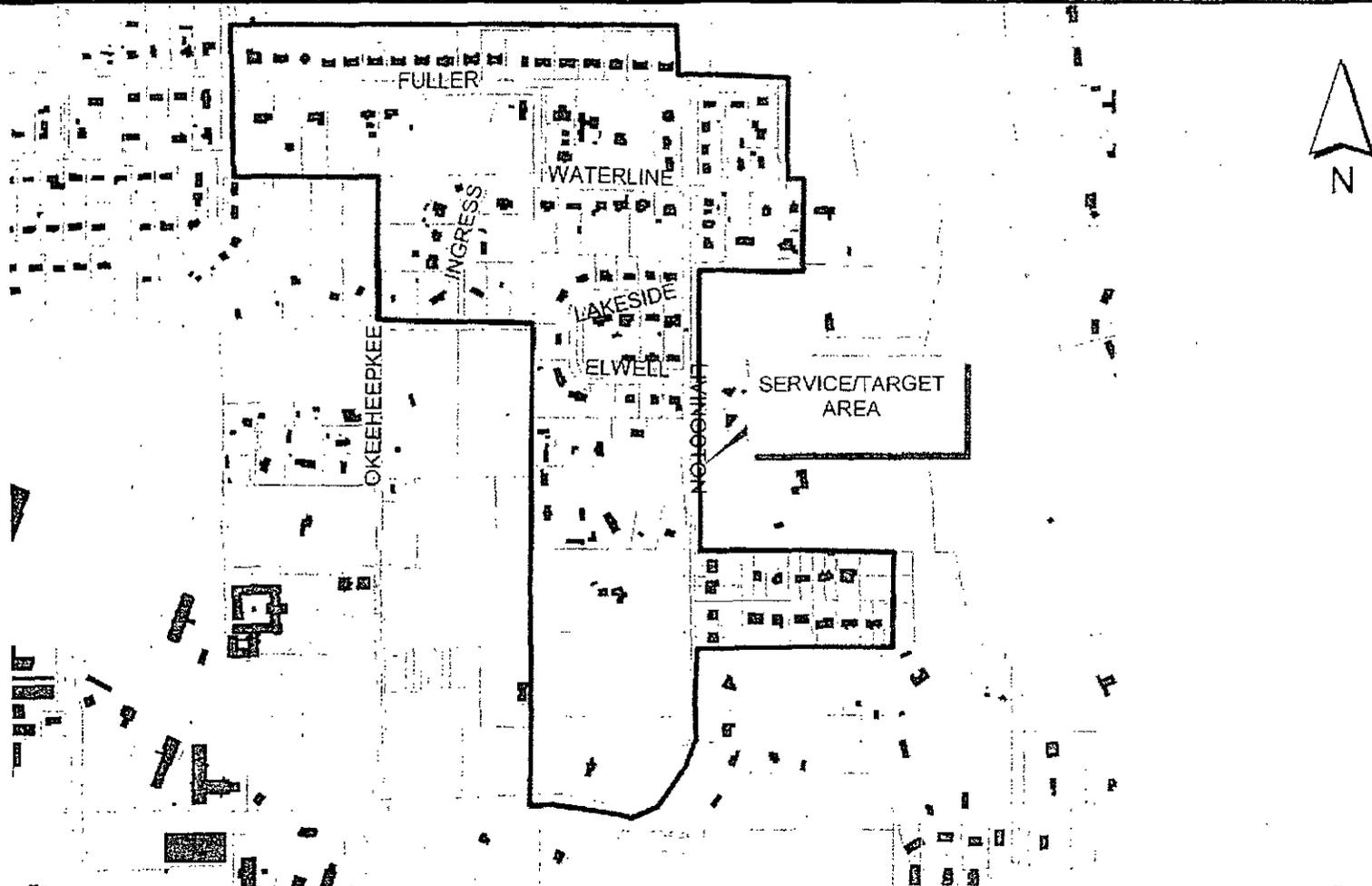


FFY 2011 Florida Small Cities Community Development Block Grant (CDBG)
Neighborhood Revitalization Category Application



Submitted by the Leon County Board of County Commissioners
August 15, 2011

Application for Funding

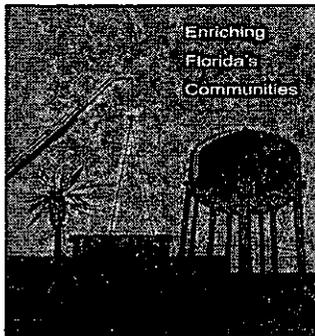
Florida Small Cities Community Development Block Grant (CDBG)

Applicant Leon County
(Name of Local Government)

Commercial Revitalization Housing
 Neighborhood Revitalization Economic Development

Federal Fiscal Year 2011

Application Due Date August 15, 2011



Department of Community Affairs
Division of Housing and Community Development
2555 Shumard Oak Boulevard
Tallahassee, Florida 32399-2100
Telephone 850/487-3644
Fax 850/922-5609
<http://www.floridacommunitydevelopment.org/cdbg/index.cfm>

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Part II – Application Profile and General Scoring Criteria

**Application Profile
Form G-1**

Local Government Contact Information:

Local Government Name: Leon County		
Street Address: 301 South Monroe Street		
City: Tallahassee	Zip Code: 32301	County: Leon
Main Telephone: (850) 606-5300		Main Facsimile: (850) 606-5301
Chief Elected Official: John Dailey		Title: Chairman
Telephone: (850) 606-5300		Facsimile: (850) 606-5301
Email Address: Daileyj@leoncountyfl.gov		
Financial Officer (Local Government): David Reid		Title: Director, Finance Department
Telephone: (850) 577-4021		Facsimile: (850) 577-4255
Email Address: DCReid@leoncountyfl.gov		
Project Contact (Local Government): Don Lanham		Title: Grants Program Coordinator
Telephone: (850) 606-5300		Facsimile: (850) 606-5301
Email Address: Lanhamd@leoncountyfl.gov		
Street Address: 301 South Monroe Street		
City: Tallahassee	State: Florida	Zip Code: 32301
<i>Local Government's Grant Consultant (if applicable):</i> N/A	<i>Name and Address of Firm</i>	<i>Telephone Number</i>

**Application Profile
Form G-1 (Continued)**

Application Preparer Information		
Preparer's Name: Don Lanham	Organization Preparing Application: <input type="checkbox"/> Private <input type="checkbox"/> RPC <input checked="" type="checkbox"/> Local Government	
Street Address: 301 South Monroe Street		
City: Tallahassee	State: Florida	Zip Code: 32301
Telephone: (850) 606-5300	Facsimile: (850) 505-5301 Email Address: Lanhamd@leoncountyfl.gov	
<p>Application Type: Indicate the type(s) of funding requested. A completed application must include the appropriate sections as provided below. A Planning and Design Specifications grant will not be offered unless the appropriate Planning and Design Specifications Grant box(es) are checked. (These grants are not a separate category but may be offered to an applicant in Neighborhood Revitalization or Commercial Revitalization with an application score below the fundable range for a full grant and which does not have completed construction plans and specifications.)</p>		
<input type="checkbox"/> Commercial Revitalization (Part IV)	<input type="checkbox"/> Economic Development (Part V)	
<input type="checkbox"/> Housing (Part VI)	<input checked="" type="checkbox"/> Neighborhood Revitalization (Part VII)	
<input type="checkbox"/> Planning and Design Specifications Grant – Neighborhood Revitalization	<input type="checkbox"/> Planning and Design Specifications Grant – Commercial Revitalization	
If you will accept a Planning and Design Specifications Grant, indicate amount being requested for:		
Basic Engineering \$	Additional Engineering \$	Administration \$
<p>Funding Preference: The applicant may submit a Commercial Revitalization and a Housing application, or a Commercial Revitalization and a Neighborhood Revitalization application, but not a Housing and a Neighborhood application. Applicants will not be considered for an additional Commercial Revitalization, Housing or Neighborhood Revitalization grant until all previously awarded Planning and Design Specifications grants have been administratively closed by the Department.</p>		
Did you submit more than one application? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If so, what category of funding do you prefer? <input type="checkbox"/> Neighborhood Revitalization <input type="checkbox"/> Commercial Revitalization		
Dates of Public Hearings on the Application:	First Public Hearing June 16, 2011	Second Public Hearing July 12, 2011
Dates of Advertisement of Public Hearings:	First Public Hearing June 10, 2011	Second Public Hearing July 1, 2011

**Application Profile
Form G-1 (Continued)**

Demographics			
U.S. Congressional District Number: 2 – Rep. Southerland			
Florida Senate District Number: 6- Sen. Monford		Florida House District Number: 9 – Rep. Rehwinkel Vasilinda	
Census Place	Census Tract	Census Block Group(s)	
Grant Request: Maximum grant requests are based on the jurisdiction's LMI population as determined by HUD. Please see the table below.			
LMI Population		Maximum Grant Request	
1 – 499		\$600,000.00	
500 – 1,249		\$650,000.00	
1,250 – 3,999		\$700,000.00	
4,000 – and above		\$750,000.00	
Local Government's LMI Population: 26,513		Grant Request	\$750,000
Answer the following questions by circling the correct response.			
Historic Preservation Will the project impact a building, public improvement or planned open space more than 50 years old? (See instructions.)			Yes No X
Interlocal Agreement Will project activities require an interlocal agreement? If yes, the interlocal agreement must be provided in the Supporting Documentation Section. (See instructions.)			Yes No X
State of Financial Emergency Has the local government been declared to be in a state of financial emergency pursuant to Section 218.50 – 218.504, F.S., at any time during the two years prior to submission of the application?			Yes No X
Grant Preparation Costs The applicant may request grant funds for the cost of grant application preparation. See instructions if funds are requested:			
Does the applicant wish to request grant funds for the cost of grant application preparation?			Yes No X
Amount \$	If yes, grant preparation cost documentation must be included in the Supporting Documentation Section.		
National Flood Insurance Program – Indicate whether or not the local government is a current participant in the NFIP.			Yes X No

**Project Narrative
Form G-2**

Describe the proposed project using the guidelines in the instructions. Use additional pages as needed.

Activity Description

The Lakeside project was developed to address stormwater drainage issues along Fuller Road, Livingston Drive, Elwell Drive, and Lakeside Drive. Due to the area having inadequate downstream drainage capacity, the residents along Lakeside and Elwell Drives experience flooding during large storm events. To correct the problem a new underground drainage pipe system will be designed and constructed to remove the stormwater from the low area and keep it from entering the properties in the area. The new system will run under portions of Livingston, Elwell, Lakeside, and Waterline Drives. The stormwater will be discharged so that it will flow into the new regional stormwater treatment facility North of Fuller Road before entering Lake Jackson.

The roadside drainage systems along Livingston Drive and Fuller Road will be enhanced to prevent/minimize overtopping and road flooding. All driveway culverts will be checked for condition/size and uniform ditch sections developed to ensure adequate capacity.

Need for CDBG Funding

Currently there is no capital funding available to complete the project, nor is it in the five year Capital Improvement Plan (CIP) scope of work. The County is currently facing a \$12 million budget deficit for the upcoming fiscal year and the existing CIP list will be reviewed , with projects removed or delayed to help balance the budget. The County is allocating \$125,000 from a grant matching pool in order to successfully complete this project.

Proposed Construction Start and Completion Dates

The engineering for this project is currently underway and being monitored by the Leon County Public Works Division. By application submittal (August 15) the County will have developed biddable plans and requested all required permits for the project. Once notified of award is received, the County will be prepared to conduct the required Environmental Assessment. The bid for the construction work can be let concurrently. Once the agreement between the County and DCA is executed and the Notice To Proceed is received, the County can immediately let a contract with the successful construction firm and start the project.

Quantity and Location of the Activity within the Service Area

For the location of the activities within the service area, please see the Service Area Map. The quantity of the activities is as follows:

Cost of the Activity

Total project cost is \$875,000 with \$60,000 in administrative costs and \$815,000 in service delivery costs. \$690,000 of the service delivery cost is from the proposed CDBG and \$125,000 if cash match from the County.

How the Activity meets a National Objective

This project meets the Benefit Low and Moderate Income Persons National Objective. A survey of the target area indicates that 66% of the households in the area are either low to moderate (LMI) or very low income (VLI) (see Attachment E).

Beneficiaries (Total, LMI and VLI)

Total beneficiaries (persons) – 192, LMI – 124 (65%), VLI – 59 (31%)

General Scoring Criteria

Form G-3

1. Enter the Local Government's Community-Wide Needs Score This document is posted to the Department's website at: http://www.floridacommunitydevelopment.org/cdbg/index.cfm		Score: 24.56
2. Special Designation Score Check all applicable designations and enter a score of 20 if all activities, are within any of the boundaries of the following designated areas.		Score: 0
<input type="checkbox"/> Empowerment Zone, Enterprise Community, or Champion Community, pursuant to the Economic Empowerment Act of 1993	<input type="checkbox"/> Rural Area of Critical Economic Concern designated by the Governor or <input type="checkbox"/> Rural Economic Development Initiative (REDI) community	
<input type="checkbox"/> Area of Critical State Concern pursuant to Chapter 380.05, F.S.	<input type="checkbox"/> Florida Enterprise Zone pursuant to Chapter 290.0065, F.S.	
<input type="checkbox"/> HUD-designated Renewal Community	<input type="checkbox"/> Front Porch Community	
3. Grant History Score If the applicant has not had an open CDBG contract in the NR, CR, or HR categories within five years of application deadline, claim 100 points.		Score: 0
4. Outstanding Performance in Equal Employment Opportunity (EEO) The applicant may claim up to 25 points for achievement in M/WBE contracting in the most recent CDBG grant administratively closed out not more than four years before application deadline date. Review the M/WBE reports submitted to DCA for that grant and enter a score based on the achievement reported.		

Grant Number: _____

$$\frac{\text{Amount Awarded to M/WBE firms}}{\text{Total Prime Contracts Amount}} \times 100 = \text{M/WBE \%}$$

M/WBE %	Points
5.0 - 9.99%	5
10.0 - 14.99%	10
15.0 - 19.99%	20
20%+	25

If the applicant has not administratively closed out a CDBG grant within four years of the application deadline date, score 5 points.

Score: 0 (Maximum 25 points)

**General Scoring Criteria
Form G-3 (Continued)**

Local Government Minority Employment

The applicant may claim **up to 60 points** for meeting minority employment goals. Complete the table below to calculate the applicant's percentage of minority employees. See instructions for calculations.

Number of Permanent Full-time Equivalent Minority Applicant Employees <u>247</u>	÷	Number of Permanent Full-time Equivalent Applicant Employees <u>760</u>	=	Applicant's Percentage of Minority Employees <u>33</u> %
--	---	--	---	---

Enter percentage of minorities in the applicant's county: _____ %

If the "Prorated 60 Points Score" is claimed, complete the following equation:

Applicant's Percentage of Minority Employees <u>33</u>	÷	Percentage of Minorities in Applicant's County <u>35.6</u>	=	Applicant's Percentage of Minority Employees <u>.9269</u>	X 60	= Points Claimed <u>55.61</u>
---	---	---	---	--	------	----------------------------------

If the applicant has three (3) or less employees, 40 points may be claimed. _____

Total Score (60 Points Maximum):

5. Outstanding Performance in Fair Housing

The applicant may claim five points for each of the following Fair Housing goals. See instructions for guidelines and documentation requirements.

	Date	Score
Date Fair Housing Ordinance Adopted	5/11/2010	5
Date of training or educational program designed for the general public and elected officials	11/09/2010	5
Date of training or educational program designed for professionals	11/16/2010	5
Total Score (15 Points Maximum)		15

Summary Score 71
(Transfer this score to the Scoring Summary)

Part III – Sources and Uses of Non-CDBG Funds (Leverage)

Leverage Score Summary

Leverage Points Calculation for CR, NR and HR

$$\text{\$ } \underline{125,000} \text{ } \div \text{\$ } 5,000 = \underline{25} \text{ Points}$$

Maximum 25 Points

Leverage Points Calculation for ED

$$\text{\$ } \underline{\hspace{2cm}} \div \text{\$ } 10,000 = \underline{\hspace{2cm}} \text{ Points}$$

Maximum 125 Points

Summary Score 25
(Transfer this score to the Scoring Summary)

Part VII – Neighborhood Revitalization (CDBG-N)

**CDBG Funds and Activity Goals
Form N-1**

A ACTIVITY NUMBER AND NAME (*Same points in the activity supported.)		B APPROPRIATE RUS ENGINEERING TABLE	C ENTER CDBG ACTIVITY FUNDS	D % OF CDBG PROJECT COST (COL C / TOTAL OF COL C)	E GOAL POINTS	F ACTIVITY GOAL SCORE (D x E)
1.						
01	ACQUISITION (IN SUPPORT OF)*	NO ENGINEERING	\$		*	
03J	FIRE HYDRANTS ¹⁶	TABLE II	\$		35	
03J	FIRE PROTECTION ¹	TABLE II	\$		35	
03I	FLOOD AND DRAINAGE ²	TABLE II	\$690,000	100	50	50
03	HAZARD MITIGATION ACTIVITIES ³	TABLE II	\$		50	
14A	HOUSING REHABILITATION - PLUMBING ⁴	NO ENGINEERING	\$		50	
03F	PARKS, PLAYGROUNDS ⁵	TABLE II	\$		25	
03L	PEDESTRIAN MALLS/SIDEWALKS ⁶	TABLE II	\$		35	
03E	RECREATION/NEIGHBORHOOD CENTER	TABLE II	\$		25	
08	RELOCATION	NO ENGINEERING	\$		35	
10	REMOVAL OF ARCH BARRIERS ⁷	TABLE II	\$		35	
03A	SENIOR CENTER	TABLE II	\$		25	
03J	SEWAGE TREATMENT PLANT	TABLE I	\$		50	
03J	SEWER LINES & COMPONENTS ⁸	TABLE I	\$		50	
03J	SEWER LINE REPLACEMENT ⁹	TABLE I	\$		40	
03J	SEWER HOOKUPS ¹⁰	TABLE I	\$		50	
03	SITE DEVELOPMENT ¹¹	TABLE II	\$		40	
03J	SOLID WASTE DISPOSAL	TABLE II	\$		25	
03K	STREET IMPROVEMENTS ¹²	TABLE II	\$		40	
03K	STREET IMPROVEMENTS - REPAVING ¹³	TABLE II	\$		25	

*Same points as the activity it supports.

**CDBG Funds and Activity Goals – Category Score
Form N-1 (Continued)**

A		B	C	D	E	F
ACTIVITY NUMBER AND NAME		APPROPRIATE RUS ENGINEERING TABLE	ENTER CDBG ACTIVITY FUNDS	% OF CDBG PROJECT COST (COL C / TOTAL OF COL C)	GOAL POINTS	ACTIVITY GOAL SCORE (D x E)
03J	WATER HOOKUPS ¹⁴	TABLE II	\$		50	
03J	WATER LINES, NEW – POTABLE ¹⁵	TABLE II	\$		50	
03J	WATER LINE REPLACEMENT ⁹	TABLE II	\$		40	
03J	WATER TANK/WELL TREATMENT PLANT ⁶	TABLE I	\$		50	
	Total		\$690,000	100%	50	50
			\$		25	
2. TOTAL COLUMN C (CDBG PROJECT COST):			\$690000			
3. CALCULATE COLUMNS D & F AND TOTAL COLUMN F FOR THE TOTAL ACTIVITY GOAL SCORE:						50 POINT MAXIMUM
4. INDICATE THE APPROPRIATE RUS USED AND ENTER ENGINEERING FUNDS: N/A			RUS TABLE USED: I__ II__ Both Prorated __			
BASIC FEE		\$				
RESIDENT INSPECTION FEE		\$				
PRELIMINARY ENGINEERING FEE		\$				
ADDITIONAL ENGINEERING SERVICES:		\$				
5. TOTAL THE CDBG ENGINEERING FEES:			\$			
6. ENTER CDBG ADMINISTRATIVE FUNDS:			\$			
7. TOTAL THE CDBG FUNDS REQUESTED:			\$			

**Needs – Activities and Beneficiaries
Form N-2**

Census or survey data must be compiled to complete this and the remainder of the application forms.

A		B	C	D	E	F	G
ACTIVITY # AND NAME		ENTER # OF CDBG UNITS TO BE ADDRESSED	UNITS OF MEASURE	ENTER # OF ALL UNITS NEEDED	ENTER # OF VLI CDBG BENEFICIARIES	ENTER # OF LMI CDBG BENEFICIARIES	ENTER # OF TOTAL CDBG BENEFICIARIES
01	ACQUISITION (IN SUPPORT OF)		UNIT, LF				
03J	FIRE HYDRANTS		FH				
03J	FIRE PROTECTION		UNIT, LF				
03I	FLOOD AND DRAINAGE		LF		59	124	192
03	HAZARD MITIGATION ACTIVITIES		UNIT				
14A	HOUSING REHABILITATION – PLUMBING		HU				
03F	PARKS, PLAYGROUNDS		SITE(S)				
03L	PEDESTRIAN MALLS/SIDEWALKS		LF				
03E	RECREATION/NEIGHBORHOOD CENTER		BU				
08	RELOCATION		BU, HU				
03	REMOVAL OF ARCH BARRIERS		BARRIER, UNIT				
03A	SENIOR CENTER		BU				
03J	SEWAGE TREATMENT PLANT		PLANT				
03J	SEWER LINES & COMPONENTS		LF, UNIT				
03J	SEWER LINE REPLACEMENT		LF				
03J	SEWER HOOKUPS		BU, HU				
03	SITE DEVELOPMENT		BU, HU				
03J	SOLID WASTE DISPOSAL		LF, UNIT				

**Current Needs – Activity Units and Beneficiaries
Form N-2 (Continued)**

A ACTIVITY # AND NAME		B ENTER # OF CDBG UNITS TO BE ADDRESSED	C UNITS OF MEASURE	D ENTER # OF ALL UNITS NEEDED	E ENTER # OF VLI CDBG BENEFICIARIES	F ENTER # OF LMI CDBG BENEFICIARIES	G ENTER # OF TOTAL CDBG BENEFICIARIES
03K	STREET IMPROVEMENTS		LF				
03K	STREET IMPROVEMENTS – REPAVING		LF				
03	UTILITY HOOKUPS – OTHER		BU, HU				
03J	WATER HOOKUPS		BU, HU				
03J	WATER LINES, NEW – POTABLE		LF				
03J	WATER LINE REPLACEMENT		LF				
03J	WATER TANK/WELL/TREATMENT PLANT		TANK, WELL, PLANT, UNIT				

**Beneficiary Verification Summary by Service Area
Form N-3**

A	B	C	D	E	F	G	H	I	J
ENTER SERVICE AREA #/ BENEFIT SURVEY METHOD*	ENTER ACTIVITIES TO BE COMPLETED IN EACH SERVICE AREA (USE MORE THAN ONE LINE FOR MULTIPLE ACTIVITIES)	ENTER TOTAL # OF HOUSEHOLDS (HH IN THE SERVICE AREA (UNIVERSE-COL H)	ENTER TOTAL # OF RESPONSES REQD	ENTER TOTAL # OF HH RESPONDING TO THE SURVEY	ENTER TOTAL # OF VLI BENEFICIARIES	ENTER TOTAL # OF LMI BENEFICIARIES	ENTER TOTAL # OF ALL BENEFICIARIES	CALCULATE PERCENT OF VLI BENEFIT (F ÷ H)	CALCULATE PERCENT OF LMI BENEFIT (G ÷ H)
A		150						%	%
								%	%
								%	%
								%	%
								%	%
								%	%
								%	%
								%	%
								%	%
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								%	%
								%	%
								%	%
								%	%
								%	%
								%	%

* A= Random Sample, B=Small Service Area, C=Census, D= Survey, not more than five years old, from previous CDBG award
 If a random survey was conducted, include as an appendix a description of the methodology which describes the basis of the universe, the confidence interval selected, and the procedures used to contact the initial sample before surveying an alternate. The sample and alternates must be selected from a random number generator website (such as random.org) and a print out of those numbers included in the appendix.

**Beneficiaries Scores
Form N-4**

1.(a) Enter the total funds requested (total CDBG request)	\$ 750,000 1.(a)	1.(b) Enter the total number of grant unduplicated VLI beneficiaries:	1.(b) 59
1.(c) Enter the total number of grant unduplicated LMI beneficiaries:	1.(c) 124	1.(d) Enter the total number of grant unduplicated beneficiaries:	1.(d) 192
1.(e) Enter the total number of unduplicated LMI households:	1.(e) 76		
<p>a. VLI BENEFICIARY IMPACT SCORE: Calculate the unduplicated VLI beneficiary percentage:</p> <p align="center">1.(b) divided by 1.(d) = <u>30.7</u> %</p> <p>Based on the result, designate with an X the score that is appropriate.</p>		<p>UNDUPLICATED VLI BENEFICIARY PERCENTAGE</p> <p>30.00% or More 20.00% to 29.99% 10.00% to 19.99% Less than 10.00%</p>	<p>SCORE</p> <p>30 20 10 0</p>
<p>b. LMI BENEFICIARY IMPACT SCORE: Calculate the unduplicated LMI beneficiary percentage:</p> <p align="center">1.(c) divided by 1.(d) = <u>64.58</u> %</p> <p>Based on the result, designate with an X the score that is appropriate.</p>		<p>UNDUPLICATED LMI BENEFICIARY PERCENTAGE</p> <p>70.00% and above 66.00% to 69.99 61% to 65.99% 56.00% to 60.99 51.01% to 55.99%</p>	<p>SCORE</p> <p>135 120 100 75 50</p>
<p>c. AVERAGE COST PER UNDUPLICATED LMI BENEFICIARY SCORE: Calculate the AVERAGE COST PER UNDUPLICATED LMI BENEFICIARY:</p> <p align="center">1.(a) divided by 1.(c) = \$ <u>6,048</u></p> <p>Based on the result, designate with an X the score that is appropriate.</p>		<p>COST PER UNDUPLICATED LMI BENEFICIARY</p> <p>\$11,000 or More \$10,000 to \$10,999 \$ 9,000 to \$9,999 Less than \$9,000</p>	<p>SCORE</p> <p>0 15 30 40</p>
<p>d. AVERAGE COST PER UNDUPLICATED LMI HOUSEHOLD SCORE: Calculate the average cost per unduplicated LMI Household:</p> <p align="center">1.(a) divided by 1.(e) = \$ <u>9864</u></p> <p>Based on the result designate with an X the score that is appropriate.</p>		<p>COST PER UNDUPLICATED LMI HOUSEHOLD</p> <p>\$16,000 or More \$13,000 to \$15,999 \$11,000 to \$12,999 \$ 9,000 TO \$10,999 Less than \$9,000</p>	<p>SCORE</p> <p>-100 40 60 75 100</p>

Readiness to Proceed Score

Readiness to Proceed points cannot be claimed if applicant is applying for a Planning and Design Specifications grant.

If biddable construction plans and specifications for all activities have been completed and submitted to all applicable permitting agencies no later than application deadline, score 100 points. Otherwise, score zero points. Include in the Supporting Documentation Section a letter from the engineer who prepared the construction plans and specifications stating the date the biddable construction documents were completed and that they have been submitted to all applicable permitting agencies.

Score 100
100 Points Maximum

Health and Safety Score

e. Designate with an X the score that is appropriate:

A. Score _____ (50 Points) B. Score _____ (25 Points) C. Score _____ (25 Points) D. Score _____ (20 Points) E. Score _____ (Prorated)

If E was selected, complete the following equation:

\$	÷	\$	=		×		=	
Enter the cost of activities subject to A (B, C OR D)		Enter the CDBG Project Cost (not Engineering or Admin Costs)		Enter the result (%) as a four digit decimal		Enter the Appropriate Multiplier (20, 25 OR 50)		SCORE

Enter the appropriate Score: 0 50 Points Maximum

Summary Score 395
(Transfer this score to the Scoring Summary)

Part VIII– Certification and Score Summary

I, the undersigned chief elected official or authorized representative of the local government, certify that, to the best of my knowledge, this application for Small Cities Community Development Block Grant funding was prepared in accordance with state and federal rules and regulations, contains information that is true and correct, and has been approved by the local governing body.

I, the undersigned, certify that the local government (Applicant):

1. Has met all citizen participation requirements:
 - Public hearings were conducted by a member of the local governing body or a duly authorized employee;
 - The first public hearing was conducted to obtain citizen views about community development needs and potential uses of CDBG funding;
 - A second public hearing was conducted to obtain citizen comments on the application; and
 - Public notice for the second public hearing was published after the first public hearing was conducted.
2. Has properly conducted surveys of service areas to document LMI benefit, if applicable.
3. Will comply with the Intergovernmental Coordination and Review requirements by submitting the required information to the local Regional Planning Council and to the State Clearing House.
4. Will not attempt to recover, through special assessments, capital costs of public improvements funded in whole or in part with CDBG funds.
5. Will ensure that upon completion of housing structures addressed with CDBG funds, each housing structure will meet the local housing code.
6. Will administer the grant in conformity with the Civil Rights Act of 1964 and the Fair Housing Act.
7. Will affirmatively further fair housing and undertake one fair housing activity each year.
8. Has adopted a Community Development Plan or has adopted the Local Comprehensive Plan as the Community Development Plan.
9. Has adopted an Anti-Displacement and Relocation Plan and will minimize the displacement of persons.
10. Has presented accurate information and has documentation on file and readily accessible to Department of Community Affairs.
11. Has authorized the submission of this application by vote of the local governing body.

Failure of the Chief Elected Official to properly sign the application by the deadline, or failure to include a copy of the ordinance or resolution of the governing body authorizing another individual to sign the application, will result in a 50-point penalty being assessed against the application that cannot be eliminated during the completeness process.

Signature of Chief Elected Official or Designee (If signed by a person designated by the local governing body, a copy of the resolution must be included.)		
Signature		
Typed Name and Title: Vincent S. Long, County Administrator		
Date: August 15, 2011		
If signed by a person other than the chief elected official, is a copy of the required resolution included in the Appendices?	Yes X	No
Signature of Application Preparer if other than an employee of the Local Government: N/A		
Signature		
Typed Name and Title		
Name of Firm or Agency		

Application Scoring Summary

This form is the applicant's evaluation of the application score. Use the "scores" identified in the application to complete this form when you have finished filling out the application. Enter the scores or other information in the appropriate columns. If additional pages are needed (number them with a lowercase letter such as 7a, 7b, 7c, etc.). When all of the scores have been transferred to this form, add the scores and enter the total.

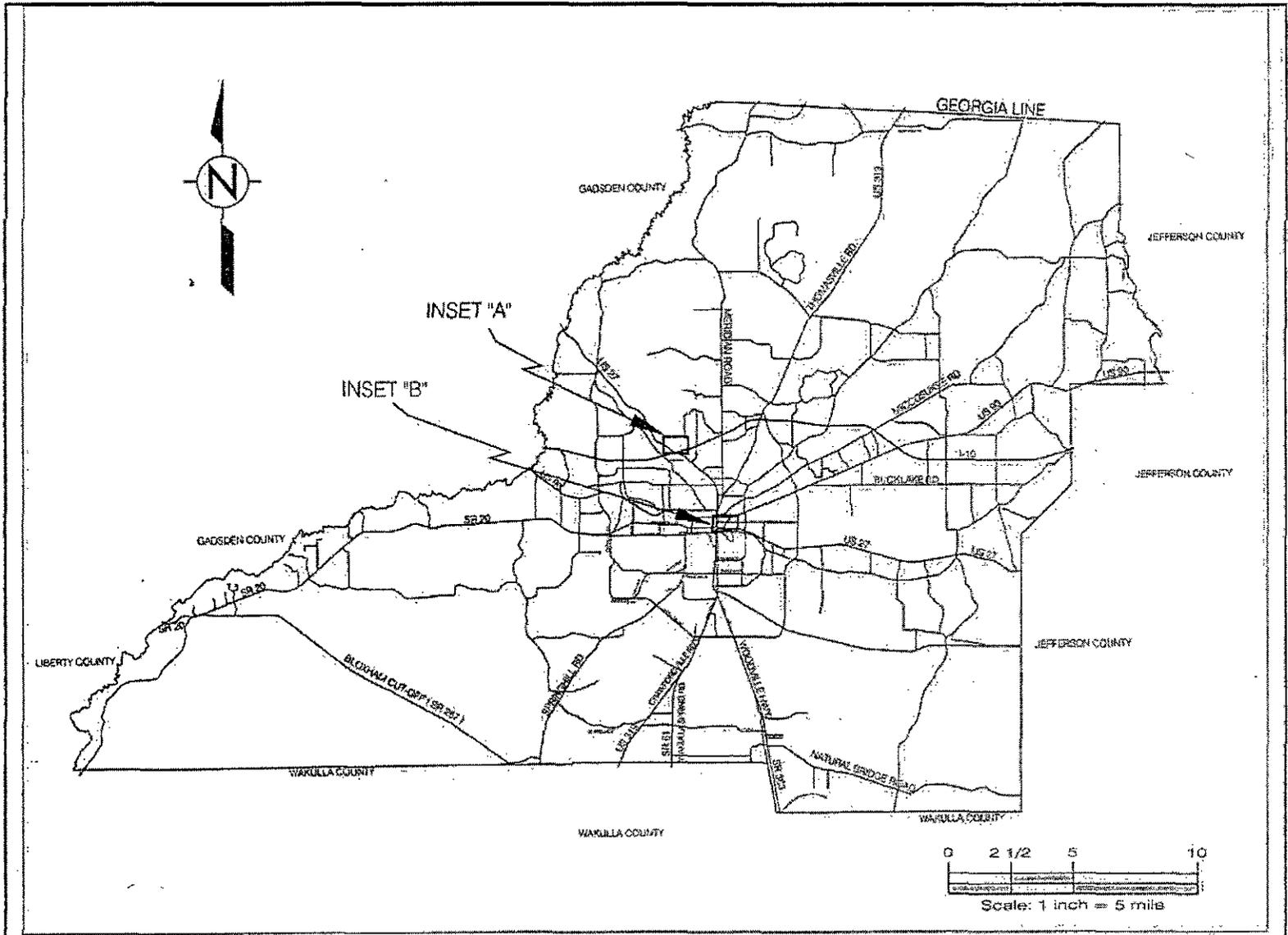
Enter Name of Local Government Applicant:					For DCA Use Only: Application Number		
Enter Type of Application(s):							
Complete this form for each application submitted.							
FORM	TITLE/SCORE	PAGE	CR	ED	H	NR	
1.	Community-Wide Needs Score (250 Points Maximum)					24.56	
2.	Outstanding Performance in Equal Employment Opportunity and Fair Housing (100 points maximum)					71	
3.	Program Impact (650 Points Maximum):					395	
	• Special Designation Score (20 Points Maximum)					0	
	• Grant History Score (100 Points Maximum)					0	
	• Leverage (Note: 25 Points Maximum for CR, NR and H and 125 Points Maximum for ED)					25	
	• Category Score Summary						
	Total Program Impact Score						
	TOTAL APPLICATION SCORE (1000 Points Maximum)						
	LESS PENALTIES ASSESSED (For DCA Use Only)						
	FINAL SCORE (For DCA Use Only)						

Part IX– Forms and Supporting Documentation

APPENDIX	TITLE	PAGE
A	Maps - Jurisdiction, Service Area, 100-Year Flood Plain (Required)	28
B	Comprehensive Plan Documents, as Amended (Required)	
C	Leverage Documentation (Letter of Commitment, etc.)	
D	Readiness to Proceed Documentation	
E	VLI/LMI Worksheets or Census Data and/or Census Maps	
F	Local Governing Body's Resolution for Signature Designation	
G	Public Hearing Documentation	

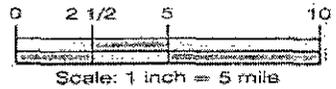
Appendix A-1, Jurisdiction Map

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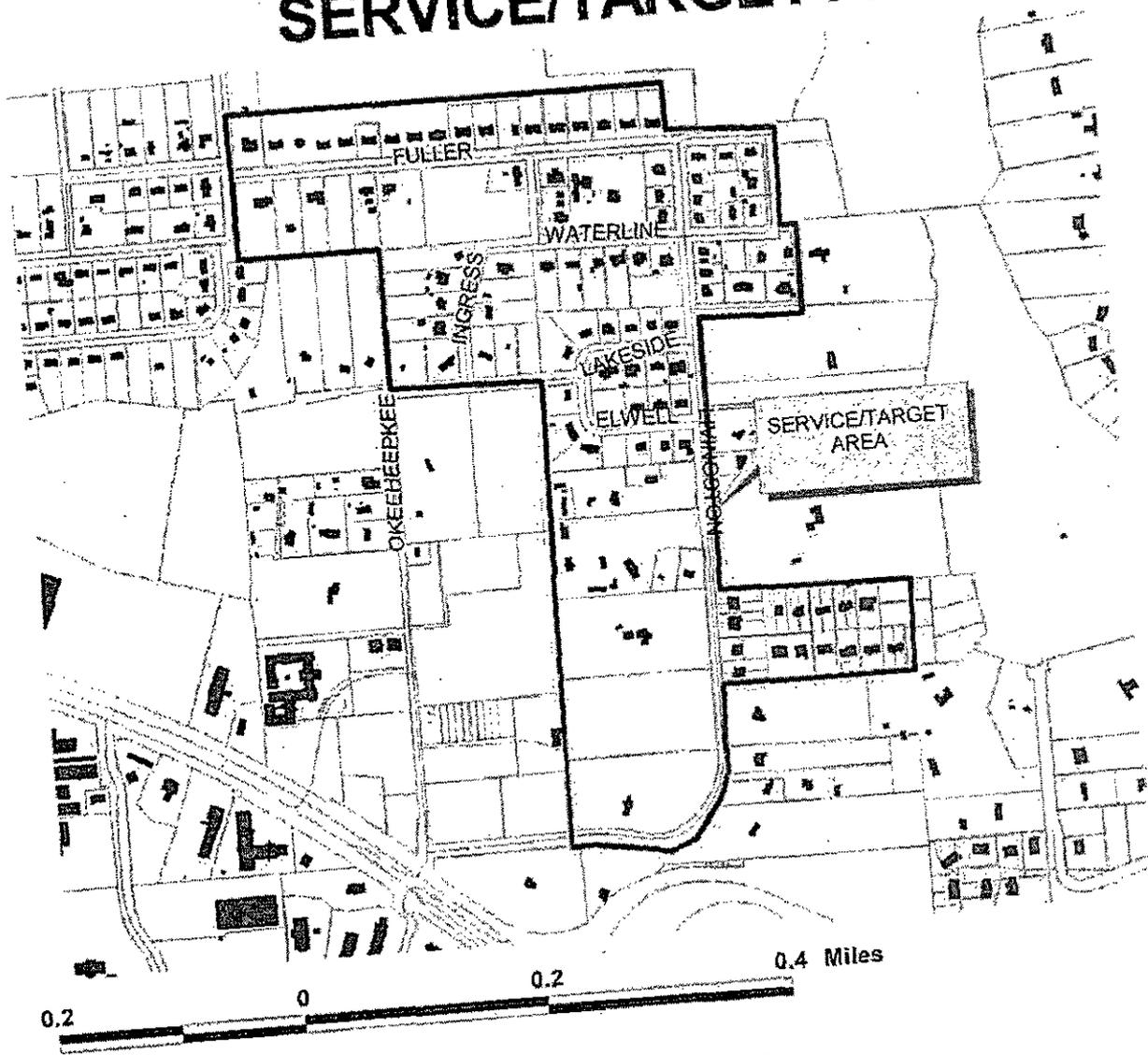

LEON COUNTY DEPARTMENT OF PUBLIC WORKS
 2280 MICCOSUKEE ROAD, TALLAHASSEE, FLORIDA 32308
 PHONE (850) 606-1500 * FAX (850) 606-1501

JURISDICTION MAP - INSET "A" & INSET "B"

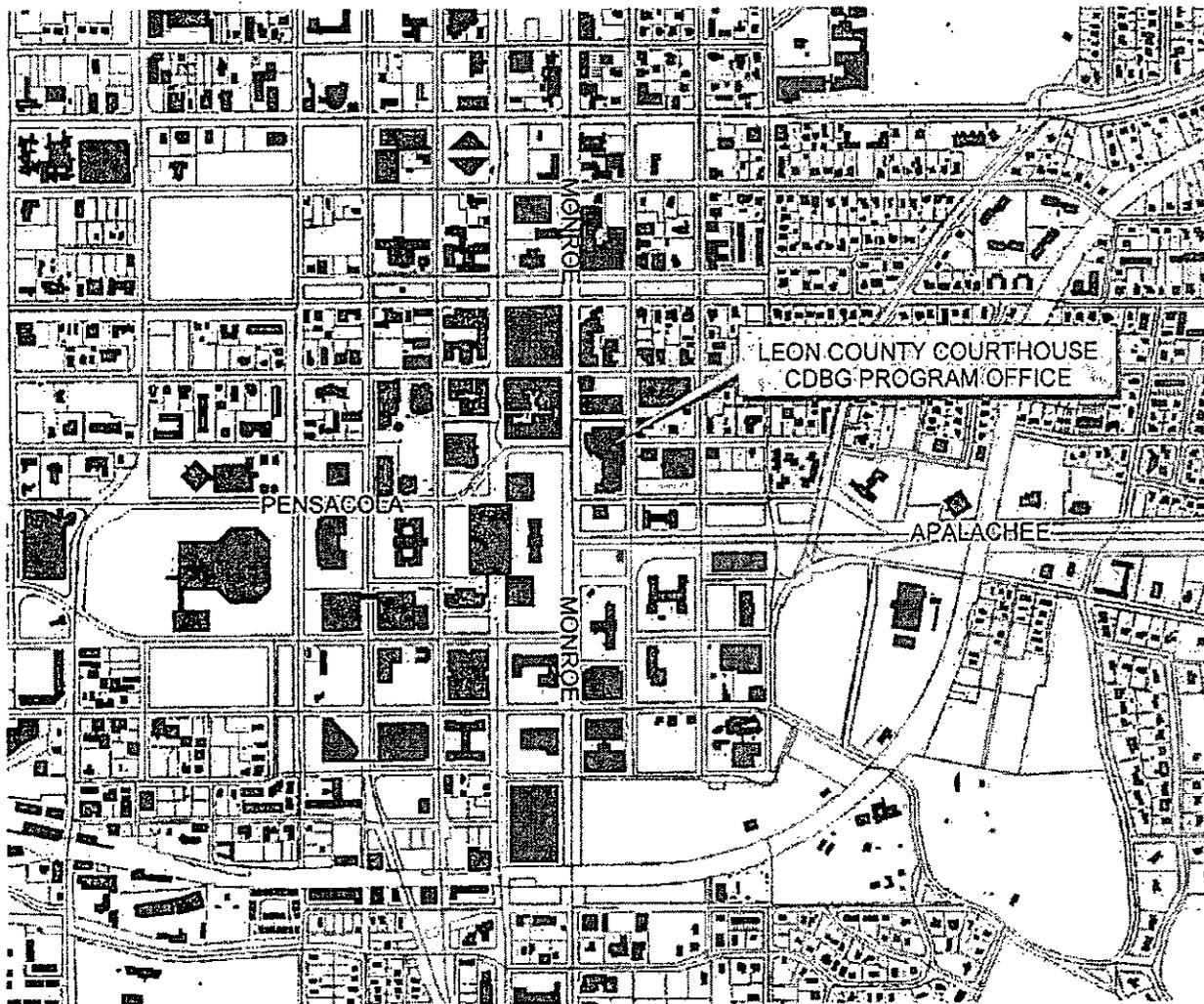


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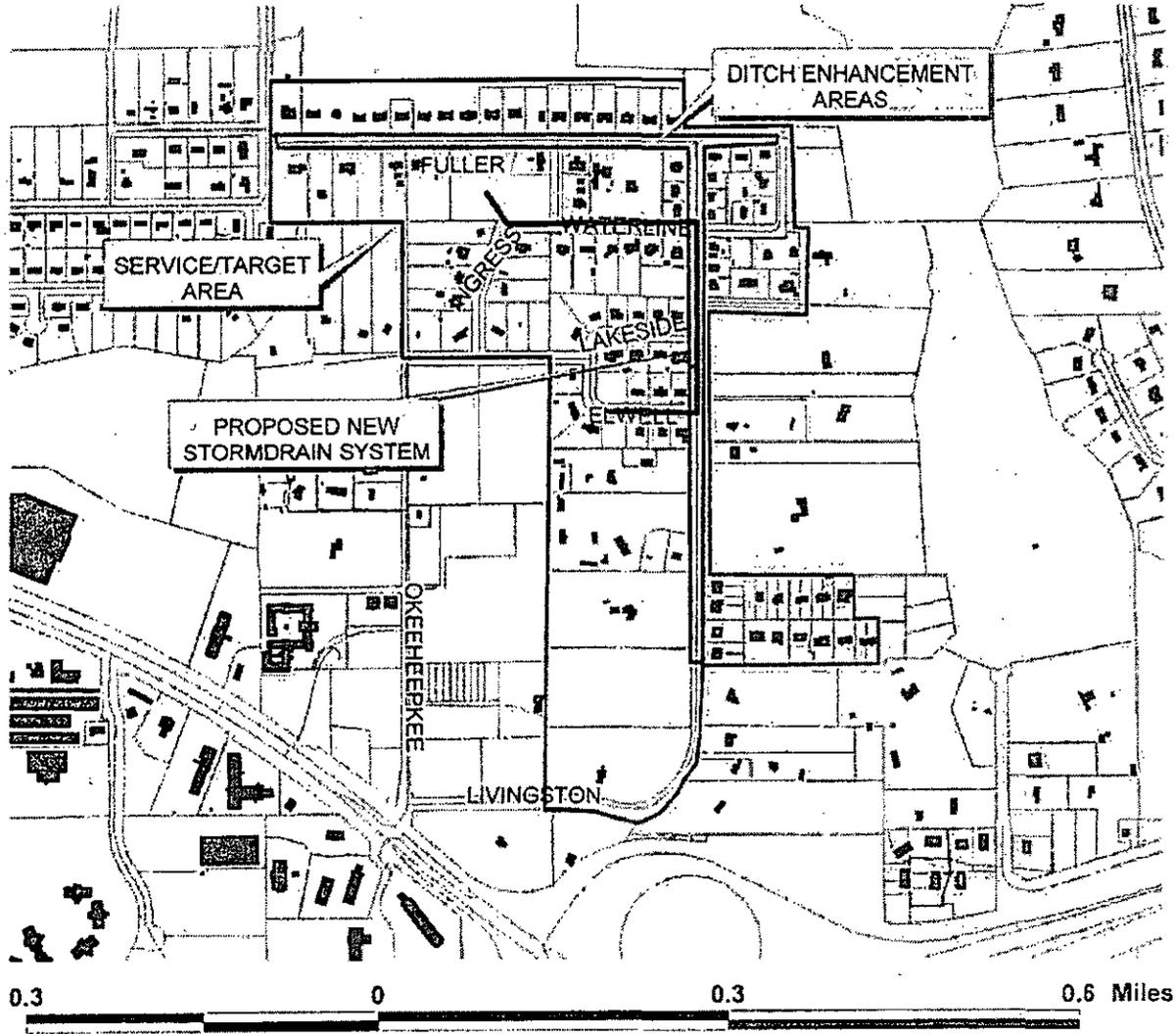
INSET "A" SERVICE/TARGET AREA



INSET "B" COURTHOUSE/CDBG OFFICE



SERVICE AREA MAP



100 Year Flood Plain Map

Appendix B, Comprehensive Plan Documents, as Amended

The Tallahassee-Leon County Comprehensive Plan (as amended, December 24, 2010)

CAPITAL IMPROVEMENTS ELEMENT - GOALS, OBJECTIVES AND POLICIES

Goal 1: [CI] (Effective 7/16/90)

To use sound fiscal policies to provide adequate public facilities concurrent with, or prior to development in order to achieve and maintain adopted standards for levels of service, and to exceed the adopted standards, when possible. 9J-5.016(3)(a)

PUBLIC FACILITY NEEDS

Objective 1.1: [CI] (Effective 7/16/90)

Define types of public facilities, establish standards for levels of service for each type of public facility, and determine what capital improvements are needed in order to achieve and maintain the standards for existing and future populations, and to repair or replace existing public facilities. 9J-5.016(3)(b)1

Policy 1.1.3: [CI] Levels of Service Required for Infrastructure, Facilities, and Utilities (Revision Effective 7/25/03; Revision Effective 7/20/05; Revision Effective 12/24/2010)

The following standards are hereby established as the minimum levels of service for various infrastructure, facilities, utilities and services required to support new development within the City of Tallahassee and Leon County.

3. Stormwater

a. Tallahassee and Leon County (Category A)

The design and water quality standards set forth in Florida Administrative Code Chapters 17-3 and 17-25, as the same may be amended from time to time, are hereby adopted by reference as the level of service for stormwater quality.

Local government may set higher minimum levels of treatment in watersheds where investigation and analysis indicate more stringent levels of service are required.

Stormwater management facilities shall be adequate to provide the following levels of service with regard to flood control:

100 Year Critical Storm Event

- No flood water in new buildings or existing buildings.

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•Overland flow capacity available for all flow in excess of capacity of underground and open channel conveyance systems.

25 Year or Less Critical Storm Event

- No flood water more than six inches deep in local roads, parking lots, or other non-street vehicular use areas.
- No flood water in one driving lane each direction of collector streets.
- No flood water in two driving lanes each direction on arterial streets.
- Open channel conveyance capacity available for all flow in excess of capacity of underground conveyance system, or for full twenty-five year storm flow if no underground system exists.
- The rate of off-site discharge shall not exceed the predevelopment rate of discharge.

10 Year or Less Critical Storm Event

- No flood water in one driving lane of local roads.
- No flood water in the driving lanes of any road other than a local road.
- Underground conveyance not overflowing in business and commercial districts.

5 Year or Less Critical Storm Event

- No flood water in the driving lanes of any roadways.
- Underground conveyances not overflowing in residential districts.

These are the adopted levels of service and shall be used as the basis for determining the availability of facility capacity and the system demand generated by development. In instances where an off-site deficiency exists at the time of adoption of this policy, such deficiency shall not be increased as the result of any development or land use changes.

Appendix C, Leverage Documentation

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Appendix D, Readiness to Proceed Documentation

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Appendix E, VLI/LMI Worksheets

**Very Low, Low and Moderate Income Random Sample Survey Worksheet
Form LMI-1
(To be completed by Commercial and Neighborhood Applicants if a Random Sample Survey was conducted)**

SERVICE AREA NUMBER	
1. Enter the total number of households in the service area (universe).	
2. Enter minimum # of sample survey responses required to obtain a 95% confidence level at the confidence interval you select (see page 23 of HUD Notice CPD-05-06).	
3. Enter the total number of households actually responding to the survey including those assumed to be above Low and Moderate Income (LMI) after third party verification of household composition.	
COMPLETE THE FOLLOWING SECTION FOR NR & CR APPLICATIONS.	
4. Enter the total number of LMI households responding from the sample.	
5. Enter the total number of LMI beneficiaries in the households responding from the sample.	
6. Enter the total number of above LMI households responding from the sample. (Check: Line 4 + Line 6 = Line 3)	
7. Enter the total number of above LMI beneficiaries in the households responding from the sample.	
8. Divide Line 5 by Line 4. This is the average size of the LMI households responding.	
9. Divide Line 7 by Line 6. This is the average size of the above LMI households responding.	
10. Divide Line 4 by Line 3. This is the percentage of households responding that are LMI.	
11. Divide Line 6 by Line 3. This is the percentage of households responding that are above LMI. [Check: Line10 + Line11 = 100%]	
12. Multiply Line 1 by Line 10. This is the estimate of the total number of LMI households in this service area.	
13. Multiply Line 1 by Line 11. This is the estimate of the total number of above LMI households in this service area.	

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**Very Low, Low and Moderate Income Random Sample Survey Worksheet
Form LMI-1 (Continued)**

14. Multiply Line 8 by Line 12. This is the estimate of the total number of LMI beneficiaries in this service area.	
15. Multiply Line 9 by Line 13. This is the estimate of the total number of <u>above</u> LMI beneficiaries in this service area.	
16. Add Line 14 and Line 15. This is the estimate of the total number of all beneficiaries in this service area.	
17. Divide Line 14 by Line 16, multiply the resulting decimal by 100, and subtract the confidence interval. This is the minimum percentage of LMI benefit in this service area for determining whether the LMI National Objective will be met. (This percentage must be the lowest possible percentage based on the confidence interval used for the survey. Example: a survey conducted using a confidence interval of 3 results in a LMI percentage of 55% using the procedure above. Enter 52% as the LMI benefit percentage.) Note: For scoring purposes, add back the confidence interval.	
COMPLETE THE FOLLOWING SECTION FOR NR APPLICATIONS ONLY	
18. Enter the total number of Very Low Income (VLI) households responding from the sample.	
19. Enter the total number of VLI beneficiaries in the households responding from the sample.	
20. Divide Line 19 by Line 18. This is the average size of the VLI household responding.	
21. Divide Line 18 by Line 3. This is the average percentage of VLI households responding in the sample.	
22. Multiply Line 1 by Line 21. This is the estimate of the total number of VLI households in this service area.	
23. Multiply Line 20 by Line 22. This is the estimate of the total number of VLI beneficiaries in this service area.	
24. Divide Line 23 by Line 16, multiply the resulting decimal by 100. This is the estimated percentage of VLI benefit in this service area.	

Appendix F, Local Governing Body's Resolution for Signature Designation

RESOLUTION NO. 11-__

A RESOLUTION OF THE LEON COUNTY, FLORIDA BOARD OF COUNTY COMMISSIONERS AUTHORIZING THE SUBMISSION OF A COMMUNITY DEVELOPMENT BLOCK GRANT, NEIGHBORHOOD REVITALIZATION APPLICATION FOR FISCAL YEAR 2011; AND AUTHORIZING THE COUNTY ADMINISTRATOR TO EXECUTE SAID GRANT, ANY AND ALL DOCUMENTS INCIDENTAL TO OBTAINING AND ADMINISTERING SAID GRANT.

WHEREAS, the U.S. Department of Housing and Urban Development under provisions of Title 1 of the Housing and Community Development Act of 1974, as amended, have authority to approve Community Development Block Grants; and

WHEREAS, Leon County possesses the legal authority to apply for a Community Development Block Grant; and

WHEREAS, there has been a series of public hearings held to obtain citizen input concerning the use and availability of these funds; and

WHEREAS, the County's Fiscal Year 2011 Florida Small Cities Community Development Block Grant Neighborhood Revitalization application reflects the community development needs of the County; and

WHEREAS, it is in the best interest of Leon County to apply for Fiscal Year 2011 Florida Small Cities Community Development Block Grant funding in the Neighborhood Revitalization category.

NOW, THEREFORE, BE IT RESOLVED BY THE COUNTY COMMISSION OF LEON COUNTY, FLORIDA, AS FOLLOWS:

1. That Leon County apply for a FFY 2011 Florida Small Cities Community Development Block Grant for Neighborhood Revitalization.
2. That the County Administrator of Leon County be hereby authorized to execute on behalf of the County, any and all application forms and other documents, including any corrective amendments, necessary in order to obtain and administer said grant.

LEON COUNTY, FLORIDA

BY: _____
John Dailey, Chairman

ATTEST:
BOB INZER, CLERK OF THE COURT
LEON COUNTY, FLORIDA

BY: _____

APPROVED AS TO FORM:
LEON COUNTY ATTORNEY'S OFFICE

Herbert W.A. Thiele, Esq.
County Attorney

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Appendix G, Public Hearing Documentation