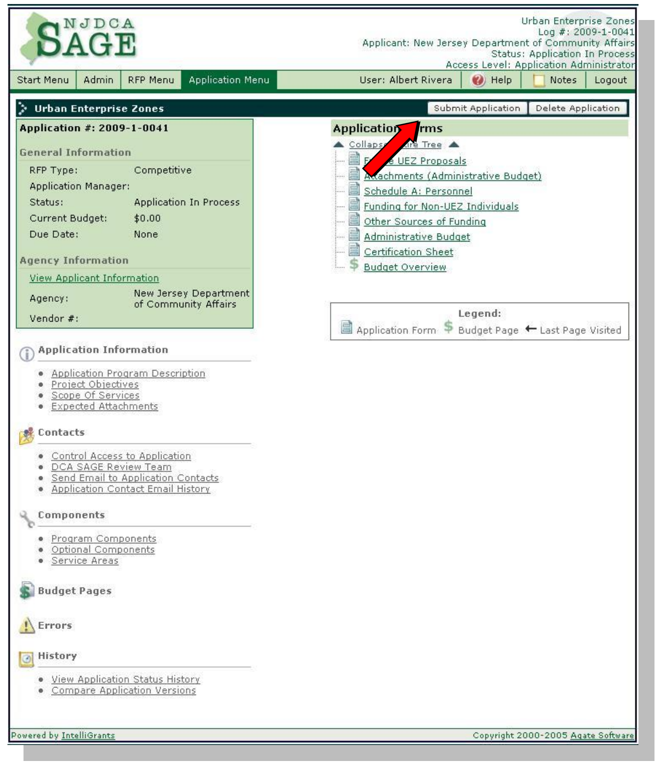
When you have completed all the Application Forms, Certifications, and Budget—

- Click the **Submit Application** button on the upper right side of the Application Menu.

This task must be performed by your SAGE **Agency Authorized Official** or SAGE **Agency Administrator**.

If the application has input errors, the system will alert you. Correct them and click **Submit Application.** If you have trouble submitting the application, contact your Application Manager.

Be sure to turn pop-up blockers OFF in your Internet browser or you may not be able to see the explanations of the errors.

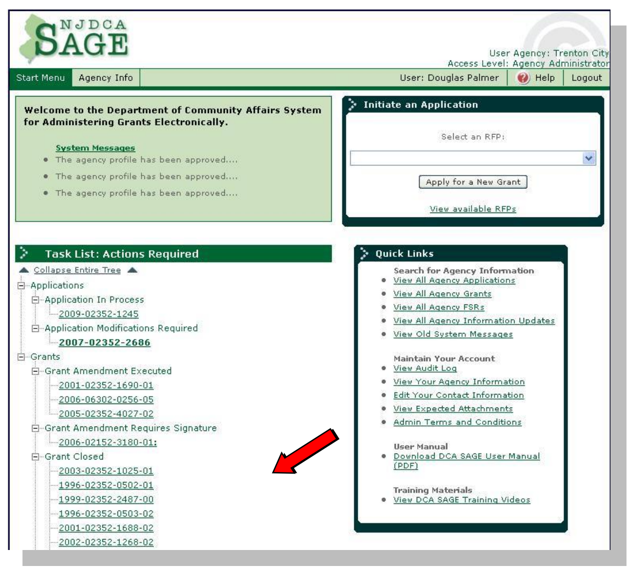


After you submit…

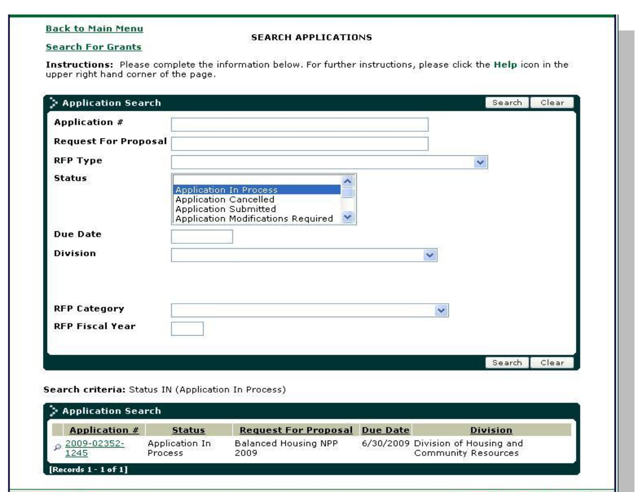
You cannot modify an application once it is submitted. Your Application Managers must send it back to you (in SAGE) as "Modifications Required." If you think you've made a mistake or omitted important information, contact your Application Manger.

After you submit an application, it disappears from your **Task List**. To access a submitted application, on your **Start Menu**, in **Quick Links**—

- Click **View All Agency Applications**



- At the **Search** screen, click **Clear** to erase any previously entered criteria
- If desired, enter or select criteria to narrow down your search
- Click **Search**
- Scroll down to see your results at the bottom of the page
- To access an application, click on its magnifying glass



APPENDIX

Compliance with National Objectives

Applicants must document how each activity for Small Cities assistance addresses at least one of the national objectives of the Housing and Community Development Act of 1974:

1.) primarily benefit people of low and moderate-income,

2.) prevent or eliminate slums or blight,

3.) address an urgent need of recent origin when no other funds are available

If your application is intended to primarily benefit people of low and moderate-income and to eliminate slums or blight, please follow the instructions below and the application instructions in this document. If you are claiming 3, contact the Small Cites CDBG Program at 609-633-6283 for guidance.

Benefit to Low and Moderate-Income People (Public Facilities and Innovative Development)

The calculation of your project's benefit to low and moderate-income people is a two step process. First the percentage benefit must be calculated for each activity. Then the separate calculations must be combined to obtain a percentage benefit for your Public Facilities project as a whole. Before you start your calculations, take a moment to understand the following standards, definitions, and requirements.

<u>Definition of Low and Moderate Income</u>

Low and moderate income people are those having incomes not more than the "moderate-income' level set by the federal government for the HUD assisted Housing Program. This income standard changes from year to year and varies by household size and the metropolitan statistical area. The most recent standard is included in the HUD Income Guidelines for Small Cities Eligible Communities on the Small Cities Program's webpage under General Information.

<u>Benefit Requirements</u>

For each activity principally benefiting low and moderate income people the applicant must document that:

1.) those served by the activity are presumed to be low and moderate-income (e.g., removing architectural barriers in the public building, developing centers for senior citizens) provide 100 percent benefit to persons of low and moderate-income; or

2.) at least 51 percent of the people in an area served by the activity are low and moderate-income.

<u>Areawide Documentation (Required only if claiming number 2 above)</u>

To document that the activity primarily benefits people of low and moderate income, the applicant must determine the area that will be served by each activity and submit one or more maps that show clearly:

a. the extent of the facility service area;

b. the location of the specific structures and facilities to be assisted with Small Cities CDBG Program funds;

c. the names of the streets in the facility service area;

d. a delineation of all structures by use with vacant structures noted; and

e. the Census tracts and block groups and their boundaries within which part or all of the facility service area is located.

Document each claim for areawide low and moderate-income benefit with the most recent US Census data or with a current income survey of area residents. Surveys must be conducted within 18 months of the application's submission.

Census: If the area that will benefit is the entire municipality or a discrete Census area, submit the low and moderate income percentage of the Census area. You may obtain low and moderate-income percentages from the Small Cities program, if you identify the specific Census area(s) in which the proposed activity is to take place. Census data is available on the Small Cities Program's webpage.

Note: If the area of benefit is smaller than the smallest Census area, you may still use the Census information rather than conduct a survey IF the area of benefit contains at least 50 percent of the total number of people residing in the complete Census area. **However, Census data covering an area smaller than a block group is not acceptable.**

Survey: If the service area cannot be described with Census data, you must conduct an income survey using the Low/Moderate Income Benefit Worksheet and Income Survey Form included in the Instructions for completing an Income Survey on the Small Cities Program's website.

Note: The applicant or grantee must show how the percentage of LMI persons was calculated. The percentage of LMI persons must be calculated from the entire population of the service area, and not from the proportion of participants who responded to the survey. If for example, a town in rural America with a population of 640 conducts a census of the entire population to determine the percentage of LMI persons, and gets an 80 percent response rate. Fifty-one percent of 640 is 326, and 80 percent of 640 is 512. Of the 512 respondents, 326 of them should be LMI persons. It is inaccurate to use 51 percent of 512 which is 261. (HUD, Notice CPD-05-06, July 26, 2005)

Housing Programs

All housing rehabilitation programs must be targeted to people of low and moderate-income, as defined by the US Department of Housing and Urban Development. The HUD Income Guidelines for Small Cities Eligible Communities are posted on the Small Cities Program's webpage under General Information.

Preventing or Elimination of Slums or Blight

Applicants who claim that their activities meet the national objective of elimination or preventing slums or blight (rather than claiming benefit to low and moderate income people) must document this claim by showing that the activities proposed will be carried out in an "area in need of rehabilitation" or a "redevelopment area" as set forth in the New Jersey Local Redevelopment and Housing Law (NJSA 40A:12A).

Scope of Services Models

Housing Rehabilitation

The Grantee shall use up to $ __________ of Community Development Block Grant Funds provided under this grant agreement to implement a program to rehabilitate approximately __ units of owner-occupied housing located throughout the Borough/City/Town/Township and to administer the grant agreement. These are eligible activities under the provisions of Section 105 of the Housing and Community Development Act of 1974 as amended. The program will serve approximately ___ residents of low and moderate income.

The rehabilitation program will benefit approximately __ households of low and moderate income. Low and moderate income is defined as the combined household and/or family income that does not exceed the Section 8 Income Limits for the residents of the County of ______ as determined by the federal Department of Housing and Urban Development, effective May 14, 2010 and as appended to this grant agreement as Section C, Exhibit II, or as may be subsequently revised by the agency.

Scope of Services Models (continued)

Public Facilities

The Grantee shall use up to $ ________ of Community Development Block Grant Funds provided under this grant agreement to reconstruct ________________ and ____________ Streets, including reconstruction and replacement of drainage, roadway, curbing, sidewalks, water and sewer infrastructure, and to administer the grant.

These are eligible activities under the provisions of Section 105 of the Housing and Community Development Act of 1974 as amended. The program will serve approximately ______ residents, of whom ______ are people of low and moderate income.

Submission Requirements

All public facilities and housing rehabilitation applications must be submitted electronically in SAGE by the deadline. The attachments, certifications and supportive documents that accompany the electronic submission must be submitted in the form of two originals in a loose-leaf or other type of binder (8 ½ by 11 inches). Place dividers between all sections and major documents and label them to correspond with the table of contents.

Mail or deliver your 2 originals to:

Small Cities CDBG Program, 5th Floor

New Jersey Department of Community Affairs

Division of Housing and Community Resources

101 South Broad Street

P.O. Box 811

Trenton, NJ 08625-0811