

Community Development Block Grant 2020 Program Year and COVID-19 Funding Joint Application - Submission #5320

Date Submitted: 5/20/2020



CITY OF SARATOGA SPRINGS

OFFICE OF COMMUNITY DEVELOPMENT

City Hall – 474 Broadway
Saratoga Springs, New York 12866
Tel: 518-587-3550 x2575 fax: 518-580-9480



COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) ENTITLEMENT PROGRAM
2020 PROGRAM YEAR & CDBG COVID-19 FUNDING
- Joint Application -

IMPORTANT

2020 CDBG Guidebook

****DO NOT attempt to complete this application prior to reviewing the 2020 CDBG Guidebook (link provided above). Questions should be directed to the Community Development Planner at lindsey.connors@saratoga-springs.org****

Applying for:*

Regular 2020 CDBG PY
Entitlement Funding

CDBG-CV CARES ACT
Funding (COVID-19 related
activities)

Both/Either

Activity Name*

Allen Drive Case Manager

Applicant Organization*

Saratoga Affordable Housing Group

Address*

20 Prospect St Building 2 Suite 313

City*

Ballston Spa

State*

NY

Zip Code*

12020

Phone Number*

5188850091

Email Address*

chp@vchcny.org

Contact Person*

Cheryl Hage-Perez

Title*

Property Manager

Applicant Type*

Choose 1

- City Department
 Non-Profit Organization
 Other Public Agency

List Department*

Federal ID #*

26-1210093

DUNS #*

832926245

Specify*

National Objective*

Choose 1

- Benefit persons of low-moderate income
 Address slum/blight conditions
 Urgent need

Specify*

Low-Mod Income Housing Activities ▼

Choose 1

Requested CDBG Entitlement Funding*

20,000

Requested CDBG COVID-19 Funding*

0

If zero, please indicate.

If zero, please indicate.

Funding leveraged from other sources*

4,000

Total activity cost*

24,000

20% of total project costs strongly recommended, but not required. If zero, please indicate.

Proposal Abstract *

Saratoga Affordable Housing Group is requesting \$20,000 for a Case Manager. The case manager will be a half time position at \$18 per hour for 20 hours per week. With fringe benefits the total for the position will be \$22,000. Also included in the budget is staff mileage and supplies. SAHG will match this award with funds from tenant rent. This Manger will assist the low income, disabled tenants who reside there. The position would offer case management services, assist homeless persons to obtain stable housing at Allen Drive, work with the tenant to prevent eviction and a homeless situation, educate and assist the elderly and disabled tenants in terms of safety and assure they receive the necessary services to remain stable and independently housed, and other duties to insure stable housing for the target population.

This year, these funds will provide assistance to 30 adults and 24 children residing in the Allen Drive Apartments.

Please provide a BRIEF overview of your proposal.

Persons served*

54

This activity is...*

expanded from previous years

How many low-moderate income persons will be served through this activity?

Activity Beneficiaries*

Individual persons and families of low to moderate income will benefit from the proposed activities. The targeted population is identified by referrals to the apartments. These referrals are made to SAHG from the Saratoga Housing Authority, who manages the Section 8 voucher program for the City of Saratoga, Homeless Shelters, the EOC, Veterans & Community Housing Coalition (VCHC) as the manager of the Section 8 Voucher Program for Saratoga County, The Department of Social Services, Wellspring, Transitional Services Association as well as other providers and through individual application. A Memorandum of Understanding is maintained with all referring agencies. For the purposes of this application 30 households for a total of 54 persons will be served. Income eligibility is determined by using the HUD calculation worksheet. Proof of income is required for all prospective tenants to calculate their eligibility and rent amount. As tenant's income changes, eligibility is re-determined.

Identify who will benefit from the proposed activity. If the activity is designed to benefit: 1) individual persons of low- to moderate-income, describe the process you will use to identify these persons and determine their income eligibility and the number of persons you expect to serve. 2) the inhabitants of a predominantly low-moderate income area, identify the Census Block Group in which the activity is located. 3) a low-moderate income "limited clientele", identify the "limited clientele" group.

Performance Goals and Indicators*

Goal: To provide stable, safe, decent affordable housing to low to moderate income households in the city of Saratoga Springs.

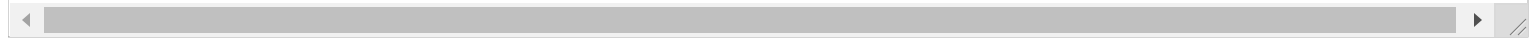
The case manager will ensure all tenants at the Allen Drive apartments are educated on individual service needs, access to services, assistance with entitlements and other needs.

Success will be indicated by a decrease in evictions, number of previously homeless families and individuals assisted with housing.

The case manager will document each visit with the tenant, and record identified needs. Follow up documentation will detail the outcome of those needs.

Over the past year, we have seen that 50% of the tenants and their families require case management assistance.

We anticipate the case manager will continue to reduce the number of evictions and assist our target population maintain their housing. Since the funding of this position by CDBG evictions have dropped from ten a year to one or two a year. With the assistance of the case manager the tenants receive advocacy, assistance information and referral to health care, mental health services, addiction services, legal services, entitlements, etc. VCHC maintains MOU's with all community service providers that outline each service available through the agencies. This has been instrumental in the tenants participating in these services.



Identify your performance goals and the types of indicators you will use to document activity accomplishments and success. (Examples should include: # of persons with new/improved access to services, # of affordable houses rehabilitated, # of businesses assisted, # of jobs saved or created, etc.)

Activity Timeframe/Schedule *

The case manager is currently on staff and will continue if funded.

Include start, completion dates, and other significant performance stages.

Required Approvals/Permits*

None

Identify whether the activity requires additional local, state or federal approval (license, permit, design/historic/environmental review, etc.). For construction/site development/land acquisition projects, provide evidence of site control.

Site Control Documentation (if applicable)

No file chosen

Deed, MOU, purchase contract, etc.

Organizational Capacity*

Has your organization been a previous sub-recipient of City CDBG funds and/or any other federal award?

Yes No

Organizational Capacity (2)*

Have these activities been completed and all federal requirements met?

yes no

Authorized Electronic Signature Agreement*

By checking the "I agree" box below, you agree and acknowledge that 1) your application will not be signed in the sense of a traditional paper document, 2) by signing in this alternate manner, you authorize your electronic signature to be valid and binding upon you to the same force and effect as a handwritten signature, and 3) you may still be required to provide a traditional signature at a later date.

I agree.

Electronic Signature*

Rocco Ferraro

Date*

5/20/2020

Activity Budget *

Complete and upload budget forms 1 and/or 2 (provided below) as appropriate. Depending on the activity, the applicant may need to submit one or both of the budget forms. On these forms, identify the amount and sources of leveraged funding for this activity. Include the status of these funds (i.e. cash on hand, grants received, planned fund-raising, etc.). Upload copies of funding commitment letters or other evidence of funding support in the space provided. *In addition, more detailed budgets MAY be uploaded in the space provided. If an architect, engineer, or other personnel have conducted a cost analysis, upload a copy noting the author and date of analysis.

Budget Form 1 - Proposed Activity Program Operating Budget[Budget Form 1](#)

Required for public service or economic development activities as applicable. Complete and save to your local computer, then upload below.

Budget Form 2 - Construction/Site Development Budget[Budget Form 2](#)

Required for "bricks and mortar" activities (ie. construction, rehabilitation, land acquisition, etc.) as applicable. Complete and save to your local computer, then upload below.

Upload Budget Form 1

CDBG 2020 Budget Form Case manager final.xlsx

Upload Budget Form 2

Choose File No file chosen

Optional: Evidence of Funding Support

Choose File No file chosen

Proof of leveraged funding (ie. grant award letter, private donation commitment letter, etc.)

Optional: Detailed Budget/Cost Analysis

Choose File No file chosen

OFFICE OF MANAGEMENT AND BUDGET (OMB) CIRCULAR A-133 -- MONITORING OF FEDERAL FINANCIAL ASSISTANCE TO SUBRECIPIENTS***Organization***

Saratoga Affordable Housing Group

Mailing Address*

20 Prospect St Building 2 Suite 313

Federal ID*

26-1210093

Phone #*

5188850091

Fax #**DUNS #***

832926245

Please identify your fiscal year (mth/yr to mth/yr):*

7/2020 to June 2021

Please identify below the funding received during your last fiscal year.

Community Development Block Grant Entitlement Funding (CDBG):

CDBG Activity Name*

Allen Drive Case Manager

CDBG Program Year*

2020

CDBG Funding Amount*

20,000

If not applicable, please reply N/A.

Other Federal Financial Awards (cash & non-cash):

Name & Catalog of Federal Financial Assistance (CFDA)#*

none

Federal Funding Amount*

0

If not applicable, please reply N/A.

Name & CFDA #

Federal Funding Amount

Name & CFDA #

Federal Funding Amount

During your last fiscal year, has your organization expended more than \$750,000 in total federal financial awards (incl. CDBG & all other federal assistance)?*

- Yes No

Single Audit Report*

No file chosen

Upload a copy of your organization's latest Single Audit Report.

Are you aware of any financial audit violations, findings or questioned costs relating to any activity funded with federal financial assistance? *

- Yes
 No
 N/A

Please describe:*

Other Saratoga County Awards (cash & non-cash):

Program Name*

Allen Drive Maintenance

Year*

2019

Award Amount*

19,416

If not applicable, please reply N/A.

Program Name

Allen Drive Case Manager

Year

2019

Award Amount

17,000

Program Name

Year

Award Amount

Authorized Electronic Signature Agreement*

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I agree.

Electronic Signature

Rocco Ferraro

Date

5/20/2020

-----ENVIRONMENTAL IMPACT & RISK ASSESSMENT FOR NEW CONSTRUCTION PROJECTS-----
----- (INCLUDING EXPANSIONS OF EXISTING BUILDING FOOTPRINTS OR REHAB
PROJECTS OF 75% OR MORE)

Does your proposed project include new construction, expansion of an existing building footprint, or rehabilitation of 75% or more of an existing building? *

Yes

No

Budget Form 1
Proposed Activity Program Operating Budget

	Entitlement Grant	Leveraged Funding	Total Activity Cost	Source of leveraged Funds and In-Kind Services
PERSONNEL				
Salaries	\$ 20,000.00		\$ 20,000.00	Tenant Rent
Fringe		\$ 4,000.00	\$ 4,000.00	tenant rent
Other (consultants, etc.)			\$ -	
<i>Subtotal</i>	\$ 20,000.00	\$ 4,000.00	\$ 24,000.00	
OVERHEAD				
Advertising/Marketing			\$ -	
Program Supplies		\$ 1,000.00	\$ 1,000.00	
Rent & Utilities			\$ -	
Other (please list below)				
mileage		\$ 800.00	\$ 800.00	
			\$ -	
			\$ -	
<i>Subtotal</i>	\$ -	\$ 1,800.00	\$ 1,800.00	
TOTAL COST	\$ 20,000.00	\$ 5,800.00	\$ 25,800.00	