



I. BACKGROUND

In response to the Coronavirus Pandemic (COVID-19), the U.S. Department of Housing and Urban Development (HUD) allocated the City of Rocky Mount \$638,042 in Community Development Block Grant Coronavirus (CDBG-CV) funding. This allocation was authorized by the Coronavirus Aid, Relief, and Economic Security Act (CARES Act), Public Law 116-136, which was signed on March 27, 2020.

The City of Rocky Mount plans to allocate approximately \$267,434 of CDBG-CV funds to Public Service Activities to remain consistent with the current 3-Year Consolidated Plan. CDBG-CV funds made available are to prevent, prepare for, and respond to coronavirus. Every grant must be expended for activities that benefit low- and moderate-income persons by providing a public service.

II. FUNDING AUTHORITY

The CDBG regulations, at 24 CFR part 570, implement Title I of the Housing and Community Development Act of 1974, as amended. The CARES Act modifies some CDBG program rules and authorizes the Secretary of HUD to grant waivers and alternative requirements. The act limited the exemption from the 15% cap to activities to prevent, prepare for, and respond to coronavirus. The suspension of the 15% cap applied not only to CDBG-CV funds, but also to any FY 2019 and FY 2020 CDBG reprogrammed allocations.

III. PROGRAM REQUIREMENTS

Service Provider Requirements

To be awarded funding, the service provider must:

- Be a non-profit organization with federal 501(c)(3) tax-exempt status, a government entity, or a faith-based organization;
- Directly serve Rocky Mount neighborhoods or households;
- Have at least three years of experience assisting low- and moderate-income households or neighborhoods. If you are meeting the income requirement on a household basis, at least 51 percent of your households must be low income. Certain persons, including certain seniors, homeless, and disabled persons, abused children, battered spouses, illiterate adults, persons living with AIDs, and migrant farm workers, may be presumed to be low- and moderate-income. Otherwise, as of June 15, 2022, income limits for low- and moderate-income households are as follows:



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| Family Size (Number of Persons in Family) | | | | | | | | |
|---|----------|----------|----------|----------|----------|----------|----------|----------|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| Income Limits | \$37,450 | \$42,800 | \$48,150 | \$53,500 | \$57,800 | \$62,100 | \$66,350 | \$70,650 |

- Ensure the confidentiality of records concerning program participants;
- Comply with all City of Rocky Mount contract agreement requirements, including following restrictions on the use of federal funds, utilizing the applicable Office of Management and Budget standard for financial management and audits, and submitting timely and complete invoices and quarterly reports describing program achievements. You must provide information on clientele demographics, if you are meeting income guidelines on a household basis or document the areas of service if you are meeting income guidelines on a neighborhood basis.

PLEASE NOTE

All public service activities are subject to the same Federal requirements as the City of Rocky Mount. Those requirements are outlined in 2 CFR Part 200, found at the following link:

http://www.access.gpo.gov/nara/cfr/waisidx_04/24cfr570_04.html .

Subrecipients which are governmental entities (including public agencies), shall be subject to the uniform administrative requirements of 2 CFR 200.318(a).

Subrecipients that are not governmental entities shall be subject to the uniform administrative requirements of **24 CFR 570.502(b) (1-7)**.

Applicants that do not already have a copy of these applicable regulations may obtain a copy from the Community Programs Department or obtain them from the Office of Management & Budget <http://www.whitehouse.gov/omb/circulars/index-education.html> or HUD <http://www.hud.gov/offices/cpd/communitydevelopment/rulesandregs/index.cfm> web sites.

IV. ELIGIBLE AND INELIGIBLE ACTIVITIES

Eligible activities for CDBG-CV public service include:

- Provide testing, diagnosis, or other services at a fixed or mobile location.
- Increase the capacity and availability of targeted health services for infectious disease response within existing health facilities.
- Support operations of food banks/pantries including staffing, supplies, utilities, maintenance, sanitary maintenance, and insurance.



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- Support feeding programs to vulnerable populations such as seniors, children, and youth affected by the COVID-19 outbreak.
- Provide emergency payments (no more than six months) on behalf of individuals and families to prevent homelessness, including utility payments to prevent cutoff of and rent/mortgage payments to prevent eviction.
- Fair housing, tenant/landlord counseling for those affected by COVID-19.
- Homeless/AIDS patient programs for those affected by COVID-19.
- Services for victims of domestic violence affected by COVID-19.
- Services for persons with disabilities affected by COVID-19.
- Mental health services for those affected by COVID-19.
- Substance abuse services for those affected by COVID-19.
- Crime awareness/prevention with a tie back to COVID-19.
- Employment training for those affected by COVID-19.
- Senior, youth, and/or child-care services for those affected by COVID-19.
- Transportation services for those affected by COVID-19.
- Legal services for those affected by COVID-19.
- Services for abused and neglected children affected by COVID-19.

Funds may be used to pay for staff, supplies and materials, and certain facility operating or administrative overhead costs that are directly related to delivery of the funded public service program.

The following activities are ineligible:

- Any activity that is not directly related to the prevention of, preparation for, or response to the Coronavirus.
- Any activity that does not benefit a majority low-to-moderate income persons.
- Income payments for more than six (6) consecutive months.
- Supplanting or substituting expenses currently paid for by other sources.
- General government expenses.
- Improvements to buildings for the general conduct of government.
- Political activities and lobbying.
- Purchase of equipment, specifically for construction but also including fire protection equipment, furnishings, and personal properties.
- Maintenance expenses.

Recipients of funds will also be required to provide HUD-required outcome indicators for Public Services, including the number of persons assisted as follows:

- With new access to a service



- With improved access to a service
- Where activity was used to meet a quality standard or measurably improved quality, report the number that no longer only have access to substandard service

V. FUNDING PRIORITY

Priority will be given to applications that address the following:

- Homelessness prevention programs for those affected by COVID-19.
- Services for victims of domestic violence affected by COVID-19.
- Transitional housing services for those affected by COVID-19.
- Housing counseling for those affected by COVID-19.
- Provide emergency payments (no more than six months) on behalf of individuals and families to prevent homelessness, including utility payments to prevent cutoff of and rent/mortgage payments to prevent eviction.
- Support operations of food banks/pantries including staffing, supplies, utilities, maintenance, sanitary maintenance, and insurance.
- Support feeding programs to vulnerable populations such as seniors, children, and youth affected by the COVID-19 outbreak



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You must submit two copies of your entire application package, including one original signed copy. All materials should be packaged in the order presented in this RFP. If you would like an electronic copy of these forms, please send an email to Cornelia.McGee-Anthony@rockymountnc.gov. (The City of Rocky Mount may request additional information from an applicant prior to granting funds.)

APPLICANT INFORMATION

Legal Name of Agency Submitting Proposal: _____

Project/Program Name: _____

Federal Identification Number (nine-digit number) _____

Agency Unique Entity Identifier Number: _____

Agency Mailing Address _____

Have you previously received CDBG funding from the City of Rocky Mount? Yes ___ No ___
When? _____

Grant Application Contact Person: _____

Phone Number: _____

Title: _____

Email: _____

Authorized person to certify commitments made in this grant: _____

Authorized Signature: _____

Name: _____

Date: _____

Title: _____

Email: _____

Brief Description of Project/Program: _____

Amount CDBG-CV Funding Requested: _____ Total Project Budget: _____

Number of People Served: _____



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PROPOSED BUDGET

Use this form to indicate how the requested grant funds will be utilized and matching resources for the grant. Matching funds may include non-federal grants; the value of any donated material, building, or lease, calculated at fair market value; and volunteer hours. You must submit a budget showing all expenses and resources associated with the proposed project, not only those staff or other program expenses for which you are requesting CDBG-CV funds. If you prefer to submit your own spreadsheet rather than this form, please feel free to do so, provided that all of the columns shown below are included and complete.

| Budget Line Item | CDBG-CV Funds Requested | Matching Resources | Total Budget | Source of Match – specify if federal or non-federal |
|-------------------------|--------------------------------|---------------------------|---------------------|--|
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| Total | | | | |



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PERFORMANCE MEASURES

Use this form to show how the program will benefit the community and meet the HUD-required outcome indicators for Public Services:

- Inputs are resources used, such as staff and money.
- Outputs are the number of units of service or clients served.
- Outcomes are the benefits received by clients.

Performance Measures

| Inputs | Outputs | Outcomes |
|--------|---------|----------|
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PROGRAM SUMMARY

Attach a one-page summary of the proposed project identifying how it will prevent, prepare for, and/or respond to coronavirus. Briefly identify the target population, key service elements, and need for service, and approximate number of persons you expect to serve. You will describe the program in more detail in the Program Description section below.

PROGRAM EXPERIENCE AND QUALIFICATIONS

Attach a summary detailing the qualifications of your organization to carry out the proposed project, in terms of mission, organizational capacity, experience with similar or related programs, track record with target population, established presence in Rocky Mount, etc. (Document is to be no more than two pages in length). Please demonstrate that you have operated a comparable program for at least three years. Describe your collaborations with other human service providers as they relate to the proposed project. Attach an organizational brochure or annual report, if you have one available. Be sure to specify any awards or commendations you have received for related work. Please note within your grant application, that if you should be awarded, no changes to any scope of work will be permitted for activities proposed without written agreement from City of Rocky Mount Department of Community Development.

FISCAL ADMINISTRATION CAPACITY

Yes No

Our agency has past-due obligations with a funding source or unearned grant from a previous contract which has not been returned to the funding source. If yes, attach a description of the funding source, amount, and reasons for past due obligation.

Yes No

In the past 3 years, our agency has had an Internal Revenue Service or State of North Carolina levy. If yes, attach a description of the problem and your plan and timeframe to resolve it.

Attach a summary of not more than one page in length your organization's capacity to manage and administer federal funds and comply with OMB financial control and reporting standards. Be sure to specify any previous experience with CDBG or other HUD funds.

AUDIT REPORTS AND MONITORING

Yes No

Our organization has expended \$25,000 or more in Federal grant funds in the previous fiscal year.



Yes No

Our organization has had a Single Audit or other financial audit in the last 12 months. If yes, attach the full audit report, including corrective actions as applicable.

Yes No

Our organization has had monitoring visits by a funding agency within the last 12 months. If yes, complete the table below indicating the results of the monitoring activity.

| Awarding Entity | Result (Finding(s) – Yes/No) | Corrective Action Plan Required? | Status (Open or Closed) |
|-----------------|---------------------------------|-------------------------------------|----------------------------|
| | | | |
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PROGRAM DESIGN

Attach a program description of not more than two pages in length. It must demonstrate that the proposed program is a new program, or alternatively offers a quantifiable increase in service for an existing program (i.e. the intensity and range of services available or the number of clients to be served). The description must also address the following:

- The purpose of the proposed program.
- The need for the proposed program, and what, why, and how the project prevents, prepares, and/or responds to COVID-19 pandemic.
- The types of services to be provided.
- The target population or neighborhoods for the program and how they were identified.
- Prepare one or more Outcome Statements for the intended objective(s) and outcome of the program and intended output(s).
- The plans and timeline for program start-up, if this is a new program.



REQUIRED ATTACHMENTS FOR ALL APPLICANTS

You must attach the following:

- Organizational chart illustrating the staff positions and organizational units involved in this project.
- Current rooster of your organization's Board of Directors with contact information for each member.
- Copy of your organization's Articles of Incorporation, including Amendments, and By-Laws.
- Proof of your organization's 501(c)(3) federal tax-exempt status and/or North Carolina nonprofit, tax-exempt corporation. (May not apply to faith-based organizations)
- Copy of your organization's most recent audited financial statement or single audit report.
- Copy of your organization's policies and procedures for financial grant management.
- Attach total annual organizational budget (for current fiscal year).
- Completed Budget Form indicating sources of all funds



ACKNOWLEDGMENT OF CDBG-CV REQUIREMENTS

This acknowledgment document concerning requirements if funds are awarded organizations must be signed by the applicant's Board President, Executive Director, or other authorized representative.

1. *The organization acknowledges that it must provide evidence and maintain records documenting that CDBG-CV funds have primarily benefited low-income (below 80% Median Family Income) City of Rocky Mount residents.*
2. *The organization acknowledges that it will not deny assistance to any individual on the basis of race, creed, religion, sex, national origin or handicapped status.*
3. *The organization acknowledges that the CDBG-CV funds may not be used for inherently religious activities such as worship, religious instruction or proselytizing.*
4. *The organization acknowledges that it must follow Federal rules concerning administrative requirements and cost principals found in OMB Circulars A- 87, A-110, A-122, A-133 and A-128 as applicable.*
5. *The organization acknowledges that it must submit an audited financial statement within 150 days of the close of their grant year.*
6. *The organization acknowledges that it must follow conflict of interest requirements as found in §570.611 CFR.*
7. *The organization acknowledges that it will publicize the funding of the program by City of Rocky Mount CDBG-CV on program literature, brochures, and also in news releases, articles, public service announcements, and advertisements.*
8. *The organization acknowledges that it will comply with the anti-lobbying provision which prohibit federally appropriated funds from being used to influence Congressional action.*
9. *The organization acknowledges the City's indemnification clause in agreements which hold the City harmless from actions related to the services required by the agreement.*
10. *The organization acknowledges that payment is on a reimbursement basis and failure to follow any of the above requirements or other requirements contained in the agreement may result in a withholding of funds and/or termination of the agreement.*
11. *The organization acknowledges that payment can only be made for funds obligated during fiscal year 2022-2023.*

Signature of Board President/Executive Director/Authorized Representative

Date