

**LEXINGTON COUNTY  
2008 CDBG PROGRAM  
APPLICATION FOR ASSISTANCE**

(REFER TO APPLICATION HANDBOOK FOR ASSISTANCE IN COMPLETING AND SUBMITTING THIS APPLICATION)

**1. GENERAL INFORMATION**

Applicant Name: Town of South Congaree

Contact Person Name: Melisha Shumpert

Email: MShumpert@southcongarree.org\*

Title: Town Administrator

Address: 119 West Berry Road

City: South Congaree

State: SC

Zip: 29172

Phone: 803-755-2760

Fax: 803-755-0456\*

\*Please provide as follow-up information may be sent by email or fax

**2. PROJECT INFORMATION**

Project Title: South Congaree Sewer Study

Location of the project: Town of South Congaree

Map attached showing general location of project (City/County level):

Map attached showing specific location of project (Street level):

Total Project Cost: \$ 44,000

**CDBG Funds Requested: \$44,000**

**3. USE OF FUNDS – Briefly, using bullet points, detail the specific use of CDBG funds for this project**

(This information will be used for project reviews)

- Administration
- Planning
- 

(A more complete description of your project should be given in response to Narrative Question 1)

**4. PROJECT SCHEDULE / TIMELINE – When do you expect to begin and end the project?**

(NOTE: Funds will not be available until after July 1)

Expected Project Begin Date (Mo/Year): July 1, 2008

Expected Project End Date (Mo/Year): June 30, 2010

**5. GRANT ADMINISTRATION – Who will administer the grant and be responsible for all compliance issues? What experience do they have in administering CDBG projects?**

- Central Midlands Council of Governments will administer the grant and be responsible for compliance issues
- Central Midlands COG staff members have worked with and administered State of SC funded CDBG projects for over 20 years and are familiar with CDBG regulations and requirements.
- 

**6. SELECT THE ELIGIBLE ACTIVITY YOUR PROJECT WILL MEET** See Application Handbook Part 3

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Acquisition          | <input type="checkbox"/> Clearance/Demolition | <input type="checkbox"/> Code Enforcement    |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Housing              | <input checked="" type="checkbox"/> Planning |

Public Facilities & Improvements

Public Services

Relocation

Other: List

**7. SELECT THE NATIONAL OBJECTIVE YOUR PROJECT WILL MEET** See Application Handbook Part 3

**Benefit to low-and-moderate income persons** (if you check this, you must choose one below)

Area Benefit:

Limited Clientele

Jobs

Housing

**Aid in the prevention or elimination of slum or blight** (if you check this, you must choose one below)

Area Basis

Spot Basis

**Planning**

**8. DOCUMENTING THE NATIONAL OBJECTIVE**

**When benefit is to Low / Moderate Income persons, how will you verify income?**

Income Verification Documentation (tax returns, pay stubs, etc.)

Income Survey verifying at least 51%, by using

Participant Survey

Survey method meeting HUD requirements

Serving 100% of clientele that meet one of the following presumed benefit categories

Abused Children

Illiterate Adults

Homeless Persons

Battered Spouses

Migrant Farm Workers

Severely Disabled

Elderly Persons (62+)

Persons with AIDS

Census Tract / Block Group Data (Contact CDBG Program staff for guidance)

% of LMI Persons in Area:

List ALL Census Tract(s) and Block Group(s) numbers to Benefit:

**For Slum and Blight Projects, how will you verify?**

Area – substantial number of deteriorated/ing buildings or public improvements in an area. Documentation is attached on the boundaries of the area and the conditions that qualified the area at the time of designation.

Spot – spot designation and project qualifies for acquisition, clearance, relocation, historic preservation or building rehabilitation (limited to the extent necessary to eliminate a specific condition detrimental to public health and safety).

## 9. PROJECT ACCOMPLISHMENT/BENEFIT DATA See Application Handbook Part 2

Based on the primary activity, funding source and intent of your project, select the most appropriate response:

The primary purpose of this project is to:

- Create a suitable living environment
- Provide decent housing
- Provide economic opportunity

The primary outcome expected at the end of this project is:

- Improved availability / accessibility (makes basics available to LMI persons)
- Improved affordability (makes an activity more affordable for LMI persons)
- Improved sustainability (using resources in a targeted area to help make that area more viable)

**Total Number of People That Would Benefit From This Project:**

## 10. HUD STRATEGIC GOALS

**(Pick one most applicable to the goal(s) of your project)**

- Increase homeownership opportunities
- Promote decent affordable housing
- Strengthen communities
- Ensure equal opportunity in housing
- Embrace high standards of ethics, management and accountability
- Promote participation of faith-based and community-based organizations

## 11. LEXINGTON COUNTY PRIORITIES

**(Pick one of the following priority needs that your service or activity most promotes)**

- Ensure adequate and dependable public facilities are available to provide for basic and essential needs and services.
- Ensure adequate and safe infrastructure to meet basic needs of residents.
- Develop and produce plans and studies that will assist in identifying and evaluating community needs and establish detailed strategies for implementation.
- Establish or support programs that provide needed public services and/or increase the level of service provided by existing programs.
- Support and provide assistance to non-profit and for-profit entities that create, increase or retain employment opportunities for LMI residents.
- Provide and/or support adequate, safe and affordable housing.
- Provide mechanisms and forums for collaboration, coordination, and community capacity building.
- Support programs that provide housing and services for homeless populations.

**12. PROJECT BUDGET – Attach supporting documentation if available**

**CONSTRUCTION PROJECTS**

Budgeted Activities	Total Project Cost	CDBG Funds Requested
Administration of Grant:	\$	
Engineering, Architect or Other Professional Fees:	\$	\$
Construction Costs:	\$	\$
Property Acquisition (Easements, Right of Way, etc.):	\$	\$
Environmental Review:	\$	\$
Other (Be Specific):	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
<b>Total</b>	\$	\$

Funding Source(s) (attach documentation showing the provider and the specific amount)	Amount of Funds	Committed	Pending
	\$	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>

LIST ANY AND ALL FUNDING FROM LEXINGTON COUNTY (other than CDBG)			
	\$	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>

**Cost Estimate Reasonableness and Accuracy**

**Who Prepared the Budget Cost Estimates?**

- Applicant: Name of Staff Person(s):
- Contracted Engineer: Name of Firm:
- Other Contractor or Consultant: Name of Firm:

**When Were the Budget Cost Estimates Prepared?**

**On What Basis Did You Determine That the Estimated Costs Were Reasonable and Accurate?**

NON-CONSTRUCTION PROJECTS		
Budgeted Activities	Total Project Costs	CDBG Funds Requested
Salaries:	\$	\$
Fringe Benefits:	\$	\$
FICA:	\$	\$
Health Insurance:	\$	\$
Worker's Compensation:	\$	\$
Unemployment:	\$	\$
Rent:	\$	\$
Equipment:	\$	\$
Insurance:	\$	\$
Phone/Fax:	\$	\$
Postage:	\$	\$
Printing:	\$	\$
Supplies/Materials:	\$	\$
Travel and Expenses:	\$	\$
Contract Services:	\$ 40,000	\$ 40,000
Other: Administration (attach details)	\$ 4,000	\$ 4,000
<b>Total</b>	<b>\$ 44,000</b>	<b>\$ 44,000</b>

Funding Source(s) (attach documentation verifying committed funds)	Amount of Funds	Committed	Pending
	\$	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>

LIST ANY AND ALL FUNDING FROM LEXINGTON COUNTY (other than CDBG)			
	\$	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>

**Cost Estimate Reasonableness and Accuracy**

**Who Prepared the Budget Cost Estimates?**

- Applicant: Name of Staff Person(s):
- Contracted Engineer: Name of Firm:
- Other Contractor or Consultant: Name of Firm: Wilbur Smith Engineers – Consultant Planning Services  
Central Midlands COG - Administration

**When Were the Budget Cost Estimates Prepared?** November 2007

**On What Basis Did You Determine That the Estimated Costs Were Reasonable and Accurate?**

The costs were provided by professional firms who perform these services on a regular basis. Cost information was based upon current costs for provision of the outlined services.

**13. NARRATIVE QUESTIONS**

**All Projects**

**NOTE:** *Attach additional sheets as necessary. Applications submitted without complete responses to the narrative questions will not be processed.*

1. Provide a detailed description of your proposed project.

The interest in public sewer service is growing in the Town of South Congaree. In order to address this, the Town proposes a planning study that would assess the need for sewer service in the Town, propose potential solutions, outline costs associated with the proposed solutions, include recommendations for the best method of addressing sewer implementation and potential methods of financing. This project would involve competitive procurement of a qualified engineering firm to study the issue and provide a completed planning document that the Town can use to move forward with sewer development.

2. What will you accomplish with CDBG Funding?

CDBG funds will be used to procure professional services for completion of the study and for administrative costs associated with management of the grant.

3. What will happen if CDBG funds are not provided for your project this year?

If CDBG funds are not provided for the project this year, the planning study will not be able to occur.

**Construction Projects Only**

1. Will all construction take place on public property? If not, explain in detail.

N/A

**Public Service Projects Only**

1. Describe any increase in services, new service to be provided, or expansion of services from previous CDBG grant award(s).

N/A

2. If your project is selected for funding, how will you continue to provide services if you are not selected in future years?

N/A

3. If you are a non-profit agency, do you have 501(c)(3) United States Internal Revenue Service tax exemption? If so, attach documentation with your application.

N/A

**14. Letters of Support – OPTIONAL (attach and identify any letters of support for your project)**

Letter of Support From

<input type="checkbox"/>	Letter of Support From
<input type="checkbox"/>	Letter of Support From

15. Other Documentation (please describe any additional documents you are providing)	
<input type="checkbox"/>	Other
<input type="checkbox"/>	Other

16. CERTIFICATION	
<p>I certify that the information contained in this application is true and correct and that it contains no misrepresentations, falsifications, intentional omissions, or concealment of material facts. I further certify that no contracts have been awarded, funds committed or construction begun on the proposed project, and that none will be prior to issuance of official authorization to proceed by the Lexington County Community Development Block Grant Program staff. I further certify that I am authorized to submit this application and have followed all policies and procedures of my agency regarding grant application submissions.</p>	
<p>_____ Signature of Authorized Official</p> <p><u>Melisha Shumpert</u> Name of Authorized Official</p> <p><u>Town Administrator</u> Title</p> <p>_____ Date</p>	