



Person responsible for operation of the proposed project:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_ (physical) \_\_\_\_\_ (mailing)

City, State, Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_

Fax number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**I certify that all of the information provided in this application is correct.**

\_\_\_\_\_  
Signature (Director, Executive Officer, etc.)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

**\*\*\* Special Note:**

Organization Name/Agency Name must be stated as it appears in By-Laws and Articles of that Incorporation.

You must have a Corporate Resolution passed by your Board authorizing the person responsible for ongoing business, submission of and entering into contract with City presented with this application.

Applicant must have a valid UEI number and be registered in the Federal System Awards Management. (SAM.gov)

Upon CAC's recommendation for funding, you will be notified, and a Form 1295 will have to be filed Texas Ethics Commission and provided to the office of Planning & Community Development.

## ATTACHMENT CHECKLIST

### Part 1 - Project Information

- Description of Project
- SAMS registration.

### Part 2 – Funding

- CDBG Program Budget Request
- Organization's Annual Budget
- Organization's Most Recent 990.

### Part 3 - Effectiveness and Efficiency

- Mission Statement
- List of Staff
- Updated W9
- List of Board Members
- Proof of 501(c)(3) Status

**SUBMIT PROPOSAL TO:  
COMMUNITY DEVELOPMENT DIVISION  
CITY OF ORANGE  
P.O. BOX 520 / 303 N. 8<sup>th</sup> Street  
ORANGE, TEXAS 77630  
ATTN: Rita Monson**

**SUBMISSION DEADLINE IS Thursday, March 30, 2023 @ 5:00 P.M.**

*Applications must physically be in the office of Planning & Community Development – applications may be mailed, but mailed applications arriving after this date will be considered late applications regardless of postmark.*

**LATE APPLICATIONS WILL NOT BE ACCEPTED!**

**Part 1 - Project Information**

1. Will this project be created with this funding request? \_\_\_\_\_Yes \_\_\_\_\_No

This proposed project/activity is consistent with which of the following 5-year measurable objectives listed in the Consolidated Plan for the City of Orange (check all that apply):

- \_\_\_\_\_Assistance for the Homeless
- \_\_\_\_\_Assistance for Persons with Special Needs
- \_\_\_\_\_Infrastructure Improvements
- \_\_\_\_\_Social Services for Low to Moderate income persons

2. Identify the primary beneficiaries of the proposed project/activity (check all that apply):

- |                                |                   |                                |
|--------------------------------|-------------------|--------------------------------|
| _____Individuals               | _____Families     | _____Elderly (60+)             |
| _____Homeless Persons          | _____Renters      | _____Veterans                  |
| _____Adults (18-60)            | _____Minorities   | _____Illiterate Adults         |
| _____Disabled                  | _____Unemployed   | _____Homeowners                |
| _____Students                  | _____Mentally Ill | _____Facilities                |
| _____Neighborhoods             | _____Utilities    | _____Infrastructure            |
| _____Domestic Violence Victims |                   | _____Chronic Substance Abusers |
| _____Developmentally Disabled  |                   |                                |
| _____Other _____               |                   |                                |

3. How many **people** will be served with CDBG funds? \_\_\_\_\_

*If awarded, this is the number of people that you will report against. It should be a number, not a percentage. Anything else could cause your application to be considered incomplete.*

**Funds must be applied toward new service or a quantifiable increase in level of service.**

Check one:    New Service                                    Quantifiable increase in level of service.

4. What percentage of the proposed beneficiaries will be low to moderate-income persons?

***In order to qualify for CDBG funding, you must serve 51% or greater L/M persons. If awarded, this must be documented by Census Tract, Presumed Benefit or Income Documentation determined by the National Objective met.***

5. Is the proposed project/activity in a CDBG target low/mod income area? \_\_ Yes \_\_ No

6. List the specific days and hours of operation, service delivery, and/or availability (i.e., Monday - Friday from 8:00 a.m. to 5:00 p.m.).

Days \_\_\_\_\_

Hours \_\_\_\_\_

**Part 2 - Funding**

1. Have you requested CDBG funds previously for this project? \_\_\_\_\_Yes \_\_\_\_\_No

2. Have you applied for funding from other sources for this project? \_\_\_\_\_Yes \_\_\_\_\_No

If yes, who have you applied to?      \$ Requested      Approved      Pending      Denied

\_\_\_\_\_  
\_\_\_\_\_

3. If there are cost overruns, the applicant will be responsible for those overruns.

4. Attach the organization's annual budget with itemized revenues and expenses.

5. If available attach most recent 990.

**Part 3 - Effectiveness and Efficiency**

1. Has the organization carried out the proposed activity before? \_\_\_\_\_Yes \_\_\_\_\_No

2. How will the project be publicized to the target population and/or residents?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. If applicable, how will your organization verify income for participants to determine if they are low to moderate income?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. How many people will be directly associated with the proposed project/activity?

	<b>Professional</b>	<b>Support</b>	<b>Volunteer</b>
<b>Full-Time Staff</b>	_____	_____	_____
<b>Part-Time Staff</b>	_____	_____	_____

5. If your organization has an elected or appointed board, attach a list of the names, addresses, and phone numbers of all board members.

This form must be completed and submitted with your proposal if your organization has any type of elected or appointed board, council, or commission.

6. Number of voting board members as of January 2023 \_\_\_\_\_ Vacancies? \_\_\_\_\_  
Total resignations during the past year \_\_\_\_\_

7. How many board members reside in the city limits of Orange? \_\_\_\_\_

8. Who recruits board members? \_\_\_\_\_

9. How long is a term? \_\_\_\_\_

10. How many consecutive years can a board member be president of the board? \_\_\_\_\_

11. How often are board meetings held? \_\_\_\_\_



