## PUBLIC SERVICES PROJECT ELIGIBILITY FORM

Applicant Name: \_\_\_\_\_\_ Use the same name as in Part 1 Project Information

**Project Name:** \_\_\_\_\_ Use the same name as in Part 1 Project Information

The provision of public services can also include labor, supplies and materials needed to carry out the service. To be eligible for CDBG assistance, a public service must be either a new service or a quantifiable increase in the level of an existing service above that which has been provided in the year before the submission of the application. An exception to this requirement may be made if HUD determines that any decrease in the level of a service was the result of events not within the control of the municipality or County. The applicant should be able to show that once the CDBG project is completed, the service will be able continue without CDBG funding.

If the project is selected, the applicant will have to maintain a \$1,000,000 general liability insurance policy naming the County as insured.

**Anticipated Budget or Costs:** CDBG funds are allocated to projects based on cost estimates provided in the application. The total anticipated budget or costs must equal the total expected resources.

Budget or Cost Item	Amount	Is verification of cost attached?
	\$	□Yes □No
	\$	Yes No
Total Cost:	\$	

**Expected Resources**: Fully complete the following chart. List ALL the funding sources that will be used to fund the project. The total expected resources (below) must equal the total anticipated cost (above).

Use of CDBG funds to leverage other grants or local resources is expected.

Attach proof of each funding source for all non-CDBG funds such as copy of check, letter or other document that shows that the applicant received the funding or that the applicant will receive the funding. If organization is using an undocumented source of funds such as donations, a letter from the Director explaining how and when the funding will be raised must be included.

Funding Source	Amount	Is funding on hand?	Proof
	\$	Yes No	
CDBG (requested in this application)	\$		
Total Funding:	\$		

**Complete description of all activities included in the project.** Describe all of the aspects of the project in sufficient detail so that a person not familiar with the project will understand it.

Name of organization that will operate the program.

What services does this organization currently offer? \_\_\_\_\_

Describe why this CDBG project is needed, use facts & numbers to support your reasoning?

Who will be served? \_\_\_\_\_

What specific services will be offered through the CDBG project? \_\_\_\_\_.

Are these NEW services, not previously offered by the applicant? Yes

If no, how many people are CURRENTLY served by the existing program?

How many ADDITIONAL people will be served by the new CDBG program?

How will participants be recruited?

List the position names of the staff that will be working on the project, how many hours a week they plan to work and the amount of their salaries and/or benefits that will be paid. The total Salary/Benefits must be included on the "Budget or Cost Item" chart above:

## FY2025 Beaver County CDBG Project Application

Staff Position	Hours per week	Salary/Benefits
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
Total Cost:		\$

Describe how the program will sustain itself financially when the CDBG funding ends. \_\_\_\_\_

**Organizational Capacity.** All applicants must adequately demonstrate their organizational capacity to fully and properly carry out the project according to HUD requirements. If the Community Development Program is unable to adequately ascertain whether the applicant has the capacity to carry out the project, then the project cannot be funded.

**Attach documentation** that demonstrates the organizational capacity of the applicant to carry out the project. Examples of appropriate documentation include brochures, annual reports, websites, IRS Form 990, IRS letter granting 501(c)(3), articles of incorporation, bylaws, board meeting minutes, brochures, reports etc.