

**COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) PREAPPLICATION**

NORTH DAKOTA DEPARTMENT OF COMMERCE

DIVISION OF COMMUNITY SERVICES

SFN 61542 (05/25)

<b>PREAPPLICATION COVER SHEET FOR FISCAL YEAR 2025</b>			
<b>1. LEGAL APPLICANT</b> <i>(Must be a unit of general local government to be eligible.)</i>			
Applicant Name	County		
Mailing Address	City	State	ZIP Code
Local Government Contact Person	Telephone Number	Email Address	
Auditor	Telephone Number	Email Address	
Person Who Completed Application	Telephone Number	Email Address	
Person Available for Questions	Telephone Number	Email Address	
<b>2. ELIGIBLE ACTIVITY</b> Which eligible activity listed in Section II of the State Program Distribution Statement does this project comply with?			
<b>3. PROPOSED BENEFIT</b> <input type="checkbox"/> Area of Benefit <input type="checkbox"/> Limited Clientele <input type="checkbox"/> Housing			
<b>4(a). PROJECT BENEFICIARIES (2020 American Community Survey Data)</b> (provide supporting documentation)			
<b>Persons</b>			
a. Project Area Population _____			
b. Low-to-Moderate Income Population _____			
<b>4(b). LMI PERCENTAGE</b> (provide supporting documentation) _____			
<b>5. PROJECT DESCRIPTION</b>			
<b>6. PROJECT ACTIVITY TYPE</b> <input type="checkbox"/> Housing <input type="checkbox"/> Public Facilities		<b>7. USE OF FUNDS</b> (check all that apply) <input type="checkbox"/> Project <input type="checkbox"/> Administration	
<b>8. ANTICIPATED PROJECT START DATE</b>		<b>9. ANTICIPATED PROJECT DURATION</b> (MAX 18 MONTHS)	
<b>10. PROPOSED PROJECT BUDGET</b> <i>(This should match Sources of Funds table on page 5, excluding denied funding.)</i>			
<b>SOURCE</b>	<b>AMOUNT</b>	<b>USE</b>	
CDBG			
CDBG Administration			
State/Local			
State/Local Administration			
Other			

Identify all sources (example: State/Local is city name)

Is the proposed project special assessing residents? ☐ Yes ☐ No  
(If yes, your application is ineligible for CDBG funding. Refer to Section II of the CDBG PDS.)

### CDBG PREAPPLICATION CHECKLIST

**The following documents must be provided with the preapplication. (If these documents are not attached, your pre-application will be considered incomplete and will not be eligible for funding.)**

**11.** Preliminary architect/engineering report. (Required for all projects)

☐ Yes, the Preliminary architect/engineering report is included. ☐ No, DCS waiver approval is attached.

**12.** Are other funding sources utilized? If yes, a letter of commitment for each funding source is required. To receive points per the scoring criteria of "Secured Sources of Other Funding", you must attach a letter of commitment.

☐ Yes, all letter(s) of commitment are included. ☐ No, there are no other funding sources.  
(If No, please explain the reasoning for no other funding sources.)

### HOUSING ONLY

**13.** Type of units

☐ Apartments ☐ Townhomes/Rowhome ☐ Detached ☐ Scattered/Multiple Site ☐ Other \_\_\_\_\_

**14.** How many total units? \_\_\_\_\_

**15.** How many units occupied? \_\_\_\_\_

**16.** How many units unoccupied? \_\_\_\_\_

**17.** How many units are occupied by low-to-moderate income individuals? \_\_\_\_\_

**18.** How many units will be rehabilitated? \_\_\_\_\_

**19.** What year were these units built? \_\_\_\_\_

**20.** Has the project site been identified? ☐ Yes ☐ No

### PUBLIC FACILITIES ONLY

**28.** Are there individual hookups to houses not in a public right away? ☐ Yes ☐ No

**29.** Does your community have a long-term plan for infrastructure maintenance? Please explain.

**Please provide an answer to each of the following questions:**

**29.** Does the CDBG project address a health and/or safety concern? Please explain.

**30.** Describe why there is a need for the project.

**31.** What efforts have been made to look for other funding sources? Include any funding sources that were applied for but not received. Include why or why not a loan would be feasible.

**32.** Has CDBG previously funded this project? ☐ Yes ☐ No

If yes: Year funded \_\_\_\_\_ CDBG Award Amount \_\_\_\_\_ Instrument # \_\_\_\_\_

**33.** Has the Unit of Local Government ever received CDBG funding? ☐ Yes ☐ No

If yes: Year funded \_\_\_\_\_ CDBG Award Amount \_\_\_\_\_ Instrument # \_\_\_\_\_

**34.** Will the Unit of General Local Government procure out for administration? ☐ Yes ☐ No

Explain the capacity the Unit of General Local Government (UGLG) has to administer the grant themselves. The UGLG may have to administer the project themselves if (1) they choose to do so, and (2) they receive no bids through the procurement process of administration.

**35.** If partially funded, could this project move forward? Please explain how or how not.

**36. Additional Comments**

**By signing below, the Applicant certifies that:**

To the best of my knowledge and belief, data in this application are true and correct, and the document has been duly authorized by the governing body of the applicant.

Name of Chief Elected Official	Title of Chief Elected Official
Signature of Chief Elected Official	Date

Sources of Funds				
List all sources of other funding obtained/committed/sought for this activity below (name of source, state funds, local funds, etc.)				
Sources of Funds	Amount	Work Item to be Accomplished with Funds	Status (select one)	Contingent upon CDBG funding?
	\$		<input type="checkbox"/> Secured* <input type="checkbox"/> Pending <input type="checkbox"/> Denied	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$		<input type="checkbox"/> Secured* <input type="checkbox"/> Pending <input type="checkbox"/> Denied	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$		<input type="checkbox"/> Secured* <input type="checkbox"/> Pending <input type="checkbox"/> Denied	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$		<input type="checkbox"/> Secured* <input type="checkbox"/> Pending <input type="checkbox"/> Denied	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$		<input type="checkbox"/> Secured* <input type="checkbox"/> Pending <input type="checkbox"/> Denied	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Total</b>	\$			
<p><i>*If secured, attach letter of commitment. If pending, thoroughly explain below where you are in the process. If denied, attach denial letter stating the name of the source, the date funds were sought, and the reason for the denial. To receive points per the scoring criteria of "Secured Sources of Other Funding", you must attach a letter of commitment.</i></p> <p>If no other funding sources are involved in this activity, please explain why.</p>				