

COMMUNITY DEVELOPMENT BLOCK GRANT



CITY OF SHREVEPORT
2023 Notice of Funding Availability (NOFA)
Community Development Block Grant
(CDBG)

CITY OF SHREVEPORT
2023 Notice of Funding Availability (NOFA)
Community Development Block Grant (CDBG)

CFDA Number: 14.218
Federal Award Number:

DEPARTMENT: Community Development
ACTION: Notice of Funding Availability (NOFA) Guidelines
DATE ISSUED: **TUESDAY, MAY, 30, 2023**
DEADLINE: **TUESDAY, JUNE 20, 2023, BY 4:30 P.M.**

INTRODUCTION AND AUTHORITY

This NOFA announces the availability of funding under CDBG to community based, not-for-profit or governmental entities that implement programs and/or projects addressing designated **services** for the youth and children, elderly, homeless services, and economic development which are limited to the City of Shreveport.

THE COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

Purpose & Authority

The purpose of the Community Development Block Grant Program (CDBG) is to develop viable urban communities by providing decent housing and a suitable living environment, and by expanding economic opportunities, principally for low- and moderate-income persons.

Funds for this program are allocated by the United States Department of Housing and Urban Development (HUD). Funding is contingent upon the approval of the HUD budget. The CDBG program is authorized by the Housing and Community Development (HCD) Act of 1974. Regulations governing this program can be found at 24 CFR 570.

HUD National Objectives

HUD's three national objectives are:

1. Benefit to low- and moderate- income (LMI) persons;
2. Aid in the prevention or elimination of slums or blight; and
3. Meet a need having a particular urgency (referred to as urgent need).

THE CONSOLIDATED PLAN

The City will only consider funding projects which are consistent with the *Consolidated Strategy Plan (CSP)*. The CSP is a five-year planning document required by HUD that determines priorities, establishes strategic goals, and allocates resources through an Annual Action Plan for various projects and initiatives. Projects selected under this Annual Action Plan will be retroactive beginning January 1, 2019. The CSP is located on the City's website at www.shreveportla.gov.

SUBMISSION DEADLINE & REQUIREMENTS

Submission Deadline

The City of Shreveport, Department of Community Development, must be in receipt of the proposal complete with all attachments, on or before **Tuesday, June 20, 2023 by 4:30 p.m.**

Proposals must be complete at the time of submission. No addendum or supplement will be accepted after the deadline

date for submission of proposals.

The City has the right to extend the submission deadline should such extension be in the interest of the city. Proposers have the right to revise their proposals in the event the deadline is extended.

Submission Options

OPTION 1- ELECTRONIC SUBMISSION: Respondents may submit one (1) complete electronic copy (PDF format only) of their submission via email to the Department of Community Development (cdproposals@shreveportla.gov), with a subject line entitled:

2023 CDBG – PS -NOFA

ORIGINAL APPLICATION DOCUMENTS SHOULD BE RETAINED, AS THEY MAY BE REQUESTED FOLLOWING ELECTRONIC SUBMISSION.

OPTION 2- HAND DELIVERY: One original and two (2) copies of application and all attachments may be hand delivered to the attention of Ms. Bonnie Moore, Director, Department of Community Development, 300 Douglas Street (First Floor), Shreveport, LA 71101, (318) 673-5900.

Applicants who physically deliver their application must have their application logged in. Under no circumstances should any applicant leave a proposal at the office without completing the required log-in procedure.

OPTION 3 – U.S. MAIL: One original and two (2) copies of application and all attachments may be mailed to Post Office Box 31109, Shreveport, LA 71130, ATTN: Ms. Bonnie Moore, Director. Mailed submissions must be received on or before the deadline.

Applicants who mail proposals should do so by certified mail, return receipt requested, or through overnight mail services, allowing enough time for the proposal to be received by the deadline date and time.

For additional information, please contact Ms. Cathy Mitchell, Grant Administrator at (318) 673-5900 or cathy.mitchell@shreveportla.gov

Application Format

Each organization is limited to one proposal submission. All applications must be completed using the forms supplied with this NOFA. Please only submit materials that have been requested. **Any application not following the prescribed format will not be considered for funding.** The City of Shreveport reserves the right to request additional information pursuant to this application.

DISCLAIMERS

All proposals submitted become the property of the City of Shreveport. By submittal of a proposal, applicant acknowledges that all proposals may be considered public record in accordance with the Public Records Law of the State of Louisiana. Subject to award of this contract, all or part of any submittal may be released to any person or firm who may request it. Therefore, Respondents shall specify in their proposal response if any portion of their submittal should be treated as proprietary and not releasable as public information. Proposers should be aware that all such requests may be subject to legal review and challenge. Any information considered proprietary should be indicated as such or not included in the response.

Submission of a proposal does not commit the City of Shreveport to award a contract or to pay for any costs incurred in the preparation of a proposal. The City of Shreveport reserves the right to reject any proposal.

The city will not fund an organization or agency with outstanding disallowed costs, defaulted loans, debarment actions or

any other legal encumbrance, regardless of the merits of the submitted proposal.

Future public service grant opportunities are not guaranteed and should not be relied on to support continued program activities. Awards will not be granted if there are open contracts or a funded project has not been successfully completed.

VIRTUAL WORKSHOP

An informational workshop will be held at a date and time to be determined. Instructions for joining the virtual workshop will be posted on the City of Shreveport's Department of Community Development's website. Interested organizations are strongly encouraged to participate in the workshop. The workshop is not mandatory, but applicants will be held responsible for all information presented.

AMENDMENTS

If it becomes necessary to revise any part of the NOFA, all amendments will be provided in writing to all applicants as well as posted to the Department of Community Development's webpage located at www.shreveportla.gov.

Requests for additional information related to this NOFA must be made in writing and directed to Cathy Mitchell, Grant Administrator at cathy.mitchell@shreveportla.gov.

MANDATORY REQUIREMENTS

Eligible Applicant(s)

- Governmental entity or a nonprofit organization established by the IRS as a 501(c) 3 organization.
- Applicant entity must be in existence for at least one year.
- Applicant must have at least one year of demonstrated experience providing the service outlined in their proposal.

Targeted Neighborhoods

All projects funded under this NOFA must be located in one of the 19 CDBG Targeted Neighborhoods which include the following:

Queensborough, Ledbetter Heights, Martin Luther King, Allendale, Lakeside, Ingleside, Mooretown, Stoner Hill, Cedar Grove, Greenwood Acres, Hollywood, Reisor, Solo Hood, Waterside, Caddo Heights, Werner Park, Sunset Acres, Cherokee Park, and Highland.

(A map and description of the Targeted Neighborhoods is attached to this proposal)

Equal Opportunity Clause

Applicants may not discriminate on the basis of race, gender, nationality, ethnicity, religion, creed, or disability.

Conflict of Interest

No employee, board member, officer, agent, consultant, elected official, or appointed official of the recipients or sub-recipients that are receiving funds under a CDBG-assisted project who have responsibilities with respect to the CDBG activities or are in a position to participate in decision making processes or have access to inside information with regard to the activities, can obtain a financial interest or benefit from a CDBG assisted activity during their tenure or for one year thereafter (Federal Regulation 24 CFR 570.611). Agencies should maintain a written code of standards of conduct governing the purchase of materials, product, supplies, services, and awarding and administering sub-recipient contracts.

Applicants are also responsible for determining that there will be no conflict or violation of the Louisiana Ethics Code (La. R.S. 42:1101, *et seq.*) if their company is awarded the contract. Ethics issues are interpreted by the Louisiana Board of Ethics.

Low-to-moderate Income Household

Your project MUST benefit low to moderate income persons. The term “low and moderate income” shall be defined as at or below 80% of the median income adjusted for family size for the area as defined in Section 102 of the Housing and Community Development Act of 1974, as amended. Low- and moderate-income household means a household having an income equal to or less than the Section 8 low-income limit established by HUD.

2023 HUD INCOME GUIDELINES		
Family Size	Very Low (50%)	Low (80%)
1	\$24,300.00	\$38,850.00
2	\$27,750.00	\$44,400.00
3	\$31,200.00	\$49,950.00
4	\$34,650.00	\$55,450.00
5	\$37,450.00	\$59,900.00
6	\$40,200.00	\$64,350.00
7	\$43,000.00	\$68,800.00
8	\$45,750.00	\$73,200.00

NOTE: The above limits became effective on May 15, 2023. All CDBG recipients will be required to update any forms used to collect beneficiary information in accordance with FY 2023 guidelines..

Cost Elements

All costs for the project shall be aligned with the Office of Management and Budget (OMB) Cost Principles located 24 CFR Part 200. The cost must be allowable, allocable, necessary, and reasonable.

Match Requirement

Applicant is required to furnish proof of match funding in the amount of twenty-five (25%) percent of the total project cost. Supporting documentation as proof of match funding must be submitted with this application and may include invoices, receipts, paystubs, earning statements, cancelled checks, credit card statements or bank statements.

Leveraging Resources

Applicant must demonstrate and document the ability to secure resources beyond those provided under this grant award, including private, other public, and mainstream resources.

Leveraging resources may include cash, cash equivalent (i.e., other federal, state and local grant awards) and in-kind contributions, such as services, donations or equipment.

Timeline

All contracts and applicable attachments must be executed no later than 15-days after notification of grant award.

Insurance

Applicants must provide proof of insurance available upon notification of funding. Coverage must be in the amounts and coverage types required by the City, must name the City as an additional insured, must provide for a full waiver of subrogation and must be in full force and effect at all times. Insurance policy limits as required by the City of Shreveport are provided for in the attached document entitled “City of Shreveport Insurance Requirements and Instructions”. **Final execution of any funding agreement under this application is contingent upon review and final approval of all insurance policies by the City of Shreveport’s Department of Risk Management.**

Outstanding Obligations to the City

All outstanding fees, fines and costs due to the City must be satisfied prior to final execution of any agreement for funding. For questions about your status please contact the City of Shreveport’s Compliance Department at (318) 673-5900.

PROJECT SUMMARY & COVER SHEET

Legal Name of Agency _____

Agency Address _____

Amount Requested \$ _____ Amount of Matching Funds \$ _____

Name of Project _____

Project Description _____

Targeted Neighborhood _____

Project Address: _____ Council District: _____

Contact Person: _____

Telephone Number: _____ Email Address: _____

Tax I.D. Year of 501 (c)(3) _____ Tax I.D. Number _____

Unique Entity Identifier (UEI) Number: _____

**** NOTE – The Federal government stopped using DUNS numbers on April 4, 2022 which was replaced by the Unique Entity Identifier (UEI) Number. UEI numbers are required for all organizations receiving or applying to receive federal funds and can be obtained from www.sam.gov**

IDENTIFICATION OF A NATIONAL OBJECTIVE

To be eligible for funding, the project and/or activity for which you are requesting funding must address one national objective. Please check all that apply.

- The project meets the needs of low- and moderate-income persons. At least 51 percent of the participants or beneficiaries of the program must meet the low- and moderate-income guidelines.
- The project is located in a low- and moderate-income area. In this case, the project must meet the needs of the residents of one of the targeted neighborhoods identified below.
- The project targets the needs of one of the following specific groups of people only (low-mod limited clientele): abused children, elderly persons, battered spouses, homeless persons, severely disabled persons and illiterate adults.
- This project provides housing assistance to low- and moderate-income households.
- This project creates or retains jobs for low- and moderate-income persons.
- The project described eliminates specific instances of blight or physical decay.

PROJECT TYPE

The City is in search of innovative programs that are effective and can be replicated throughout the City. Please select the type of activity/project/program for which you are requesting funds. **ADMINISTRATIVE COSTS ARE NOT ELIGIBLE UNDER THIS NOFA.**

PUBLIC SERVICES (Includes labor, supplies and materials)		
Please check (✓) all that apply.	✓	✓
Elderly Services		Employment Training
Handicapped Services		Crime Awareness/Prevention
Legal Services		Fair Housing Activities
Youth Services		Tenant/Landlord Counseling
Health or Mental Health Services		Child Care Services
Mental Health Services		Youth Programming
Neighborhood Cleanups		Food Banks
OTHER CDBG ACTIVITIES		
Please check (✓) all that apply.		✓
Special Economic Development Activities	Assistance to a private, for-profit businesses in the form of technical assistance, economic development services and job training to enhance employability of low-moderate-income individuals.	
Fair Housing	Provision of fair housing service and fair housing enforcement, education, and outreach.	
Interim Assistance	Interim assistance to areas experiencing physical deterioration and for which permanent improvements will be undertaken as soon as practicable. Activities may include the repair of parks and playgrounds, the removal of garbage trash and debris and neighborhood cleanup campaigns.	

An applicant may earn bonus points for projects and activities with a tieback or component dedicated to blight elimination in the City of Shreveport.

IDENTIFICATION OF OUTCOME & PERFORMANCE MEASURES

HUD has established an outcome-based performance measurement system. Outcome and performance measures are an organized process for fathering information to determine how well programs and activities are meeting established needs and goals.

Performance Objectives

All of the activities funded must identify one of the following performance objectives. **PLEASE CHECK ONLY ONE BOX THAT BEST APPLIES TO YOUR PROJECT'S OBJECTIVES**

- Creating suitable living environments - In general, this objective relates to activities that are designed to benefit communities, families, or individuals by addressing issues in their living environment which may include but is not limited to blight, crime, literacy, etc.

- Creating economic opportunities - This objective applies to the types of activities related to economic development, commercial revitalization, or job creation.

Performance Outcomes

Program outcomes help to capture the nature of the change or the expected result of the objective that a subrecipient seeks to achieve. Outcomes correspond to the question “What type of change or result am I seeking?” **PLEASE CHECK ONLY ONE BOX THAT BEST APPLIES TO YOUR PROJECT’S OUTCOMES**

- Availability/Accessibility.** This outcome applies to proposals that make services, infrastructure, housing, shelter or jobs available or accessible to extremely low- and low/moderate-income people, including persons with disabilities.
- Affordability.** This outcome applies to proposals which provide affordability in a variety of ways in the lives of extremely low-, very low- and low/moderate- income people.
- Sustainability/Promoting Livable or Viable Communities.** The outcome applies to proposals that are aimed at improving a community or neighborhood by helping to make it more livable or viable by providing a benefit to principally extremely low-, very low- and low/moderate-income people.

Listed below are examples of objective and outcome statements. Statements should relate to the eligible activities as well as the objective identified for your proposed program or activity.

- Through this tutoring program, 20 youth will have greater **accessibility** to higher education opportunities.
- Through this job training activity, 150 individuals will gain marketable skills which will make them more employable and **create greater economic opportunities** for the purpose of **sustaining and promoting viable communities**.

In your own words provide a brief objective and outcome statement relative to your proposed program or activity. Provide the performance objectives proposed by your program or activity as well as the desired performance outcome(s) you intend to achieve. You may identify multiple outcomes.

APPLICATION CERTIFICATION

By my signature below, I certify and acknowledge that:

1. I am authorized to submit this application on behalf of the named organization;
2. The information provided herein is true and correct.
3. Any funds approved under this proposal shall be used solely in accordance with the uses described herein;
4. Any misrepresentation or intentional omission of information that leads to the improper allocation and expenditure of public funds may result in legal action against the organization for retrieval of any such funds as well as any applicable or appropriate penalties as provided for under local, state or federal laws and regulations.

SIGNATURE

TITLE

NAME OF AUTHORIZED REPRESENTATIVE

DATE

APPLICATION OUTLINE

Your application must be formatted as outlined below. **Proposals that are not submitted in the following format will not be reviewed.** This section shall not exceed six double spaced pages in 12 font, Time New Roman. The application outline must address ALL of the following items and subcategories listed below:

Project Summary and Narrative: (25 pts)

1. Describe how the proposed project will meet HUD's national objective of benefiting low-moderate income persons and families.
2. Briefly explain how your proposed project fits into one of more of the project types identified above.
3. Provide a summary of the project activities, services to be provided, and how they will be accomplished.
4. Describe how you will reach out and market to the targeted beneficiaries of your project.
5. Provide a clear and concise timeline for commencement, implementation, and completion of the proposed project.

Project Performance Measures (25 pts.)

1. Clearly define and document the extent of the need or problem to be addressed by the proposed project or activity.
2. Describe how you will measure the success of the project, including the positive outcomes, the projected number of households or individuals to be served, the accomplishments you intend to achieve and the anticipated changes and benefit to the community and the City of Shreveport.
3. Provide a brief description of the client target population to be served by the project, the total number of people to be served and a brief description of the potential beneficiaries' age, ethnicity, gender and any other relevant characteristics.
4. Describe the specific tools and methods to be used to track and record low-moderate income participant eligibility (including income and demographics), and your procedure for verifying their residence within the City limits of Shreveport.

Applicant Capacity (25 pts.)

1. Describe your organization, your purpose, mission, and goals.
2. Describe the agency's qualifications, and the extent to which you have the organizational resources necessary to successfully implement the proposed activities in a timely and efficient manner.
3. Identify and describe each staff member who possesses knowledge and experience in your proposed program or activity. (Resumes NOT required).
4. Provide relevant experience in managing federal grants or similar programs.

5. Describe all good faith efforts made to secure participation from minority and women owned business.
6. Provide a list of accomplishments and previous projects for the previous twelve (12) months.

Financials & Budget Narrative (25 pts.)

1. Please complete the budget chart on the following page. Identify the proposed project’s cost estimates, leverage of funds, matches from other grants and a brief explanation of each line item supported by grant funds including the need, usage and benefit to the program.
2. Describe your organization’s fiscal management disbursement methods, financial reporting, recordkeeping and accounting procedures.
3. Provide the names of your organization’s accountant/financial staff.
 - a. *Note – all organizations receiving over \$25,000 must have a certified bookkeeper responsible for its financial management.*
4. Provide sufficient supporting documentation showing proof of match funding amounts including signed letters of commitment for each funding source. The individual signing all letters of commitment must identify their authority to commit the resources necessary to provide funding to your organization.
5. Demonstrate and document all resources leveraged and secured beyond those provided under this grant award, including private, other public, and mainstream resources. Leveraging resources may include cash, cash equivalent (i.e., other federal, state and local grant awards) and in-kind contributions, such as services, donations or equipment. **Please be sure to include supporting documentation of your resources.**

BUDGET CHART ON THE FOLLOWING PAGE.

BONUS POINTS – Blight Elimination Component (15 pts.)

An applicant may earn bonus points for projects and activities with a tieback or component dedicated to blight elimination in the City of Shreveport. This tieback or component must be clearly identified and described and must be feasibly incorporated into the overall project or activity.

CDBG BUDGET FORM

ORGANIZATION NAME:

PROJECT NAME:

PROJECTED EXPENDITURES AND BUDGET

Category	CDBG (\$)	Match (\$)	Total (\$)	Details and Explanation
Operating Costs (list fully)				
Insurance Costs				
Supplies				
Other Expenses (List)				
TOTAL	\$	\$	\$	

SELECTION PROCESS

Minimum Review Standards

1. Applicant eligibility. The applicant must be a nonprofit organization (IRS 501(c)(3) tax exempt status), and must have at least one year of experience in a related area.
2. To be eligible for CDBG assistance, a project or activity must be either a new service or a quantifiable increase in the level of an existing service above that which has been provided in the 12 calendar months before the submission of the application.
3. The population to be served must meet the eligibility requirements identified herein.
4. The activities for which assistance is requested must be consistent with the national objectives of the CDBG program.
5. The applicant must furnish and provide proof of at least a 25% match.

Core Selection Criteria

CATEGORY	POSSIBLE POINTS
PROJECT SUMMARY AND NARRATIVE The project meets one of HUD’s national objectives, clearly defines the project, activity or services to be provided and provides a clear timeline for implementation and completion of the project.	25
PROJECT PERFORMANCE MEASURES Proposal provides a clear need to be addressed, a full summary of the target population to be served, the accomplishments to be achieved and the anticipated changes to the community. All project goals are clear, measurable and specific to realistic outcomes. Number of beneficiaries to be served is reasonable in correlation to the funding request.	25
APPLICANT CAPACITY Proposal shows ability to undertake the project. Applicant shows history of effective program management.	25
FINANCIALS & BUDGET NARRATIVE Proposed expenditures are reasonable. Project is not totally dependent on City of Shreveport’s CDBG funding. Other funding sources and amounts are clearly identified. Project appears cost-effective regarding service and community need. Program is able to sustain itself without future years CDBG funding.	25
BONUS: Blight Elimination Component/Tieback	15
TOTAL POSSIBLE POINTS	115

APPLICANTS WITH A TOTAL AVERAGE SCORE OF LESS THAN 75 POINTS WILL NOT BE CONSIDERED FOR FUNDING.

Additional Selection Criteria

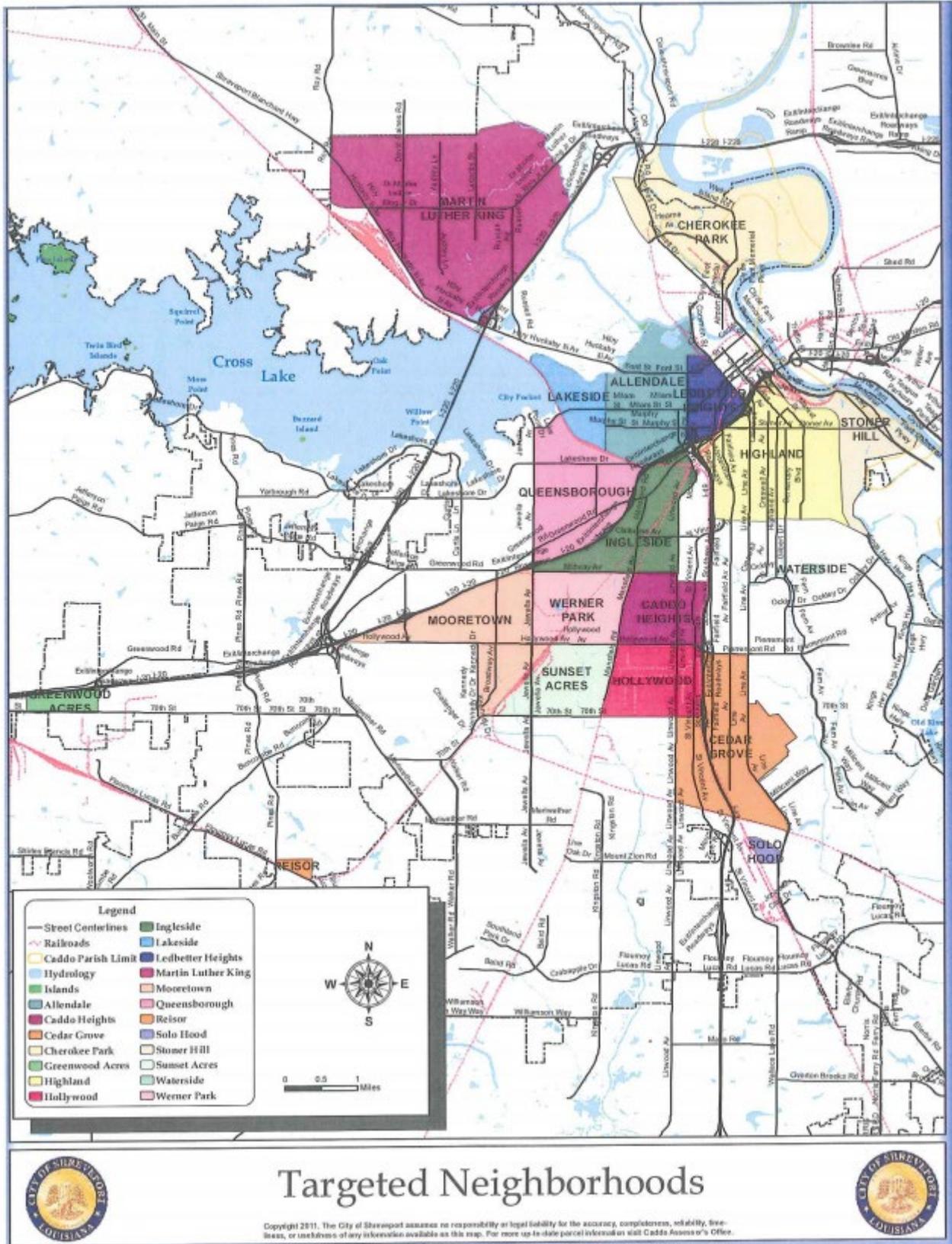
Agencies who have received prior funding from the Department of Community Development (DCD) will also be evaluated on past performance in carrying out programmatic activities and contractual compliance. Factors such as agency ability to meet service delivery goals, timely expenditure of funds, timely reporting, accuracy of reporting, ability to meet audit requirements, and other programmatic and fiscal contractual requirements will be considered. **All unresolved monitoring findings must be cleared prior to applying.** These other factors will be considered in conjunction with the proposal score in developing an overall recommendation for agency funding.

Incomplete proposals will not be reviewed.

CHECKLIST OF DOCUMENTS & ATTACHMENTS

NAME	DESCRIPTION	(✓)
Project Summary & Cover Sheet	Please complete all sections and sign	
Affidavit of No Adjudicated Property	Must be completed, executed, and notarized.	
Authorizing Resolution	<p>Please provide names of all parties have signature authority relative to this grant and application. Sample included below, however your organization may provide its own form document.</p> <p><i>*Note: This authorization will remain in effect at all times until delivery of written revocation to the City of Shreveport.</i></p>	
Certificate of Insurance	Instructions provided.	
Felony Conviction Affidavit	Must be signed by authorized representative	
Most Current Financial Statements or Audit	Not to exceed two (2) years old.	
Proposed Project Budget	Complete chart above.	
Proof of Match Funding	The individual signing all letters of commitment must identify their authority to commit the resources necessary to provide funding to your organization.	
Listing of Board of Directors and their affiliations		
List of Staff Members and Positions		
A copy of your current IRS tax exempt statement	Must evidence that you are not a private Foundation and should include an explanation of any changes to your IRS status.	
<p align="center">ALL ORIGINAL DOCUMENTS SUBMITTED ELECTRONICALLY MUST BE RETAINED AND SHALL BE PROVIDED AT ANY TIME UPON REQUEST BY THE CITY OF SHREVEPORT.</p>		

MAP OF TARGETED NEIGHBORHOODS



Targeted Neighborhoods

Copyright 2011. The City of Shreveport assumes no responsibility for the accuracy, completeness, reliability, fitness, or usefulness of any information available on this map. For more up-to-date parcel information visit Caddo Assessor's Office.





AFFIDAVIT

**ATTESTING THAT ENTITY OR PERSON
DOES NOT OWN ADJUDICATED OR LIEN PROPERTY AND
DOES NOT OWE OUTSTANDING DEBT TO CITY**

**** This affidavit is submitted to document compliance with Shreveport City Code 26-211. ****

BEFORE ME, the undersigned Notary Public duly qualified and commissioned, came and appeared

(Name) _____ authorized representative of:
(Business Name) _____ with a Federal Tax Identification Number (EIN) of:
(Tax ID) _____ and with a current email address of:
(Email Address) _____ who does hereby state as follows, to-wit:

- 1 Business Entity or Person does not own any property which is adjudicated to the City of Shreveport, Louisiana or which has demolition liens, grass cutting liens, or any other Property Standards liens on it. For purposes of this subsection, the term "own" shall mean to be the last record owner of the property prior to a tax sale or adjudication.
- 2 Business Entity or Person does not own more than twenty-five percent (25%) of a legal entity that owns any property which is adjudicated to the City or which has demolition liens, grass cutting liens, or any other Property Standards liens on it.
- 3 Business Entity or Person has paid all taxes, licenses, fees, fines and other charges which are outstanding and due to the City. E.g. false alarm fees, property standard fines, over-due water bills.
- 4 Business Entity or Person will provide written notification to the City's Purchasing Agent no later than the next work day after any of the above statements becomes invalid.
- 5 Upon request of the Purchasing Agent the City reserves the right to require a newly dated/issued Affidavit.

BY: _____
Printed Name: _____
Title: _____

SWORN TO AND SUBSCRIBED BEFORE ME, this ____ day of _____, 20 ____.

Notary Public

Notary Identification Number or LA Bar Roll Number

Mail original affidavit via U.S. mail to: *OR* Deliver via other carrier or hand-delivery to:
Purchasing Division Purchasing Division
P.O. Box 31109 | Shreveport, LA 71130 505 Travis St., Suite 610 | Shreveport, LA 71101

Affidavit must be on file in the Purchasing Office before a contract, purchase order or check is issued.

** Form Revised 05-17-2021 **

AUTHORIZING RESOLUTION

BE IT RESOLVED by the Board of Directors or Members of _____, an entity organized and existing under the laws of the State of _____ and domiciled in, _____ that _____ is hereby authorized to sign any and _____
(Name of Authorized Party)
all contracts and/or agreements with the City of Shreveport and to do any and all things necessary to execute the contracts and/or agreements on behalf of this corporation.

That I, _____, _____, hereby
(Name) (Position of Authority)

certify that the above and foregoing resolution is a true and correct copy of a resolution of the Board of Directors of this corporation which was passed at a meeting duly called on _____, 20 _____ at which a quorum was present.

This resolution has been entered into the records of this corporation, has not been rescinded or modified and remains in full force and effect on this date.

It is acknowledged by Signer that this Resolution shall remain in full force and effect, and the City of Shreveport may rely on it until written notice of its revocation is delivered to and received by the City via certified mail to the Department of Community Development, P.O. Box 31109, Shreveport, La 71130, ATTN: Director.

Dated this _____ day of _____, 20 _____.

WITNESSES:

1) _____ Signature: _____

Print: _____ Print: _____

2) _____ Federal Tax I.D. # _____

Print: _____

IF YOUR COMPANY IS NOT A CORPORATION SIGN ABOVE AND COMPLETE BELOW:

Company Type (Select One) LLC Sole Proprietorship

CITY OF SHREVEPORT
INSURANCE REQUIREMENTS and INSTRUCTIONS

Unless waived by the Risk Manager for the City of Shreveport, evidence of all appropriate and applicable insurance coverage carried by the firm, agency or organization during the full term of any contract or agreement.

Funding recipients and contractors shall furnish the City of Shreveport with certificates of insurance showing that the following insurance is in force at all times. Each certificate must name the organization or agency contracting with the city as the policy holder and should contain the following coverages and limits of liability:

Commercial General Liability Insurance - in an amount not less than a combined single limit of \$1,000,000 per occurrence and \$1,000,000 annual aggregate. It is the intent of the **City** that the policy coverage should not be limited by an annual aggregate limitation. If this policy is to be limited by an aggregate annual limitation, the aggregate limitation shall not be less than \$2 Million otherwise **Subrecipient** must provide a \$1,000,000 per project aggregate applicable for the project specified in this agreement.

Commercial Auto Liability Insurance - including hired, rented or non-owned automobiles, in an amount not less than \$500,000 combined single limit.

Workers' Compensation Insurance - as required by the laws of the State of Louisiana and Employer's Liability Insurance in a minimum amount of \$1,000,000. This policy shall contain an Other States Coverage Endorsement. When required by the **City**, this policy shall also be endorsed to include coverage required by the United States Longshoreman and Harbor Workers' Compensation Act and Maritime Coverage. The certificate of insurance required by section C, below, must have the following statement shown in the remark section: This policy for workers' compensation protects all members of the insured organization, including an employer a sole proprietor, a partner or bona fide officer of the insured organization, and all employees.

IN ADDITION TO THE ABOVE, THE FOLLOWING REQUIREMENTS MAY APPLY TO PUBLIC FACILITIES AND/OR CONSTRUCTION PROJECTS FOLLOWING AN ASSESSMENT BY THE CITY OF SHREVEPORT'S RISK MANAGER.

Builders' Risk Insurance - for the mutual benefit of the Vendor/Contractor and the City, to be provided in a reporting policy form or other form acceptable to the City. This policy shall be written on an "all-risk" basis providing coverage for the building structure and construction machinery and equipment. This policy shall be endorsed to name the City as an additional insured.

Performance Bond - issued by a qualified Surety in favor of **City**, as obligee, which guarantees that **City** will be indemnified for any loss occurring from the failure of **Contractor**, as obligor, to perform the work according to the Agreement, plans and specifications. This bond shall be in an amount equal to 100% of the Agreement amount. This bond will be required on any agreement amount exceeding \$50,000. This bond will be waived on any agreement amount less than \$50,000 providing the aggregate amount of any such Agreements concurrently in effect does not exceed \$50,000. Any agreement which causes the aggregate amount to exceed \$50,000 will be bonded for the entire amount of the agreement in question. This bond will be waived on any agreement amount less than \$7,000, regardless of the aggregate amount on any such agreements concurrently in effect. There will be no more than three (3) agreements concurrently in effect for any one (1) contractor.

Payment Bond - issued by a qualified Surety in favor of City, as obligee, which guarantees that bills incurred Contractor, as obligor, for labor and materials will be fully paid at the completion of the project. This bond shall be written in an amount equal to 50% of the Agreement amount. This bond will be required on any agreement amount exceeding \$25,000. This bond will be waived on any agreement amount less than \$25,000 providing the aggregate amount of any such

- 6) If any part of the services specified by this agreement is sublet, similar insurance shall be provided by or on behalf of the subcontractor to cover their operations, and evidence of such insurance, satisfactory to the **City**, shall be furnished to the **City** by **Subrecipient**.
- 7) The payment of any deductible specified by such insurance policies shall be the responsibility of the Contractor and will be paid solely by the Contractor. If any of the insurance policies referred to above do not have a flat premium rate and such premium has not been paid in full, such policy must have a rider or other appropriate endorsement or waiver sufficient to establish that the issuer of the policy is entitled to look only to the Contractor for premium payment and has no right to recover premium payment from the City.

FOR QUESTIONS RELATED TO INSURANCE COVERAGE REQUIREMENTS FOR YOUR SPECIFIC PROJECT, PLEASE CONTACT THE CITY OF SHREVEPORT'S RISK MANAGEMENT DIVISION AT (318) 673-5540.



CRIMINAL CONVICTION CERTIFICATION

The Department of Community Development is required to conduct criminal record checks for all contractors. The department can deny participation in any of its programs based upon an individual's conviction.

Have you ever been convicted or pled no contest to a felony within the last ten years?

Select One: Yes No

IF YOU ANSWERED YES, PLEASE ANSWER THE FOLLOWING QUESTIONS:

Supply the following information:

- What was the specific crime(s)?
- What was the date of the conviction(s)?
- Where (city and state) did the crime(s) occur?
- In what court(s) were you convicted?
- Provide any other facts you consider important relative to the conviction(s) by attaching additional page(s) if needed.

I certify that my answers are complete and accurate to the best of my knowledge. I understand that failure to provide this information or concealment or misrepresentation of information may result in denial of participation in any program administered by the department of Community Development.

Furthermore, I understand that if I am convicted of a felony or misdemeanor at ANY time during my contract, I am obligated to notify the department of the conviction. Failure to do so will result in removal or suspension from participating in the program.

Printed Name

Signature

Community Development: Criminal Conviction Certification

Date

form CDADM- 7