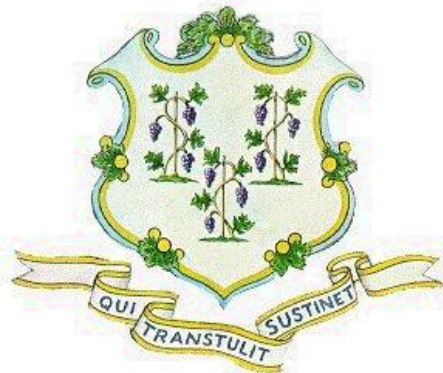




**Community Development Block Grant
Disaster Recovery (CDBG-DR)**

**Second Tranche
Infrastructure Application
(Due Date: August 15, 2014)**



**State of Connecticut
Department of Housing**

July 2, 2014

Evonne Klein, Commissioner

An Affirmative Action/Equal Opportunity Employer

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General Information

Purpose: CDBG-DR is providing assistance to communities for the purpose of providing municipalities with support for infrastructure projects to repair and bolster existing systems damaged by Hurricane Sandy and to strengthen resiliency against future storm and disaster events. For additional detailed information please refer to the CDBG-DR Program Guide for Infrastructure (At the CT – DOH website - Hurricane Sandy)

Application and Program Procedures

Program procedures including drawdown, construction and monitoring will be included in individual grant agreements following formal award notice and will be discussed in detail between approved grantees and DOH - CDBG-DR. (Note: This Application is a Word Document that can be copied and expanded with your responses.)

Applicant Information

Applicant Name _____

Applicant Address _____

City _____ County _____ State _____ Zip _____

Authorized Individual Name _____ Title _____

Contact Name _____ Title _____

Phone _____ Fax _____

E-Mail _____ FEIN # _____

DUNS # _____ CCR# _____

Did a consultant prepare this application? Yes No

If yes, provide the following:

Consultant Name _____ Phone # _____

Company (if applicable) _____

Address _____

City _____ State _____ Zip _____

E-Mail _____

Project Description

Project Name _____

Project Address _____

County _____

Census Tract _____ Block Group _____

Congressional District _____

State Senate District _____ State House District _____

CDBG-DR Grant Request: \$ _____ Total Project Cost: \$ _____

Total Amount of Additional Sources of Funding for Project (Include all other disaster related assistance) by Town : \$ _____ (cash, not in-kind)

1. Project Information

1.1 Eligible Activity

- Repair Infrastructure Infrastructure Related Activities Mitigation/Resiliency

1.2 Is this project a continuation of an earlier project Yes _____ No _____

1.3 Is the project part of phased improvements? Yes _____ No _____

1.4 Will any previous undeveloped land be disturbed? Yes _____ No _____

1.5 Will building construction or rehabilitation occur? Yes _____ No _____

1.6 Acres to be converted into impervious surface: _____

1.7 Description of the Project and Map (Exhibit 1.7)

In 500 words or less, please describe the problem or need for this project and how the project addresses a direct impact from Hurricane Sandy.

1.8 National Objective (Definitions in Program Guide) Select 1, 2 or 3

1. ___ Low and Moderate Income Benefit:

Number of Persons in the Service Area: _____
 Number of households, businesses, or units assisted: _____
 % of Funds benefiting low/mod income persons: _____ %
 Income levels of persons or households served:
 0-30% _____ 31% and 50% _____ 51% and 80% _____

2. ___ Slum and Blight – Prevent or Eliminate: If slum and blight conditions, please describe:

3. ___ Urgent Need –If urgent need, please describe the main urgency of this activity including financing shortfalls:

2. Project Funding

Damage Assessment and Prior Assistance: *The Stafford Act* directs administrators of federal assistance to ensure that no person, business concern or other entity will receive duplicative assistance. As such, all applicants are required to accurately report all prior financial assistance received for this project. Please complete the following sections and indicate all applicable assistance received or applied for:

Has the municipality applied for the FEMA and Hazard Mitigation Grant Programs and/or other Public Assistance Grant Programs? Yes___ No___

If yes, application status? Submitted___ Offered Assistance___ Denied___

Total Amount received or offered? _____

Is an appeal pending with FEMA? Yes___ No___

Was the disaster affected property, facility or service covered by Flood Insurance? Yes___ No ___

If yes, Name of Insurance Carrier: _____
 Policy Number: _____

2.1 Summary of Hurricane Sandy Assistance (Please attach copies of documents as **Exhibit 2.1**):

Amount received/expected from FEMA	\$
Amount received/expected from Flood Insurance Policy Proceeds	\$
Amount received/expected from Property Insurance Policy Proceeds	\$
Amount received from any other Governmental Assistance	\$
Total Disaster Compensation (sum of above)	\$

2.2 Additional Funding Sources for this proposed project:

List All Additional Funding Sources (Please attach copies of all Commitment Letters (Exhibit 2.2):

Sources	Amount	Committed Yes/No	Comments
Total:			

2.3 Uses - Funds Requested Total Estimated Amount \$_____ including :

Architecture/Engineering \$ _____
 Demolition/Construction \$ _____
 Acquisition of Property/Right of Ways/Easements \$ _____
 Public Services \$ _____

2.4 Project Costs:

- a. Total estimated project cost: \$ _____
- b. Amount of CDBG-DR funds requested: \$ _____
- c. Amount of Previous CDBG Funds: \$ _____
- d. Amount of Applicant Contributions: \$ _____
- e. Additional Funding Sources: \$ _____

Note: b+c+d+e must equal a

2.5 Name of Architectural/Engineering Firm that prepared the cost estimates:

3. Project Implementation

3.1 Acquisition

Does the proposed property require the applicant to acquire property? Yes ____ No ____

Does the town have title to the property? Yes ____ No ____

If the town does not have title, is there an option to purchase the property?

Yes ____ (if yes include date) _____ No ____

3.2 Relocation Plan

If you are planning a project that has relocation as a part of the project, has the General Information Notices (GIN) been sent out? Yes ____ No ____ N/A ____

If yes, please provide a copy (**Exhibit 3.2**).

Tenant Relocation

Please check all that apply.

Tenants will be permanently relocated ____

Tenants will be temporarily relocated ____

No Tenant relocation ____

3.3 Project Implementation Schedule Please attach a detailed timetable showing all phases of the project: design, engineering, contract document preparation, construction completion and acceptance (**Exhibit 3.3**).

3.4 Community Impact Maps

How will this project impact the community? Please include

1. A map highlighting major housing patterns, transportation, relevant services, significant community facilities, and the locations of substantial public and private investment as well as any other features relevant to demonstrating community impact.
2. Color sea level rise maps showing 1', 3', 5' rise. Website (Use Foxfire): NOAA Sea Level Rise and Coastal Flooding Impacts/CT/Town/Focus Area/Streets/ Sea Level Rise Legend. Identify the project site location on each sea level rise map (**Exhibit 3.4**).

3.5 Community Support and Public Participation

Are there letters of support from individuals and/or any of those who represent the community and provide and/or receive services in the project area? List and attach letters (**Exhibit 3.5**).

3.6 Consistency with the Connecticut's Consolidated Plan for 2010-2015; the Plan of Conservation and Development for 2013-2018; Connecticut's Hazard and Mitigation Plan and CDBG-DR Action Plan. Each project must be reflective of the goals, priorities, and requirements of the Plans. Please provide a brief explanation of the proposed project's consistency with the Plans (**Exhibit 3.6**).

4. Site and Building Information

4.1. Infrastructure: Roads, Streets, Utilities, Walks, Parks, Landscaping

4.1.1. Is any Environmental Remediation needed? Yes No

4.1.2. Is the property adjacent to properties with environmental risks?
Yes No

4.1.3 How old is the road, street, walk, etc.?
 0- 5yrs 5-10yrs 10 + years N/A

4.1.4 When were the last repairs, improvements, or replacement work for the proposed site?
 0 - 5yrs 5-10yrs 10+yrs N/A

4.1.5 Unusual Site Conditions: Check all that apply.
 Sediment/Soil Erosion Easements
 Wetlands Rock

4. 2. Hazardous Materials Notifications & Requirements

Are your buildings occupied? Yes No

Do hazardous materials exist in and or around the building(s)? Yes No

If **yes to both of the above**, please attach all notification materials and documents that have or will be issued to residents (**Exhibit 4.2**).

4.3. Utilities Expansion

Expansion of existing public utilities (water, sewer, etc.) has been found to lead to unplanned development pressures on adjacent land. Does the project include a proposal to expand existing public utilities (e.g. Main sewer line or Main water line)? Yes No

4. 4. Coordination/Approvals/Clearances/Readiness to Proceed

Please submit/attach documentation for verification of Readiness to Proceed and Permits.
(Exhibit 4.4. A + B Readiness to Proceed and Permits).

:

4.4. A. Readiness to Proceed:

Type	Needed: Yes/No	Approved Date	Anticipated Approval Date
Historic			
Planning			
Zoning			
Wetlands			
CHFA/LHA Housing			
Easement			
Right of Ways (Utilities)			
Department of Envir. Protection (DEEP)			
Flood Management Certification			
Department of Health			
Department of Transportation (DOT)			
HUD			
Other			

4.4.B. Permits:

- Local _____
- State _____
- Other _____

4. 5. Floodplains: List and describe any floodplains that have been determined to be present in or immediately adjacent to the proposed project site **(Exhibit 4.5)**. Identify FEMA’s **Flood Map Community Panel No:** _____

4.6. Wetlands: List and describe any wetlands (as classified by the Department of Interior Fish and Wildlife Service) or as defined by CGS Section 22a-92(2) or 22a-38(15) that have been determined to be present in or immediately adjacent to the proposed project area **(Exhibit 4.6)**.

4.7. Historic Resources List all that are located in the project area which could be potentially impacted by the proposed projects including the age of the building to be improved and the surrounding buildings **(Exhibit 4.7)**.

4.8 Sustainable Features and Design

For all Projects, list the features and products you intend to use from that qualify as a sustainable/green standard.

- A. **Good Storm-Water Management Techniques (Exhibit 4.8.A).**
- B. **Other sustainable/green feature products and/or processes relevant to project (Exhibit 4.8.B).**

Please be sure that the features and products listed are included with their specifications in the document page of your construction specifications document (**Exhibit 5.5 H**).

OR

If you have proof of LEED or equivalent green building/planning registration/certification (minimum of silver certification), including the CT-DEEP Green Circle Award, submit certification (**Exhibit 5.5.H**).

Proof of LEED (or equivalent) silver certification Yes ____ No ____

For a more complete description of HUD's goal see: The Federal Register/Vol.78. No. 43/Tuesday, March 5, 2013, p. 14334, below:

(e) HUD encourages grantees to implement green infrastructure policies to the extent practicable. Additional tools for green infrastructure are available at the Environmental Protection Agency's water Web site; *Indoor AirPlus* Web site; Healthy Indoor Environment *Protocols for Home Energy Upgrades* Web site; and *ENERGY STAR*

**For the State of CT see these websites:
Energize CT and CT- DEEP and CT-DOH Building Standards**

5. Construction Documents

Please check all that apply.

A. Drawings Completion Level - Submit drawings (Exhibit 5A).

None _____ Schematic _____ Design Development _____ Construction/Final _____

B. Specifications Completion Level - Submit specifications (Exhibit 5.B).

None _____ Outline _____ Developmental _____ Final/Bid/Contract Package _____

C. Time needed for Completion of Drawings & Specifications (Final Bid Set)

0 months _____ 1-3 months _____ 3-6 months _____ +6 months _____

D. Length of Construction Period:

1-6 months _____ 6-9 months _____ 9-12 months _____ 12-15 months _____
15-18 months _____ +18 months _____

E. Estimated Time for Non-Local Building Permits, Approvals, Clearances

1 month _____ 1-3 months _____ 3-6 months _____ +6 months _____

F. Construction Cost Estimate:

Submit with Completion Level indicated in 5.5 A-E. Submit (Exhibit 5.5F).

G. Construction Procurement Plan - Submit (Exhibit 5.5G).

Please attach a narrative description of the process that will be used for the selection of the (construction professionals) contractor, project manager or technical specialist etc.

H. Construction Drawings & Specifications and Specification Compliance Certifications (Exhibit 5.5H).

I. Project Team - Please include the following information for each member of your project team. Please attach the resume for each member (Exhibit 5.I).

Name: _____ Specialization: _____

Company Name _____ Phone: _____ Website: _____

**Please include all experience with CDBG and/or CDBG-DR Funded Project(s)
(Add additional projects to list as appropriate):**

1. CDBG/CDBG-DR Project Name:

Town/City, State: _____ Completion Date: _____

2. CDBG /CDBG-DR Project Name:

Town/City, State: _____ Completion Date: _____

6. Evaluation Requirements

Please provide short answers (200 words or less) to all that apply to your proposed project.

- 6.1** Is this project necessary for community health and safety? Yes ____ No ____
If yes, please explain:
- 6.2** Does the contribute significantly to the long term recovery and economic revitalization of the affected area? Yes ____ No ____
If yes, please explain:
- 6.3** Does the project impact more than one market segment such as housing, transit oriented design, public facilities, infrastructure repair? Yes ____ No ____
If yes, please explain:
- 6.4** Does this project support the existing resources of the community, including cultural, physical, natural environment and geographic resources Yes ____ No ____
If yes, please explain:
- 6.5** Does the project provide for or enhance community services (schools, libraries, cultural centers, community gathering places and recreational facilities)? Yes ____ No ____
If yes, please explain:
- 6.6** Does the project provide or enhance a critical facility – hospitals, fire and police facilities, and other emergency response facilities? Yes ____ No ____
If yes, please explain:
- 6.7** Will the project enhance housing/shelter situations? Does it provide for community shelters, enhance mixed-income housing options, or improve assisted living facilities?
Yes ____ No ____
If yes, please explain:

- 6.8** Does the project serve or support several geographic areas within the community?
Yes No
If yes, please explain:
- 6.9** Does this project interconnect among and within the existing community development framework and physically connect neighborhoods, key features, districts, etc?
Yes No
If yes, please explain:
- 6.10** Is the project a result of cooperative planning, development, or implementation efforts among various local, state, or federal agencies or organizations? Yes No
If yes, please explain:
- 6.11** Does the project provide an opportunity to improve upon pre-disaster conditions?
Yes No
If yes, please explain:
- 6.12** Does the project apply a mitigation or safety measure to increase resiliency and avert future losses related to natural disaster or incidents of national significance?
Yes No
If yes, please, explain:
- 6.13** Does the project provide innovative green wastewater technologies and/or stormwater technologies? Yes No
If yes, please explain:
- 6.14** Does the project utilize construction methods that emphasize green technologies, high quality, durability, energy efficiency, sustainability and/or mold resistance? Yes No
If yes, please explain:

6.15 Does the project protect (does not harm) key ecosystems? Protect wildlife and natural areas?
Improve water and air quality? Yes ____ No ____
If yes, please explain:

6.16 How many temporary or permanent jobs will be created or reestablished as a direct result of this activity? Please explain:

6.17 Does the project rebuild or redevelop damaged properties or infrastructure?
Yes ____ No ____
Please explain:

6.18 Can the activity be completed with the funds requested? Yes ____ No ____

6.19 Does the project have access to the resources and funding sources necessary to cover the project costs within the project time frame?
CDBG-DR Funds must be spent by September 30, 2017.
Yes ____ No ____

6.20 Does the project leverage multiple sources of funding? Yes ____ No ____
Please explain:

6.21 What is the number of families or individuals benefiting directly or indirectly from the activity?

6.22 How soon can the project start? Specify month and year: _____

6.23 What is the length of time from project closing (to begin the project) to project completion?
Specify number of months: _____

7. Certification

I/We understand that the rehabilitation of the above mentioned property will be undertaken in accordance with the procedures outlined in this application which I/We have received and that I/We qualify for a grant as required and explained in this Application and in the Program Guide for Public Facilities, Infrastructure and Planning for CDBG-DR.

In the event any of the information provided in this application changes prior to the completion of any rehabilitation or construction work, I/We will notify the CT Department of Housing of any such changes.

Any applicant(s) making any misleading or falsified statements may be required to reimburse the Connecticut Department of Housing for any grant received and may be subjected to penalties under Section 1001 and 1012 of Title 18 of the United States Code.

Applicant Signature _____ Date _____

Applications for funding can be Emailed to Elizabeth.swenson@ct.gov

Or Mailed to:

**CDBG-DR Team Sandy – Attention Geraldine Rice
CT Department of Housing
505 Hudson Street
Hartford, CT. 06106**

8. Exhibits

Note: Some Exhibits may not apply to your proposed project.

1.7 Description of the Project and Map (Exhibit 1.7)

In 500 words or less, please describe the problem or need for this project and how the project addresses a direct impact from Hurricane Sandy.

2.1 Summary – Insurances Please attach copies of documents. (Exhibit 2.1)

2.2 Additional Funding Sources Copies of Commitment Letters (Exhibit 2.2):

3.2 Relocation Plan Please provide a copy (Exhibit 3.2)

If you are planning a project that has relocation as a part of the project, and the General Information Notices (GIN) been sent out.

3.3 Project Implementation Schedule - Detailed Timetable showing all phases of the project: engineering, design, contract document preparation, construction completion and acceptance (Exhibit 3.3)

3.4 Community Impact Maps

How will this project impact the community? Please include

1. A map highlighting major housing patterns, transportation, relevant services, significant community facilities, and the locations of substantial public and private investment as well as any other features relevant to demonstrating community impact.
2. Color sea level rise maps showing 1', 3', 5' rise. Website (Use Foxfire): NOAA Sea Level Rise and Coastal Flooding Impacts/CT/Town/Focus Area/Streets/ Sea Level Rise Legend. Identify the project site location on each sea level rise map (Exhibit 3.4).

3.5 Community Support and Public Participation

Are there letters of support from individuals and/or any of those who provide for or represent those who receive services in the project area? List and attach letters (Exhibit 3.5).

3.6 Consistency with the Connecticut's Consolidated Plan for 2010-2015; the Plan of Conservation and Development for 2013-2018; Connecticut's Hazard and Mitigation Plan and CDBG-DR Action Plan. Each project must be reflective of the goals, priorities, and requirements of the Plans. Please provide a brief explanation of the proposed project's consistency with the Plans (Exhibit 3.6).

4.2. Hazardous Materials Notifications & Requirements

Are your buildings occupied? Yes ___ No ___

Do hazardous materials exist in and or around the building(s)? Yes ___ No ___

If **yes to both of the above**, please attach all notification materials and documents that have or will be issued to residents (Exhibit 4.2).

4.4. Coordination/Approvals/Clearances/Readiness to Proceed

Please submit/attach documentation for verification as

Readiness to Proceed (Exhibit 4.4.A) and Permits (Exhibit 4.4.B):

- 4.5. Floodplains:** List and describe any floodplains that have been determined to be present in or immediately adjacent to the proposed project site (**Exhibit 4.5**). **Identify FEMA's Flood Map Community Panel No:** _____
- 4.6. Wetlands:** List and describe any wetlands (as classified by the Department of Interior Fish and Wildlife Service) or as defined by CGS Section 22a-92(2) or 22a-38(15) that have been determined to be present in or immediately adjacent to the proposed project area (**Exhibit 4.6**).
- 4.7. Historic Resources** List all that are located in the project area which could be potentially impacted by the proposed projects including the age of the building to be improved and the surrounding buildings (**Exhibit 4.7**).
- 4.8 Sustainable Features and Design** List the features and products you intend to use that qualify as a sustainable/green standard.
- A. Good Storm Water Management Techniques (Exhibit 4.A).**
 - B. Other Sustainable/Green Feature Products and/or Processes Relevant to Project (Exhibit 4.B).**

Please be sure that the features and products listed are included with their specifications in the document page of your construction specifications document (**Exhibit 5.5 H**).

OR

If you have proof of LEED or equivalent green building/planning registration/certification (minimum of silver certification), including the CT-DEEP Green Circle Award, and submit as (**Exhibit 5.5.H**).

5. Construction Documents

- A. Drawings Completion Level -** Submit drawings as **Exhibit 5A**.
None _____ Schematic_____ Design Development_____ Construction/Final_____
- B. Specifications Completion Level -** Submit specifications as **Exhibit 5.B**.
None _____ Outline_____ Developmental_____ Final/Bid/Contract Package_____
- F. Construction Cost Estimate:**
Submit with Completion Level indicated in 5.5 A-E. Submit as **Exhibit 5.5F**.
- G. Construction Procurement Plan -** Submit as **Exhibit 5.5G**.
Please attach a narrative description of the process that will be used for the selection of the (construction professionals) contractor, project manager or technical specialist etc.
- H. Construction Drawings & Specifications -** Please submit as **Exhibit 5.5H**.
- I. Project Team -** Please attach the resume for each project team member (**Exhibit 5.I**).