

**CITY OF MERCED**  
**COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG)**  
**PROGRAM FY 2018/19 CDBG APPLICATION**

**APPLICATION SUBMITTAL CHECKLIST**

*This checklist must be included as part of your agency's FY 2018/19 CDBG Application packet.*

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

Agency Name: \_\_\_\_\_

**INSTRUCTIONS**

Enter an "X" next to each item below as you complete it. If the form or document listed does not apply to your project, enter "N/A" next to the item. This checklist must be included as part of your agency's FY 2018/19 CDBG Application packet.

**APPLICATION**

|  |   |
|--|---|
| <i>The following must be submitted to be considered for funding:</i> |   |
|  | Application Submittal Checklist   |
|  | Application for Funding   |
|  | Appendix A: Narrative of Project  |
|  | Appendix B: Capital Improvement Project (CIP) Project Details                           |
|  | Appendix C: List of All Funding Sources & Two Years of Annual Financial Audits          |
|  | Appendix D : Project Implementation   |
|  | Appendix E : Results of Prior Year Projects <i>(as applicable to project; see form)</i> |
|  | Appendix F: Roster of Board Members   |
|  | State and Federal Tax Exemption Determination Letters                                   |
|  | Charter and/or Bylaws   |
|  | Organization Chart  |
|  | Copy of Insurance Certificate   |
|  | Applicant Attended MANDATORY Community Meeting  |



**FY 2018/19 CDBG APPLICATION SUBMITTAL CHECKLIST**

**PROJECT-SPECIFIC REQUIREMENTS: For PUBLIC SERVICES projects only**

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| Copy of Rental or Lease Agreement ( <i>A copy of lease is only required if CDBG funds are proposed to be used to make a portion of the lease payments.</i> ) |
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*CDBG Eligible Activity for Public Services Projects (must select one):*

|  |   |
|--|---|
| <i>Public Facilities and Improvements:</i> |   |
| General Public Services                    | Child Care Services                     |
| Homeless/AIDS Services                     | Health Services                         |
| Senior Services                            | Abused and Neglected Children           |
| Disability Services (documentation req.)   | Mental Health Services                  |
| Legal Services                             | Lead Based Paint/Lead Hazards Screening |
| Youth Services                             | Subsistence Payments                    |
| Transportation Services                    | Homeownership Assistance (not direct)   |
| Substance Abuse Services                   | Rental Housing Subsidies                |
| Battered and Abused Spouses                | Security Deposits                       |
| Employment Training                        | Housing Counseling                      |
| Crime Prevention and Public Safety         | Neighborhood Cleanups                   |
| Tenant/Landlord Counseling                 | Food Banks                              |
| Illiterate Adults (Non-English/ESL)        | Migrant Farm Workers                    |

**OPTIONAL DOCUMENTS: Not required from any applicant, but enter an “X” next to the items included in your application submittal**

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| Exhibits: These refer to no more than two 8.5” X 11” pages of exhibits that you may use to supplement your application materials. You may include photographs, charts, pictures, conceptual drawings, and/or anything else you consider suitable within the 2-page limit (may be in color or black and white). |
| Letters: You may submit up to 3 letters of support for your project as part of your application submittal.   |

