April 17, 2013

Dear Community Partner:

SUBJECT: **Community Development Block Grant (CDBG) Application**
                        FOR_____PROPOSALS
                        Program Year: September 1, 2013 – August 31, 2014
                        Deadline: 5 pm, May 7, 2013

The City of Olympia is requesting applications for eligible _____ to be funded by the City's Community Development Block Grant (CDBG) in Program Year 2013 (September 1, 2013 – August 31, 2014). Attached please find the "**Pre-Application.**" Deadline for submittals is Friday, May 7, 2013.

You are invited to participate in the City of Olympia's public process for prioritizing the CDBG funding, listed as follows:

> **Community Partner Meetings**
> Noon, Thursday, April 25, 2013
> 5:30 p.m., Thursday, May 2, 2013
> Location: City Hall, 601 4th Avenue E, 1st Floor, Room 112

> **Public Hearing**
> 7:00 p.m., Tuesday, June 11, 2013
> Location: City Hall, 601 4th Avenue East, Council Chambers

All projects and services that benefit low- and moderate-income people must meet federal CDBG regulations, which can be found **under CFR 24, Parts 500 through 699**. Previous eligible projects and programs that benefit low- and moderate-income persons have included: youth after-school drop in centers, homeless prevention outreach, domestic violence shelter maintenance, homeless shelter maintenance, and supportive services for residents of transitional housing. The total of available funding is tentatively anticipated to be $270,000 but may be reduced by congressional action.

If you have any questions or need more information, please contact either Anna Schlecht or Steve Friddle as listed below.

Sincerely,

M. ANNA SCHLECHT
Olympia Housing Program Manager
aschlech@ci.olympia.wa.us
Phone: (360) 753-8183

STEVE FRIDDLE
Olympia Community Services Manager
sfriddle@ci.olympia.wa.us
Phone: (360) 753-8591

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MAYOR: Stephen H. Buxbaum   **MAYOR PRO TEM:** Nathaniel Jones   **CITY MANAGER:** Steven R. Hall
COUNCILMEMBERS: Jim Cooper, Julie Hankins, Steve Langer, Jeannine Roe, Karen Rogers

CITY OF OLYMPIA — REQUEST FOR PROPOSALS
Community Development Block Grant Program
FACT SHEET & SUBMISSION REQUIREMENTS

The City of Olympia is requesting proposals that address TO BE DETERMINED BY COUNCIL. The City of Olympia will provide up to $270,000 of one-time funding to develop and deliver a project or program that meets the following guidelines:

2013 COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM GOALS

1) **TO BE DETERMINED BY OLYMPIA CITY COUNCIL**

CDBG RELEASE OF REQUEST FOR PROPOSALS: APRIL 17, 2013

The City of Olympia will release a "REQUEST FOR PROPOSALS" on Wednesday, April 17, 2013 by email and paper copies to all stakeholders.

COMMUNITY PARTNER MEETINGS

The City will host two "Community Partner Meetings" to present information about the CDBG Program and the City's goals for Program Year 2013 and the RFP process. These meetings will be held as follows:

Noon, Thursday, April 25, 2013
5:30 p.m., Thursday, May 2, 2013
Location: City Hall, 601 4th Avenue E, 1st Floor, Room 112

CDBG DEADLINE FOR SUBMISSIONS: MAY 7, 2013

All proposals for 2013 Olympia CDBG funding will be due by 5 pm, May 7, 2013. Please see submission requirements below.

ACTIVITIES ELIGIBLE FOR FUNDING
TO BE DETERMINED BY OLYMPIA CITY COUNCIL

Intended Beneficiaries

Low and moderate income Olympia residents, at or below (80% or 50%) of the median family income who are homeless or at risk of homelessness including:

- BENEFICIARIES TO BE IDENTIFIED BY OLYMPIA CITY COUNCIL

Funding Priorities:

Funding priority will be given to projects that meet the following goals:

- Impact TO BE DETERMINED BY OLYMPIA CITY COUNCIL
- Meets the goals of the Joint Olympia & Thurston County Consolidated Plan
  Meets the Olympia City Council
- Reflect a collaborative approach with other service providers
- Will leverage other private federal, state or local government funding sources
- Include a viable plan for neighborhood notification to all affected stakeholders

ELIGIBLE APPLICANTS

TO BE DETERMINED BY OLYMPIA CITY COUNCIL   that have a proven record in providing TO BE DETERMINED BY THE OLYMPIA CITY COUNCIL within the Olympia area. If a multi-organizational submission, the application should identify the lead organization and clearly explain the role(s) of partner organization(s).

Application Format Guidelines:

Only complete proposals will be accepted as received in the format described below and by the deadlines stated above. Format guidelines include the following:

- **Application Cover Sheet** – Identifying the agency, contact information, etc.
- **Narrative Questions** Answers to explain how each of the program goals will be addressed; eligible funding activities and level of funding, list of targeted beneficiaries; and how the program results will be tracked, managed and reported. (cumulative maximum total of six pages for narrative answers - print size no smaller than 12 point)
- **Source documents** (if necessary) to be attachments. If the source documents exceed two pages, excerpt or summarize them and note the source(s).
- **Letters of Support** - attachments documenting participation or support by sectors of the community, or letters verifying contribution of resources are appropriate.
- Other **Required Attachments:**
  - Agency or Business Brochure(s)
  - Proposed Homeless Prevention Budget
  - Last Fiscal Year Actual Agency Budget

Non-Discrimination Policy:

Applicants shall neither deny services to, nor otherwise discriminate in the delivery of services, against any person who otherwise meets the eligibility criteria for the program on the basis of race, color, religion, gender, sexual orientation, gender identity, age, national origin, citizenship, ancestry, marital status, physical or mental handicap, or because such person is a recipient of federal, state or local public assistance

We look forward to reviewing your RFP submission. If you have any questions or need further information, please contact:

M. Anna Schlecht
Olympia Housing Program Manager
aschlech@ci.olympia.wa.us
Phone: (360) 753-8183

Steve Friddle
Olympia Community Services Manager
sfriddle@ci.olympia.wa.us
Phone: (360) 753-8591

CITY OF OLYMPIA - COMMUNITY DEVELOPMENT BLOCK GRANT
Program Year 2013 PRE-APPLICATION
Please Note: 2013 Funding for COUNCIL DESIGNATED ACTIVITIES TO BE ANNOUNCED

COVER PAGE	
Amount Requested:	
Program Name:	

AGENCY INFORMATION
Name:
Street Address:
Mailing Address:

Email Address:	Web Address:
Phone:	Fax:

Agency Director:
Application Contact Person:

Years in Existence:	# of Staff:	# of Volunteers:

Type of Agency	☐ Public Agency	☐ Private Non-Profit (501c3)	☐ Partnership
	☐ Corporation	☐ Sole Proprietorship	☐ Other _____

Federal Tax ID#:	DUNS# **(Required)**:

Mission Statement:

PERFORMANCE GOALS (number of housing units, people served, number of bed nights, etc.):

Target Population (check most appropriate):

☐ Low-income area	☐ Low-income persons	☐ Seniors
☐ Abused/neglected Children	☐ Abused spouses	☐ Migrant Farm Workers
☐ Persons living with AIDs	☐ Illiterate	☐ Seriously disabled adults

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NARRATIVE QUESTIONS:

Use this format with option to expand to a maximum of six (6) pages, 12 point font.

1. **PROPOSED PROGRAM/SERVICE TO BE FUNDED:**

2. **SPECIFIC PURPOSE OF FUNDING:**

3. **PROJECT/PROGRAM LEADERSHIP TEAM -** List all members of leadership team and management experience with similar projects and programs:

Name	# Years of Experience	# Years on Staff

4. **NEIGHBORHOOD NOTIFICATION -** Describe plans to notify and consult with affected neighborhood associations, business associations, immediate neighbors of potential locations and other stakeholders:

5. **PROJECT TIMELINE -** Present timeline of activity for Project/Program mandatory dates, e.g.: "September 1, 2013 – START", "June 30, 2014 – Expenditure of $____ Funds" *(attach separate page if necessary)*

Date	Activity

PROJECT/PROGRAM REVENUE BUDGET:

Source of Program Revenue	% of Program Budget	Amount of Funding ($)	Start/End Dates of Funding Cycle	Status (Approved or Pending)
TOTAL:				

CERTIFICATION: As the applicant, I certify that all the information submitted is true and accurate, and that this agency is a federally designated tax-exempt organization with an active State non-profit corporation status. Further certification of insurance, standing board of director's roster and organizational chart will be submitted upon request.

_____   _____   _____
Signature   Title   Date

Required Attachments:
Agency or Business Brochure
Proposed Agency Budget for Year(s) including CDBG Program Year
Last Fiscal Year Actual Budget