



# Neighborhood Partnership Grant Application

[www.sarasotagov.com/NDS/NPgrantapplication.pdf](http://www.sarasotagov.com/NDS/NPgrantapplication.pdf)

Fiscal Year 2014-15  
Cycle A

**Deadline: Tuesday, September 2, 2014, 4:00 PM**

***NOTE: \*\*All required back-up material (quotes, meeting minutes, etc.) MUST be attached to the application in order to be submitted\*\****

# ***Neighborhood Partnership Grant Program Guidelines***

## **Program Intent**

The intent of the Neighborhood Grant Program is to assist and strengthen the City of Sarasota neighborhood associations and improve the quality of life within City neighborhoods.

## **Eligible Applicants**

Neighborhood, Resident, Homeowner, and Business Associations and Coalitions of Associations, within the City of Sarasota, and on record with the Department of Neighborhood and Development Services, are eligible for grant funding.

The City of Sarasota will be accepting Neighborhood Partnership Grant applications until **Tuesday, September 2, 2014, 4:00 PM** at 1565 First Street, Third Floor Annex, Sarasota, FL 34236. Applications must be submitted in person and any applications received after this date/time will be disqualified. No facsimiles or electronic copies will be accepted. All required back-up material (quotes, meeting minutes, etc.) must be attached to the application in order to be submitted and be on 8½" x 11" paper.

Only one grant application per City recognized association/entity will be funded per fiscal year. Funds will be allocated based on average scores of applications in descending order until funds are depleted. The average scores are derived from the Grant Review Committee.

## **Available Funding**

The maximum award amount is **\$2,000** per City recognized association/entity, per fiscal year. Associations/entities with 1,000 parcels/units or more may request up to **\$3,000**. A 50% match is required at all levels. For example: A request for \$2,000 in grant funds requires matching funds in the amount of \$1,000—the total project cost would be at least \$3,000. Matching funds may be in the form of volunteer labor (\$15/hr), donated services, goods/materials, in-kind contributions, and/or cash. The match must be substantiated with a signed Contribution/Match Worksheet (page 6) as part of the neighborhood grant application. City resources may not be used as matching funds. Matching funds are not transferable to other projects.

Grant funds are to be disbursed as either direct payments to vendors or reimbursements to associations with a valid checking account. In order to reimburse an association, the following items must be submitted: 1) Invoice from the association to the City of Sarasota; 2) Vendor receipts marked "paid" and/or credit card receipts; 3) Copy of front/back of cancelled checks if vendor was paid by check. All vendors receiving direct payment from the City must complete a W-9 (and any other necessary paperwork) and file with the City of Sarasota Financial Administration Department. Associations without a valid checking account will be limited only to direct payments to vendors.

Neighborhood association/entity president or chairperson receiving grants will be required to sign a grant agreement before any funds will be distributed. Funds are expected to be available for expenditure the third week of October 2014 and all dollars must be expended prior to September 30, 2015. **No expenses may be incurred before City Commission approval date and staff authorization.** Any proposed changes to approved project/program funding must first be thoroughly explained in writing and show evidence of association/entity support. Staff has the ability to approve or deny proposed changes.

## **Application Requirements**

- All questions/worksheets must be thoroughly completed.
- All projects/programs must demonstrate the potential to benefit the neighborhood.
- Evidence of association consensus for the project must be provided.
- All project improvements and installations (such as signage and landscaping) must be on public land.
- The original application must be completed and signed by the neighborhood association/entity president or chairperson.

## **Responsibilities of Applicant**

- The applicant and/or contractor awarded the work must obtain all appropriate permits prior to project initiation, if applicable.
- The applicant and/or contractor awarded the work must adhere to all applicable City Codes.
- Substantiation of individual budget amounts being requested is required at the time of application, as follows:

\$250.00 or less	No quotes necessary
<b>\$250.01 and above</b>	<b>Three (3) written quotes from vendors</b>
- All projects/events must be completed and funds expended by September 30, 2015.
- Payments to contractor/distributors that are in excess or outside of the grant award and arranged by the applicant are the responsibility of the applicant. The City shall not be held responsible for arrangements of services made by the applicant.
- Any proposed project which may be considered an increase to the City's standard level of service may require a maintenance agreement and proof of liability insurance as a condition of grant approval.

# ***Neighborhood Partnership Grant Program Guidelines (continued)***

## **Projects for Consideration**

The following is a sample list of projects/programs to be considered for funding. Ideas are not limited to this list – neighborhood leaders are encouraged to be creative in addressing their individual neighborhood needs:

- Beautification – community clean-ups, landscaping, minor park improvements, public art.
- Children/Youth – short-term neighborhood operated programs which would benefit children (after-school/summer program, tutoring/mentoring), neighborhood-based sporting events.
- Communication/Membership – web sites, newsletters, advertising, membership drives, directories.
- Crime – signage, newsletters and items associated with neighborhood crime watch operations. Video devices may be considered, as long as they can be affixed in a secure location.
- \*Events – supplies, notices, entertainment, rentals for festivals/celebrations. \**Special events must obtain applicable City permits*
- Identity – signage, logo design, membership t-shirts.

The following is a sample list of projects/programs that would not be eligible for funding:

- Capital items (any individual item over \$500 that would require tracking by City property control, excluding signage/surveillance camera equipment).
- Computer hardware/software and other electronic devices and related equipment.
- Food and/or provisions for festivals/celebrations.
- Ongoing multi-year projects.
- Ongoing or operational costs (including salaries/personnel).
- Projects/programs already funded from another source (including current operating budgets).
- Projects/programs that have already been completed.
- Projects typically funded under other sources such as City (or County) department operating budgets, Capital Improvement Program, Community Development Block Grant Program.
- Projects which conflict with existing City plans/policies.

## **\*\*Application Scoring and Ranking\*\***

Each application may be given a maximum of 110 points as follows: **Project Description** (20 points) - *How well does the application clearly describe the project and its goals?* **Demonstration of Community Need** (20 points) - *How well does the application describe, communicate/address a community need?* **Evidence of Community/Association Strengthening** (20 points) - *Does the project have the potential to strengthen the overall neighborhood and association?* **Community Support** (20 points) - *Does the application show evidence of community consensus for the project and resident involvement in the implementation?* **Appropriateness of Proposed Budget** (20 points) - *Are the budget revenues and expenses clear and justifiable, funding source(s) appropriate?* **Bonus** (10 points) - *Up to ten (10) additional bonus points may be allocated through the incorporation of sustainable/"green" initiatives that are directly related to the project and documented in the grant application.*

The "average score" derived from the Grant Review Committee will be determined by dividing the total points given to an application by the number of scores. The highest scoring applications will be considered first. Funds will be allocated based on application average scores in descending order until funds are depleted. Funds will not be allocated to any application with an average score less than 65.

## **Performance Reporting**

- Grant recipients are required to produce a final performance report evaluating the success of the project within 60 days of project completion. These reports should include photographs, if applicable, and evidence of project completion.
- Failure to submit a final performance report may result in disqualification from future grant cycles.
- Final report forms will be provided by the Department of Neighborhood and Development Services, who will also monitor and maintain grant files on all projects.

## **Instructions**

Please complete and submit Pages 1 thru 10 of the application. **Facsimiles or electronic copies will not be accepted.** Read each question carefully and respond in the spaces provided. If extra space is needed, please attach additional pages (attachments must be 8½" x 11").

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### 1. Association Information:

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_ City / Zip Code: \_\_\_\_\_

Organization Type:

- Neighborhood, Community or Resident Association
- Homeowner Association
- Coalition of Neighborhood Associations
- Other: \_\_\_\_\_

Is the Association incorporated? Yes  No

If yes, what is the Federal I.D. #? \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

### 2. Leadership Information:

President's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City / Zip Code: \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_

E-mail address: \_\_\_\_\_

Additional Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_ City / Zip Code: \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_

E-mail address: \_\_\_\_\_

### 3. Neighborhood Information:

Name: \_\_\_\_\_

Boundaries: North: \_\_\_\_\_ South: \_\_\_\_\_

East: \_\_\_\_\_ West: \_\_\_\_\_

# of parcels/units: \_\_\_\_\_ # of association members: \_\_\_\_\_



#### 4. Project / Program Information:

A — **Name:** \_\_\_\_\_

B — **Summary:**

*Clearly describe the project(s)/program(s) you are proposing, including **i)** goals; **ii)** the specific need in your community to be addressed; **iii)** how the need was determined; **iv)** how the project/program will address said need; and **v)** how the proposed project(s) will strengthen the community/association.*

*Photos may be attached. **Additional pages may be attached if extra space is needed.***

*\*BONUS: Is your project/program incorporating any sustainable/"green" initiatives? If so, please explain.*

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\*BONUS) \_\_\_\_\_  
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**C — Resident Notification, Involvement, and Consensus:**

*Describe i) resident participation in the project/program selection as well as the application process; ii) planned resident/association involvement in the implementation of the project; and iii) provide documentation of association concurrence with the project idea (e.g. minutes of board/association meeting(s) reflecting consensus for project(s)).*

i) \_\_\_\_\_  
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D — **Other Sources of Funding:** Describe any other sources of funding that are available for the project/program(s) (e.g. association membership dues collected and/or other grants received/applied for).

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E — **Time Line:** Estimated Start Date: \_\_\_\_\_
(See page 9) (must start after 10/20/14)
Estimated Completion Date: \_\_\_\_\_
(must be completed by 9/30/15)

F — **Prior Funding:** Have you previously received Neighborhood Partnership Grant funds?
[ ] Yes [ ] No

If Yes, please list all previously funded project(s)/program(s) within the last 36 months (include specific year) and describe the lessons learned and outcomes of the project(s). Please also confirm if a final performance report was submitted during previous grant funding. [Do not include any references to Community Building Grant funds/projects, as this is a separate program.]

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G — **Ongoing Project Maintenance (if applicable):** What project maintenance will be assumed and provided by the applicant? Be sure to include the name/phone number of those who will oversee ongoing maintenance. Please provide a detailed description of how equipment use will be monitored.

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**5. Funding Information:**

**A — Total Grant Funds Requested:** \$ \_\_\_\_\_ (Line 1)

*Maximum \$2,000 per City recognized association/entity, per fiscal year. Associations/entities with 1,000 parcels/units or more may request up to \$3,000.*

**B — Total Matching Funds:**

*(Enter total amount below on Line 2)*

*A 50% match is required at all levels. For example, if you are requesting \$2,000 in grant funding, then evidence of a minimum \$1,000 match is required — the total project cost would be at least \$3,000. Matching funds which are not directly related to the project will not be considered. All matching funds must be substantiated. All volunteer labor hours must be allocated after grant approval date (10/20/14).*

**Compilation of matching funds:**

**Volunteer Labor** \$ \_\_\_\_\_  
*(Calculate at \$15/hr — Please complete Volunteer Labor Worksheet—Page 7)*

**Cash** \$ \_\_\_\_\_  
*(Please itemize in Contribution/Match Worksheet—Page 6)*

**Donated Professional Services** \$ \_\_\_\_\_  
*(Not including Volunteer Labor—Please itemize in Contribution/Match Worksheet—Page 6)*

**Donated Materials/Supplies** \$ \_\_\_\_\_  
*(Please itemize in Contribution/Match Worksheet—Page 6)*

**Other (please describe)** \$ \_\_\_\_\_  
*(Matching funds which are not directly related to the project will not be considered)*

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**B — Total Matching Funds Amount:** \$ \_\_\_\_\_ (Line 2)

**C — Total Project Cost:** \$ \_\_\_\_\_ (Sum of Lines 1 & 2)



### 6.A Contribution/Match Worksheet

Please provide information for each donation (*except volunteer hours*) to be used as part of the grant project. If more than two donations are being received, additional worksheets must be provided.

1) Grant Project Name: \_\_\_\_\_

Donation Type:  Cash  In-kind  
(check all that apply)  Services  Goods/Materials  
 Other: \_\_\_\_\_

Donor Information: \_\_\_\_\_  
Organization/Company/Individual Name

\_\_\_\_\_ Address City/Zip Code

\_\_\_\_\_ Telephone # E-mail

Itemized Description of Contribution/Match:

Total Value: \$ \_\_\_\_\_  
(The value of in-kind contributions must be determined by the donor, not the applicant.) \_\_\_\_\_ Authorized Signature (Donor) \_\_\_\_\_ Date

2) Grant Project Name: \_\_\_\_\_

Donation Type:  Cash  In-kind  
(check all that apply)  Services  Goods/Materials  
 Other: \_\_\_\_\_

Donor Information: \_\_\_\_\_  
Organization/Company/Individual Name

\_\_\_\_\_ Address City/Zip Code

\_\_\_\_\_ Telephone # E-mail

Itemized Description of Contribution/Match:

Total Value: \$ \_\_\_\_\_  
(The value of in-kind contributions must be determined by the donor, not the applicant.) \_\_\_\_\_ Authorized Signature (Donor) \_\_\_\_\_ Date



**6.B**

**Volunteer Labor Worksheet**

*(NOTE: All volunteer labor hours must be allocated after 10/20/14. Preparation of the grant application cannot be considered part of the volunteer labor hours.)*

Type of Work	Volunteer Information				
	Name	Address	Phone #	# Hours	Signature
				<b>Total Hours:</b>	<i>If necessary, additional Volunteer Labor Worksheets may be attached.</i>
				<b>Rate:</b> \$ 15/hr	
<b>Total Volunteer Labor Value:</b>				\$	



**7. Expenditure Information:**

Specify expenditures for this project with enough detail to clearly explain what is being proposed, including: supplies, equipment, professional services, postage, printing, and any other related expenses. Please be sure to provide quotes or other documentation to explain each line item. The City of Sarasota is tax exempt and will not pay sales tax on any grant-funded expenditure. **Do not include sales tax in your calculations.** Volunteer hours may be calculated at \$15 per person, per hour.

Individual expenditure items \$250.00 or less require no quotes, but any back-up information provided is helpful. Items \$250.01 and above require three (3) written quotes from vendors. Description of work being proposed should be identical for each quote. **Applications without required quotes will be disqualified.**

A —

EXPENDITURE DESCRIPTION	FUNDING SOURCE TO BE USED		TOTAL <i>(Column C)</i>
	GRANT FUNDS <i>(Column A)</i>	MATCHING FUNDS <i>(Column B)</i>	
<b>TOTAL EXPENDITURES:</b>	<b>\$</b> <i>(Column A)</i>	<b>\$</b> <i>(Column B)</i>	<b>\$</b> <i>(Column C)</i>

B — **Budget Balancing:** Please confirm that your budget balances using the following formulas:

Total Grant Funds Requested (5.A—Page 5) = Total Grant Fund Expenditures (7.A, Column A—Page 8)

Total Matching Funds (5.B—Page 5) = Total Matching Fund Expenditures (7.A, Column B—Page 8)

Total Project Cost (5.C—Page 5) = Total Expenditures (7.A, Column C—Page 8)



## 8. Work Plan Worksheet

List in chronological order the specific steps or key activities necessary to reach project goals and the estimated dates (month/year) of completion. All new work must be completed by 9/30/2015.

Steps or Key Activities	Start/Completion Date



**9. Applicant Checklist:**

- ◆ Were all questions answered thoroughly?
- ◆ Is there evidence of consensus (meeting minutes) supporting the proposed project?
- ◆ Is there evidence of the 50% required match?
- ◆ Have all listed volunteers signed the volunteer labor worksheet (page 7)?
- ◆ Is there adequate backup (quotes) to substantiate budget line items greater than \$250?
- ◆ Is the budget balancing formula accurate (page 8)?

**10. Certification:**

As association/entity president or official signatory, I hereby certify that the information included in this application is correct and represents the consensus of the residents in the neighborhood described.

Signature: \_\_\_\_\_

Name: \_\_\_\_\_  
*(Please print)*

Title: \_\_\_\_\_ Date: \_\_\_\_\_  
*(Please print)*

**Submission:**

This grant application must be received in person at:

**City of Sarasota**  
Department of Neighborhood and Development Services  
Neighborhood Services Division  
1565 First Street, Third Floor Annex, RM 301  
Sarasota, FL 34236

by:

**Tuesday, September 2, 2014, 4:00 PM**

Original signed application is required—No facsimiles or electronic copies will be accepted.  
*Applications received after posted deadlines will be disqualified.*

**Questions may be directed to (941) 954-2612.**

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## **City Commission**

Willie Shaw, Mayor  
Susan Chapman, Vice-Mayor  
Suzanne Atwell  
Paul Caragiulo  
Shannon Snyder

## **City Manager**

Thomas Barwin

Neighborhood and Development Services  
Neighborhood Services Division  
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