



City of Harrisburg, PA

CDBG/ESG Application for Funding

Applications Due by 5:00pm EST Friday, May 12th

2023 - 2024 CDBG/ESG APPLICATION FOR FUNDING

The City of Harrisburg annually applies for grant funding from the U.S. Department of Housing and Urban Development (HUD) through the Community Development Block Grant (CDBG) Program and Emergency Solutions Grants Program (ESG). These funds help the City provide decent housing, a suitable living environment, and expand economic opportunities for low- to moderate-income (LMI) persons and persons who are experiencing homelessness or are at-risk of homelessness.

Applicant organizations must be either a (1) public agency or (2) private, non-profit entity and must be in good standing with the Federal Government, State of Pennsylvania and the City of Harrisburg.

To be considered for funding, a project must primarily benefit low- and moderate-income persons or special needs populations as defined by HUD programmatic regulations.

All applicant organizations **must** attend one of the following **Mandatory Workshops** to be eligible to apply for funding:

- **Tuesday, April 11, 2023**
 - **9:30 – 11:00 AM**
 - **1:00 – 2:30 PM**
- **Wednesday, April 12, 2023**
 - **9:30 – 11:00 AM**
 - **12:30 PM – 2:00 PM**

All workshop sessions will be held at the City of Harrisburg MLK Jr. City Government Center, 10 N 2nd Street, Harrisburg, PA, 17101. To register for a workshop, email the following information to DBHDHousing@harrisburgpa.gov:

- Name
- Organization
- Title
- Workshop Date and Time Selection

If after attending a workshop applicants need additional assistance, questions can be sent to DBHDHousing@harrisburgpa.gov.

A. SUBMISSION INSTRUCTIONS:

Applications must be received by DBHD no later than 5:00 p.m. EST on Friday, May 12, 2023. **NO LATE APPLICATIONS WILL BE ACCEPTED.**

- Applicants are required to submit an electronic application (scanned application), with attachments, signed and dated. **Applicants must submit a separate and complete application for each project type for which funding is requested.**

- Applicants shall submit one (1) electronic copy of the entire application via email to: DBHDHousing@harrisburgpa.gov.
- Answer all questions applicable to your project concisely and in the space provided. Include attachments as requested.
- Incomplete or late applications will not be considered. To be considered for funding, the application must be complete with all required attachments. The City reserves the right to negotiate the final scope of work and related funding for any approved applications.

B. REVIEW PROCESS:

It is the responsibility of the City of Harrisburg to ensure that City funds are disbursed and managed in accordance with funding regulations. To fulfill this responsibility, the City of Harrisburg will conduct a review of all applicants applying for funding to evaluate their operations, services, projects, and budgets. Any project and/or organization not receiving **a minimum score of 75** is not eligible for further review. Receipt of maximum scoring points is not a guarantee of funding. Receipt of an award letter is NOT a guarantee of funding. **Prior funding awards do not guarantee continued or future funding.**

The City, in its sole and absolute discretion, with or without cause, and without liability of any kind to any applicant, reserves the right to accept or reject any and/or all applications either in whole or in part, waive any informalities or irregularities of any applications, cancel this CDBG/ESG Funding Application at any time and/or take any action in the best interest of the City. The City's decision in all matters shall be final. The City reserves the right to contact an applicant if additional information is required.

Accepted applications will be reviewed and scored based on the following criteria:

Project Description	25 points
Agency Summary	30 points
Financial Management	30 points
Statement of Need	15 points

Agencies who have received prior funding through the City of Harrisburg will also be evaluated on past performance in carrying out programmatic activities and contractual compliance.

Factors to be considered are:

- Agency ability to meet service delivery goals
- Timely expenditure of funds
- Timely reporting
- Accuracy of reporting
- Ability to meet audit requirements
- Other programmatic and fiscal contractual requirements.



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REQUIRED DOCUMENT CHECKLIST

✓	Required Document
	Completed Application
	Completed Budget Worksheet
	Resolution from the Board of Directors authorizing the application for and use of funds from the City of Harrisburg
	Organizational Chart with employee names and titles.
	List of all current or proposed staff names and titles directly associated with proposed grant/program.
	Job descriptions with pay scales for Executive Director, Fiscal Officer, Program Administrator, and Program Staff and any other proposed positions to be funded.
	Resumes of Executive Director, Fiscal Officer, Program Administrator, Program Staff, copies of certifications, and consultant contract (if applicable).
	List of Current Board Members
	Conflict of Interest Disclosure Forms for all Board Members/Commission Members, Executive Management/Officers, and Program Staff associated with Delivery of Program
	Year-to-Date Financial Statement
	Most recent Certified Audit, Management Letter, and Agency Response
	Most recent Organization By-Laws
	Certificate of Non-profit Status
	Articles of Incorporation
	Letter of Endorsement from the Capital Area Council on Homelessness CoC (ESG applicants only)
	Proof of General Liability Coverage
	SAM.gov Registration Confirmation
	Certificate of Attendance for Application Workshop on April 11th or April 12th

AGENCY INFORMATION

Organization or Agency Legal Name:

Street Address:

City: _____ State: _____ Zip Code: _____

Unique Entity Identifier (Your UEI can be found on Sam.gov):

Fed. I.D. #:

System for Award Management CAGE Code# _____ EXP Date _____

Council District:

Primary Contact: _____ **Title:** _____

Telephone No: _____ E-mail: _____

President/Executive Director: _____

Telephone No: _____ E-mail: _____

Location of proposed service/program/project (if different than stated above):

Street Address:

City: _____ State: _____ Zip Code: _____

Council District(s) if different than stated above:

- 1) **Project Description - All Applicants (15 points):** Provide a detailed description of your proposed project. This should include a summary of the project and the objectives that the agency/organization will accomplish during the program year. *Type your response in the text box below. 200 maximum word count.*

- 2) **Project Description - CDBG Applicants ONLY: Select one service delivery area:**
Public Facilities Improvements (rehabilitation including acquisition and construction)
Public Services (select one primary beneficiary below):
Homeless (as defined in 24 CFR 91.5)
Victims of abuse
Special needs population (elderly, disabled adults, illiterate adults)
Low-to-moderate income

3) **Project Description - ESG Applicants ONLY:**

- Select the program components that this project is applying for (select all that apply):
Emergency Shelter
Street Outreach
Homelessness Prevention
Rapid Rehousing
Homeless Management Information System (HMIS)

- Organization currently uses or is willing to use HMIS?
Please note this is threshold criteria
Yes
No

- Organization currently participates or is willing to participate in the Continuum of Care Coordinated Entry Process?
Please note this is threshold criteria
Yes
No

- Organization is an active member of the Continuum of Care?
Please note this is threshold criteria
Yes
No

- Organization has adopted a Housing First policy?
Yes (5 points)
No (0 points)

- Does your application include a project specific endorsement from the Continuum of Care? If so, you must include a copy of the endorsement with the application.
Yes (5 points)
No (0 points)

4) **Project Description - CDBG Applicants ONLY: Select the statement that best describes the project:**

- This project is a new service not already available in the community. (10 points)
This project is a new service for this organization, but the service is already available in the community by another organization. (5 points)
This project is expanding an existing service. (0 points)

- 5) **Agency Summary - All Applicants (10 Points):** Summarize the professional expertise of project-relevant staff members responsible for implementation of this project in their ability to manage or provide program services. If the staff member does not have prior experience in providing the proposed service, please indicate experience and successes carrying out similar programs. Remember to attach all project-relevant staff resumes to this application. *Type your response in the text box below. 200 maximum word count.*

- 6) **Agency Summary - All Applicants:** Select the response that best describes the project-relevant staff members' experience with program management of grant programs.

Multiple staff members associated directly with the project have relevant program management experience, reflected on their resumes attached to this application. (5 points)

No other staff members, besides the manager, associated directly with the project have relevant program management experience. (0 points)

- 7) **Agency Summary – All Applicants:** Select the response that best describes the project manager's years of relevant experience managing programs and services.

5+ years of experience in relevant program management (5 points)

3-5 years of experience in relevant program management (3 points)

1-3 years of experience in relevant program management (2 points)

0-11 months of experience in relevant program management (1 point)

- 8) **Agency Summary - All Applicants:** The overall number of staff dedicated to implementation of this project:

- 9) **Agency Summary - All Applicants:** The number of staff dedicated to implementation of this project who have experience with City of Harrisburg grant programs:

- 10) **Agency Summary- All Applicants:** The number of staff dedicated to implementation of this project who have experience with non-City of Harrisburg grant programs:

- 11) **Agency Summary - All Applicants:** The number of staff dedicated to implementation of this project with no grant experience:

12) Agency Summary – All Applicants (10 points): Provide a detailed project management plan. *Type your response in the text box below. 200 maximum word count.*

13) Financial Management – All Applicants (5 points): Describe grant management experience of key staff responsible for financial management of the project. *Type your response in the text box below. 200 maximum word count.*

14) Financial Management - All Applicants (5 points): Describe grant administration software and financial management capabilities, and financial grant management policies and procedures the organization possesses in order to manage this project consistent with Federal financial management requirements as set forth in 2 CFR 200. *Type your response in the text box below. 200 maximum word count.*

15) Financial Management - All Applicants: Select the response that best describes the organization's financial grant management:

- 3 + years previous experience with City of Harrisburg grant programs. (5 points)
- 1-2 years previous experience with City of Harrisburg grant programs. (3 points)
- Previous experience with similar grant programs outside of City of Harrisburg. (2 points)
- No grant management experience (0 points)

16) Financial Management– All Applicants: This agency/organization has a dedicated Chief Financial or equivalent financial officer.

- Yes (5 points)
- No (0 points)

17) Financial Management – Matching Funds – All Applicants: The applicant has documented commitments for matching funds as follows: *(ESG applicants must provide at least 100%)*

- Greater than 25% of requested grant funding (5 points)
- Between 15 and 24.9% of requested grant funding (3 points)
- Between 10 and 14.9% of requested grant funding (2 points)
- Less than 10% of requested grant funding (0 points)

18) Financial Management – All Applicants (5 points): Describe internal controls and separation of duties the organization has currently in place to properly manage public funds. *Type your response in the text box below. 200 maximum word count.*

19) Statement of Need – All Applicants (10 points): Describe the community problem or need to be addressed by the proposed project. Support the urgency of meeting this need using current data.

Type your response in the text box below. 200 maximum word count.

20) Statement of Need - CDBG Applicants ONLY: Select the population that best describes the project's primary target population (choose one):

Homeless (5 points)

Victims of domestic violence or victims of abuse (3 points)

Special needs populations (Elderly, disabled, illiterate adults, etc.) (2 points)

Low-to-Moderate Income population, including Harrisburg Housing Authority residents (0 points)

21) Statement of Need - ESG Applicants ONLY: Select the population that best describes the project's target population (choose one):

This project provides a mental health or substance abuse service. (5 points)

Elderly, disabled, or special needs (3 points)

Fleeing Domestic Violence (3 points)

At-risk or homeless Youth (3 points)

Other eligible target population or service. (0 points)

22) All Applicants – If your organization receives partial funding, will you still be able to complete the project by leveraging other funding sources? Describe other funding resources.

Type your response in the textbox below. 200 maximum word count.

[to be placed on organization letterhead]

RESOLUTION

At a meeting held on the following date _____, the Executive Committee/Board of Directors of the following agency: _____ passed the following resolution:

The Board of Directors authorizes the application for and use of funds from the City of Harrisburg's Department of Building and Housing Development for activities described in the proposal and, if awarded funds, shall implement the activities in a manner to ensure compliance with all applicable federal and local laws and regulations.

Signature of Board President

Date

Printed Name of Board President

Telephone Number



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CONFLICT OF INTEREST DISCLOSURE FORM

Federal Law prohibits persons who exercise or who have exercised any functions or responsibilities with respect to the funding sources administered through this jurisdiction (1) or who are in the position to participate in a decision making process or to gain inside information with regard to such activities, may obtain a financial interest or benefit from an assisted activity, either for themselves or those whom they have family or business ties, during their tenure or for one year thereafter.

Therefore, please answer the following disclosure questions:

1. Are you currently a (Please Check One):

- Board Member City Council Member Officer
- Executive Management Staff Staff directly associated with delivery of program

2. State position held: _____

3. Are you a business partner of any City of Harrisburg employee(s) or member of City Council?

(Please Check One): No Yes

If yes, please state the name of the City of Harrisburg employee(s) and the Department or City Council Member(s):

4. Are you an immediate family member of any City of Harrisburg employee(s) or member of City Council?

(Please Check One): No Yes

If yes, please state the name of the City employee(s) and the Department or City Council Member(s):

Signature: _____ Name: _____

Name of Current Employer: _____ Date: _____

24 C.F.R. §570.611 (CDBG); 24 C.F.R. §576.404 (ESG) and 2 C.F.R. §200.112 and/or any other citations applicable to any future funding that may be awarded to this jurisdiction.

**City of Harrisburg 2023 CDBG/ESG Application For Funding
BUDGET FORM**

SOURCES OF REVENUES	PROPOSED
A. FUNDS REQUESTED	_____
B. SOURCES OF MATCHING FUNDS	_____
1. Match Funds	_____
2. Donations	_____
3. In-Kind	_____
TOTAL SOURCES OF REVENUE	_____

Agency Name: _____

Project Name: _____

ITEM #	DESCRIPTION OF WORK	TOTAL PROJECT COST	A FUNDS REQUESTED	B SOURCES OF MATCHING FUNDS		
				Match Funds	Donations	In Kind
01	_____	_____	_____	_____	_____	_____
02	_____	_____	_____	_____	_____	_____
03	_____	_____	_____	_____	_____	_____
04	_____	_____	_____	_____	_____	_____
05	_____	_____	_____	_____	_____	_____
06	_____	_____	_____	_____	_____	_____
07	_____	_____	_____	_____	_____	_____
08	_____	_____	_____	_____	_____	_____
09	_____	_____	_____	_____	_____	_____
10	_____	_____	_____	_____	_____	_____
11	_____	_____	_____	_____	_____	_____
12	_____	_____	_____	_____	_____	_____
13	_____	_____	_____	_____	_____	_____
14	_____	_____	_____	_____	_____	_____
15	_____	_____	_____	_____	_____	_____
16	_____	_____	_____	_____	_____	_____
17	_____	_____	_____	_____	_____	_____
18	_____	_____	_____	_____	_____	_____
19	_____	_____	_____	_____	_____	_____
20	_____	_____	_____	_____	_____	_____
21	_____	_____	_____	_____	_____	_____
22	_____	_____	_____	_____	_____	_____
23	_____	_____	_____	_____	_____	_____
24	_____	_____	_____	_____	_____	_____
25	_____	_____	_____	_____	_____	_____
	TOTAL PROJECT COST	=====	=====	=====	=====	=====