



**2011-12 CONSTRUCTION IMPROVEMENTS PROJECT PROPOSAL**

<b>C. Project Characteristics</b>	
1	Street address and nearest cross streets of the site or office where the program will be carried out:
2	Legal property owner:
3	What is the current zoning? Is this use permitted in this zoning?    Yes <input type="checkbox"/> No <input type="checkbox"/> If no, explain why:
4	Is a conditional use permit required?    Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, attach a copy of the permit.)
5	Complete applicable items for all construction projects (including rehabilitation, acquisition and demolition). Assessor's parcel number:  Square footage of proposed building or building addition:  Square footage of construction site parcel:  Length of improvements if street, water or sewer project:  Service capacity of existing facility:  Improved service capacity of the facility:  Age of structure: Is the structure registered as a historic landmark under: State <input type="checkbox"/> Federal <input type="checkbox"/> Local law <input type="checkbox"/> (If registered, attach a copy of the registration)
6	Check the community need that will be addressed by this proposal: <b>Public Facility Needs:</b> Senior Center Improvements <input type="checkbox"/> Community Center Improvements <input type="checkbox"/> Child Care Center Improvements <input type="checkbox"/> Youth Center Improvements <input type="checkbox"/> Park & Recreation Improvements <input type="checkbox"/> Fire Station Improvements <input type="checkbox"/> Social Care Facility Improvements <input type="checkbox"/>  <b>Code Enforcement Needs:</b> Code Enforcement <input type="checkbox"/> Demolition and Clearance <input type="checkbox"/> Blight Abatement <input type="checkbox"/>  <b>Other</b> <input type="checkbox"/> (Please describe)  <b>Infrastructure Needs:</b> Water and Sewer Improvements <input type="checkbox"/> Drainage Improvements <input type="checkbox"/> Street Improvements <input type="checkbox"/> Sidewalk Improvements <input type="checkbox"/> Commercial/Industrial Infrastructure Development <input type="checkbox"/>  <b>Accessibility Needs:</b> Removal of Architectural Barriers <input type="checkbox"/>  <b>Historic Preservation Needs:</b> Historic Preservation Improvements <input type="checkbox"/>
7	Describe the geographic boundaries of the neighborhood, community, or region to be served by this project. This description must include service area boundaries if land acquisition or structural improvements are proposed (attach a map):

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<b>D. Project Budget</b>		
Provide the estimated financial data for the project as requested below for the appropriate project group. Costs should be based on the best information available. When preparing this data, consider the following factors: (a) project should be completed in one phase if possible, or if phased, operational capability of the phases should be independent of each other; (b) a phased project should be prioritized and broken into distinct parts, with estimated cost and priority for each part; (c) <b>apply federal prevailing wage rates to construction projects over \$2,000. See Attachment A "Highlights of Federal Standards Provisions" page 8.</b>		
	<b>CDBG Share</b>	<b>Other Source</b>
Architectural and engineering services	\$	\$
Site acquisition	\$	\$
Local Review application	\$	\$
Construction	\$	\$
Other	\$	\$
<b>Total Costs</b>	\$ 0	\$ 0
<b>Grand Total (CDBG &amp; Other)</b>	\$ 0	
Estimator (name and title):		

<b>E. Amount of CDBG Funds Requested</b>		
1	Amount of CDBG funds requested in this application (must equal Section D CDBG Share)	\$
2	Additional funds to be provided by <u>Other Source(s)</u> for this project. The date that the <u>Other Source(s)</u> of funds have been or will be awarded and available, must be stated below:	
	Source(s) <input type="checkbox"/> Federal (Type of Funding): _____ <input type="checkbox"/> State (Type of Funding): _____ <input type="checkbox"/> County (Type of Funding): _____ <input type="checkbox"/> Other (Type of Funding) _____ Award Date / /                      Date Available / /	\$
	Source(s) <input type="checkbox"/> Federal (Type of Funding): _____ <input type="checkbox"/> State (Type of Funding): _____ <input type="checkbox"/> County (Type of Funding): _____ <input type="checkbox"/> Other (Type of Funding) _____ Award Date / /                      Date Available / /	\$
	Source(s) <input type="checkbox"/> Federal (Type of Funding): _____ <input type="checkbox"/> State (Type of Funding): _____ <input type="checkbox"/> County (Type of Funding): _____ <input type="checkbox"/> Other (Type of Funding) _____ Award Date / /                      Date Available / /	\$
	Source(s) <input type="checkbox"/> Federal (Type of Funding): _____ <input type="checkbox"/> State (Type of Funding): _____ <input type="checkbox"/> County (Type of Funding): _____ <input type="checkbox"/> Other (Type of Funding) _____ Award Date / /                      Date Available / /	\$
	<b>Total of Other Sources</b> (Should equal "Total costs, Other Sources" in section D above)	\$ 0

**Please note:** If this project also benefits residents of non-participating jurisdictions, matching funds in proportion to the percentage of non-cooperating residents to be served must be provided by other funding sources.

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**F. Benefit Areas**

This section requires a break down of the requested CDBG funds according to the proposed project's benefit area. Only enter amounts for cities where the project will provide a primary benefit. Partial funding of a project proposal may occur and must be considered when calculating a requested amount for more than one area. **The total amount must be \$75,000 or greater and must be sufficient to complete the project for the identified city. Big Bear Lake, Grand Terrace and Needles are cities receiving less than \$100,000, which will have no limit, but may only fund four (4) projects.**

- 1) **Cooperating Cities:** The following cities participate as cooperating cities in the County's CDBG program. Please determine if the primary service area for your proposed project would include one or more of the following cities. If the project would provide predominate or partial benefit to city residents, the County will request a funding recommendation from the benefiting city or cities. Enter the requested amount of CDBG funds needed to provide the proposed project to each applicable city. Sub-total your entries below.

	Amount Requested		Amount Requested
Adelanto	\$	Loma Linda	\$
Barstow	\$	Montclair	\$
Big Bear Lake	\$	Needles	\$
Colton	\$	Twentynine Palms	\$
Grand Terrace	\$	Yucaipa	\$
Highland	\$	Town of Yucca Valley	\$
<b>Sub-total of Funds Benefiting Cooperating Cities:</b>			\$ 0

- 2) **Total Funds:** This amount must equal the amount of CDBG funds requested in this application on Line 1, in Section E.

<b>Total Funds Requested</b>	\$ 0
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**G. Maintenance and Operation**

All capital improvements or facilities will require a Maintenance and Operation (M & O) contract between the County and an M & O Entity. The MAINTENANCE AND OPERATION COMMITMENT must be signed by a representative of the M & O entity with authority to obligate the organization.

- 1) **MAINTENANCE AND OPERATION COMMITMENT:** The governing body of the below named public, quasi-public, or non-profit entity has the financial capacity and is willing to assume the Maintenance and Operation (M & O) responsibility and costs associated with the indicated community development project. This body has reviewed the "Estimated Annual Maintenance and Operation Budget" part of this section. To the best of this body's ability, it has determined this budget to be a true and accurate estimate of the annual M & O costs for the proposed project.

It is understood that without a commitment for maintenance and operation, the indicated project may not be considered for funding under the Community Development Block Grant program. Should this project be funded, a formal M & O contract between the County and the M & O entity shall be written and signed before any funds can be released.

NOTE: The Maintenance and Operation cost for capital improvements and facilities are not eligible for CDBG funding.

Proposed Project:
Legal/Incorporated Name of Prospective M&O Entity:
Address:
Federal I.D. Number of M&O Entity:

**Signature:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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2) **ESTIMATED ANNUAL MAINTENANCE AND OPERATION BUDGET**

**M&O Annual Expenses**

**Estimated Dollar Value**

**Utilities**

Electric	\$	_____
Water	\$	_____
Gas	\$	_____
Telephone	\$	_____
Disposal Service	\$	_____
Other ( )	\$	_____
<b>Sub-total</b>	\$	<u>0</u>

**Materials**

Janitorial Supplies	\$	_____
Office Supplies	\$	_____
Recreational Supplies	\$	_____
Ground Supplies	\$	_____
Other ( )	\$	_____
<b>Sub-total</b>	\$	<u>0</u>

**Maintenance—Capital Improvements**

Building Repair	\$	_____
Maintenance of Equipment	\$	_____
Improvements to Property	\$	_____
Other ( )	\$	_____
<b>Sub-total</b>	\$	<u>0</u>

**Insurance**

Liability	\$	_____
Fire	\$	_____
Other ( )	\$	_____
<b>Sub-total</b>	\$	<u>0</u>

**\*Personnel**

	# Of People	Man-Hours	
Maintenance			\$ _____
Secretary			\$ _____
Administrator			\$ _____
Program Staff			\$ _____
Other			\$ _____
<b>Sub-total</b>			\$ <u>0</u>

\*List # of people and man hours based on 2080 Hours per year.  
Dollar value must include salaries and benefits.

**M&O Annual Expense Total** \$ 0

**Revenue Sources** (List out all sources such as budget sources, memberships, user fees, etc.)

_____	\$	_____
_____	\$	_____
_____	\$	_____
<b>Budgeted Revenue Total</b>	\$	<u>0</u>

**Assets/Liabilities**                      **Budgeted Revenue minus M&O Expense** \$ 0

H. Organizational Information

1) **Organizational History:** (This is applicable only if you are a non-profit organization).

a. Date Organization founded: / /	
b. Date Organization incorporated as a non-profit organization: / /	
c. Federal Identification Number:	State Identification Number:
d. Number of paid staff:	Number of volunteers:
e. DUNS Number:	

2) Is this a "faith-based" organization? \*\*Yes  No

\*\*Generally, a faith-based organization was founded or is inspired by faith or religion. Such organizations often choose to demonstrate that faith by carrying out one or more activities that assist persons who are less fortunate.

**DETAILED PROJECT DESCRIPTION**

(Continuation of Section B, Project Description, Page 1)

Within the space provided on this page, provide detailed information on the construction project to be completed, its purpose and its beneficiaries. Include professional estimates for material and labor costs, the square footage of the proposed project and any pertinent construction related information. Also, include the cost of any required permitting for the proposed project, such as building permits. Please attach applicable maps, plans and brochures.

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DETAILED PROJECT DESCRIPTION (Continued)

**Authorized Signature:** To the best of my knowledge, the information provided on this application is true and I am authorized to submit this application on behalf of the applicant organization. Also, I acknowledge that insurance coverage including, but not limited to, Comprehensive General Liability, Automobile Liability, and Professional Liability (or Errors and Omissions Liability) will be required before CDBG funds can be made available to approved projects.

**Signature:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

PLEASE SUBMIT ONE SIGNED PAPER COPY OF EACH COMPLETED AND SIGNED PROJECT PROPOSAL TO:  
County of San Bernardino, Department of Community Development and Housing, 290 North "D" Street, Sixth Floor, San Bernardino, CA 92415-0040, Attention: Program and Compliance Section.

For assistance or information regarding the completion of this proposal, call (909) 388-0800 or FAX (909) 388-0929.

This application form can be accessed on CDH's Web Page at:  
[http://www.sbcountyadvantage.com/Community\\_Development\\_Information-Community\\_Dev\\_Division.aspx](http://www.sbcountyadvantage.com/Community_Development_Information-Community_Dev_Division.aspx)

## Attachment A

### 2011-12 CONSTRUCTION IMPROVEMENTS PROJECT PROPOSAL

#### HIGHLIGHTS OF FEDERAL STANDARDS PROVISIONS (DAVIS –BACON ACT)

- Applies to any construction, rehabilitation, alteration, or repair, including painting, flooring, and decoration, in an amount of \$2,000 or more, any part of which is federal money.
- The prevailing federal wage rates and fringe benefits are effective as of the date of the advertisement for bids. (Davis-Bacon wage rate schedule is available on the internet at: <http://www.access.gpo.gov/davisbacon/>).
- Workers must be paid weekly and certified payrolls submitted weekly in the prescribed format. The payrolls must include details of each worker's job classification, hours worked, and wages and benefits paid. Certified payrolls must be reviewed as soon as they are received and compared to the appropriate federal wage decision. Any discrepancies must be resolved immediately.
- Workers must be interviewed on the job site regarding appropriate job classification and wages and benefits received. Employee interviews must be compared to the appropriate federal wage decision. Any discrepancies must be resolved immediately.
- Contractor and subrecipient must maintain all records for a minimum of five years after completion of the project.

#### CDBG Application Checklist

Community-based organizations are required to include one copy of the items listed below. If you are not submitting these items at this time, please notify the Department of Community Development at (909) 388-0800 to make other arrangements. The following information is required before any contract or reimbursement can be completed.

- Summary of agency's current year General Operating Budget
- List of Agency's Board of Directors, including names and addresses
- Proof of existing non-profit/tax-exempt status (Letters from the Federal Internal Revenue Service and State Franchise Tax Board)
- Current certificate of insurance and amounts covered
- Organizational Chart
- Minutes of last Board meeting

If your application is funded you will be required to provide a copy of you last audit and your Articles of Incorporation and Bylaws must be on file.

Attachment B

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CDBG Application Training

All Community Based Organizations are required to attend a 2011-12 CDBG Application Training Session before the application will be accepted. See the 2011-12 CDBG Application Training Schedule below.

<b>CDBG Application Training Schedule</b>		
<b>Date</b>	<b>Time</b>	<b>Location</b>
Wednesday, 1/5/2010	10:00am - 12:00pm	<b>HIGH DESERT VICTOR VALLEY AREA</b> Mojave Desert Air Quality Management District, Board Chambers 14306 Park Avenue, Victorville, CA
Wednesday, 1/5/2010	3:00pm - 5:00pm	<b>CENTRAL VALLEY AREA</b> County of San Bernardino Workforce Development Department Conference Room 215 North D Street, San Bernardino, CA