

## West Virginia Community Development Block Grant- Mitigation Regional and Local Planning Grant Application 2022

### Application Instructions

- Submit the Fillable PDF for your application.
- Answer each of the numbered questions.
- Answer each of the numbered questions within the limits of the fillable space provided in the application.
- Any attachments should be attached at the end of application in order, according to the application checklist attached **below**.
- Attachments should be titled as stated in the **File Name** section of the application checklist.
- Attachments should have page numbers; list page numbers in the application checklist.
- Applications can be submitted through Dropbox, Email, or shared through Google Drive.
- Large attachments such as PER's, IJDC reports, or Audit reports can be submitted separately.

Application Checklist			
Section	File Name	Page #	Included (Yes/No)
Application - Fillable PDF	Project Title- Applicant		
<b>Attachments</b>			
4- Historical Damages	Section 4- Historic Data (Pictures, Newspaper articles, letters from Mayor, City Manager or Engineers on City or Town letterhead)		
5 – Quantity of Protection and Service Area	Section 5- Service Area Include: Service area map, project site map, FEMA floodplain map of project area. Include Maps with Census tract and Block groups		
7- Capacity Plan	Section 7 - Capacity Plan Include: Procurement Documentation Include: Most recent Audit Report (Can be attached separately-notify in Page # section)		
8 – Project Timeline	Section 8- Project Timeline Include the Project Timeline Template Provided by WVDED		
9 – Budget	Section 10- Budget Include Budget Template Provided by WVDED		
10 – Leveraged Funds	Section 11- City/Town Budget Attach approved City/Town budget for project year		
11 – Public Notice Requirement	Section 12 - Public Notice -Public Notice Documentation (newspaper advertisements with 14-day comment period, affidavit)		
Additional Attachments	Additional Attachments- -Signed consent form provided by WVDED - Resolution approving the submissions of application (for UGLGs only) -Attach pictures of project location		

## West Virginia Regional and Local Planning Program

Project Title: \_\_\_\_\_

Section 1 Applicant Information:			
Primary Contact Name:		Mailing Address:	
Title:		City:	
Email:		State:	
Phone Number:		Zip Code:	

Entity Name:			
Oasis Number:		UEI Number:	
Cage Code:		FEIN Number:	

Project Administrator Name (if different than above):		Mailing Address:	
Title:		City:	
Email:		State:	
Phone Number:		Zip Code:	

Total Customers Served		Total CDBG-MIT Funds	
Total Residents Served		Total Project Cost	
LMI Persons Served		Number of Acres Impacted	

Executive Summary of Project (100 words or less):

County Selection:		
Select each county that your project directly benefits. WVDED will use this information to assess MID . Only counties eligible for CDBG-MIT funds are listed below.		
Kanawha	Fayette	Lincoln
Greenbrier	Roane	Summers
Nicholas	Pocahontas	Monroe
Clay	Webster	Jackson

**Section 2 Project Description:**

Respond to the prompts:

1. What is the proposed project? Where will the proposed project take place?

2. What is the current problem or risk? How many people does it affect? Where does the current problem or risk affect persons or property?

3. How will the proposed project mitigate against the identified problem or risk?

4. Explain the use of natural infrastructure in the project, if applicable.

### Section 3 Mitigation Impact:

Projects must meet the HUD definition of a mitigation activity. **HUD describes a mitigation activity as “...those activities that increase resilience to disaster and reduce or eliminate the long-term risk of loss of life, injury, damage to and loss of property, and suffering and hardship, by lessening the impact of future disasters.”**

West Virginia identified Flooding, Winter Weather, Severe Storms as the top risks impacting the state.

Write response to the prompts.

1. Describe how implementing this project will increase resilience to disaster and reduce or eliminate the long-term risk of loss of life, injury, damage to and loss of property, and suffering and hardship, by lessening the impact of future disasters.

2. State the estimated savings that will result from the reduction of the repetitive losses.

For reference, Community Lifelines are listed below. For more information, visit [www.fema.gov/emergency-managers/practitioners/lifelines](http://www.fema.gov/emergency-managers/practitioners/lifelines)

1. Safety and Security
2. Food, Water, Shelter
3. Health and Medical
4. Energy (Power and Fuel)
5. Communications
6. Transportation
7. Hazardous Materials

3. Describe the project’s value to the community in normal circumstances and in times of natural disasters. Which of the seven community lifelines will be served by completion of this project? How does this project enhance regional and/or multijurisdictional community resilience?

Fill out the table to indicate which/how many of the federally measured deliverables the project will produce.

Proposed Performance Measure	Yes/No	Quantity
Number of jurisdictions with enacted resiliency plans/ordinances		
Number of acres with improved multiple hazard risk mapping		
Number of climate action plans completed		
Number of communities with standards exceeding NFIP		
Number of community engagement meetings/events		
Number of disaster recovery plans completed		
Number of ecological actions Identified		
Number of energy plans completed		
Number of entities at resilience meetings		
Number of floodplain design standards updated		
Number of Hazard Mitigation Plans prepared		
Number of infrastructure design standards updated		
Number of legislative actions taken to improve resiliency		
Number of local laws passed		
Number of mitigation plans completed		
Number of Non-business organizations benefiting		
Number of persons at resilience meetings		
Number of planning and studies and initiatives completed		
Number of of plans adopted		
Number of plans or planning products		
Number of public education meetings		
Number of resilience planning recommendations implemented		
Number of resilience plans created		
Number of revised zoning codes incorporating resiliency adopted		

Number of Stormwater Management Zoning Ordinances adopted		
Percent of survey respondents with an increased understanding of flood risks and water management issues		
Number of management/flood maps updated		
Number of water management/flood plans completed		

**Section 4 Historical Damages**

In reference to application checklist, attach:  
 - Section 4 Historic Data ( Pictures, Newspaper articles, letters from Mayor, City Manager or Engineers on City or Town letterhead )

1. Please describe recurring events specific to the identified risk and proposed project area (Flooding, severe storms, etc.)

2. For plans that affect a local area, record historical damages before mitigation.

<i>Damage Year</i>	<i>Damage Amount</i>	<i>Number of Volunteers</i>	<i>Impact days</i>

## Section 5 Quantity of Protection and Service Area:

Respond to the prompts. Contact the project manager for questions regarding the service area.

1. Where is the service area?

2. What is the population of the service area?

3. Describe in quantifiable terms the benefits of the project, such as how many customers and/or households will be served (existing and new), how many acres will be made more resilient, to future disasters, how many structures demolished, compliance with public standards, etc

Attachment (Section 5- Service Area): Include maps of the identified service area. Maps should clearly identify the following:

- a. Service Area
- b. Location of the Project Site(s)
- c. Census Tracts and Block Groups within the Service Area
- d. Relevant political boundaries such as city limits, streets, and county lines
- e. Attach a FEMA floodplain map of the project area

**Section 6 Level of Need:**

Respond to the questions below.

1. Describe how the project will prioritize and/or consider low-moderation income households and vulnerable populations as defined in the CDBG-MIT Action Plan.

2. Describe how LMI and vulnerable populations will be engaged as part of the planning process.

**Section 7 Capacity Plan:**

Please provide the following information:

1. List project members assigned to the project team (name, role, responsibilities). If name is unknown, list role and responsibility.

2. Describe work completed on comparable projects with federal funding in the past 5 years by both project administrators and the applicant.

3. Document that the procurement policy governing the proposed project is compliant with 2 CFR 200. If the procurement policy is not compliant at time of submission, describe what steps will be taken to ensure compliance for funds associated with the project.

Attachment (Section 7 - Capacity Plan) –

- Provide a copy of all procurement documentation- must be compliant with 2 CFR 200 and State Code 5G.
- Provide a copy of a recent independent or single audit report. **This must be a separate attachment.**

**Section 8 Project Timeline:**

Attach the Project Timeline template as described in the Application Checklist.

The Project Timeline must be for the entire life of the project and organizes work into logical, manageable tasks and expected deliverables. Include activities that have already been undertaken, if applicable. Please allow time for any unacquired permits, easements, waivers, and/or approvals if applicable.

The Project Timeline Template has been provided on the CDBG-MIT website.

**Section 9 Budget:**

Include your project budget using the Budget Template found on the CDBG-MIT website. Ensure your budget is reasonable, appropriate, and accurate. Budgeted items must be consistent with the project description and tasks. The amount requested must fall within the RLPG applicant's allowable maximum (\$250,000).

All funds identified for use on your project must be fully disclosed and detailed to ensure budget accuracy and no duplication of benefits. Do you anticipate receiving any funds for this project that will not be supplied by the CDBG-MIT program? If yes, detail the anticipated or committed funds in the Leveraged Funds section below.

- Yes
- No

Does your project budget contain any duplication of benefits? (Check one)

- Yes
- No

**Section 10 Leveraged Funds:**

If your project involves the qualified use of matching or leveraged funds or services in any capacity, describe the specifics of leveraged fund/service usage in the space below. Refer to the RLPG guidelines for more information. Put "N/A" in the Sources section if not applicable to your project.

Are there local or other funds available to address the proposed project in whole or in part? If yes, report all sources of funding and the amount available.

- Yes
- No

Sources	Amount	Committed by

In a maximum of 300 words, describe the uses of non CDBG-MIT funds and any additional requirements that will impact the project scope, budget, or timeline.

**Section 11 Public Notice Requirement:**

Prior to submitting an application for CDBG-MIT funding, applicants are required to select their public notice format as described in the RLPG Guidelines. Public Notices must run in a newspaper of general circulation for at least five (5) consecutive days.

In addition to following these instructions please include relevant notice dates on your Project Timeline template. Applications will not be complete until Public Notice requirements are fulfilled.

**Public Notice without Public Hearing**

Attach a file titled "ApplicantNameRLPG\_S12" that contains the following files:

- Documentation of newspaper advertisement with a 14-day comment period.
- Print-out of UGLG webpage showing public notice, if applicable.
- Affidavit of advertisement that ran for 5 consecutive days

**Section 12 Compliance:**

According to 84 FR 45838, August 30, 2019 Section V.A.(18), "The State shall make reviews and audits, including on-site reviews of any subrecipients, designated public agencies, and local governments, as may be necessary or appropriate to meet the requirements of section 104(e)(2) of the HCDA, as amended, as modified by this notice. In the case of noncompliance with these requirements, the State shall take such actions as may be appropriate to prevent a continuance of the deficiency, mitigate any adverse effects or consequences, and prevent a recurrence. The State shall establish remedies for noncompliance by any designated subrecipients, public agencies, or local governments."

Can you certify to comply with state and federal register regulations as outlined in 84 FR 45838? (Check one)

Yes  
No

**Section 13 Conflict of Interest Statement and Disclosure:**

A potential or actual conflict of interest exists when commitments and obligations are likely to be compromised by the CDBG-MIT applicant's or CDBG-MIT agent's other material interests, or relationships (especially economic), particularly if those interests or commitments are not disclosed.

This Conflict of Interest Disclosure should indicate whether the CDBG-MIT applicant or CDBG agent has an economic interest in, or acts as an officer or a director of, any outside entity whose financial interests would reasonably appear to be affected by the awarding of CDBG-MIT funding. The CDBG- MIT applicant or CDBG-MIT agent should also disclose any personal, business, or volunteer affiliations that may give rise to a real or apparent conflict of interest. Relevant Federally and organizationally established regulations and guidelines in financial conflicts must be abided by to consider awarding CDBG-MIT funds.

I have no conflict of interest to report

I have the following conflict of interest to report (please specify other nonprofit and for profit boards you (and your spouse) sit on, any for-profit businesses for which you or an immediate family member is an officer or director, or a majority shareholder, and the name of your employer and any businesses you or a family member own:

Please describe below any relationships, transactions, positions you hold (volunteer or otherwise), or circumstances that you believe could contribute to a conflict of interest:

WARNING: Any person who knowingly makes a false claim or statement to the Department of Housing and Urban Development (HUD) may be subject to civil or criminal penalties under 18 U.S.C.287, 1001 and 31 U.S.C. 3729. Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willfully making false or fraudulent statements to any department of the United States Government.

**Sign and Date**

As the primary entity contact for this project, I certify that staff, contractors, vendors and community partners of our mitigation initiative:

- A. Will comply with all HUD and West Virginia requirements in the administration of the proposed CDBG-MIT funded activities;
- B. Will work in a cooperative manner to execute the Subrecipient Agreement that provides the pathway for successful CDBG-MIT program(s) and/or project(s) and;
- C. Certify that all information submitted in this application is true and accurate.
- D. Certify the submission thereof has been duly authorized by resolution of the Unit of Local Government after public notice requirements have been met.

**Attach a copy of the resolution authorizing the application.**

Typed Name:

Title:

Signature:

Date: