FUNDING PERIOD: July 1, 2022 - June 30, 2023

ELIGIBLE APPLICANT: Non-profits. All applicants must be incorporated or partner with a satisfactory Fiscal Agent.

AVAILABLE FUNDS: Total funds to be determined through deferred, forgivable, or low interest rate loans, or grants.

PROPOSALS DUE: Applications accepted all year, but proposals received by 5:00 p.m. on February 10, 2022 will have priority for FY 2022-23 budget consideration.

PROGRAM INFORMATION
This program offers financial and technical assistance to community-based organizations (CBOs) providing Community Development Block Grant (CDBG)-eligible services to improve public facilities, including retrofitting buildings to increase accessibility for persons with disabilities.

The program assists CBOs with new construction and to assess rehabilitation needs, pay “soft costs” including but not limited to title and credit reports, planning and building fees, and to contract with:

1. Licensed architect(s): to prepare plans and specifications which comply with state/local planning, and building codes and requirements for federally-assisted construction projects including, ADA and Section 504 provisions; to conduct formal bidding of the project; and to administer project construction; and/or
2. Other specialized professionals to project manage, conduct environmental and historic resource review, and consultant/engineering services to assess health and safety hazards, if needed; and/or;
3. Licensed contractor(s) to construct improvements rendered under Davis-Bacon and related requirements.

FINANCIAL ASSISTANCE
Financial assistance will be in the form of interest subsidies for market-rate loans and/or below market-rate loans tailored to the specifics of each project. Depending on project type and funding availability grants may be offered in lieu of loans. CBO’s must be able to demonstrate capacity, or are required to hire a project manager as part their budget. Assistance is limited to the “gap” which CBO cannot fill through other public/private financing, typically not to exceed $75,000. (Waivers may be granted for complex projects, e.g. multi-story or historic structures.)
ELIGIBLE PROPERTIES
To be eligible for the program, the applicants must meet all criteria indicated below.

The Property shall be:
- Located in the City of Alameda;
- Open to the general public during normal hours of operation;
- Used for on-going services and/or programs that meet CDBG requirements, including serving low- and moderate-income households; and
- Limited to charging reasonable fees, if any, for post-rehabilitation use.
- Conform to zoning requirements for property use, or have current use permit; and
- Owned or leased with five-year minimum remaining term (lesser term at discretion of City). If leased, property owner (owner) must also sign application.

FEDERAL LABOR REQUIREMENTS
Projects receiving HUD funds may be subject to federal labor requirements in the construction activity:

<table>
<thead>
<tr>
<th>Federal Requirements</th>
<th>Requirements</th>
<th>Threshold (applies to Prime &amp; Subcontracts)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Davis-Bacon – CDBG-funded projects</td>
<td>Payment of prevailing wages to on-site construction workers (laborers &amp; mechanics). Identification of the applicable wage decision number and provision of weekly certified payrolls are required.</td>
<td>CDBG funded construction contract of $2,000+, regardless of CDBG investment amount.</td>
</tr>
<tr>
<td>Section 3</td>
<td>Good faith efforts to hire qualified local low-income residents and/or businesses. A public housing resident in the County of Alameda will meet this requirement. This is applicable only if the project construction generates new hires. Goals: offering 30% of new employment opportunities to Section 3 residents; awarding 20% of contract activity to Section 3</td>
<td>Construction contract in amounts greater than $100,000 will generate this requirement if CDBG/HOME funds in excess of $100,000 are invested in construction contract activity.</td>
</tr>
<tr>
<td>Minority Business Enterprise or Women-owned</td>
<td>Good faith efforts to hire/contract with minority and women-owned businesses; includes subcontracts.</td>
<td>Any prime or subcontract of $10,000+.</td>
</tr>
</tbody>
</table>
NON-HOUSING CAPITAL IMPROVEMENT PROJECT
PROPOSAL INSTRUCTIONS

CONSTRUCTION PROJECTS

Proposed projects involving construction are subject to additional federal requirements including: Federal Labor Standard Provisions (Davis Bacon); Affirmative Action and Equal Opportunity; and Section 3 requirements. Properties containing both eligible and ineligible uses, including those related to religious purposes, may apply, but additional qualifying criteria may be necessary.

PROPOSAL SUBMISSION REQUIREMENTS

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<table>
<thead>
<tr>
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<tbody>
<tr>
<td>☐ STEP 1:</td>
<td>COVER SHEET (ATTACHED FORM REQUIRED)</td>
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<tr>
<td>☐ STEP 2:</td>
<td>NARRATIVE (SEE ATTACHED NARRATIVE QUESTIONS)</td>
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<tr>
<td>☐ STEP 3:</td>
<td>PROJECT/PROGRAM BUDGET (ATTACHED BUDGET FORM REQUIRED)</td>
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<tr>
<td>☐ STEP 4:</td>
<td>HUD MEASUREMENT CHECKLIST</td>
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<tr>
<td>☐ STEP 5:</td>
<td>ORGANIZATIONAL CHECKLIST</td>
</tr>
<tr>
<td>☐ STEP 6:</td>
<td>OTHER REQUIRED SUPPORTIVE DOCUMENTATION</td>
</tr>
</tbody>
</table>
NON-HOUSING PUBLIC IMPROVEMENT (CAPITAL IMPROVEMENT) PROJECT
COVER SHEET

NONPROFIT/FISCAL SPONSOR INFORMATION

Organization: ____________________________________________________________
Address/City/Zip: _________________________________________________________
Executive Director: __________________________________ E-Mail (required): __________
Nonprofit Phone: ___________________________ Board President: ______________________
Name, Email Address and Telephone of person authorized by board to sign and designated to authorize
agents, if different from Executive Director:
____________________________________________________________________
____________________________________________________________________
Total Nonprofit Budget: __________________________
Nonprofit Mission Statement and Services: ______________________________________

PROPOSED PROJECT INFORMATION

Proposed Project Name: ________________________________________________
Contract/Program Administrator Name: __________________ Title: ______________________
Project Summary (please provide 1-2 sentences describing the project you are applying for):
____________________________________________________________________
____________________________________________________________________
Total City of Alameda CDBG Funds Received in FY 2021-22, if applicable: ______
Total City of Alameda CDBG Funds Requested for FY 2022-23: ________________
Total Matching Funds Anticipated: __________________________
Total Program Budget: __________________________

Number of Staff Participating in this Activity: _________________________________
Anticipated number of individuals served: ______
Brief Description of Activity and Anticipated Outcomes: ______________________
____________________________________________________________________
____________________________________________________________________

Please initial one of the following statements to accept the use of the current boilerplate Agreement. Please call
Lisa Fitts at 510.747.6884 if you need a copy for review.

___ We are a current 2021-22 sub-grantee and accept the use of the current Grant Agreement boilerplate in
any contract for 2022-23.
___ We are a new applicant. We have requested and reviewed the boiler plate Agreement. We accept the
use of the Grant Agreement boilerplate in any contract for 2022-23.

Submitted by: ____________________________________________________________
Signature Date

City of Alameda NOFA/RFP CDBG FY2022-23: Non-Housing Capital Improvement Application
NON-HOUSING CAPITAL IMPROVEMENT
PROJECT APPLICATION

PROPERTY ADDRESS: __________________________________________

Owner’s Name(s): __________________________________________

Mailing Address: __________________________________________

Daytime Phone: ___________________ Email:____________________

1. Property Description. Age of Building: _____ years. Please attach photograph if possible.

2. Describe the work needed, in order of importance and attach a detailed project timeline.

3. Is applicant currently receiving City of Alameda Community Development Block Grant operating funds? ___Y ___ N

4. Please describe system for recording the type, location, results of services provided, and information necessary to establish program benefit.

5. Please describe system for tracking real property or equipment.

PLEASE INITIAL EACH SENTENCE, AND SIGN AND DATE FORM TO INDICATE YOUR ACCEPTANCE OF THESE TERMS.

I/We authorize the City of Alameda to enter and inspect the property with prior notice.
INITIAL: ___________ DATE: ___________

I/We authorize the City, and any credit reporting agency used by the City, to verify any information necessary in connection with this application for assistance, including, but not limited to: Title Report; Mortgage History; Credit History; Building/ Zoning Histories; and/or Neighborhood Complaints.
INITIAL: ___________ DATE: ___________

During application review and throughout the term of the agreement (if application is approved), I/we agree to not
(1) Evict or otherwise displace existing non-residential and/or residential tenants, if any;
INITIAL: ___________ DATE: ___________

(2) Construct, remodel, or otherwise alter this property. INITIAL: ___________ DATE: ___________

__________________________
Signature Date

__________________________
Print Name and Title

City of Alameda NOFA/RFP CDBG FY2022-23: Non-Housing Capital Improvement Application
# NON-HOUSING CAPITAL IMPROVEMENT
## PROJECT BUDGET FORM

Please ensure project timeline submitted is consistent with budget.

<table>
<thead>
<tr>
<th>ITEM</th>
<th>FY2022-23 GRANT FUNDS REQUESTED</th>
<th>FY2022-23 LEVERAGED FUNDS*</th>
<th>FY2022-23 ANTICIPATED PROGRAM INCOME**</th>
<th>FY2022-23 TOTAL PROGRAM BUDGET</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Capital Costs</td>
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<tr>
<td>Permits and Fees</td>
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<tr>
<td>Design</td>
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<td>Engineering</td>
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<tr>
<td>Acquisition</td>
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<tr>
<td>Other Soft Costs (Define)</td>
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<tr>
<td>Rehabilitation</td>
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<tr>
<td>Construction</td>
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<tr>
<td>Contingency</td>
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<tr>
<td>Environmental Review</td>
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<tr>
<td>A. SUBTOTAL CAPITAL COSTS</td>
<td></td>
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<tr>
<td>B. PERSONNEL COSTS, including Payroll</td>
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<tr>
<td>Taxes/Fringe Benefit. Note % FTE on this project***</td>
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<tr>
<td>B. SUBTOTAL PERSONNEL EXPENSES</td>
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<tr>
<td>TOTAL PROGRAM BUDGET (a+b)</td>
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</tbody>
</table>

* Per HUD, leverage is the non-match cash or non-match in-kind resources committed to making a project fully operational. This includes all resources in excess of the required 25 percent match as well as other resources that are used on costs that are ineligible in the Program. Leveraged funds may be used for any program related costs, even if the costs are not budgeted or not eligible in the CoC Program. Leverage may be used to support any activity within the project provided by the recipient or subrecipient. Please identify the source and commitment status (e.g., funds received, committed, or otherwise guaranteed, with proof) of other non-City funding and in-kind contributions that directly benefit the activity for which CDBG funding is requested. Please explain your basis for valuing any in-kind contributions.

** Revenue resulting from the use of Grant funds, including fees for service.

*** Agency FTE (full time equivalent) = _____ hours per week. Include Position titles and percentage of FTE or number of hours assigned to the program. Attach job descriptions and staff person’s name for each position for which CDBG funding is sought.
## ORGANIZATIONAL CHECKLIST

**Organization Name:**

**Proposed Project:**

<table>
<thead>
<tr>
<th>Please read question and check yes or no.</th>
<th>YES</th>
<th>NO</th>
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</thead>
<tbody>
<tr>
<td><strong>TRACKING CLIENT DATA</strong></td>
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<tr>
<td>Does your agency have a system for recording the type, location and results of services provided?</td>
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<tr>
<td>Does your agency have a system for recording information necessary to determine number of clients served and to track demographic information?</td>
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<tr>
<td><strong>HUMAN RESOURCES POLICIES AND PROCEDURES</strong></td>
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<td>Does your agency have a code of standards governing procurement procedures?</td>
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<td>Does your agency have a conflict of interest policy?</td>
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<td>Does your agency have a personnel policy?</td>
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<tr>
<td>Does your agency have a policy on non-discrimination and harassment?</td>
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<tr>
<td>Are your existing facilities, programs, and activities readily accessible to and usable by individuals with disabilities?</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>FINANCIAL POLICIES AND PROCEDURES</strong></td>
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<tr>
<td>Does your agency have a system for recording and storing financial data and documents?</td>
<td></td>
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<tr>
<td>Does your agency have a method for identifying and tracking federal and non-federal sources of income and expenditures?</td>
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<tr>
<td>Does your agency have a method for determining allowability, reasonableness and allocation of costs and for approving disbursement of funds?</td>
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<tr>
<td>Does your agency have a method for comparing expenditures with budgeted amounts?</td>
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<tr>
<td>Does your agency have a method for identifying program income, i.e. income directly generated from the use of CDBG grant funds?</td>
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<tr>
<td>Does your agency prepare an annual audit or financial report?</td>
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<tr>
<td>Does your agency have any outstanding audit or monitoring findings?</td>
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<tr>
<td>Does your agency have a system for tracking real property or equipment?</td>
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</tbody>
</table>
REQUIRED SUPPORTIVE DOCUMENTATION

1. □ Proof of 501(c)3 (tax exempt status for non-profit entities)
2. □ PROJECT/PROGRAM MATERIAL (ATTACH BROCHURES AND CLIENT OUTREACH MATERIAL)
3. □ Organizational chart for entire organization
4. □ Key project staff, including:
   • Job description for key staff
   • Brief description of qualifications
5. □ Board roster, including:
   • Name, Affiliation, Years on Board
   • Meeting dates for previous 12 months
   • Number of years allowed for each board term
6. □ By-laws (for non-profit entities)
7. □ Articles of incorporation (for non-profit entities)
8. □ Certified financial audit no more than 1 fiscal year old, prepared by CPA, and Single Audit (for entities that receive more than $750,000 in federal funding)
9. □ Organization Budget (total operating budget showing sources and uses):
   • Current Budget
   • Proposed Budget
10. □ Project Budget Worksheet
11. □ Estimated Project Schedule
12. □ Mission Statement
13. □ Non-discriminatory Policy
14. □ Reasonable Accommodation Policy
15. □ Resolution authorizing application and designation of signatory by name and title will be due prior to entering into contract, if project is proposed for approval
PROVISIONS FOR PERSONS WITH DISABILITIES

If any person with an interest in participating in the aforementioned federal program is a person with a disability as defined by Section 504 of the Rehabilitation Act of 1974 and requires an accommodation to participate or take interest, a request for accommodation may be made to Lisa Fitts at (510) 747-6884, (510) 522-7538 (TYY) or by email at lfitts@alamedaca.gov. Such request shall include a description of the accommodation sought, along with a statement of the impairment that necessitates the accommodation. Any request for accommodation shall be reviewed and a response provided within five business days of receipt of such request. Notice of any accommodation granted will be promptly provided to the requester.

PROVISIONS FOR NON-ENGLISH SPEAKING RESIDENTS

The City of Alameda has a network of employees speaking some 45 languages who can act as interpreters for residents seeking information regarding the aforementioned federal program. If notified two business days in advance, the City will arrange to have an interpreter available. Please contact Lisa Fitts at (510) 747-6884, (510) 522-7538 (TYY), or by email at lfitts@alamedaca.gov.

NON-DISCRIMINATION POLICY

The City of Alameda does not discriminate against any persons on the grounds of race, color, religion, national origin, ancestry, sex, gender, gender identity, gender expression, sexual orientation, marital status, familial status, source of income, genetic information, medical condition, physical disability or mental disability, or any other category protected by law.