



**City of Spartanburg
Department of Neighborhood Services**

**Community Development Block Grant (CDBG – CV)
COVID- 19**

Project Application II

Applicant Agency

Applicant Name and Title

The City of Spartanburg Neighborhood Services Department is making available CDBG funding to assist eligible entities and/or businesses in response to local needs as it relates to COVID-19.

Eligible Activities include:

- Building improvement, including public facilities
- Assistance to Businesses, including special economic development assistance
- New or increased public services
- Planning for response to infectious diseases

Public Service Eligible uses include:

- Housing counseling to prevent displacement
- Job loss prevention
- Job training
- Medical supplies development and delivery
- Foods systems development and delivery

To be considered for funding, please complete the following questions as well as include all required attachments. Proposals must be submitted in the legal name of the organization or agency and an authorized representative of the applicant organization who has the legal authority to bind the organization in contract with the City of Spartanburg must sign the application (in BLUE INK).

All applications are due by 4pm on January 15, 2021 to be considered for funding.

Please submit to:

City of Spartanburg
Neighborhood Services
440 S. Church Street
Spartanburg, SC 29306

For questions or information, call: 864-596-3560

APPLICANT INFORMATION

Name of Organization: _____

Business Address: _____

Mailing Address: _____

Authorized Representative – NAME and TITLE: _____

Contact Person – NAME and TITLE: _____

Telephone: _____ Fax: _____

E-Mail Address: _____

Type of organization: Not for Profit/501(c) 3 For Profit Government/Public Agency

Federal Tax ID number: _____

DUNS Number: _____

(The Federal Government requires all applicants for federal funds to have a DUNS number)

Does the requested CDBG CV funding replace other funding for the same service(s)?

Have you received funding from the City of Spartanburg for this same activity in 2019 – 2020?

Yes _____ No _____

Total matching funds (if applicable): \$ _____

Project Title:

Application Questions:

1. Describe your organization’s mission and program activities.

2. Explain how COVID-19 has impacted your organization and the ability to provide services.

3. Describe your organization/project funding needs and objectives directly associated with COVID-19 relief or recovery efforts.

4. What type of funding are you applying for?
_____ Direct assistance for individuals and families
_____ Service operation funding

5. Describe the population your project will purposefully serve.

6. If you are partnering with other organizations/businesses on this project, please list them and their roles.

7. Describe in detail how assistance will be provided. (i.e. Who, how much, for what purpose)

8. How many recipients will your project serve and how will they be chosen?

9. What is your anticipated timeline for project start and completion?

10. Will your organization be able to sustain services that are offered? If so, how?

11. Does your organization utilize "Charity Tracker"?

Budget:

Amount requested: \$ _____

Please complete the budget worksheet: In column A, list the items for which you anticipate the need for CDBG funds; In column B, provide the calculation explaining how you arrived at the cost of the line item. In column C, provide your total projected request for that line item.

A – BUDGET ITEM	B – CALCULATION	C – CDBG CV REQUEST
BUDGET TOTAL		

Attachments:

The following attachments are required and must be included as part of your application package, including this checklist.

_____ All sections of the application are complete

_____ Copy of 501 (c) 3

_____ List of Board of Directors

_____ IRS Form 990 for last fiscal year

_____ Most current audited financial statement

_____ Certificate of Good Standing (Secretary of State)

_____ Budget form (attached)

I have completed this application in its entirety and I can legally sign for this organization.

Name

Date

Title and Agency