

Outlined below are several key questions that evaluators typically consider during their review of CDBG applications.

Beneficiaries: Does the activity primarily benefit low and moderate income persons?

Community Impact: Does the activity prevent or eliminate slums and blight, and address an urgent need or problem within the City?

Alignment with Objectives: Does the applicant's request fulfill at least one of the City's objectives and priorities outlined in the Five-Year Consolidated Plan?

Duplication of Services: Does the activity duplicate services offered by another applicant or agency?

Relevant Experience: Does the applicant have experience with CDBG/HOME/ESG related activities or other HUD programs, and a proven record of delivering similar services within the City?

Financial Capacity: Does the applicant demonstrate financial capacity through audited financial statements and banking or credit references?

Financial Stability: Does the applicant exhibit financial stability, as evidenced by a diverse mix of funding sources and historical funding patterns that show no total dependence on CDBG/HOME/ESG funds? (Note that the activity should not require ongoing CDBG/HOME/ESG funding.)

Staffing Adequacy: Does the applicant have sufficiently trained personnel or adequate staffing—both in number and qualifications—to deliver the proposed service or activity?

Organizational Strength: Does the applicant possess overall organizational strength, including established record-keeping methods, a systematic filing system, robust financial systems, and documented procedure manuals for financial management and personnel policies?

Funding Dependence: Has the applicant become overly reliant on CDBG/HOME/ESG funds as the primary source of support for program operations?

Budget Detailing: Has the applicant provided a detailed line-item budget that specifies how funds will be used and explains how the CDBG National Objective will be achieved?

Income Compliance: How has (or will) the organization determine compliance with low and moderate income criteria?

Benefit Estimation: Has the organization provided realistic estimates of the number of low and moderate income persons who will benefit from the service or project?

Targeted Clientele: Does this activity serve a defined clientele, such as abused children, battered spouses, older adults, individuals with severe disabilities, persons experiencing homelessness, illiterate adults, individuals living with AIDS, and migrant farm workers?

Service Enhancement: Has the public service organization detailed how CDBG or ESG essential services funding will result in a measurable increase in service or the introduction of new services, thereby delivering quantifiable benefits and impacts to the City and its residents, particularly low and moderate income individuals and families?

**FUNDING REQUEST FORM
CITY OF READING
COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) PROGRAM
PY2027**

Please provide comprehensive and specific responses to all questions relevant to your activity, either by printing or typing.

The application deadline is June 30, 2026. Should you require an extension, please do not hesitate to contact us. Applicants are strongly encouraged to attend the PY2027 Action Plan Public Hearing.

Furthermore, all proposed activities must adhere to the City's Comprehensive Plan and the Five-Year Consolidated Plan. Timely expenditure of CDBG funding is of critical importance, as the City is required to successfully pass HUD's annual CDBG Timeliness Test on November 1, 2027. Please be aware that failure to meet this requirement may result in the revocation of CDBG funding by HUD.

This application is not applicable to improvement projects on any City-owned land, including buildings and/or public rights-of-way, nor for any Special Economic Development Activities benefiting businesses.

For any assistance required, please contact Neil Nemeth at 610-655-6423.

I. GENERAL INFORMATION

A. Date: _____

B. Submitted By: _____ Title: _____

C. Organization: _____

D. Address: _____

E. Telephone: _____ Fax: _____

F. Contact Person: _____

G. Contact Person Telephone: _____ Unique Entity ID SAM.gov _____

H. Email: _____ IRS Tax Number: _____

I. Total Project Budget: _____ Amount Requested: _____

J. Project Name: _____

K. Brief Description of Project: _____

L. Project Service Area: _____

M. Census Tract: _____

II. CHECKLIST OF REQUIRED DOCUMENTS

- _____ 1. Narrative data on project and applicant
- _____ 2. Articles of Incorporation and Bylaws
- _____ 3. State and Federal Tax Exemption Determination letters
- _____ 4. List of Board of Directors
- _____ 5. Board of Directors' authorization to request funds
- _____ 6. Board of Directors' designation of authorized official
- _____ 7. Organizational chart
- _____ 8. Resume of program administrator
- _____ 9. Resume of fiscal officer
- _____ 10. Financial statement and most recent audit
- _____ 11. Documentation of compliance with National Objectives
- _____ 12. Copy of most recent strategic plan or similar planning document.
- _____ 13. Performance Measurement Form
- _____ 14. Current annual salary of the Executive Director.

III. NARRATIVE

While a specific format is not mandated for this section, the narrative must be typed and limited to a maximum of three pages.

A. Project Summary

Please provide a concise overview of the proposed project. The narrative must clearly articulate the identified need or problem, contextualized within the framework of the City's Five-Year Consolidated Plan, and specify the target population or geographic area intended to benefit. Detail the proposed scope of work, including planned activities or services, overarching goals and objectives, the implementation methodology, and a projected timeline. A proposed budget, itemizing anticipated costs such as personnel, supplies, equipment, and travel, must be included. Conclude by discussing the proposed staffing structure and detailing all other funding sources, both secured and currently being sought.

B. Performance/Outcome Measurement

Human service agencies are undergoing a significant transition, shifting their operational focus from activities to measurable results. This evolution toward an outcomes-driven approach offers considerable potential benefits. Agencies will gain invaluable data to enhance the quality and effectiveness of their programs, while program participants will receive services demonstrably linked to positive outcomes. To this end, please clearly articulate the intended measurements, the methodologies for their assessment, and the anticipated positive impact of the proposed project on the target neighborhood. The

Drawing upon your organization's strategic planning documents, kindly provide specific performance and outcome measurements relevant to the project for which funding is being requested. Examples include: the number of individuals successfully completing a course, the number of individuals acquiring a new skill, the number of individuals achieving proficiency in English as a second language, and the number of families securing permanent housing.

Should the proposed activity not have received CDBG Program funding in the preceding year, please detail any new services planned or specify a quantifiable increase in the provision of existing services for the upcoming year in comparison to the previous twelve (12) months of operation. In the event of a quantifiable increase, comprehensive documentation substantiating the funding amount and the source of local or state funding for the preceding twelve (12) months must be provided.

C. Organization Information

Background - Please indicate the duration for which the organization has been in operation, the date of

incorporation, its stated purpose, and the type of corporation. In addition, describe the services provided, the capabilities of the organization, the profile of your clients (including number and key characteristics), and, if applicable, the organization's license to operate.

Personnel - Provide a concise overview of the organization's existing staff, including current positions and relevant qualifications. Confirm whether a personnel policy manual is in place, and if so, whether it includes an affirmative action plan and a grievance procedure.

Financial - Detail the organization's current operating budget, itemizing revenues and expenses. Please include copies of the funding commitments that support the funds being requested. Additionally, explain your fiscal management practices, covering aspects such as financial reporting, record keeping, accounting systems, payment procedures, and audit requirements. Be aware that the City may opt to use the cost per unit of service or the cost per measured outcome as the payment method; therefore, a detailed breakdown and explanation of the cost per unit may be required.

Audit - Requirements Should the organization be funded by the CDBG Program, it will be subject to the audit requirements outlined in OMB Circular A-133. Upon request, please submit a copy of the annual audit to the City, clearly indicating the receipt of any federal funds provided under this Agreement.

Insurance/Bond/Worker's Compensation - State whether the organization maintains liability insurance—specify the coverage amount and the insuring organization. Confirm that all payroll taxes are paid and that worker's compensation is provided in accordance with federal and state laws. Additionally, indicate whether fidelity bond coverage is maintained for principal staff responsible for handling the organization's accounts, specifying the coverage amount and the insuring organization.

Additional Information - Include any other pertinent information.

IV. STANDARD REQUIRED DOCUMENTS

A. Articles of Incorporation/Bylaws

Articles of Incorporation/Bylaws Articles of incorporation are the documents recognized by the Commonwealth of PA as formally establishing a private corporation, business or organization.

B. Non-profit determination

Non-profit organizations must submit tax-exemption determination letters from the Federal Internal Revenue Service and the Commonwealth of PA Franchise Tax Board.

C. List of the Board of Directors

A list of the current board of directors or other governing body of the organization must be submitted. The list must include the name, telephone number, address, occupation or affiliation of each member and must identify the principal officers of the governing body.

D. Authorization to Request Funds

Documentation must be submitted of the governing body's authorization to submit the funding request. Documentation of this requirement consists of a copy of the minutes of the meeting in which the governing body's resolution, motion or other official action is recorded.

E. Authorized Official

Documentation must be submitted of the governing body's action authorizing the representative of the organization to negotiate for and contractually bind the organization. Documentation of this requirement consists of a signed letter from the Chairperson of the governing body providing the name, title, address and telephone number of each authorized individual.

F. Organizational Chart

An organizational chart must be provided which describes the organization's administrative framework and staff positions, which indicates where the proposed project will fit into the organizational structure, and which identifies any staff positions of shared responsibility.

G. Resume of the Chief Program Administrator

H. Resume of the Chief Fiscal Officer

I. Financial Statement and Audit

V. NATIONAL OBJECTIVES

The proposed project must address at least one of the three national objectives for the CDBG Program. Check the appropriate objective for your project and provide supporting information.

Low/moderate Income Benefit:

1) Census data must be provided demonstrating the service area contains at least 51% low/moderate income persons and is predominately residential if the project will primarily benefit low/moderate income persons living within the project service area.

Service Area: This is the geographic area to be served by the project. It may be the houses along the particular section of road, the families using the bridge on a daily basis; the homes that will have water problems eliminated by the drainage improvements, etc. Please provide a map showing the project and outlining the service area of the project.

Provide a justification for the service area chosen.

2) Some projects may be designed to benefit low/moderate income persons because the project will only be available to this income group. An example would be the rehabilitation of rental housing to be rented to low/moderate income persons. If the proposed project addresses this type of limited clientele, please explain.

3) HUD presumes the following groups consist of principally low/moderate income persons: abused children, elderly persons, battered spouses, homeless persons, handicapped persons, illiterate persons, and migrant farmworkers. If the proposed project addresses persons of one or more of these groups, please explain.

4) If the proposed project is designed to retain existing jobs or create new jobs, please explain how the jobs relate to the project, how many jobs will be created or retained, how many low/moderate income jobs will be create or retained, and when the jobs will be filled.

Slums and Blight: Explain the slum and blighting influence. Attach additional sheets if necessary.

VI. BUDGET SUMMARY

Provide financial data requested below. Costs should be based on the best information available at the time of the request. When providing the information, consider the following: (a) a project must be completed in a single phase if possible; (b) Federal wage rates apply to construction projects costing \$2,000 or more; (c) projects may not begin construction until CDBG Program funding is approved by the U.S. Department of Housing and Urban Development.

Total estimated cost of project: \$ _____ *

Amount of funds requested: \$ _____

It is important to try to obtain funds to offset the demand for the limited amount of CDBG Program funds. If the project requires a renewal of funds every year, the City can not guarantee that renewal.

***Please Note:** It is the applicant's responsibility to make certain that all CDBG-funded construction expenses comply with the Buy America Build America Act.

For more information see https://www.hud.gov/program_offices/general_counsel/BABA

A. List the amount and source of other funds that will be used in addition to the CDBG Program funds being requested.

B. If CDBG Program funds are needed to secure matching funds from another source, state the source and the amount of funds to be matched.

VI. CERTIFICATION

This funding request for CDBG Program funds was discussed at a _____ meeting held on

_____ and was approved by the governing body on _____
(date) (date)

Signature

Title

One original and one (1) copy must be sent by June 30, 2026 to:

City of Reading Community Development Department
City Hall Third Floor
815 Washington St.
Reading, PA 19601

Please contact us at 610-655-6423 if you need to request an extension

PERFORMANCE MEASUREMENT FORM

The U.S. Department of Housing and Urban Development (HUD) is requiring the City of Reading to develop, implement, and report on the performance of the Community Development Block Grant (CDBG) Program. When submitting a funding application for the CDBG, HOME, or ESG Program, you must complete and submit the following information for your project.

OBJECTIVES

All projects or programs must relate to one of the following objectives. Please circle the appropriate number.

1. **Suitable Living Environment.** In general, this objective relates to activities that are designed to benefit community, families, or individuals by address issues in their living environment.
2. **Decent Affordable Housing.** The activities that typically would be found under this objective are designed to cover the wide range of housing possible that can be funded by the CDBG, HOME, and ESG Programs. This objective focuses on housing projects or programs where the purpose is to meet individual family or community needs and not where housing is an element of a larger effort.
3. **Creating Economic Opportunities.** This objective applies to the types of activities or projects related to economic development, commercial revitalization, job creation, or job retention.

OUTCOMES

All projects or programs must relate to one of the following outcomes. Please circle the appropriate number.

1. **Availability/Accessibility.** This outcome category applies to projects and programs that make services, infrastructure, housing, or shelter available or accessible to low and moderate income people, including people with disabilities. In this category, accessibility does not refer only to physical barriers, but also to making the affordable basics of daily living available and accessible to low and moderate income people.
2. **Affordability.** This outcome category applies to projects or programs that provide affordability in a variety of ways in the lives of low and moderate income people. It can include the creation or maintenance of affordable housing, basic infrastructure hook-ups, or services such as transportation, day care, etc.
3. **Sustainability/Promoting Livable or Viable Communities.** This outcome applies to projects and programs that are aimed at improving communities or neighborhoods, helping to make them livable or viable by providing benefit to low and moderate income people or by removing or eliminating slums or blighted areas through multiple activities or services that sustain communities or neighborhoods.

OUTCOME INDICATORS

You must select one or more of the following indicators that relates to your project or program and provide the information requested under the indicator.

1. **Infrastructure and public service activities.**
Provide the number of persons or households to be assisted:
_____ with new access to service or benefit
_____ with improved access to service or benefit
_____ where activity was used to meet a quality standard or measurably improved quality, report number of persons or households that no longer have access to substandard service only

2. Activities are part of a geographically targeted revitalization effort.

Check one:

- ☐ Comprehensive
- ☐ Commercial
- ☐ Housing
- ☐ Other

Choose all the indicators that apply, or at least 3 indicators if the effort is Comprehensive.

- ☐ Number of new businesses to be assisted
- ☐ Number of businesses to be retained
- ☐ Number of jobs created or retained in target area
- ☐ Amount of money to be leveraged (from other public or private sources)
- ☐ Number of low/moderate income persons to be served
- ☐ Number of Slum/blight demolitions
- ☐ Number of low/moderate income households to be assisted
- ☐ Number of acres of remediated Brownfield
- ☐ Number of households with new or improved access to public facilities/services
- ☐ Number of commercial facade treatment/business building rehab
- ☐ Other - can include: crime numbers, property value change, housing code violations, business occupancy rates, employment rates, homeownership rates.

3. Activity addresses slum and blight spot basis.

4. Number of commercial facade treatment/business building rehabilitations. _____

5. Number acres of brownfields to be redeveloped. _____

6. Number of new rental units to be constructed.

Total number of units: _____

Of total:

- ☐ Number affordable
- ☐ Number accessible to persons with disabilities

Of affordable:

- ☐ Number subsidized by program (federal, state or local program)
- ☐ Number of years of affordability guaranteed:
- ☐ Number of housing units (supported through development and operations or rental assistance) for persons with HIV/AIDS:
- ☐ Of those, number of units for the chronically homeless
- ☐ Of those, the number made accessible to persons with disabilities
- ☐ Number of units of permanent housing for homeless persons and families (supported through development and operations):
- ☐ Of those, number of units for the chronically homeless
- ☐ Of those, the number to be made accessible to persons with disabilities

7. Rental units to be rehabilitated or improved.

Total number of units: _____

Of total:

- ☐ Number affordable
- ☐ Number accessible to persons with disabilities
- ☐ Number brought from substandard to housing code compliance
- ☐ Number to meet meeting International Building Code Energy standards
- ☐ Of those, number meeting Energy Star standards
- ☐ Number brought into compliance with lead safe housing.

Of Affordable:

- _____ Number subsidized by Federal, state or local program.
- _____ Number of years of affordability guaranteed
- _____ Number of housing units (supported through development and operations) for persons with HIV/AIDS
- _____ Of those, number of units for the chronically homeless
- _____ Of those, the number made accessible to persons with disabilities
- _____ Number of units of permanent housing for homeless persons and families (that are supported through development and operations)
- _____ Of those, number of units for the chronically homeless
- _____ Of those, the number made accessible to persons with disabilities

8. Owner occupied units to be rehabilitated or improved.

Total Number of units: _____

- _____ Number of units brought from substandard to local code compliance
- _____ Number of units brought to International Building Code Energy standards
- _____ Of those, number brought to Energy Star standards
- _____ Number of units brought into compliance with lead safe housing rule
- _____ Number of units subsidized by federal, state or local program

9. Direct financial assistance to be provided to home buyers

- _____ Number of first-time home buyers
- _____ Number of subsidized tenants
- _____ Number of minority households

Down-payment Assistance	Yes	No
Closing Costs	Yes	No
Mortgage buy-down/Reduction	Yes	No
Interest Reduction	Yes	No
Second Mortgage	Yes	No

10. Number of jobs to be created: _____

Employer sponsored health care benefits: Yes No

Type of jobs created (use existing Economic Development Administration (EDA classification))

_____ Number of unemployed before taking job.

11. Number of jobs to be retained, saved, or maintained: _____

Employer sponsored health care benefits: Yes No

Type of jobs created (use existing Economic Development Administration (EDA classification)):

_____ Number of unemployed before taking job.

12. Number of businesses to be assisted: _____

- _____ Number of New
- _____ Number of Expansions
- _____ Number of Relocations

DUNS number(s) of those businesses: _____

Two-digit NAIC industry classification (if needed w/DUNS): _____

13. Does assisted business provide a good or service to meet needs of service area/neighborhood/community? Yes No

14. Number of homeownership units to be constructed, acquired, and/or acquired with rehabilitation.

Total Number of Units: _____

Of those:

- _____ Number of affordable units
- _____ Number of years affordability guaranteed
- _____ Number meeting International Building Code Energy standards
- _____ Of those, number using Energy Star standards
- _____ Of those, the number made accessible to persons with disabilities

Of the affordable units:

- _____ Number subsidized by state/local programs
- _____ Number subsidized by federal programs
- _____ Number specifically for persons with HIV/AIDS
- _____ Number specifically for homeless

Of those, number specifically for chronically homeless: _____

Of those, the number made accessible to persons with disabilities: _____

15. Number of renter units or tenants to be assisted with monthly subsidies (tenant-based rental assistance).

Total Number of units _____

Of those:

- _____ Number subsidized by state/local programs
- _____ Number subsidized by federal programs
- _____ Number assisting persons with HIV/AIDS
- _____ Number assisting homeless

Of those, number assisting chronically homeless _____

Of those, the number made accessible to persons with disabilities. _____

16. Number of homeless persons stabilized due to access to overnight shelter or other emergency housing support.