



Dakota County CDBG Activity Amendment Request Form

City/Township Name: Northfield

Please identify the change(s) to be made:

Administrative Amendment

☐ Change an existing activity budget < \$100,000

Substantial Amendment

A substantial amendment will take approximately 45 days to complete.

- ☒ Create a new activity (previously not an application) *Please complete pages 3-6
- ☐ Cancel an existing activity
- ☐ Change an existing activity budget > \$100,000+
- ☐ Change the National Objective of an existing activity
- ☐ Identify the specific property location for an activity previously unknown at the date of application

Identify the activity budgets you are requesting to be amended. The amendment options, include:

- A transfer of funds from one activity to a different activity within the same program year;
- A transfer to a newly created activity from an existing activity within the same program year;
- A cancelation of an activity (with no prior expenditure) and transfer of funds to one or more existing/new activities within the same program year.

Activity Status*	Program Year	Activity Name	Original Budget	Proposed Budget	Budget Change
Cancel	2013	DPA	\$15,000 Currently \$3,000.	\$ 0	(\$3,000)
Transfer	2013	Residential Rehab	\$	\$3,000	+3,000
Cancel	2014	DPA	\$20,000	\$0	(\$20,000)
Transfer	2014	Residential Rehab		\$20,000	\$20,000
Cancel	2013	Rental Rehabilitation	\$1,398.50	\$0	(\$1,398.50)
Transfer	2013	Residential Rehab		\$1,398.50	\$1,398.50

*(i.e. New, Cancel, or Continue)

Prepared by:

Janine Atchison, Housing Coordinator

Local Program Administrator (Print)

(Signature)

Approved by:



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Brenda Angelstad, Finance Director

City or Township Financial Officer (Print)

(Signature)

CDA Office Use Only

		Reviewer
Amendment Received	-- / -- / --	

Other Comments:

CDBG Account Numbers	CDBG Account Numbers

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If creating a new activity, complete the following sections.

Describe the proposed activity.

Residential Rehabilitation - In 2017 the HRA received permission from the CDA to change the perimeters of the residential rehab program from Cherry Park Neighborhood to City Wide. The maximum loan amount was increased to \$10,000.

After completing a windshield survey and direct mailing in two Northfield neighborhoods, the HRA has received applications from 5 eligible households seeking assistance for home repairs. The HRA plans to conduct additional neighborhood windshield surveys and send direct mailings regarding the program in Spring 2018.

The HRA is requesting to transfer \$3,000 in unspent 2013 funds and \$20,000 in unspent 2014 funds from Down Payment Assistance to Residential Rehab. In addition, the HRA is requesting to transfer \$1,398.50 in unspent 2013 funds from Rental Rehabilitation to Residential Rehab.

The current balance in the Residential Rehab fund is insufficient to meet the needs for the current applications.

Will the proposed activity alter the completion timeline for any previously funded activity?

No

Check the eligible activity category of the proposed activity:

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Affordable Rental Housing <input type="checkbox"/> Rehabilitation of Multi-Unit Residential <input type="checkbox"/> Rental Assistance Subsidies <input type="checkbox"/> Fair Housing Activities <input type="checkbox"/> Energy Efficiency Improvements	Public Service <input type="checkbox"/> Senior Services <input type="checkbox"/> Youth Services <input type="checkbox"/> Transportation Services <input type="checkbox"/> Operational Support
Affordable Homeowner Housing <input type="checkbox"/> Homeownership Assistance <input type="checkbox"/> New (Re)Construction Homeowner Housing <input checked="" type="checkbox"/> Rehabilitation/ Energy Efficiency Improvement of Single Unit Residential <input type="checkbox"/> Housing Counseling and Short Term Assistance <input type="checkbox"/> Fair Housing Activities	Community Development <input type="checkbox"/> Recreational Parks <input type="checkbox"/> Water/Sewer Improvements <input type="checkbox"/> Street Improvements <input type="checkbox"/> Sidewalks <input type="checkbox"/> Beautification <input type="checkbox"/> Assessment Abatement
Homelessness <input type="checkbox"/> Coordinated Access to service & Shelter <input type="checkbox"/> Housing Stabilization <input type="checkbox"/> Emergency Shelter Operation <input type="checkbox"/> Addition of Permanent Supportive Housing Units <input type="checkbox"/> Shelter Renovation/Creation	Neighborhood Revitalization <input type="checkbox"/> Acquisition of Real Property <input type="checkbox"/> Clearance and Demolition <input type="checkbox"/> Clean-up of Contaminated Site
Economic Development <input type="checkbox"/> Employment Training <input type="checkbox"/> Economic Development Assistance <input type="checkbox"/> Rehabilitation of Commercial/Industrial Buildings <input type="checkbox"/> Micro-Enterprise Assistance <input type="checkbox"/> Relocation	Planning and Administration <input type="checkbox"/> Planning <input type="checkbox"/> Administration

Describe the activity schedule:

Proposed Activity Start Date: Ongoing

Proposed Activity Completion Date: 6-30-2018

CDBG funded activities must meet one of the program objectives. Check the objective for which the CDBG funds will be used.

- | | |
|---|--|
| <input type="checkbox"/> Low/Mod Area Benefit | <input type="checkbox"/> Low/Mod Limited Clientele Benefit |
| <input checked="" type="checkbox"/> Low/Mod Housing Benefit | <input type="checkbox"/> Low/Mod Jobs Benefit |
| <input type="checkbox"/> Slum/Blight Area Benefit | <input type="checkbox"/> Slum/Blight Spot Benefit |
| <input type="checkbox"/> Urgent Need (extremely rare; used only for emergencies): _____ | |

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If you checked the Low/Mod Area Benefit box, please answer the following:

In what Census Tract/Block Group(s) do beneficiaries of your Activity live? *(Please include map)*

How many residents live in this area? _____

What is the percentage of low and moderate-income beneficiaries? _____

How was this documented? ☐ HUD Data ☐ Survey
(Please include a copy of survey)

If you checked the Low/Mod Housing Benefit box, please answer the following:

How many Low/Mod Households will benefit? 5 - 8 Households
(Income eligibility must be verified by written documentation)

Where will this activity occur? *(Address of property, neighborhood, city-wide)*

Citywide

If you checked the Low/Mod Limited Clientele Benefit box, please answer the following:

How many Low/Mod People or Households will benefit? _____ People/Households
(Please choose either people or households for each project.)

How will income be verified?

- ☐ Income Verification Request Forms
☐ Eligibility Status for other Governmental Assistance program
☐ Self Certification *(Must request source documentation of 20% of certifications and must inform beneficiary that all sources of income and assets must be included when calculating annual income)*
☐ Presumed benefit *(HUD presumes the following to be low and moderate-income: abused children, battered spouses, elderly persons, severely disabled persons, homeless persons, persons living with AIDS, migrant farm workers)*

If you checked the Low/Mod Jobs Benefit box, please answer the following:

To meet the "Jobs" National Objective requirements, the assisted business must enter into an agreement showing commitment that at least 51% of jobs created/retained will be available to low/mod income persons. The business must also be prepared to provide a list of all jobs, detailed information about the jobs being created/retained, the selection and hiring process, and demographic information about the employees.

Will this activity create or retain full time equivalencies (FTEs)? ☐ Create ☐ Retain

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For job(s) that are being retained, please provide evidence that the assisted business has issued a notice to affected employees or that the business has made a public announcement to that effect, OR an analysis of relevant financial records that shows the business is likely to cut back on employment in the near future without planned intervention.

Will the job(s) created or retained require a special skill? ☐ Yes ☐ No

What percent of permanent FTEs will be held by or available to low/mod income persons? _____ %

If you checked the Slum/Blight Area or Spot Benefit box, please answer the following:

What are the boundaries of the slum/blight area or the address of the slum/blight spot?

(Please provide letter from building inspector or other documentation noting deficiencies and include photos)

If Slum/Blight Area, what percent of buildings are deteriorated? _____ %

What deficiency will be corrected or the public improvement be? _____

Indicate the proposed objective and outcome of the activity/project.

	Outcome #1 Availability/Accessibility	Outcome #2 Affordability	Outcome #3 Sustainability
Objective #1 Suitable Living Environment	<input type="checkbox"/> Accessibility for the purpose of creating a suitable living environment	<input type="checkbox"/> Affordability for the purpose of creating a suitable living environment	<input type="checkbox"/> Sustainability for the purpose of creating a suitable living environment
Objective #2 Decent Housing	<input type="checkbox"/> Accessibility for the purpose of providing decent housing	<input type="checkbox"/> Affordability for the purpose of providing decent housing	<input checked="" type="checkbox"/> Sustainability for the purpose of providing decent housing
Objective #3 Economic Opportunity	<input type="checkbox"/> Accessibility for the purpose of creating economic opportunities	<input type="checkbox"/> Affordability for the purpose of creating economic opportunities	<input type="checkbox"/> Sustainability for the purpose of creating economic opportunities

Indicate how the activity outcome will be measured and projected number of beneficiaries.

☐ People _____
 ☐ Public Facilities _____
 ☐ Organizations _____
☒ Households 5 - 8
☐ Jobs _____
☐ Housing Units _____
 ☐ Businesses _____

Provide the total project cost and CDBG request.

Total Project Cost: \$75,794.25 Total CDBG Request: \$50,529.50

Describe all other funding sources.



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Source of Funds	Amount	Committed	Pending
Property Owners	\$25,264.75	<input type="checkbox"/>	<input checked="" type="checkbox"/>
CDBG (2013-2014)	\$23,000	<input type="checkbox"/>	<input checked="" type="checkbox"/>
CDBG (2013)	\$1,398.50	<input type="checkbox"/>	<input checked="" type="checkbox"/>
CDBG(2017)	\$26,131	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Total:			

Itemized Use of Funds/Expenses	Costs	CDBG Funds Requested	Other Funding Sources
Rental Rehabilitation	\$75,794.25	\$24,398.50 + \$26,131	\$25,264.75
Total:	\$75,794.25	\$50,529.50	\$25,264.75