

**County of Union  
Community Development Block Grant  
Program Year 44**

**September 1, 2018 to August 31, 2019**

**Proposal  
Submission  
Application**



**Application Deadline**

**December 8, 2017**

**10:00AM**

**Please submit One (1) Original and Four (4) Copies**

**County of Union  
Department of Economic Development  
Division of Community Services  
Administration Building, 3<sup>rd</sup> Floor  
Elizabeth, New Jersey 07207**

## Disclaimer

By using this fill-able word document you agree not to modify any text within the actual application. You also agree that if the application is altered or modified, it may disqualify the application.

## Document Instructions

All boxes with a light gray background are fill-able. You can adjust the font size within the boxes if needed. Fields with just a bottom line are fields that are required to be handwritten in.

## Submission Instructions

Please return one original (1) and four (4) copies of your completed applications to:

County of Union  
Department of Economic Development  
Division of Community Services  
Administration Building, 3<sup>rd</sup> Floor  
10 Elizabethtown Plaza  
Elizabeth, New Jersey 07207  
Attn: Grace Minas

**COUNTY OF UNION  
COMMUNITY DEVELOPMENT BLOCK GRANT APPLICATION  
FISCAL PROGRAM YEAR 2018 – 2019 (YEAR 44)**

**I - Project Name**

Project Name	New Providence Senior Citizens Social Services Program		
Project Address	15 East 4 <sup>th</sup> Street	Amount Requested	\$16,000
Census Tract(s)	38101&38102	Block Group(s)	
Contact Person	Therese Dalton	Title	Program Coord
E-mail Address	<a href="mailto:tdalton@newprov.org">tdalton@newprov.org</a>		
Phone Number	908-665-0046	Fax Number	908-665-6421

**II – Name of Applicant**

Name of Applicant	Borough of New Providence	DUNS #	089205181
Applicant Address	360 Elkwood Ave, New Providence, NJ 07974		
Contact Person:	Therese Dalton		
Email Address:	<a href="mailto:tdalton@newprov.org">tdalton@newprov.org</a>		
Phone Number	908-665-0046	Fax Number	908-665-6421

**III - Person Preparing Drawdowns**

Contact Person:	Therese Dalton		
Address:	15 East 4 <sup>th</sup> Street, New Providence, NJ 07974		
Email Address:	<a href="mailto:tdalton@newprov.org">tdalton@newprov.org</a>		
Phone Number	908-665-0046	Fax Number	908-665-6421

**IV - Person Preparing Progress Reports / Final Reports**

Contact Person	Therese Dalton		
Applicant Address	15 East 4 <sup>th</sup> Street, New Providence, NJ 07974		
Email Address:	<a href="mailto:tdalton@newprov.org">tdalton@newprov.org</a>		
Phone Number	908-665-0046	Fax Number	908-665-6421

## V. CDBG Eligibility

### National Objective

*Check one*

X	Benefit Low/Mod Income Persons
	Prevent/Eliminate Slums or Blight
	Urgent need

### Type of Project

*Check One*

	<b>Facility/Public Improvement</b> Complete page 9 + 10
	<b>Housing</b> Complete page 11 + 12
X	<b>Social Services</b> Complete page 13
	<b>Administrative &amp; Planning</b> Attach separate description <b>**NOTE: All applicants must complete pages 14-17.</b>

### Activity Category

*Check One*

	Acquisition
	Public Facilities & Improvements
X	Social Services
	ADA Improvements
	Housing Rehabilitation
	Planning & Administration

### Certification of Eligibility

110	<b>Number of Persons benefiting from the project</b>
85	<b>Number of Low/Mod Income Persons Benefiting from Project</b> (per HUD Sections 8 Income Limits)
77%	<b>Percentage of Low/Mod Income Persons Benefiting from Project</b> (Must be at least 51% of total)

### Data Source

*Check one*

	Low/ Mod Job Creation
X	Limited Clientele
	Census Tract
	Section 8

## VI. Performance Measures

### A. Objective of Project

1. Identify which objective will be addressed by the activity proposed in this application.  
*Choose only one objective:*

	<b>Suitable Living Environment</b> - This objective relates to activities that are designed to benefit communities, families, or individuals by addressing issues in their living environment.
	<b>Decent Affordable Housing</b> - This objective focuses on housing programs where the purpose of the program is to meet individual family or community needs and not programs where housing is an element of a larger effort.
	<b>Creating Economic Opportunities</b> - This objective applies to the types of activities related to economic commercial revitalization or job creation.

### B. Expected Outcome of Project

2. Identify which outcome category best reflects what you are seeking to achieve (the results) in funding this particular activity.

*Choose only one outcome:*

	<b>Availability / Accessibility</b> - This outcome category applies to activities that make services, infrastructure, housing, or shelter available or accessible to low and moderate income people, including persons with disabilities. In this category, accessibility does not refer only to physical barriers, but also to making the affordable basics of daily living available and accessible to low and moderate income people.
	<b>Affordability</b> - This outcome category applies to activities that provide affordability in a variety of ways in the lives of low and moderate income people. It can include the creation of maintenances of affordable housing, basic infrastructure hook-ups, or services such as transportation or day care.
	<b>Sustainability: Promoting Livable or Viable Communities</b> - This outcome applies to projects where the activity or activities are aimed at improving communities or neighborhoods, helping to make them livable or viable by providing benefits to persons of low and moderate income, or by removing or eliminating slums or blighted areas through multiple activities or services that sustain communities or neighborhoods.

## VII. Budget Information/Project Funding

**Complete budget pages**

### VIII. Prior CD Funds Received

CD / Year 43

CD / Year 42

### VIII. Certification

I hereby certify that all information included in this application is correct to the best of my knowledge.

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SIGNED

AGENCY

Date the application has been discussed at a local public meeting

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MAYOR'S SIGNATURE

DATE

**\*Please Note: Certain types of proposals can be combined. For example, if requesting funding for a senior social service program and a senior bus program, one application can be submitted. Also, if an application is for performing several improvements to a senior center, it is okay to one application that includes all the activities rather than submitting separate applications.**

**\*IMPORTANT: ALL APPLICANTS MUST SUBMIT THEIR DUNS NUMBER. NON-PROFITS MUST INCLUDE THEIR 501 (C )(3) DOCUMENTATION, A LISTING OF THE MEMBERS OF THEIR BOARD OF DIRECTORS OR EQUIVALENT, AND A COPY OF THEIR LAST AUDIT.**

# Social Services

**1. Project Description: Describe very specifically what you would want to use CD funds for below. (i.e. pay salary of senior bus driver; pay salaries of after school instructors; purchase food to provide free meals to seniors; pay fees/salaries for classes for seniors; etc.) (DO NOT SAY "See Attached")**

CD funds will pay salaries of part time bus drivers and instructors for senior exercise, education and programs. Bus transports seniors to grocery store, mall and club for meetings and activities. We offer 6 different exercise classes at no charge to seniors which allow them to remain mentally and physically active. Materials for English as a Second Language course for our growing number of non-English speaking Senior Asian members.

**2. Specific Anticipated Accomplishments: (i.e. number of clients to be served, classes to be held, etc.)**

Exercise classes, light aerobics, balance and conditioning, Zumba and Tai Chi meet weekly from September-August. Each classes draws between 8-25 participants. Union County Life Center class draws approximately 60 attendees throughout Union County each semester. The bus has a weekly schedule and in Year 43 was approximately 870 hours of service provided.

3. a. Type of Service       New       Continued       Increased       Decreased

b. Project Level of unduplicated clients	110	Month	110	Year
c. This CD level of service unduplicated clients	85	Month	85	Year

**4. Sub-grantee Organization and Social Service capability** (Give a brief history of your organization, a brief description of previous efforts in similar activity, and a description of the organization's capability in undertaking the proposed activity). Explain how your project would function should CD funding cease.

The NP Senior Center has had a positive and active role in the community for 56 years. It serves nearly 700 residents age 55+ and hosts daily activities in a comfortable, familiar environment. The seniors have relied on bus transportation to activities for years. Should funding cease, the classes and bus service would be significant reduced or eliminated

**5. Document how all Community Development funds will be spent within the 12 month contract period.**

CD funds will be used to pay the part time bus driver and instructors. They will be paid per normal payroll processes. Payroll reports will be provided as documentation of drawdown.

**\*IMPORTANT: ALL APPLICANTS MUST SUBMIT THEIR DUNS NUMBER. NON-PROFITS MUST INCLUDE THEIR 501 (C)(3) DOCUMENTATION, A LISTING OF THE MEMBERS OF THEIR BOARD OF DIRECTORS OR EQUIVALENT, AND A COPY OF THEIR LAST AUDIT.**

# Budget Information & Project Funding

Total Cost of Project

Grant Amount Requested

Percentage Total

Total of Other Funding

## Other Agencies Applied to for Funds

Name	Amount	Status (Check)
n/a	\$	Pending
		Approved
		Declined
	\$	Pending
		Approved
		Declined
	\$	Pending
		Approved
		Declined
	\$	Pending
		Approved
		Declined
	\$	Pending
		Approved
		Declined
	\$	Pending
		Approved
		Declined
	\$	Pending
		Approved
		Declined
	\$	Pending
		Approved
		Declined
	\$	Pending
		Approved
		Declined



## Proposed Budget

Budget Category	Amount	Description
Project Cost	\$	
Project Salary	\$16,000	Salaries for part time bus driver, exercise instructors and enrichment
Project Fringe	\$	
Architect / Engineer	\$	
Consultant	\$	
	\$16,000	<b>Total Budget Request</b>

## Matching Funds

Budget Category	Community Development Share	Agency / Municipal Share	Other Federal & State Funds	Other Source Share	Total Program Budget
Project Cost	\$	\$	\$	\$	\$
Project Salary	\$16,000	\$16,000	\$	\$	\$
Project Fringe	\$	\$	\$	\$	\$
Architect / Engineer	\$	\$	\$	\$	\$
Consultant	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$



# Application Check List

Please review the checklist to insure all the necessary steps have been taken to submit a completed application.

✓	Item
x	<b>Is the project eligible for funding? (See Criteria for Eligibility)</b>
x	<b>Does the project meet a National Objective?</b>
n/a	<b>Does your Organization have records to document low income eligibility?</b> (i.e. Housing and Social Services need to meet Section 8 Income Limits (copy enclosed) and must obtain information pertaining to family size and income. Public Improvements/Facilities need to show service area and include eligible low income census tracts.)
x	<b>Did you conduct a public hearing and include the public notice ad and minutes of that meeting with the application?</b>
x	<b>Did you include Priority Listing of projects submitted?</b>
x	<b>Is the application signed by the Mayor of your municipality?</b>
x	<b>Is the application and FOUR copies being submitted in a sealed envelope with the label firmly attached? (If submitting more than application, each application and copies must be in separate envelopes)</b>
n/a	<b>For non-profit agency: Did you include a copy of 501(C)(3) IRS designation letter, listing of your Board of Trustees, and copy of latest audit?</b>
x	<b>Did you include your agency's DUNS number?</b>
x	<b>Did you clearly describe the project in detail (Question #1 "Project Description" pages of application depending on the category of request)?</b>

# **Listing of Applicable Statutes and Regulations by Area of Compliance**

## **Historic Properties**

- National Historic Preservation Act of 1966, Section 106 (16 U.S.C. 470f)
- Preservation of Historic and Archaeological Data Act of 1974 (16 U.S.C. 469-469c)
- Executive Order 11593, Protection and Enhancement of Cultural Environment

## **Floodplain**

- Flood Disaster Protection Act of 1973 (42 U.S.C. 4001 et. seq.) and Implementary Regulations
- Title 24, Chapter X, Subchapter B, Nation Flood Insurance Program (44 CFR 59-79)
- Executive Order 11988 and HUD Procedure for Floodplain Management (24 CFR Part 55) (When Issued)

## **Wetlands**

- Executive Order 11990, Protection of Wetlands and Applicable State Legislation or Regulations. Also 24 CFR Part 55 (When Issued)

## **Noise**

- HUD Regulations (24 CFR Part 51, Subpart B)

## **Air Quality\***

- Clean Air Act of 1970 as Amended (42 U.S.C. 7401- 7742)
- EPA Regulation 40 CFR Part 50, and Partially)
- 40 CFR Part 51, 52, 61.

## **Man-Made Hazards**

- HUD Regulation (24 CFR Part 51, Subpart C)
- HUD Notice 79-33) Indefinite Notice, September 10, 1979.
- HUD Regulation 24 (CFR part 51 Subpart D)

## **Water Quality\***

- Federal Water Pollution Control Act, as Amended (33 U.S.C.1251-1376)
- Safe Drinking Water Act of 1974 (42 U.S.C. 300f-300j-10) as Amended
- U.S. Environmental Protection Agency (EPA) Implementing
- Regulations 40 CFR Parts 100-149

## **Solid Waste Disposal\***

- Solid Waste Disposal Act as Amended by the Resource
- Conservation and Recovery Act of 1976 (42 U.S.C. 6901-6987)
- U.S. Environmental Protection Agency (EPA) Implementing
- Regulations 40 CFR Parts 240-265

## **Coastal Areas**

- Coastal Zone Management Act of 1972 as Amended (16 U.S.C.1451-1464)
- Coastal Barrier Resources Act of 1982 (16 U.S.C. 3501 et. seq.)

## **Endangered Species**

- Endangered Species Act of 1973 as Amended (16 U.S.C. 1531-1543)

## **Farmlands Protection**

- Farmlands Protection Policy Act of 1981 (U.S.C. 4201 et. seq.) Implementing Regulations 7 CFR Part 658

## **Wild and Scenic Rivers**

- Wild and Scenic Rivers Act of 1968 as Amended (16 U.S.C.1271 et. seq.)

***\* Environmental laws that have permit, license or other forms of compliance usually implemented through a State agency are also listed here.***

***End of Application***