



Jefferson Parish Department of Community Development

Subrecipient Application for FY-2024

Funding Fiscal Year July 1st, 2024 to June 30th, 2025

Deadline for submittal: Friday, January 12, 2024, via email
JPCDPrograms@jeffparish.net by End of Day - 11:59:59pm

Final (as of 1/26/2023)

1221 Elmwood Park Blvd., Suite 605

Jefferson, LA 70123

(504) 736-6262

[Jefferson Parish Department of Community Development](#)



SUMMARY PAGE

NAME OF ORGANIZATION _____

CONTACT EMAIL/PHONE _____

BUDGET AMOUNT REQUESTED (FEDERAL/HUD) \$ _____

SELECT A SOURCE OF FUNDING __ CDBG OR HOME OR HESG? _____

MATCHING FUNDS \$ AMOUNT AND SOURCE \$ _____

PAST EXPERIENCE WITH FEDERAL GRANTS YES/NO? _____. IF YES GRANT? _____

CON PLAN/ACTION PLAN GOAL PRIORITY? _____

PROJECT NARRATIVE (IN 100 WORDS OR LESS) PLEASE SUMMARIZE THE PROPOSAL HERE:

Table of Contents

- Before you Begin..... 4
 - Certification of Guidelines 4
- 2023 SUBRECIPIENT APPLICATION..... 5
 - 1 Project/Organization Information 5
 - 1.1 Applicant Contact Information: 5
 - 2 Proposed Project or Program 6
 - 2.1 Project/program information 6
 - 2.2 Basic Project Description 7
 - 2.3 Project/Program Details..... 8
 - 2.4 Project/Program Details – Leveraged Funds/ Matching Funds 11
 - 3 Organization/Agency Details 9
 - 3.1 Organization Background /Capacity 9
 - 3.2 Additional documentation 10



BEFORE YOU BEGIN

Before you complete the Subrecipient Application, please review the following:

1. Eligibility for Applying

An application that is eligible for consideration, must meet the following,

- Applicant organization is a 501(c) status, nonprofit, or governmental entity.
- Applicant organization is not seeking funds for new housing construction (unless a housing developer only-see HOME Developer Guidelines).
- Project must be ready for and able to use funds on a reimbursement basis.
- If organization has been awarded funds from JPDCD in the last two years, applicant must show that a minimum of one payment request for the awarded funds has been processed and approved.

2. Read and understand the Subrecipient Application Guidelines.

All applicants must read through the program guidelines for application requirements, program definitions, eligibility, submission process, funding regulations, and expectations.

Organizations who apply must meet the above eligibilities and agree to the Subrecipient Application Guidelines to prepare the application. Applications submitted by organizations who do not meet these requirements will not be considered. Please consider applying in the future.

CERTIFICATION OF GUIDELINES

By signing here, the applicant indicates agreement with the eligibility requirements and the guidelines for the application. This page is to be included with the application's submission.

I have read the Subrecipient Application Guidelines and understand the requirements of CDBG, ESG and HOME funds should my organization be awarded based on the proposal prepared and submitted to JPDCD.

Name _____ Initials _____

Organization _____ Date _____



2024 SUBRECIPIENT APPLICATION

1 PROJECT/ORGANIZATION INFORMATION

Project Name/Total Budget Applied For: _____

1.1 APPLICANT CONTACT INFORMATION:

Organization: _____

Name of Organization's Executive Director/President: _____

Executive Director/President's Email: _____

Type of Organization:	<input type="checkbox"/> Non-Profit Organization	<input type="checkbox"/> Faith Based Organization
	<input type="checkbox"/> Governmental Entity	<input type="checkbox"/> Institution of Higher Education

Organization Physical Address: _____

Organization Mailing Address (if different from physical address): _____

DUNS # _____ (required)

Does your organization expend \$750,000 or more a year in federal funds? Yes No

Application Contact Person: _____

Application Contact Person's Title: _____

Telephone: _____

Application Contact Person's Email: _____

Executive Director/President Signature: _____



2 PROPOSED PROJECT OR PROGRAM

2.1 PROJECT/PROGRAM INFORMATION

Please indicate if the activity proposed: Project (one-time) Program (ongoing service)

Project/Program Title: _____

Community in Which Project/Program is Located: _____

Project/Program Address: _____

For Public Infrastructure Projects only:

Census Tract(s) (CT) and CT Block Group(s) of Project or program (LMI maps can be found on JPDCD website at: <https://www.jeffparish.net/departments/community-development/community-development-planning-program>):

Estimated duration of the project: _____

Is the project kick-off ready? (Check one): Yes No

Estimated start date: _____

Type of Activity: (Please check only one):

AFFORDABLE HOUSING		SERVING SPECIAL POPULATIONS (PUBLIC SERVICES)			
<input type="checkbox"/>	Housing rehabilitation (HOME and CDBG)	<input type="checkbox"/>	Welfare services (CDBG)	<input type="checkbox"/>	Health services (CDBG)
<input type="checkbox"/>	Tenant based rental assistance (HOME)	<input type="checkbox"/>	Child care services (CDBG)	<input type="checkbox"/>	Drug abuse services (CDBG)
<input type="checkbox"/>	Rapid re-housing (HESG)	<input type="checkbox"/>	Street outreach (HESG)	<input type="checkbox"/>	Education services (CDBG)
FAIR HOUSING		<input type="checkbox"/>	Homelessness prevention (HESG)	<input type="checkbox"/>	Employment services (CDBG)
<input type="checkbox"/>	Fair housing counseling (CDBG)	<input type="checkbox"/>	Shelter operations (HESG)	<input type="checkbox"/>	Crime prevention services (CDBG)
ECONOMIC DEVELOPMENT		PUBLIC FACILITIES & INFRASTRUCTURE (GOV ONLY)			
<input type="checkbox"/>	Economic development (CDBG)	<input type="checkbox"/>	Public facilities improvement (CDBG)	<input type="checkbox"/>	Public infrastructure improvement (CDBG)
<input type="checkbox"/>	Façade improvements (CDBG)	<input type="checkbox"/>	Development or rehabilitation of Senior Centers (CDBG)	<input type="checkbox"/>	Construction or major rehabilitation of sewer systems (CDBG)
<input type="checkbox"/>	Revolving loans (CDBG)	<input type="checkbox"/>	Development or rehabilitation Playground (CDBG)	<input type="checkbox"/>	Construction or major rehabilitation of drainage systems (CDBG)
<input type="checkbox"/>	Energy conservation services (CDBG)	<input type="checkbox"/>	Development or rehabilitation of gym (CDBG)	<input type="checkbox"/>	Construction and major rehabilitation of streets (CDBG)
		<input type="checkbox"/>	Planning (CDBG)	<input type="checkbox"/>	Acquisition of real property (CDBG)

For more information, Section 3.0 of the Subrecipient Application Guidelines provides details on eligible activities and project types. New housing construction activities are NOT eligible under this application. See the HOME Developer Guidelines for new housing construction.



2.2 BASIC PROJECT DESCRIPTION

Attach a **one page, typed**, description of the program or project and the purpose for use of funds requested in this application. Address each of the following listed below for the program/project that funding is needed for. Project descriptions cannot be changed or amended once submitted, except due to extenuating circumstances. **Please refer to section 4.2 of the guidelines for definitions.**

1. Information on need or problem to be addressed
2. Description of the area/population to be served by your project or program
3. How many individuals will be assisted by your program and/or activity or describe the area of the parish which will benefit from your activity.
4. Describe the anticipated outcomes
5. Provide a plan of action (timeline, outcomes, and scope of work) to accomplish the proposed project or program
6. Provide a connection to the current approved consolidated plan based on the activity selected.

2.3 PROJECT/PROGRAM DETAILS

Public Services Activities ONLY

If the proposed project meets the definition of public services: *(Provision of public services (including labor, supplies, and materials) including but not limited to those concerned with employment, crime prevention, child care, health, drug abuse, education, fair housing counseling, energy conservation, welfare, homebuyer down payment assistance, or recreational needs)* please provide the following information: (if additional space is needed, please attach the detail to the application). **Please refer to section 3.1.1 of the guidelines for further information regarding public service activities.**

Item	Answer
Documentation that the proposed service is new or is a significant increase in the existing service.	
Indicate if there are client charges for proposed services and if so, the amount.	
Estimated number of households to be served during project:	
Will the project serve a special needs population, (disabled, elderly, homeless, etc.)?	
Calculate the percent of anticipated Jefferson residents and any non-Jefferson residents to be served.	
The anticipated number of low/mod income persons or households to be served:	



Housing Improvement Activities ONLY

If the proposed project is for housing improvement, please provide the below information: (if additional space is needed, please attach the detail to the application). **Please refer to sections 3.1.1-3.1.3 of the guidelines for further information regarding housing activities for this application.** **NOTE:** This application cycle does NOT include new construction. Applications for new construction projects will be considered by JPDCD under a separate RFP, or as posted on the JPDCD website under the HOME Developer Guidelines and Application.

Item	Answer
Type of housing rehab (provide brief description):	
Special Populations to be served (e.g. low and moderate income, elderly, disabled, special needs):	
Years of organization’s experience in housing improvement programs:	
Does the organization have credentials to test or remediate Lead Based Paint? (Yes/No):	

Economic Development Activities ONLY

If the proposed project is for economic development through job creation, energy conservation, or façade improvement, please provide the below information: (if additional space is needed, please attach the detail to the application). **Please refer to sections 3.1.1 of the guidelines for further information regarding economic development activities for this application.**

Item	Answer
Type(s) of economic development activity (provide brief description):	
Documentation of the need for the program/project:	
Does this program/project benefit an area overall or individuals? Where will the program/project be located?	
The anticipated number of low/mod income persons or businesses to benefit:	
Have organizations in the target location documented interest in the program/project (e.g. will hire and train low-income individuals, or can commit to an impactful façade improvement)? Provide documentation if yes.	



Public Infrastructure Activities ONLY

If the proposed project is for public infrastructure improvement, or public facilities (sewer, streets, drainage, etc.) construction or rehabilitation please provide the below information: (if additional space is needed, please attach the detail to the application). **Please refer to sections 3.1.1 of the guidelines for further information regarding infrastructure activities for this application.** **NOTE:** This section of the application is open to local governments within Jefferson Parish or Parish governmental offices only.

Item	Answer
Type of infrastructure or facility improvement (provide brief description):	
Documentation that the improvement is necessary:	
Estimated number of households to be served by the improvement:	
The estimated number of low/mod income persons or households to benefit from the improved service or facility:	
Has an environmental been completed on this project (Yes/No. If yes, attach a copy and state if there were any findings.)	
Has the project received the necessary department and council approvals? (If yes, provide documentation. If no, provide schedule for reviews and approvals.)	



2.4 PROJECT/PROGRAM DETAILS – LEVERAGED FUNDS/ MATCHING FUNDS

All applicants must complete the following table. The parish encourages applicants to seek funding and in-kind contributions from private and public sources to match parish funding. Other things being equal, applications with greater matching sources will receive favorable consideration.

Item	Answer
Type of Leveraged Funds (e.g. match, in-kind, staff time, building, equipment, etc.):	
Source of Matching Funds (e.g. state, local, federal, corporate, public donations, etc.):	
Amount/ Percentage of Matching Funds.	
Does the organization have experience with matching/ leveraging funding (Yes/No):	

3 ORGANIZATION/AGENCY DETAILS

3.1 ORGANIZATION BACKGROUND /CAPACITY

Address each of the following questions below for the organization to demonstrate capacity and ability to execute successful programs/projects. Use additional pages if necessary. **Please refer to section 4.2 of the guidelines for definitions.**

Please provide a brief description of the objectives or mission statement of the organization or agency and relevant experience. How long has the organization been in existence?

Please provide the services currently provided by the organization. Please provide a brief description of projects/programs successfully undertaken within the last 5 years.



Of the above projects, were any funded by JPDCD (indicate which projects and years funded)? Also, please indicate whether or not your organization has experience in implementing CDBG, ESG, HOME or other federal or state grant funding. Please also indicate if your organization received a monitoring report and/ or audit that indicated deficiencies on any grant.

List any membership, umbrella and or other professional organizations that your organization and/or employees belong to:

Please list any other agencies with which you coordinate services:

3.2 ADDITIONAL DOCUMENTATION

Please attach the following documents (as applicable) to your application and list the location of each within the application (page number, tab, appendix, etc.).

	Organizational Chart <i>with names, positions and salaries of management and staff</i>	
	Resumes of key personnel <i>Limit to ½ page per individual</i>	
	Program Budget <i>completed with provided template</i>	
	Last report to IRS (990 for non-profits)	
	Copies of required licenses or certifications required from state, federal or local agencies	
	Articles of Incorporation and By-Laws	
	Non-profit determination (tax exempt letter from IRS)	
	Authorization to Request Funds (resolution from board)	
	Proof of processed/approved invoice (<i>Applicants with prior year funding only</i>) Copies of submitted payment request/check received/bank statement showing deposits.	
	Letters of Recommendation and Support (as applicable)	
	Non Conviction Affidavit	
	Non Collusion Affidavit	
	Conflict of Interest and Lobbying Certification	
	Project Specific Documents (List):	