

**FUNDING APPLICATION FOR
COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) ENTITLEMENT PROGRAM
— 2014 Program Year —**

ACTIVITY NAME: Residential Rehabilitation Grant Program

APPLICANT: City of Saratoga Springs

MAILING ADDRESS: City Hall – 474 Broadway

Saratoga Springs, New York Zip: 12866

PHONE: 518.587.3550 FAX: 518.580.9480 EMAIL: bradley.birge@saratoga-springs.org

CONTACT PERSON: Bradley S. Birge TITLE: Administrator, Planning & Economic Development

APPLICANT (*select 1*): City Department Private non-profit organization Other Public Agency
 Mayor's Office _____ _____
 (List Dept.) (List Federal ID #) (Specify)

NATIONAL OBJECTIVE (*select 1*):

"Benefit persons of Low/moderate income"

- L/M Income Area Benefit
- L/M Income Limited Clientele Activities
- L/M Income Housing Activities
- L/M Income Job Creation/Retention

"Address slum/blight Conditions"

- "N/A" Slum/blighted Area
- Slum/blighted Spot Basis
- "N/A" Urban Renewal Completion

"Urgent CD Need"

"N/A" Urgent Need

REQUESTED ENTITLEMENT FUNDING: **\$200,000**

Funding Leveraged from Other Sources: * applicants leverage grant funding through participation in City revolving loan program and by property owner contributions beyond maximum grant amounts. In addition, this program is administered in-house with staffing costs borne through general program administration and delivery funding.

Total Activity Cost: **\$200,000**


Proposal Abstract - please provide a *brief* overview of your proposal in the space below:

The Citywide Residential Rehabilitation Grant Program is a successful ongoing program to provide grants to eligible applicants to improve the appearance, safety and energy efficiency of their homes.

Income-eligible resident homeowners are eligible for a grant up to \$15,000 for 1 unit and \$5,000 for each additional unit (4 max.) for eligible home repairs. Rental property owners with income-eligible tenants may apply for a 1:1 matching grant up to \$5,000 per unit (4 max.). Grant recipients must agree not to sell or transfer title for a minimum of 4 years, and rental property owners must agree to rent to income-eligible persons at established "affordable rates" for 4 years.

Cases deemed an "emergency" based on health and safety concerns are addressed as priorities. Emergency repairs are limited to addressing the immediate situation. Emergency repair recipients may still participate in the grant program for additional repairs up to the program maximum.

In the past year, the rehabilitation grant program assisted 5 applicants with expenditures exceeding \$62,125. Four houses were completed during this period and there are currently 8 applicants in the process of income verification or rehabilitation.


(Authorized Signature)
Joanne D. Yepsen
(Typed or Printed Name)

Mayor
(Title)
January 29, 2014
(Date)

Please respond in writing to each of the following (add additional pages as necessary):

1. Activity Description

Provide a detailed description of your activity. Identify whether the activity is new, ongoing, or expanded from previous years.

Please see the attached "Saratoga Springs Residential Rehabilitation Grant Program Guidelines". This program is a continuation of the City's successful Residential Rehabilitation Grant.

A) Identify whether the activity is new, ongoing, or expanded from previous years

This is an ongoing program each year.

B) Describe the community need that your activity is intended to address and how your activity will address that need. Provide evidence that this need is currently not being addressed through existing programs or activities.

There is a need for safe, energy efficient and code compliant housing. This activity will address affordability for the elderly and other fixed-income households to maintain their housing. This activity also will address lead-based paint hazards and accessibility needs of persons with disabilities.

C) Identify who will benefit from the proposed activity. If designed to benefit persons of L/M income, describe the process you will use to identify these persons and ensure that the activity meets this objective.

This program is designed to assist persons of low and moderate income throughout the City as detailed in the attached "Saratoga Springs Residential Rehabilitation Grant Program Guidelines".

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

We are proposing to assist 13 households at \$15,000 per household.

E) Provide an activity timeframe/schedule (include start, completion dates, and other significant performance stages).

This is an ongoing program year to year.

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

No additional approvals are required

2. ORGANIZATIONAL CAPACITY

A) Provide an overview of your organization including length of time in existence. List current officers and board members and identify any prior funding by the City of Saratoga Springs (year, activity, and amount).

The Office of Community Development will continue to administer this program. Recent funding for this program is as follows:

1994	\$ 80,000	2004	\$ 73,000
1995	\$ 90,000	2005	-0-
1996	\$ 65,000	2006	\$ 52,000
1997	\$160,000	2007	\$108,718
1998	\$165,000	2008	\$ 60,000
1999	\$204,000	2009	\$ 69,982
2000	\$120,000	2010	\$100,116
2001	\$ 52,500	2011	\$ 62,850
2002	\$100,000	2012	\$ 75,000
2003	\$100,000	2013	\$ -0-

- B) Describe your organization's experience in successfully conducting this type of activity. Identify any skills, current services, or special accomplishments that demonstrate your capacity for success.

The Office of Community Development will continue to administer this program as detailed in the attached "Saratoga Springs Residential Rehabilitation Grant Program Guidelines".

- C) Identify the person(s) responsible for program and financial management of the activity. Identify all other persons involved in this activity noting whether these positions are current or new, pending this award. For construction/site development projects, identify the development team including proposed contractors, subcontractors, and project manager.

Office of Community Development:

- Bradley Birge, Administrator, Planning & Economic Development
- Cindy Phillips, Community Development Coordinator
- Paul Frederick, Rehabilitation Specialist

- D) Identify any other agencies/partners in this activity and define the roles and responsibilities of these partners.

Given their experience in these matters, the Office of Community Development has contracted with ATC Associates, Inc. and Flatley-Read, LLC for lead-based paint assessments, identification, and clearance.

4. ACTIVITY BUDGET – (ATTACHMENTS 1,2)

- A) Include attached budgets (Attachments 1, 2) as appropriate. Depending on the activity, the applicant may need to submit one or both of the following budget forms. More detailed budgets may be attached (and are recommended) in support of the proposal. If an architect, engineer, or other personnel have conducted a cost analysis, attach a copy noting the author and date of analysis.

\$200,000 requested. Since the Office of Community Development administers this program, all funding will go directly to grants for income-eligible persons to improve the appearance, safety, and energy efficiency of their homes.

- B) Identify sources of leveraged funding for this activity. Include the status of these funds (i.e. cash on hand, grants received, planned fund-raising, etc.). Attach copies of funding commitment letters or other evidence of funding support.

This funding is leveraged through matching grants from rental property owners, revolving loan applications and by property owner contributions beyond maximum grant amounts. In addition, this program is administered in-house with staffing costs borne through general program administration and delivery funding.

5. MONITORING OF FEDERAL FINANCIAL ASSISTANCE TO SUBRECIPIENTS - (ATTACHMENT 3)

The City of Saratoga Springs is responsible for ensuring that subrecipients expend awards in accordance with applicable laws, regulations, and provisions of contracts and grant. Therefore, in accordance with the OMB Circular A-133 requirements, please:

- A) Complete Attachment 3 and include it with your application.
- B) During your last fiscal year, if your organization has expended more than \$500,000 in total federal financial awards (including CDBG and all other federal assistance), please include a copy of your latest Single Audit Report with this application.

As the CDBG Recipient, this is not applicable to the City of Saratoga Springs.