

**COUNTY OF SANTA CRUZ
CDBG PRE-APPLICATION
Public Facility-COVID-19**

(NOTE: This pre-application is being published prior to the State Notice of Funding Availability and is subject to change.)

1. How will CDBG funds be used (select all that apply), if using other funding please identify for what activity:
 - Acquisition of Vacant Land
 - Acquisition of Existing structure
 - New Construction
 - Rehabilitation
 - Other (describe):

2. What type of Public Facility? (select only one)
 - Senior Center
 - Centers for the Disabled/Handicapped
 - Homeless Facility (not operating costs)
 - Youth Center/Facility
 - Neighborhood Facilities
 - Parks, Recreational Facilities
 - Parking Facilities
 - Child Care Centers
 - Fire Stations/Equipment
 - Health Facilities
 - Other (specify):

3. How many public services will be provided at this Facility? Explain if any of the services to be provided are not CDBG eligible activities.
 - a. One Public Service, list:
 - b. More than one Public Service, list all:
 - c. Public Services Activity(s), as noted above and other non-CDBG eligible Public Service Activities. Explain/Describe:

4. How much funding are you requesting? (Please note the amount will be reduced by CDBG administration funds for the County)

5. Where will this public facility be located? Provide physical address of facility. (The County CDBG funds can only be used in unincorporated Santa Cruz County, not in the Cities of Scotts Valley, Santa Cruz, Watsonville or Capitola)

- a. Do you have site control? Is it a draft or executed document?
 - i. County owned site
 - ii. Purchase agreement
 - iii. Option to purchase
 - iv. Option to Lease
 - v. Leasehold Interest
 - vi. Deed of Trust
 - vii. Other Documentation, list:
6. Describe your project, include description of structure and type of rehabilitation or construction proposed.
7. Does the proposal involve purchase, conversion or demolition of structures on the proposed project's site that will cause displacement of any "persons".
 - a. Will this activity trigger relocation temporary or permanent displacement of any "persons"?
8. Are you also requesting CDBG funding under this NOFA for the proposed public services at this facility?
9. For each service conducted or to be conducted in the facility project, describe the problem if the service(s) is not provided, continued or expanded.
10. Explain how and to what extent the proposed service/activity will solve the problem: a. necessity for all services; and b. condition of the building.
11. To be eligible for CDBG assistance, the service must benefit low income person (80% Area Median Income). Please select from a, b, or c below.
 - a. Will beneficiaries be 100 % low income?
 - b. Limited Clientele? List type?
 - c. Primarily low income? List percentage of total.
 - i. Based on Income Survey? Must comply with CDBG rules.
 - ii. Based on HUD ACS Low/Mod data? The County of Santa Cruz data does not qualify under this data.
12. Please provide breakdown of beneficiaries.

<u>81% AND ABOVE</u> <i>(Non-Low/Mod)</i>	<u>BETWEEN 51% - 80%</u> <i>(Low/Mod)</i>	<u>BETWEEN 31% - 50%</u> <i>(Very Low-Income)</i>	<u>BELOW 30%</u> <i>(Extremely Low-Income)</i>	<u>TOTAL</u> <i>Number of People</i>

13. Provide Engineer Preliminary Design and Plans, documents with engineer's signature and stamp will be awarded full points.
14. Provide Engineer Cost Estimate
15. Provide Engineer Timeline
16. Provide list of all Funding in Place and documentation