

COUNTY OF SAN LUIS OBISPO DEPARTMENT OF SOCIAL SERVICES HOMELESS SERVICES DIVISION

2024 NOFA - Public Facilities Application

Please submit Application by email to <u>SS HomelessGrants@co.slo.ca.us</u>. All submissions must be made electronically, no paper applications will be accepted. Application must be received no later than Sunday, November 5, 2023, at 9 pm.

I. PRIMARY APPLICANT INFORMATION (LEAD AGENCY)

Organization Name	
Type of Organization	☐ Non-Profit ☐ For Profit ☐ Gov't/Public ☐ Other:
UEI Number	
Contact Person/Title	
Finance Contact (if different)	
Phone Number	
Email	
Address	
City, State, Zip	
Date of Incorporation	
Is the organization faith- based?	☐ Yes ☐ No
Annual Operating Budget	
Number of Paid Staff	
Number of Volunteers	
II. FUNDING DETAILS	
Please identify all funding sources being requested: CDBG is the only eligible funding source available for Public Facilities	Community Development Block Grants (CDBG)
Total Funding Requested	\$

III. APPLICANT CAPACITY

1.	Describe the organization's history of receiving and managing grants from County/State/Federal sources.
2.	Briefly list any recent development projects your organization has proposed, is currently working on, and has completed. (Regardless of funding source)
3.	Briefly describe your organization's auditing requirements, including those for the proposed project. (As outlined in 2 CFR § 200.500 and 24 CFR § 5.801)

4.	Describe project staffs' experience with Section 3. (As outlined in 24 CFR Part 75)
5.	Briefly describe your agency's record keeping system with relevance to the proposed
J.	project.
6	Do you have any funds remaining from prior Fiscal Year allocations? If so, please list the
0.	project you received funding for, the fiscal year(s) you received the funding, and the
	remaining amount(s) for each fiscal year(s).

7. How do you plan to fund the operation and maintenance costs (if any) associated with this project? Are these funds available now? If not, when will they be available?		
. ,		
Does your organization comply		
with the Generally Accepted Accounting Principles? (As	Yes No	
outlined in 2 CFR § 200)		
IV. PROPOSED PROJECT and Pl	ROJECT DETAILS	
Name of proposed project		
Project/Program address(es)		
and/or Accessor's Parcel		
Number(s)		
Please attach any maps, pictures, the application.	plans, or drawings under the attac	chments section at the end of
Areas served	City of Arroyo Grande	City of Atascadero
711 cus sei veu	City of Pismo Beach	City of Paso Robles
	City of Morro Bay	City of Grover Beach
	City of San Luis Obispo	
	Unincorporated community of _	
Please select which eligible catego	ory applies to project:	
☐ New Sanitary Sewer Systems – Con	struct new sewage treatment plants	and collections systems.
Caraitama Causar Sustains Sistematica	Extend and ton consequent and the state of	and housed ouistics
areas.	- Extend sanitary sewage collection li	nes beyond existing service
filtration plant, distribution system o	nd Extensions – Construction of a new	public water treatment plant,
madion plant, distribution system o	. extension project.	
Neighborhood Improvement Projects – Curb and sidewalk replacement, major storm water management		
improvements, street reconstruction	n, or water main and sewer main repl	acement.
Parks and Recreational Facilities –	Construct new facilities or purchase	new equipment.
Public Facility Improvements – Fne	rgy efficiency improvements, handica	an accessibility and other
structural improvements to a public		-

Number of proposed units
created or rehabilitated
8. Provide a brief narrative of the proposed project including projected outcomes. How would
you describe your project to the public in one paragraph?
9. Describe the proposed project in detail. What activities are to be undertaken?
Please attach a timeline of the project milestones as an attachment.
Trease access a amount of ano project immediation as an accession.
10. What is the current zoning of the project site? Is the project site zoned correctly for the
proposed activity?

11. If the project is NOT zoned correctly for the proposed activity, provide an explanation of efforts and a timetable to change the zoning or obtain a variance.	
12. Identify whether or not the project is required to pay a prevailing wage. If not, please briefly explain.	
13. Describe how the project will align with a (or multiple) Line(s) of Effort to support the San	
Luis Obispo Countywide Plan to address homelessness (2022-2027).	

specific population(s) expected to be served through this	☐ Multifamily☐ Age Restricted (including seniors)☐ Persons Experiencing Homelessness
expected to be served	$\Pi \equiv \Gamma$
be served	
	Chronically Homeless
through this	Persons with a Disability
	Veterans
project:	Domestic Violence Survivors
	Unaccompanied Youth (under 25 years of age)
14. Does the pror	posed project complement and collaborate with existing efforts in the county?
	name partner agencies and how they will participate.
,	,
15. If the propose	ed project will serve households experiencing homelessness, describe how the
	oordinate with other homeless service providers to connect individuals
	homelessness and families to resources.
experiencing	noniclessiless and families to resources.
16. Will the proje	ct use a project specific waitlist or coordinated entry? Please describe.
16. Will the project use a project specific waitlist or coordinated entry? Please describe.	

17. Describe any consultation with local jurisdictions to gain support for the project. Describe any support you have from local jurisdictions.	
40. Henry ill von cellect democracy bie dete on the honeficienies of the managed musicet?	
18. How will you collect demographic data on the beneficiaries of the proposed project?	
19. Describe how you will ensure that the proposed project is accessible to communities of color which are disproportionately impacted by homelessness, particularly Black, Latinx, Asian, Pacific Islander, and Native and Indigenous communities. If you have previously received a grant to serve any of the affected communities, please provide a brief description of those grant activities and the outcomes you achieved.	

20. Has an environmental review been No – CEQA review not con	
completed (CEQA Yes – NEPA review compl No – NEPA review not con	
Has a Phase I or Phase II archeological/historical survey been conducted at the project site?	☐ Yes ☐ No
Has a Phase I or Phase II environmental assessment been	Yes No N/A
conducted for the property?	
21. List and describe any known hazards (e.g. asbestos, aboveground, underground). List "N/A" if not application	•
according, and a ground, and a ppinot	
Is the project on a property designated or been	
determined to be potentially eligible for designation as a	│
local, state, or national historical site?	
Are the building(s)/structure(s) located on a historic site or within a local historic district?	☐ Yes ☐ No ☐ N/A
Is the project located within a 100-year flood plain?	Yes No N/A
If YES to the question above, does your organization have	
flood insurance?	│
Will demolition be required?	Yes No
Are there any existing buildings on the project property	☐ Yes ☐ No
that were constructed prior to 1978?	L res L No
If YES to above, please answer the following questions:	
Has an asbestos risk assessment report(s) been prepared for the building(s)?	☐ Yes ☐ No
Has the building(s) been abated for asbestos?	Yes No
Has a lead hazard risk assessment report(s) been prepared for the building(s)?	☐ Yes ☐ No
Has the building(s) been abated for lead paint?	Yes No
Will children occupy the building(s)?	Yes No
IF CHILDREN WILL OCCUPY THE BUILDING, indicate	Age Range:
the age range of the children. If no children will	N/A
occupy the building, select N/A.	
If the project includes temporary or permanent	Yes, I have read and understand this
relocation of occupants, it is subject to the Uniform	requirement.
Relocation Act (URA). Please indicate whether the URA is applicable to your project.	No, this requirement is not
applicable to your project.	applicable.

22. Describe how the project will meet ADA and Section 504 standards for accessibility by the disabled. Describe the methods, funding, and timetable to be utilized to address the problems.		
Section 504 (24 CFR Part 8) applies to new construction of multifamily housing with five or more units, or substantial rehabilitation of multifamily housing projects that have 15 or more units.		
-	he site is owned or leased by the applicant. If optioned or owned le their name and contact information.	
V. CDBG – if requesting CDBG funds		
Estimated number of unduplicated persons or households to benefit from CDBG funds Please write "p" for persons and "hh" for households.	Total Regardless of Income: Low – Moderate Income (80% or less of the County Median Income)	
Please select the national objective that best applies to the proposed project. Please refer to "Basically CDBG" or the "CDBG Guide to National Objectives and Eligible Activities" in the Library for more information regarding CDBG national objectives.	☐ Low/Moderate Income ☐ Slums or Blight ☐ Urgent Need (e.g., after a natural disaster)	
LOW/MODERATE INCOME Select which criteria the proposed project intends to qualify under to meet the Low/Moderate Income objective	☐ Area Benefit ☐ Limited Clientele ☐ Housing ☐ Jobs ☐ N/A – Low Moderate Income NOT Selected	

SLUM OR BLIGHT	
Select which criteria the	Area Basis
proposed project intends to	Spot Basis
qualify under to meet the Slums	N/A – Slum or Blight NOT Selected
or Blight objective	
24. Explain how the proposed project meets the selected National Objective.	

VI. Attachments

Attachment A - Sources and Uses (Required)

Please attach the Sources and Uses for your proposed project. This should include a summary of where the capital used to fund a development will come from (the sources) and what this capital will be used for (the uses).

Attachment B - Timeline (Required)

Attach a timeline for key steps of project implementation.

Attachment C - Any Maps, Photos, Drawings, Plans (Required)

Attachment D - Most Recent Audit (Required)

Attachment E - Proof of Active SAM.gov Registration (Required)

Attachment F - Organizational Chart (Required)

Attachment G - Incorporation Documents (Required)

Attachment H - General Liability Insurance (Required)

Attachment I - CDBG Acknowledgements (Required if Applicable)

Attachment J - Client Intake Form (Required if Applicable)

Attachment K - Phase I or Phase II Environmental Review (Required if Applicable)

Attachment L - Relocation Plan (Required if Applicable)

Attachment M - Commitment letters for funds (if applicable)

Attachment N - Supplemental Answers to Questions (Optional)

If you need more room to answer any of the application questions, please attach additional information here. Include the question number for each question being answered.

Attachment O - Letters of Support (Optional)

Please attach any letters of support or commitment from local governments or community partners.

For other additional or optional attachments, please label them clearly (e.g. Attachment P - "Title").

VII. APPLICATION SUBMISSION:

Applications and accompanying documents are due to Homeless Services Division, Department of Social Services by 9:00 pm on November 5, 2023.

Electronic Copy – email to SS_HomelessGrants@co.slo.ca.us Subject line: 2024 NOFA Public Facilities Application – (Applicant Name)