COMMUNITY DEVELOPMENT BLOCK GRANT DISASTER RECOVERY

MITIGATION & RESILIENCE PLANNING PROGRAM APPLICATION

For eligible activities administered by the Michigan Economic Development Corporation (MEDC) on behalf of the Michigan Strategic Fund (MSF)



MICHIGAN ECONOMIC DEVELOPMENT CORPORATION

Published July 2023

INTRODUCTION & PROCEDURES

APPLICATION INSTRUCTIONS

MEDC will provide applicants with training and guidance on how to complete the application. The training will be recorded and posted on the recovery website. Questions and applications should be sent to this inbox: cdbg@michigan.org. MEDC will review questions once a week and provide responses on the website.

Please make sure to read the Planning Program Guidelines and the Grant Administration Manual before completing the application. The attached forms are designed to obtain pertinent information, not lengthy narrative. Forms provided must be used and completed according to instructions. Partial submissions will not be accepted. Instructions are given on the respective forms. Please type or print all responses.

Section 1: Applicant Details

- **Applicant Information:** Identify the contact for the application submission and provide general applicant identification information.
 - Evidence of the Unique Entity Identifier is necessary to confirm validity period for doing business with the U.S. Government, please attach a screenshot capturing the UEI number, Entity Name, and Expiration Date.
- Coordination and Partnerships: Provide the co-applicants' name (list all involved in this project) and details regarding the support being provided from co-applicants.
- Application Funding: Identify the total amount of funding requested, including the number of projects associated with the funding request, and the jurisdictions involved and benefitted by the proposed project.
- Capacity Plan: MEDC needs to assess the capacity of the implementing entity to carry out programs funded by the grant funds. The applicant should identify key staff and explain how they will ensure compliance with CDBG-DR regulations regarding compliance, financial management, project implementation, and closeout procedures.
 - Please attach an organizational chart that identifies key staff associated with project delivery, including proposed contractors and partners.
 - Identify if the applicant has worked with prior CDBG-related funding, has open findings on existing grants, and if there are any conflict-of-interest concerns.
 - Provide supporting documentation to highlight previous experience with a similar project type and project scale.
- Supporting Documentation: Submit required documents by checking that attachments are included. Applicants can provide additional documents as needed.
- Legal Authority: Applicants provide evidence of legal authority to adopt codes, ordinances and/or plans created.

Section 2: Project Information

Section 2 should be completed for each individual activity included with the application.

- Activity (Planning/Resilience types): Applicants may choose from the following planning and resilience activities; Hazard Mitigation Plans, Comprehensive Plans, Land-Use Plans, Site-Development Plans, Building Codes, Energy Codes, Zoning Ordinance, Flood Damage Prevention Ordinance and Other mitigation-specific studies, plans, or strategies that support hazard risk reduction within sectors, such as economic development, housing development, or environmental development. Other studies, plans, or strategies must identify local hazard risks and explain how the concept mitigates against those risks. The locality must finalize and present the study, plan, or strategy to its legislative authority as part of product completion. Multiple activities or plans can be chosen by one applicant.
- Must include verification from Michigan State Police/Emergency Management & Homeland Security Department for Hazard Mitigation Plans.

Project Scope and Summary:

Project Title: The title of the project should define the proposed project. This name should be short and clear.

- Project Description: Provide project narrative, outlining the purpose of the project, anticipated outcomes of the funded activity, and the proposed scope of work.
 - Attach associated documentation to support the project description as applicable. A narrative can be attached to include a longer description or report associated with the project as necessary.
 - Previous plans, codes and ordinances should be included in the project's description and how those existing regulations and planning efforts will inform the project for which funding was requested.
 - Associated documentation may also include feasibility studies or other environmental studies already completed.
- Project Site: Provide a clear description of the site or area to be covered by the plan, codes, ordinances, or study.
- Responds to Projected Hazard Risk: Activities funded through this program must address flood risk.
 Describe how the plan, code, ordinance, or study responds to flood hazard risks.
- Most Impacted and Distressed (MID): Identify where the project site is located within the HUD or State MID areas identified, according to the qualifying disaster. If the project site is not located in one of the identified areas, the project is ineligible.
- Benefit to MID: Applicant will demonstrate how the activities or plans will focus on improvements within the most impacted and distressed areas to address unmet recovery and mitigation needs associated through planning projects.
- Link Between Existing HMPs, Codes, Ordinances and Standards with Planning Project: Applicants must list and describe existing building codes, ordinances, and local and/or regional plans (if applicable)—including county or regional level hazard mitigation plans—and how those existing regulations and planning efforts will inform the project for which funding was requested. Applicants will provide supporting documentation linking the proposed project with existing plans, codes or ordinances, and resolutions, as applicable.
- Risk Reduction Benefits: Applicants will provide information on how activities and/or plans will provide a risk reduction for the community.

Project Budget Details:

- Applicant's budget must provide an overview of sources of uses for various funds (if applicable) going into the project. For sources of funds, Applicant should identify the requested HMP/Resilience Planning funds, local funds for the project, and any other committed sources of funds (cash, in-kind, grants, loans, etc.) or formal partnerships being leveraged for the project.
- Traditional Hazard Mitigation Planning
 - Implement a funding range of no more than \$150,000 for plan development, update, or amendment.
- Resiliency Planning
 - Implement a funding range of no more than \$300,000.

Project Activities:

Indicate the start date and end date of listed project activities, this should align with the Project Schedule. The program has a set timeline and milestone schedule (suggested subtasks are included but can be edited) and projects must be closed out within three years, unless MEDC provides an extension.

Attached Documents:

- Indicate with a check whether the listed documents are attached. This section should act as a guide to completing the application.
- □ Attach Subrecipient policies required with the application including:
 - Procurement Policy (Federal, State, and Local, as applicable)
 - Fraud, Waste, & Abuse Policy
 - Cross-Cutting Federal Compliance (Fair Housing and Civil Rights Laws, Labor Standards and Section 3)

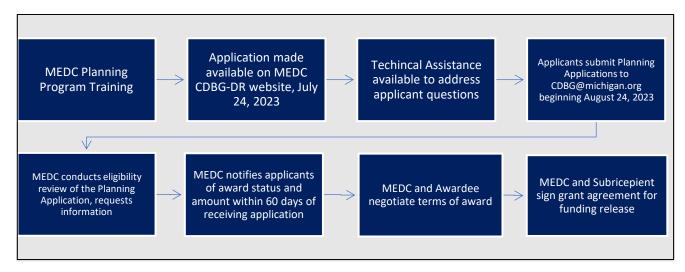
SUBMITTAL REQUIREMENTS

The application process will require applicants to demonstrate the project's tie-back to the disaster, community benefit, the project scope of work, estimated budget and project timeline, and other elements.

Applications will be evaluated on the following project components; a full document list is included at the end of each Application section:

- Completed CDBG-DR Planning Program Application
- □ SAM.gov Verification (Unique Entity Identifier)
- Detailed Project Budget
- Single Audit Form
- □ Fiscal End of Year Statement
- □ Schedule of Federal Expenditure
- Activities Timeline
- Subrecipient Capacity and Conflict of Interest
- Statement of Assurances Form
- Legal Authority
- Organizational Chart
- Identified Compliance Policies/Plans
 - Local Citizen Participation Plan
 - Procurement Policy
 - Financial Policies and Procedures
- Associated Local Plans, Codes or Ordinances and Resolutions (as needed)

APPLICATION REVIEW PROCEDURES



After MEDC announces the availability of CDBG-DR funding, MEDC will release the application. The MEDC Planning Program is a non-competitive first come first serve program. MEDC will award funds to eligible activities/plans for eligible applicants as long as funding remains or until the program ends whichever comes first.

Application reviews will be based on application responses, supporting documentation submitted, and third-party verifications.

MEDC will post the application and publish the awards on the main recovery website: https://www.miplace.org/cdbg-dr/.

| SECTION 1 | | |
|--|-----------------|--|
| APPLICANT | IDENTIFICATION | |
| Official Applicant: Jurisdiction or Not-for-profit entity Mailing Address: Street/PO Box, City/County, | | |
| State & Zip Code | | |
| Applicant Project Contact (PC) Name | | |
| Applicant PC Title | | |
| Applicant PC Address | | |
| Applicant PC Telephone Number | | |
| Applicant PC Fax Number | | |
| Applicant PC E-Mail Address | | |
| Applicant's Unique Entity Identifier (UEI) # | | |
| Applicant's Federal Tax ID (FEIN) # | | |
| SECOND PO | DINT OF CONTACT | |
| Applicant Second Contact Name | | |
| Applicant Second Contact Title | | |
| Applicant Second Contact Telephone Number | | |
| Applicant Second Contact E-Mail Address | | |
| CHIEF ELECTED OFFICIAL | | |
| Chief Elected Official Name | | |
| Chief Elected Official Title | | |
| Chief Elected Official Email | | |

| COORDINATION AND PARTNERSHIPS (list all co-applicants/partners involved in this project): | | | |
|---|--|---------------------------------|--|
| Co-applicant/Partner Name | Support being provided from co-applicant/partner | 501(c)(3) non- profit status | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| APPLICATION FUNDING DETAILS | | |
|--|--|--|
| Total CDBG-DR Award Requested: | | |
| List of the names of jurisdictions included and benefiting from this application. | | |

CAPACITY PLAN

| Does the Jurisdiction have open CDBG grants, including CDBG housing grants, or executed Letters of Intent (LOI) related to a CDBG project? | Yes No |
|--|---|
| If yes, please provide the grant number(s) and project name in the case of a LOI: | |
| Does the Jurisdiction have any unresolved CDBG grant issues and/or findings? | Yes No |
| If yes, please provide the grant number and explain the issues and/or findings: | |
| Conflict of Interest, check all that apply: | Employees, agents, consultants, officers, elected board members or appointed officials of the Jurisdiction will obtain a financial interest or benefit from a CDBG assisted activity or will have an interest in any contract, subcontract or agreement with respect thereto, or in the proceeds hereunder, either for themselves or for those with whom they have family or business ties, during their tenure or for one year thereafter. Officials and staff of the Jurisdiction will be a party to contracts involving the procurement of goods and services assisted with CDBG funds. No conflicts. |

| LEGAL AUTHORITY | | | |
|----------------------|--|---------------|--|
| ATTACHED? | ATTACHMENT | DOCUMENT NAME | |
| | Legal Authority to adopt plans, codes and/or ordinances | | |
| Additional Comments: | | | |

| ATTACHED DOCUMENTS | | | |
|--------------------|---------------------------------------|--|--|
| ATTACHED? | DOCUMENT NAME | | |
| | Organizational Chart | | |
| | (Identify Key Staff) | | |
| | UEI Registration | | |
| | (Sam.gov screenshot or | | |
| | documentation) | | |
| | Experience Documentation | | |
| | (Similar projects of size, scale, and | | |
| | type) | | |

| | Financial Statements (Single Audit or CAFR) | | | |
|----------------|--|------------|------|--|
| A | dditional Comments: | | | |
| | AUTHORIZED OFFICI | AL APPLICA | NT | |
| SIGNATURE: | | | | |
| Name and Title | | D | ate: | |
| E-Mail Address | | | | |

| SECTION 2 | | | |
|--------------------------------------|--|--|--|
| Activity (Planning/Resilience types) | | | |
| Hazard Mitigation Plan | | | |
| Comprehensive Plan | | | |
| Land-Use Plan | | | |
| Site-Development Plan | | | |
| Building Codes | | | |
| Energy Codes | | | |
| Zoning Ordinance | | | |
| Flood Damage Prevention Ordinance | | | |
| Other Site Plans or Studies: | | | |
| | | | |

| PROJECT SCOPE AND SUMMARY | |
|---|--|
| Official Project Title: | |
| Project Description/Scope of Work | |
| Description of Site or Area Covered: | |
| Identify Qualifying Disaster: | 2020 Severe Storms 2021 Severe Storms |
| Describe Projected Hazard Risk that this planning project is responding to. | |
| Provide source of information that describes this risk, such as the state's CDBG-DR Action Plan or an existing Hazard Mitigation Plan. | |

| Most Impacted and Distressed (MID) Area: | Midland County Saginaw County Gladwin County Iosco County Arenac County Wayne County |
|--|---|
| Benefit to MID Area: | |
| Existing HMP, Plans, Codes, Standards, and/or Ordinances and the link with proposed planning activity. *Applicants seeking to update or amend existing plans, codes, or ordinances must attach the current version of the document and clearly explain the proposed update or amendment within the scope of work. For applicants updating or amending their current HMP, attachments should include the current version as well as the resolution. | |
| Risk Reduction Benefits of Activities selected: | |

| PROJECT BUDGET DETAILS | | | |
|--|--------|---|--|
| Total Project Budget: | | | |
| CDBG-DR Assistance Requested for HMP/Resilience Planning: | | | |
| LEVERAGED FUNDING SOURCE | AMOUNT | PURPOSE OF FUNDING (A&E, Administration, Acquisition, Environmental, Construction, etc.) | |
| CDBG (from other sources) | | | |
| Local Funding | | | |
| FEMA (PA, HMGP, 428 PAAP, BRIC) | | | |
| US Army Corp (USACE) | | | |
| Insurance | | | |
| Federal Highway Administration (FHA) | | | |
| DDA or other like district Funds | | | |
| Approved Local Bonding | | | |
| American Rescue Plan Act (ARPA) | | | |
| EPA Clean Water State Revolving Fund (CWSRF) | | | |
| Other Assistance (not specified above) | | | |

| Project Sche | edule | | | | |
|---------------------------|---|------------|----------------------|-------------------|---------------------|
| Start Date (MM/DD/YYY) | | | End Date (MM/DD/Y | YYY) | |
| Milestones a | and Tasks (List in Chronological Order) | | | | |
| Please provid | de details about each of the project's individu | ual activi | ities (or sub | otasks). Subtasks | s of Milestones are |
| | amples and may be revised by Applicant to | | | | |
| procurement | | | | | |
| Activity | Activity Title | Start | End | Duration | Staff Responsible |
| Number | | | •• | (Days) | |
| | Procurement of subcontractor and/or Fi | nal deta | iled scope | of work | |
| Task 1.1 | Draft RFP | | | | |
| Task 1.2 | Final RFP Publication | | | | |
| Task 1.3 | Contract Execution | | | | |
| Milestone 2: | Draft product submitted to the appropria | ite legis | lative bod | y | |
| Task 2.1 | Internal Outline | | | | |
| Task 2.2 | Internal Draft for Review | | | | |
| Task 2.3 | Final Draft for Authority Review | | | | |
| Milestone 3: | Approval, Adoption, or Presentation of I | inal Pro | oduct | | |
| Task 3.1 | Internal Final Draft for Review | | | | |
| Task 3.2 | Final Version of Product Submitted | | | | |
| Task 3.3 | Final Approval, Adoption, Presentation to Authority | | | | |
| Milestone 4: | Closeout | | | | |
| Task 4.1 | Final Funding Request Submitted | | | | |
| Task 4.2 | Final Progress Report Submitted | | | | |
| Task 4.3 | Closeout Documentation Submitted | | | | |

| ATTACHED DOCUMENTS | | | |
|----------------------|--|--|------------------|
| ATTACHED? | ATTACHMENT | DESCRIPTION | DOCUMENT NAME |
| | Expanded Project Description/Scope | Attach additional details about the project as needed. | |
| | Associated Current Local Plans, Codes, or Ordinances (If Applicable) | E.g., Capital Improvement Plan, Hazard Mitigation Plan, Master Plan, Zoning Code, Flood Management Ordinance, etc. Include page callout where project is referenced and resolution. | |
| | Project Budget | Including Cost Reasonableness and Leveraged Funds | |
| | Single Audit | | |
| | Fiscal End of Year Statement | | |
| | Schedule of Federal Expenditures | | |
| | Activity Timeline | Account for procurement periods. | |
| | Legal Authority | | |
| | Statement of Assurances | | |
| | Subrecipient Conflict of Interest | | |
| | Procurement Policy | | |
| | Financial Policies and Procedures | | |
| | Local Citizen Participation | | |
| Additional Comments: | | | |