

**CITY OF WARREN
2024-2025 ACTION PLAN
REQUEST FOR CDBG, HOME, OR HOPWA FUNDS**

GENERAL INSTRUCTIONS

Please follow the outline below.

A. APPLICATION COVER SHEET (attached)

B. NARRATIVE

1. Executive Summary
 - Briefly state the amount of funding requested, the activities that will be undertaken and the results anticipated.
2. Description and Purpose of Activities
 - Describe the activities in detail and be sure to indicate the location of the activities.
 - Describe the target population.
 - Indicate the expected outputs (the measurable or quantifiable results the activity will achieve).
 - Indicate the expected outcomes (changes in conditions, status, attitudes, skills, knowledge and/or behaviors of the people benefiting from the proposed activities).
 - Describe what housing or community development needs your organization believes exist in the community that the proposed activities will address.
 - Describe how the proposed activities will address these needs.
 - State whether the activities are new or a continuation of prior year's activities (if the activities are not new, indicate how they were funded in the past).
 - Describe the steps that will be taken to complete the proposed activities, include a schedule or timetable for completion.
 - Indicate the period of time over which the funds will be expended.
 - Indicate if any other organizations will be partners in this activity and if so, what their roles will be.
 - List long-term strategies for securing future funding for these activities. **(The City can not guarantee future years funding).**
3. Budget Narrative/Justification
 - Provide an itemized budget for the proposed activities (**not for your entire organization**), including both expenses and revenues. (If you are requesting funding for housing activities include proforma).
 - Indicate the total amount of funding requested. **Be sure to justify the need for the amount of funding requested.**
 - Indicate the amount requested for each measurable output unit. Provide budget documentation justifying the amount requested for each output unit.
 - In the event the City is unable to fund your full request, please prioritize the different activities included in your request.
4. Organization Information
 - Provide a brief statement of your organization's history.
 - Provide a brief statement of your mission and goals.
 - Describe current programs, activities and accomplishments.
 - Provide an organizational chart, including board, staff and volunteer involvement.
 - Indicate who will manage this activity and provide their qualifications.

C. ATTACHMENTS

1. A copy of current IRS determination letter indicating 501(c)(3) tax-exempt status.
2. List of Board of Directors with affiliations.
3. Finances:
 - > Organization's current annual operating budget, including expenses and revenue
 - > Most recent annual financial statement (independently audited, if available).
 - > Annual report, if available.
4. FFATA - names and total compensation of the five most highly compensated officers of the entity if the entity in the preceding fiscal year received 80 percent or more of its annual gross revenues in Federal awards; and \$25,000,000 or more in annual gross revenues from Federal awards; and the public does not have access to this information about the compensation of the senior executives of the entity through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. §§ 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. FFATA § 2(b)(1).

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APPLICATION COVER SHEET**

Date of Application: _____

CFDA Number (Circle One):

CDBG **14.218** HOME **14.239** HOPWA **14.241**

Organization Name: _____
Should be the same as on IRS determination letter or IRS Form 990

Year Founded: _____ Current Operating Budget: \$ _____

Executive Director: _____ Phone Number: _____

Contact person/title/phone number (if different from above) _____

Address (principal/administrative office): _____

City/State/Zip: _____

Fax Number: _____ E-mail address: _____

Activity Name: _____

Purpose of Activity (one sentence): _____

Dates of Activity: _____

Amount Requested: _____ Total Activity Cost: _____

Area Served: _____

Signature, Chairperson, Board of Directors

Date

Typed Name and Title

Signature, Executive Director

Date

Typed Name and Title

***Return by 2-2-2024 to: City of Warren, Office of Community Development,
One City Square, Ste 210, Warren, Michigan 48093***

**CITY OF WARREN
2024-2025 ACTION PLAN
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APPENDIX A
CONSOLIDATED PLAN NEEDS, GOALS, AND OBJECTIVES**

The long term goals of the City’s five-year Strategic Plan are 1) to provide decent housing 2) to provide a suitable living environment and 3) to expand economic opportunities principally for extremely low-, low- and moderate-income residents. A Strategic Plan has been developed to meet the City’s priority needs, which are enumerated in the table below:

City of Warren Housing & Community Development Needs (listed in order of priority)		
No.	Need	Rank
1	Rehabilitation of owner occupied housing	High
2	Reversal of neighborhood decline	High
3	Maintenance of the supply of affordable housing	High
4	Correction of environmental problems-physical disorder such as poor property maintenance, and abandoned autos	High
5	Increased homeownership	High
6	Street repair/reconstruction	High
7	Senior services (Chores)	High
8	Housing and supportive services for the homeless and those in danger of becoming homeless	High
9	Parks and Recreation Facility Improvements	High
10	Child Advocacy Services	High
11	Housing Support for Victims of Domestic Violence	High
12	Crime awareness	High
13	Economic development for low/mod income neighborhoods	Medium
14	Education to prevent substance abuse to preserve neighborhoods	Medium
15	Housing and supportive services for other special needs populations	Medium
Warren EMA Housing Needs PLWH/A (Listed in Priority)		
16	Emergency (long term) assistance with rent and mortgage	High
17	Help find housing/resource identification	High
18	In home support (homemaker, home-health aide, and personal care)services for medically fragile	High
19	Emergency (short term) assistance with rent, mortgage, or utility payments	Medium

Four objectives established to meet the City’s priority housing and community development needs are listed below in order of priority. They are followed by a fifth objective established to meet the housing needs of PLWH/A (Persons Living with HIV/AIDS) in the Warren EMA.

1. Preserve existing single family neighborhoods.
2. Preserve existing single family housing stock.
3. Encourage homeownership among very low, low, and moderate income households and provide these households with opportunities to purchase affordable, decent, safe, and sanitary housing.
4. Encourage and cooperate with providers of shelter and support services for the homeless and with providers of homeless prevention services.
5. Provide income eligible PLWH/A in the 5 county Warren EMA with access to permanent, stable, decent, and affordable housing.