

COMPLETE AND RETURN THE FOLLOWING APPLICATION PAGES WITH THE REQUIRED ATTACHMENTS

**THANK YOU FOR YOUR COOPERATION! GOOD LUCK!!
APPLICATIONS DUE NO LATER THAN 4:00 p.m. ON May 20, 2016 IN
THE PICKAWAY COUNTY COMMISSIONER OFFICE**

**PICKAWAY COUNTY
FY2016 CDBG COMMUNITY DEVELOPMENT PROGRAM AND
COMPETITIVE SET – ASIDE PROGRAMS**

Please read Section 5 if you are applying for a Competitive Set – Aside Program

PROGRAM APPLYING FOR: [Community Development Program](#)

1. APPLICANT INFORMATION:

- a. Name of Applicant: [Village of Ashville](#) Phone # [740 983 7132](#)
E-mail Address: fchristman@ashvilleohio.gov Fax # [740 983 4703](#)

Address: [200 East Station Street, P.O. Box 195, Ashville, Ohio 43103](#)
- b. Contact Person: [Franklin Christman or David Ballard](#) Phone # [740 983 7132](#)
E-mail Address: fchristman@ashvilleohio.gov Fax # [740 983 4703](#)
Office Phone # [740 983 6367](#) E-mail Address: dballard@ashvilleohio.gov

Address: [200 East Station Street, P.O. Box 195, Ashville, Ohio 43103](#)
- c. Are you a public service group or a non-profit entity? Check: ___Yes___No
IF YES, attach a copy of: (1) constitution and by-laws, (2) year-end income and expense report, and (3) 501(c) (3) designation form.

2. PROJECT INFORMATION:

- a. Describe project Activity. Specify Outcome measurements.
Photographs and letters of support helpful. ***Exhibit A***
>Activity Name: [Village of Ashville Center Alley Resurfacing Improvement Project](#)
[Priority Two \(2\)](#)
>Measurable Outcome: [Street = 855 LF of roadway resurfacing, 14 LF average pavement width.](#)
(Please use LF for streets/sidewalks. State does not use CY or SF)
>Activity meets which National Objective? [Yes LMI](#) ***Exhibit B***
>Describe what your activity is and **why** it is needed. Attached sheet if necessary.

[This project will correct serious paving and elevations issues on Center Alley. This section of pavement is severely deteriorated \(see attached photos, Exhibit A\) and will require full-depth pavement replacement if it is allowed to continue to deteriorate. The milling and overlay of this pavement will increase vehicular safety.](#)

b. Will you need to acquire easements or property to complete this project?

YES_____ NO__X___ If yes, please explain:

Is this property occupied residents/tenants? YES_____ NO__X___

c. Who provided the Project Cost Estimate?

Agency/Company: Pomeroy & Associates, Ltd.
Contact Name: Christopher M. Tebbe, P.E.
2550 Corporate Exchange Drive, Suite 10
Columbus, Ohio 43231
Phone: 614-885-2498 Fax: 614-885-2886
E-mail: ctebbe@pomeroyassoc.com

Exhibit C

Labor: (Use Federal Prevailing Wage Rates)	\$ 25,293.40
Materials:	\$ 37,940.10
Subtotal	\$63,233.50
Cost of Project:	\$ 63,233.50
Engineering or Architectural Fees:	\$ 3,161.68
**Total cost of Project with A/E Fees:	** \$66,395.18

(ATTACH AN ORIGINAL SIGNED, CERTIFIED COST ESTIMATE FROM ENGINEER/ARCHITECT/CONTRACTOR/SUPPLIER ON THEIR LETTERHEAD. PUT ON THE CONSTRUCTION/REHAB ESTIMATES: "PROPOSED PROJECT TO MEET OR EXCEED STATE BUILDING CODE. DAVIS-BACON PREVAILING WAGE RATES TAKEN INTO CONSIDERATION." STREET ESTIMATES MUST HAVE USEFUL LIFE CERTIFICATION.)

d. Please identify all funds to be committed to this project:

1. What is your CDBG grant Request?	\$ 57,694.00
1. Are you providing any matching funds? If so, how much and from where?	\$ 8,701.18
2. Source 1: 1000-670-399-0000	\$ ***
Source 2: 1000-670-690-0000	\$ ***
Source 3: 2101-610-396-0000	\$ ***
Source 4: 1000-930-930-5001	\$ ***
**Total:	**\$ 66,395.18

**These totals must be the same!!

***These Fund Accounts would be used as part of the \$5,701.18 Total

(ATTACH COMMITMENT LETTERS FOR MATCHING FUNDS.)

Commitment Resolution and Certification of Funds

Exhibit D

e. Will City, Village, Township, or County employees perform work on this project?
 YES NO

If yes, will the employees be paid from the CDBG grant? YES NO

Describe the work to be performed by City, Village, Township, or County employees:
Inspection of project value \$10,000.00

3. PROJECT BENEFIT INFORMATION:

a. What is the (or nearest) STREET ADDRESS of the project?
(Attach LEGIBLE project site map.) 24 Main Street West and 99 Long Street, Ashville
Exhibit A

b. What is the project service area?
Center Alley between Main Street West and Madison Avenue.
(Attach map indicating location of proposed project beneficiaries).
Exhibit A

c. Who will benefit from this project?
Directly residents and businesses that are located on or use Center Alley. The Pickaway Library - Younkin Branch uses this alley as an exit. Indirectly all residents that are on the Westside of Ashville.
Exhibit B & E

d. What are the number of **households** and number of **persons** to benefit?
Direct
Persons: 920 see attached 2010 Persons in Census Block Group
Households: 405 see attached 2010 Households in Census Block Group
Exhibit E
Indirect – Entire Ashville Population and Households
Persons: 4,097 see attached 2010 Persons in Census Tract
Households: 1,598 see attached 2010 Households in Census Tract
Exhibit E

e. Has an income survey been done for the project area: YES NO
(SUBMIT SURVEYS AND INCOME SURVEY SUMMARY)

4. SITE INFORMATION:

a. What is the “year built” of any structures to be affected? NA

b. Does your project affect an historic property (50 years of age or older) or is your project a historic district? YES NO

c. Is your project located in a floodplain? YES NO
If yes, explain/describe and provide the FEMA Floodplain Panel Number:
Exhibit F

d. Will any assessments or fees (i.e., water or sewer line hook-up, etc.) be charged as part of this project? YES NO
If yes, please explain

e. Please indicated the Census Tract(s) and Block Number(s) of the project site:

Direct		Persons	Households
Census Tract: 021200	Block Group: 1-094	43	21
Census Tract: 021200	Block Group: 3 partial	132	58 LMI
Census Tract: 021200	Block Group: 4 partial	164	62

Exhibit B

Indirect Ashville		Persons	Households
Census Tract: 021200	Block Group: 1	2,102	808
Census Tract: 021200	Block Group: 2	283	149
Census Tract: 021200	Block Group: 3	788	347 LMI
Census Tract: 021200	Block Group: 4	686	296

Exhibit E

5. COMPETITIVE SET – ASIDE PROGRAMS

Are you applying for any of the following?

- No Neighborhood Revitalization
- No Downtown Revitalization
- No Critical Infrastructure

If yes, make a copy of this application and use it for the Competitive Program you are applying for, as well as, the Community Development Program.

6. APPLICATION PREPARED BY:



Signature

Franklin Christman, Village Administrator
Printed name and Title

Village of Ashville
Community/Agency

200 East Station Street
Address

Ashville, Ohio 43103
Village, State, Zip

740 983 7132 Cell 740 207 1842
Phone Number

fchristman@ashvillohio.gov
Email