Housing & Neighborhood Services Grants to Blocks Program

APPLICATION

**NEIGHBORHOOD GROUP(S) INFORMATION**

Name of Applicant:

Name of Neighborhood:

Address:

City/State/Zip:

Email:

Ph.: Alt. Ph.:

**\***Please be advised that there is limited funding and completing an application does not guarantee funding. Grant funding will be provided on a first come, first served basis, until the grant funds are allocated.

**PROJECT DESCRIPTION**

Brief Description of Project: (attach plans and design)

1. Does this project involve two or more houses? Yes or No

If so, please talk to your neighborhood leader.

1. Owner or Renter (circle appropriate one)
2. Have you received Grants to Blocks funds in the past? Yes or No

Grant Amount Requested: $

Project Location (address or nearest address):

Approx. Start Date:

Approx. End Date:

All work must be completed within 60 days from start date.

60 day Action Plan for Proposed Project:

**PROJECT IMPACT**

**Goal 1: Community Benefit/Neighborhood Need** – Please describe how this project addresses an identified need, such as improving the health, safety and/or appearance of the neighborhood and will result in a benefit/positive impact for the neighborhood and community.

**Goal 2: Neighborhood Participation** – Please describe how this project is supported by the community? For example, how it will help build stronger relationships between neighbors.

**PROPOSED PROJECT EXPENSES**

Item Description Quantity Total $\_\_\_\_\_\_\_­­­­­­­­­­­­

1.

2.

3.

4.

5.

6.

7.

8.

9.

Total proposed project cost $ ­­­­­­­­\_\_\_\_\_\_\_­­­­­­­­­­­­

Maximum $5,000

**APPLICATION SUBMITAL CHECKLIST**

* Complete and sign application with budget section accurately filled out
* Location map of project
* Written authorization of the property owner, if the applicant is a renter
* Submit W-9 form
* Submit, via email, supporting digital photographs, graphics, drawings of the project, the location and examples of the expected result
* Submit before and after photos
* Wait to start until you receive letter of project approval from Housing & Neighborhood Services
* Additional demographic information such as race, ethnicity, and income will be required upon approval (this is confidential and for reporting purposes only)

**REIMBURSEMENT TERMS**

Reimbursements will not be processed until the project is approved and a letter has been issued by the City. Completed reimbursement forms with attached original receipts. Please allow 30 business days for processing. A final inspection by City Staff will be required prior to release of reimbursement funds.

\*All projects and receipts need to be submitted by June 1, 2023.

Project funds cannot be used for the following:

* Gifts of appreciation
* Expenses without receipts
* Food

**MAINTENANCE OF IMPROVEMENTS**

Maintenance of all improvements are the sole responsibility of the applicant/property owner.

**SIGNATURES**

The signatory declares that he/she is an authorized official of the applicant, is authorized to submit this application, and certifies that the information in this application is true and correct to the best of his/her knowledge.

Signature of applicant: Date:

Printed Name: Title with Organization:

Submit original application to: City of Escondido, Housing & Neighborhood Services Division ATTN: Dulce Salazar, 201 N Broadway Escondido, CA 92025