



2024 Cuyahoga County Supplemental Grant Program

Change in Font Size or Character limit on application WILL result in Disqualification!

Cuyahoga County is pleased to announce our Supplemental Grant Program for 2024. The Supplemental Grant Program is a competitive grant that makes awards to help strengthen cities, encourage regional collaboration and improve quality of life for county residents.

Supplemental Grant applications are open to all 59 Cuyahoga County communities and 501(c) (3) community development corporations incorporated for not less than two years prior to the application deadline set by the Department of Development.

Grant funding obligates both the county and grant awardees to meet certain objectives and adhere to some specific funding requirements. Grant awards are administered on a reimbursement basis only.

	Supplemental Grant
Maximum Grant Award	\$50,000
Total Grants Available	30 (anticipated)
Anticipated Program Term	12 months
Application limit	One per organization/municipality

All applications **must meet a community development need related to the health or welfare** of the community.

Soft costs are NOT an eligible reimbursable expense. Soft costs include, but are not limited to, architectural fees, accounting fees, consulting fees, legal fees, engineering fees, permitting costs. **Administrative fees/cost including Personnel is not an allowable expense.**

**Application Deadline: Tuesday, November 28, 2023 by 4PM
to**

dbroadus@cuyahogacounty.us

pjackson01@cuyahogacounty.us

You may contact Daray at dbroadus@cuyahogacounty.us or (216) 443-7279 for technical assistance or questions during the application period.

Application Details:

The PDF application form is locked and formatted to the standards required by the Cuyahoga County Department of Development. **Change in Font Size/Character limit/Page limit WILL result in Disqualification.**

Each narrative section is limited to one page each. Please be specific and concise in the completion of these three sections.

Complete the entire application and attach all required documentation with your submission.

Evaluation Criteria:

Applications for the Cuyahoga County Supplemental Grants are scored on a 100-point scale.

Activity/Program Description (35 pts. max) Activity summary must include **WHAT** the project or activity is, **WHERE** it is located and **WHY** it is needed. Describe **HOW** the activity is innovative or transformative.

Activity Impact (50 pts. max, includes 5 points for being in an Equity Zone)

Explain **HOW** proposed solution fits strategically with other development activities planned and underway in the community or surrounding area; **HOW** funding received is a catalyst for additional growth; **WHY** proposed activity is needed, and **specific outcomes** anticipated to be achieved from the proposed project or activity; **WHO** activity/project will serve. Equity Zone info - <https://cuyahogacounty.us/department-of-equity-and-inclusion/equity-zones>

Activity Implementation Schedule with Milestones (15 pts. max) The schedule must provide a **specific timeline** of when **legislative, administrative and contractual activities** will occur from inception to completion, including the timing and amount of other funding. Strong applications will demonstrate that milestones are realistic and feasible and **include proposed dates**.

Required Attachments - ALL APPLICANTS:

1. Evidence of public participation via a community meeting for the proposed activity must include:
 - a. Copy of **dated** advertisement* placed at least 7 days prior to meeting; and
 - b. Copy of **dated** sign in sheet for related public meeting (screen shot acceptable for virtual), and
 - c. Copy of **dated (at least 7 days after public meeting)** Executive Board or legislative approval

***Dated Advertisement** includes but is not limited to placing a notice in a newspaper, community newsletter, or organizations web site. Submit a copy of the

notice or newsletter page or a screenshot of the website with the date. Make sure the date of the notice is clearly visible & clearly reference CDSG discussion.

2. Cost estimate with supporting documentation
3. Activity location map w/street(s) clearly identified, if applicable
4. 2 pictures of activity location, if applicable
5. Proof of commitments of additional funding to the project, if applicable
- 6. Copy of letter from Mayor/City Manager (highest elected official) in support of proposed project**
7. Resolution from council (cities) or Board of Directors (501c3) authorizing the request for funding (see above, only 1 copy required)

Non-profit organizations must also provide:

1. Copy of the IRS tax-exempt determination or affirmation letter.

2. Copy of Business name on file with State of Ohio as verified in the Business Filing Portal

3. Secretary of State of Ohio Certificate of Good Standing

Supplemental (OPTIONAL) Attachments:

Limited to five (5) pages, which provide additional information regarding the impact of the project/activity to the community/neighborhood.

APPLICATION SUBMITTAL:

Submit ONE email which must identify in the title and body the organization name and submission, with 3 clearly labeled .pdf attachments. Specifically - Application, Required Docs, Supplemental Docs. A receipt will be provided within 24 hours of submittal. Submit applications via email only and with described .pdf attachments to dbroadus@cuyahogacounty.us on or before November 28, 2023 at 4:00 p.m. A confirmation reply will be provided within 24 hours - if not received within 24 hours, please contact the office.



**CUYAHOGA COUNTY COMMUNITY DEVELOPMENT
SUPPLEMENTAL GRANT PROGRAM
2024 CDSG PROGRAM APPLICATION**

Change in Font Size/Character Limit/Fields will result in Disqualification

Date:	Municipality/ Organization:	County Council District:	
Activity Name:			
Activity Address or Location:	Street Address: City:	State:	Zip Code:
Amount Requested:	Total Activity Cost*:		
<p>*If your Total Activity Cost is greater than your Amount Requested, provide a breakdown of funds that your Total Activity Cost consists of, including your CDSG grant request amount:</p> <p>CDSG Supplemental Grant Amount Requested:</p> <p>Federal Funds:</p> <p>State/Local Funds:</p> <p>Private Funds:</p> <p>Other (provide brief description):</p>			
<p>Mayor/Executive Director:</p> <p>Mayor/Exec Director Email:</p> <p>Federal IRS Tax Exempt No: UE ID No:</p> <p>City Hall/ Street Address: Org Address: City: State: Zip Code:</p>			
<p>Project Contact Name & Title:</p> <p>Contact Email: Phone No:</p> <p>Contact Address, Street Address: (if different from above): City: State: Zip Code:</p>			
Proposed Eligible Use:			
<p>List census tract(s) with block group(s) in actual proposed Project Area:</p> <p>County Planning Commission Combo LMI/ITA Map 08/2021 Attached, with Project marked on map: <input style="width: 40px; height: 20px;" type="checkbox"/></p>			

Contingent Funding

If this application is contingent upon a receipt of additional funding, please identify source, proposed amount, and purpose.

Funding Source	Amount Requested	Purpose

ACTIVITY/PROGRAM DESCRIPTION (35 points max)

The summary must include WHAT the project or activity is, WHERE it is located, and WHY it is needed. Describe HOW the activity is innovative or transformative.

ACTIVITY IMPACT (50 points max - includes 5 points if project/activity is located in an Equity Zone)

Applications must describe WHO the activity will serve. Applications will explain HOW the proposed solution fits strategically with the other development activities already planned and underway in the community or surrounding area, and HOW funding received would be a catalyst for additional growth. The activity impact should include WHY the proposed project/activity is needed and the specific outcomes anticipated to be achieved from the proposed project/activity.

ACTIVITY IMPLEMENTATION SCHEDULE with MILESTONES (15 points max)

The schedule must provide a specific timeline of WHEN legislative, administrative, and contractual activities occur from inception to completion, including the timing and amount of other funding. Strong applications will demonstrate that milestones are realistic and feasible and include proposed dates.

Cuyahoga County 2024 CDSG Municipal Grant Signature Page

I HEREBY CERTIFY that I have the authority to apply for financial assistance on behalf of the entity described herein and that the information contained herein and attached hereto is true, complete, and correct to the best of my knowledge.

I acknowledge and agree that all Cuyahoga County contracts and programs are subject to all applicable HUD regulations, County Ordinances, including, without limitation, the County's Ethics Code, Inspector General Ordinance, and the Contracting Ordinance.

I understand that any willful misrepresentation on this application or any of the attachments thereto could result in a fine and/or imprisonment under provisions of the United States Criminal Code.

IN WITNESS WHEREOF, the undersigned, being duly authorized so to do, have signed this application.

Municipality/Organization:

Mayor/Executive Director:

Signature

Date:

Completing the Cuyahoga County Community Development Supplemental Grant Application

Page 1

- 1 Enter the **Date** you are completing the application, the name of your **Municipality/Organization**, and the **County Council District** number that your municipality is located in.
- 2 Enter an **Activity Name** that briefly but uniquely describes the activity/project that you are requesting funds for (*example - Main Street Resurfacing Project or Smithville Park Playground Equipment Upgrade Project*). You will be able to describe your activity/project in more detail on Page 2 of the application.
- 3 The **Activity Address or Location** should be an actual physical address if your activity/project involves a specific location such as a recreation center, park, or city/village building. *If your activity/project does not have a physical address*, such as the resurfacing of a portion of a street, you can list the general location of the activity/project as your "Street Address".
- 4 The **Amount Requested** will be the amount that you are requesting from Cuyahoga County for your supplemental grant. The **Total Activity Cost** will be the total amount of funds that you are planning to utilize to complete your project. This amount should include your CDSG supplemental grant requested amount.
 - a If your Total Activity Cost is more than your Amount Requested, you will need to provide a breakdown of the funds into the following categories: Federal Funds, State/Local Funds, Private Funds, and Other. If your additional funds fall into the Other category, list a brief description of where the funds are coming from.
- 5 The **Mayor/Executive Director** information is for the current mayor or executive director and the address for this section should be the current location of your City Hall/organization. The **Federal IRS Tax Exempt No** and **UE ID No** should be your municipality/organization's numbers.
- 6 The **Project Contact Name & Title** should be the person who is overseeing the activity/project and would also be the primary contact as well. You only need to provide the **Contact Address** for this person if it differs from the address provided in the "Mayor/Executive Director" section.
- 7 The **Proposed Eligible Use** field should provide a brief description of what the requested grant funds will be used for. You will be able to provide a more detailed description of your activity/project on Page 2.
- 8 When providing the **Census tract(s) with block group(s) in the actual proposed Project Area**, you should provide all census tracts and block groups that the activity/project is physically located in. You will typically see multiple census tracts and block groups for projects such as street improvements or park improvements, where the activity may straddle one or more census tracts and/or block groups.
 - a As part of your application, you should include a copy of the **Cuyahoga County Planning Commission Combo LMI/ITA Map**, with your activity/project location clearly marked on the map.

- 9 The **Contingent Funding** section will need to be completed if your application/project is contingent on receiving additional funding from other sources. If this applies to your application/project, you need to provide the proposed **Funding Source**, the **Amount Requested**, and the **Purpose** of the proposed funds. Your contingent funds plus your Amount Requested, should equal your Total Activity Cost referenced in Step 4. *If your application/project is NOT contingent on additional funding, you should enter "N/A" in the first Funding Source box.*
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Page 2

- 1 Your **Activity/Program Description** should be as descriptive as possible and should touch on all four of the following categories:
- WHAT** - Describe in detail WHAT the project or activity is for or attempting to accomplish. You want to ensure that your Activity Summary adequately describes your project/activity so that there is no question as to what you are planning on purchasing or accomplishing.
- WHERE** - Describe in detail WHERE the project is taking place. This is especially important if the project/activity is not at a fixed location. You can include details about the area that the project/activity is located in, which offers support to the need or necessity for the project/activity within that location.
- WHY** - Describe in detail WHY you feel that this project/activity is necessary. Providing history or examples that identify why this project/activity is needed, such as including specific details, statistics, or examples of past issues, is encouraged.
- HOW** - Describe in detail HOW your activity/project may stand out against other potential solutions or how it may transform the area being served once it has been completed.
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Page 3

Be advised that, if your application is reviewed and moved forward to be considered for approval, 5 points will be added to the score given to this section (not to exceed a total of 50 points) if your project/activity is located in an Equity Zone.

- 1 Your **Activity Impact** should be as descriptive as possible and should touch on all four of the following categories
- WHO** - Describe in detail WHO will be served/will benefit from this project/activity. If you have statistical data with regard to the low/mod residents that will benefit from this project/activity, it is encouraged that you provide it in your description.
- HOW** - Describe in detail HOW your project/activity fits strategically with other development activities that are already planned and underway in the target community or surrounding areas.
- HOW** - Describe in detail HOW the funding you're receiving would be a catalyst for additional growth within the community that the activity/project is located.
- WHY** - Describe in detail WHY you feel that the activity/project is needed and what you believe the specific outcomes and anticipated benefits of completing your activity/project will be.
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Page 4

Your **Activity Implementation Schedule with Milestones** needs to be a detailed timeline of your project/activity and should provide dates WHEN each item in the timeline (legislative, administrative, and contractual activities) are set to occur. Your timeline should be in an outline form.

When constructing your timeline, be sure to include the timing (of receipt) for other funding or in-kind contributions that will be utilized for your project/activity.

Your timeline should demonstrate that each item and, especially, each milestone is realistic in its timeframe and is feasible as it relates to your project/activity.

Page 5

The signature page needs to include the name of the **Municipality/Organization** for which the project/activity is for, the name of the **Mayor/Executive Director** of said municipality/organization, and needs to be signed and dated by that individual. *The municipality/organization and mayor/city manager listed on the signature page should match the information provided on the first page of the application.*