

# Kentucky Community Development Block Grant Public Facility Project Application Form Applicant Information

<b>For DLG Use Only</b>	<b>SAI Number</b>	<b>If a Project involves Water or Sewer Activities</b>
<b>20-</b>	<b>KY202007060874</b>	WRIS Number

<b>PROJECT TITLE</b> Drakesboro Natural Gas System Rehabilitation Project
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**APPLICANT**

Legal Applicant <b>City of Drakesboro</b>		CEO <b>Mike Jones</b>	E-mail Address <b>Jonesv0120@gmail.com</b>		
Street or P. O. Box <b>P.O. Box 129</b>		City <b>Drakesboro</b>	County <b>Muhlenberg</b>	State <b>KY</b>	ZIP Code + 4 <b>42337-0129</b>
Telephone Number <b>270-476-8986</b>	Fax Number <b>270-476-7714</b>	DUNS Number <b>098947757</b>	Tax ID Number <b>61-6001810</b>	SAM Number	

**JOINT APPLICANT**

Legal Applicant		CEO	Email Address		
Street or P. O. Box		City	County	State <b>KY</b>	ZIP Code + 4
Telephone Number	Fax Number	DUNS Number	Tax ID Number		

**APPLICANT'S LDA or SUBRECIPIENT- CHECK BOX IF A FAITH BASED ORGANIZATION**

Name		CEO	Email Address		
Street or P. O. Box		City	County	State <b>KY</b>	ZIP Code + 4
Telephone Number	Fax Number	DUNS Number			

**PREPARER**

Name <b>Amy Frogue</b>		Telephone Number <b>270-886-9484</b>	FAX Number <b>270-886-3211</b>		
Organization <b>Pennyrile Area Development District</b>		E-mail Address <b>Amy.frogue@ky.gov</b>		Certified Administrator Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Street or P. O. Box <b>300 Hammond Drive</b>		City <b>Hopkinsville</b>	County <b>Christian</b>	State <b>KY</b>	ZIP Code + 4 <b>42240-7952</b>

State House District <b>15</b>	State Senate District <b>6</b>	Congressional District <b>1</b>	Area Development District <b>Pennyrile</b>
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# Kentucky Community Development Block Grant Public Facility Project Application Form Checklist

These forms are designed to obtain pertinent information, **not lengthy narrative**. Forms provided **must** be used and completed according to instructions. Instructions are given below and on the respective forms. **No additional pages** will be allowed **unless noted on relevant form page**.

Answer **all** questions--if a particular question is not pertinent to your project, **insert N/A**. Please type or print all information. Attach and number all exhibits to correspond with the appropriate section.

The following materials constitute a complete application. Attach and number all exhibits to correspond with the appropriate section.

**Please provide the page number for each item listed below on the line to the left:**

- \_\_\_ Project Summary
- \_\_\_ Project Funding Summary
- \_\_\_ Cost Summary  
[https://kydlgweb.ky.gov/Documents/CDBG\\_cities/COSTSUMMARY2010.xls](https://kydlgweb.ky.gov/Documents/CDBG_cities/COSTSUMMARY2010.xls)
- \_\_\_ Attach a Detailed Cost Estimate from a Professional Engineer – *(Please see page 26 as example)*
- \_\_\_ **Project Schedule**
- \_\_\_ Mapping Requirements
- \_\_\_ Citizen Participation - tear sheet, signed detailed public hearing minutes/handouts, sign-in sheet, and comments
- \_\_\_ Please indicate which of the National Objectives, as stated in Section II of the Program Guidelines, that applies to this project:  
LMI  (complete page 8) Slum\Blight  (Contact DLG) Urgent Need  (Contact DLG)  
*If using LMI per survey results, be sure to attach a copy of the LMI Worksheet(s)*  
[https://kydlgweb.ky.gov/Documents/CDBG\\_cities/AppendixBLMIWorksheetUpdated.xls](https://kydlgweb.ky.gov/Documents/CDBG_cities/AppendixBLMIWorksheetUpdated.xls) and an example of a survey form used for the 2019project
- \_\_\_ Certification of Area Income Eligibility
- \_\_\_ Person and Household Benefit Profiles  
[https://kydlgweb.ky.gov/Documents/CDBG\\_cities/BenefitProfilewithBudgetInfo.xls](https://kydlgweb.ky.gov/Documents/CDBG_cities/BenefitProfilewithBudgetInfo.xls)
- \_\_\_ Project Overview – Including Project Need (pg. 14-19) and Project Effectiveness (pg. 20-25)
- \_\_\_ Housing and Community Development Needs
- \_\_\_ Title VI Form
- \_\_\_ Statement of Assurances

Documents to Attach:

- \_\_\_ Authorizing Resolution adopted by the community’s governing body
- \_\_\_ Documentation supporting Commitment of Other Funds
- \_\_\_ Kentucky State Clearinghouse Endorsement, as stated in Section III of the 2019 CDBG Program Guidelines
- \_\_\_ Letter signed by the applicant CEO stating how applicant has met threshold requirements as stated in Section III of 2019 CDBG Program Guidelines
- \_\_\_ Applicant/Recipient Disclosure/Update Report (form HUD-2880)  
<http://www.hud.gov/offices/adm/hudclips/handbooks/hsg/4350.2/43502x18HSGH.pdf>.
- \_\_\_ For water or sewer line extension activities, attach evidence that water or sewer lines will serve at least a minimum average of 6 customers per mile
- \_\_\_ Attach a copy of the following Division of Water written approvals, if applicable to this project
  - Water Infrastructure Branch (Planning Approval)
  - Engineering design and specifications approved\*\*

\*\*These must be dated within 2 years of submission of this form

**NOTE: Partial submissions will NOT be accepted!**

**Kentucky Community Development Block Grant  
Public Facility Project Application Form  
Project Summary**

**Project Site Address (including ZIP code + 4):**

*(If no address, enter address to closest physical location where work is being performed)*

Highway 176 (Mose Rager Blvd), and Hwy 431/US 70 (John Prine Ave), Drakesboro

**Please provide a detailed description of proposed project. DO NOT exceed page limit**

The City of Drakesboro operates a natural gas system that serves to provide natural gas to approximately 507 residential customers (617 total customers). The gas system was originally installed and became operational in the early 1960's and over time has developed substantial issues that led to significant gas loss (60%) and eventual action from the PSC in 2018 because of the health and safety hazards associated with natural gas leaks. PSC gave the City the option of resolving the issues within the system, sell the system to a private entity, or shut the system down completely. Since then, the City has been able to resolve some of the gas loss issues on their own, but this larger project must be completed in order to avoid additional fines to the City. If the City is forced to shut the natural gas system down, this will mean that 507 residences will either have to: 1) convert to propane gas, which is not an easy retrofit and often propane trucks would not have access to roads that serve these residences during inclement weather; or 2) replace all of the appliances and HVAC in the homes with those that will accommodate electric as a source of energy. Because of the high number of low income households being served by the system, this would be cost prohibitive for most of them.

This project will entail the replacement of a portion of the Drakesboro natural gas distribution system including 4", 2", and 1" diameter distribution and service lines. There will be approximately 7,800 lineal feet of 4" diameter steel line replaced with 4" diameter polyethylene, 5,340 lineal feet of 2" diameter steel line replaced with 2" diameter polyethylene, and 46 service lines replaced in Phase I. In addition to the replacement of said portions of steel line, we will be installing up to three rectifiers in the areas where the line was not replaced to bolster the system and protect it from further corrosion/damage using impressed current cathodic protection. This rectifier installation will require collaboration with a cathodic protection design specialist to complete a field assessment, engineering design, and installation of said system. These improvements will make the system sound for at least the next 50 years. The PSC is supportive of this project as indicated in their correspondence (attached).

# Kentucky Community Development Block Grant Public Facility Project Application Form Project Funding Summary

**FINANCING**

Include **all** funding amounts and sources. Please complete all appropriate columns and indicate the status of funds as “Approved”, “Applied For”, or “Committed”. In-kind contributions should be listed separately on the chart below.

Source	Amount	Project %	Type	Rate	Term	Status of Funds
CDBG	484,977.68					
CDBG Admin/Planning	30,000					
<b>Subtotal - CDBG</b>	<b>514,977.68</b>					
USDA Rural Development	514,977.68					Applied for
<b>Total</b>	<b>1,029,955.35</b>					

Source of In-Kind Contributions	Estimated Amount
<b>Total</b>	

**APPLICATION CERTIFICATION**

To the best of my knowledge and belief, information in this Form is true and correct. Applicant also agrees to comply with requirements of 24 CFR Part 58.

I also certify, to my knowledge and belief that the information provided in the Community Development Block Grant Application form is identical to the WRIS Project Profile provided via electronic submission to the Kentucky Infrastructure Authority and the eClearinghouse, and this information is true, accurate and complete.

I am aware that the proposed project may be removed from further consideration should it be determined that there are significant discrepancies in the information provided, and/or false, inaccurate or incomplete information has been given.

\_\_\_\_\_  
Signature, Chief Executive Officer

\_\_\_\_\_  
Mayor  
Title

\_\_\_\_\_  
Mike Jones  
Name Typed

\_\_\_\_\_  
Date

*If multi-jurisdictional application, joint applicant must also certify below.*

\_\_\_\_\_  
Signature, Chief Executive Officer

\_\_\_\_\_  
Title

\_\_\_\_\_  
Name Typed

\_\_\_\_\_  
Date

# Kentucky Community Development Block Grant Public Facility Project Application Form Project Funding Summary

Attach a copy of the Public Facility Project Cost Summary. The Public Facility Project Cost Summary is included in an Excel spreadsheet named *Cost Summary.xls* and that file can be downloaded from the DLG web site ([https://kydlgweb.ky.gov/Documents/CDBG\\_cities/COSTSUMMARY2010.xls](https://kydlgweb.ky.gov/Documents/CDBG_cities/COSTSUMMARY2010.xls)).

Replace this page with the completed Cost Summary for this application

## Cost Summary

1. Enter the amount of CDBG funds requested for each activity identified in the "CDBG Funds" column.
2. Enter the amount(s) of other funds, i.e. RD, ARC, to be used for each activity in the "Other Funds" column. The source of these funds should be identified in the "Source" column. If more than one (1) "Other Source of Funds" is used for an activity, please identify the amounts and sources separately.
3. When an activity has several components, the sum for all components should be totaled and entered on the "Total" line for the activity.
4. Subtotal all activity costs.
5. Total all project costs (CDBG, Other Funds, and Total Costs). **(Check for mathematical errors.)**

## Special Notes:

- Total engineering design and inspection services are based on total construction costs excluding contingencies. CDBG funding for engineering cannot exceed the RD fee schedule. If CDBG, ARC, or local funds are financing engineering costs, provide the RD scale calculations supporting costs.
- All engineering costs should be included in the appropriate line item of the cost summary: 5a thru k. Engineering costs should be broken out and shown in the engineering chart at the bottom of the page.
- Public Services costs are not eligible for CDBG participation except for Recovery Kentucky projects.
- Contingencies: No CDBG funds shall be used for contingencies.
- Program Income is any money generated from CDBG projects and may be eligible for use in public facilities projects. Contact DLG for further information.
- Service lines must be shown as Rehabilitation Grant, Activity Code 4b. **If cost is greater than \$1,000 per household, Section 8 income verification must be completed.** (Contact DLG)
- Do not include in-kind dollars on the Cost Summary.
- Tap fees collected must be included in construction line items and identified in the source column (Make sure to include tap fees on the Project Funding Summary).
- **Tap fees are not considered program income.**

**Reminder:** Include costs associated with the requirement for recipient to erect a project sign according to CDBG specifications.

**Insert the detailed engineers estimate behind the Cost Summary**

# Kentucky Community Development Block Grant Public Facility Project Application Form Mapping Requirements

All projects must include the following information on their maps:

[Replace this page with the completed Maps for this application](#)

1. Include map of the applicant's jurisdiction showing:
  - boundaries of the entire jurisdiction;
  - project's location within the jurisdiction; and
  - areas of minority concentration within the jurisdiction.
  
2. Include map of the applicant's project area(s). This map must be of engineer's quality, specific to the project area(s), **and must clearly delineate:**
  - boundaries of the project area(s);
  - land to be acquired;
  - floodplain area;
  - drainage problem area; and
  - highways and railroad lines proximate to the project area.
  - water and wastewater treatment plants within the jurisdiction;
  - proposed improvements including sizes/dimensions;
  - sizes/dimensions of existing facilities serving the project area(s);
  - test sites;
  - deficient facilities; and
  - each proposed line by numbering the line and providing number of customers to be served, and length of each proposed line.
  
3. Include a Census Tract map (s) showing the location of the proposed project. Census Tract Maps can be downloaded at <http://www.census.gov/>

**NOTE:** Energy and Environment Cabinet (EEC) requires the submission of a copy of a 7.5 minute USGS topographical map delineating these items. It is recommended that the project area map take this form.

**Kentucky Community Development Block Grant  
Public Facility Project Application Form  
Citizen Participation**

1. Date of publication of notice of CDBG information to the public 7/7/2020

2. Notice of first public hearing

Date of advertisement 7/7/2020

Date of hearing 7/23/2020

3. Describe the other methods used to solicit participation of low and moderate income persons, such as posting notices at public buildings, radio ads, etc...

Publication in Leaders News  
Posted notice at City Hall  
Discussion at City Council meetings  
Social media

4. Describe any adverse comments/complaints received and describe resolution.

No adverse comments received

5. Attach to this form:

- a) Tear sheet of all public notices
- b) Signed Minutes of the public hearing(s) including lists of signatures from attendees, agendas, and handouts
- c) Copy of response(s) to comment(s) and/or complaint(s)

**Kentucky Community Development Block Grant  
Public Facility Project Application Form  
NATIONAL OBJECTIVES IDENTIFICATION  
Low and Moderate Income**

In the first column, list each proposed CDBG activity that will benefit persons of Low and Moderate Income (LMI), exclude planning and administration activities. In the second column provide the applicable Code of Federal Regulations (CFR) citation for LMI benefit. In the third column, respond to the following for each activity. *(Attach additional pages if necessary)*

- 1) Identify source documentation for determining LMI benefit *(e.g. survey, census tract)*
- 2) Explain how each activity will benefit LMI individuals *((1)area benefit, (2)limited clientele, (3)housing, (4)job creation or retention)*
- 3) Provide description of survey method *(if applicable)*

Cost Summary Activity Number	CFR Citation	LMI Benefit
5k	24CFR 570.483(b)(3)	<ol style="list-style-type: none"> <li>1. Survey - 52.06% LMI</li> <li>2. Area benefit - the natural gas system rehabilitation will benefit the entire customer base for the Drakesboro Natural Gas System</li> <li>3. Random survey was completed using the customer list for the natural gas system. There are 507 residential customers on the system; 276 surveys were completed.</li> </ol>

Describe how LMI information was assembled

- Community wide
- Census tract/block area  *(list census tract numbers, attach copy of map and other documentation)*
- Survey
- Other *(describe)* \_\_\_\_\_

**Please Include the Following**

- 1) Attach Certification of Area Income Eligibility *(if surveys were conducted)*
- 2) Attach LMI Worksheets *(if applicable)*
- 3) Attach Sample Survey *(if applicable)*

Note: For CFR (LMI) determination, refer to the HUD Guide to National Objectives for State CDBG program  
[http://portal.hud.gov/hudportal/HUD?src=/program\\_offices/comm\\_planning/communitydevelopment/library/stateguide](http://portal.hud.gov/hudportal/HUD?src=/program_offices/comm_planning/communitydevelopment/library/stateguide)



**Kentucky Community Development Block Grant Application**  
**Public Facility Project Application Form**  
**NATIONAL OBJECTIVES IDENTIFICATION**  
**Certification of Area Income Eligibility**

*To be used by applicants using income surveys as the basis for proving LMI benefit*

I certify that a household income survey was performed for the CDBG project area on February 2020 to determine the percentage of low and moderate income (LMI) residents. LMI determination was based on the 2019 HUD income limits for Muhlenberg County. A copy of the survey methodology (sample size and methodology, survey collection method, etc.) is included in the application as part of the Benefit to Low and Moderate Income form. A copy of the survey form used and the LMI worksheet are attached to this Certification.

The survey was carried out in conformance with the 2020 Kentucky CDBG Program Guidelines. To the best of my knowledge, the results of the income survey are true and accurate reflection of current economic conditions in the activity service area.

\_\_\_\_\_  
Signature, Chief Executive Officer

\_\_\_\_\_  
Date

# Kentucky Community Development Block Grant Public Facility Project Application Form Benefit Profile

## Person Benefit Profile

Identify persons benefiting from the project and enter the number of **total beneficiaries** for all activities (exclude engineering, planning and administration). Individuals who receive benefit from more than one activity should not be double counted within the total. For each activity, persons must be identified by racial and ethnic background.

**The individual themselves make this determination.**

[https://kydlgweb.ky.gov/Documents/CDBG\\_cities/BenefitProfilewithBudgetInfo.xls](https://kydlgweb.ky.gov/Documents/CDBG_cities/BenefitProfilewithBudgetInfo.xls)

Replace this page with the completed Person Benefit Profile for this application

1. At the top of the page, list **total** number of beneficiaries for **all** activities.
2. List the proposed activity number (exclude engineering, planning, and administration).
3. List number of **White** persons benefiting. (A person having origins in any of the original people of Europe, North Africa, or the Middle East)
4. List number of **Black/African American** persons benefiting. (A person having origins in any of the **black** racial groups of Africa.
5. List number of **Asian** persons benefiting. (A person having origins in any of the original people of the Far East, Southeast Asia, the Indian subcontinent, including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.)
6. List number of **American Indian/Alaskan Native** persons benefiting. (A person having origins in any of the original peoples of North, Central and South America and who maintain tribal affiliation or community attachment.)
7. List number of **Native Hawaiian/Other Pacific Islander** persons benefiting. (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)
8. List number of **American Indian/Alaskan Native & Other** persons benefiting.
9. List number of **Asian & White** persons benefiting.
10. List number of **Black/African American & White** persons benefiting.
11. List number of **American Indian/Alaskan Native & Black/African American** persons benefiting.
12. List number of **Other Multi-Racial** persons benefiting.
13. Add together and **total** the number of beneficiaries for all races for an activity and enter the number in the total space.
14. List number of **Hispanic** persons benefiting. (A person of Mexican, Puerto Rican, Cuban, Central or South America or other Spanish culture or origin, regardless of race.) Each person listed in the Total for that race, must be determined to be Hispanic or not. Race is not a factor in this column. Show the number of that race who believe themselves to be Hispanic.
15. Show the Total of all Hispanic persons.

**Kentucky Community Development Block Grant  
Public Facility Project Application Form  
Benefit Profile**

16. List number of **female head of households** benefiting.
17. List number and percent of **extremely low income** persons benefiting (0% to 30% of median).
18. List number and percent of **very low income** persons benefiting (31% to 50% of median).
19. List number and percent of **low income** persons benefiting (51% to 80% of median).
20. Add 17, 18, and 19 together and show the total number and percentage of LMI persons.
21. List number of persons who are not low to moderate income (above 81% of median).
22. List all sources of funding (CDBG, HOME, ESG, HOPWA, ARC, etc) and amount of funds to be expended by **project activity**.
23. Complete as many sections as necessary to report beneficiaries for all CDBG funded project activities.

**Reminder:** Check all numbers for accuracy and consistency with other application paperwork, especially the worksheet and the customer report (question 10a.)

# Kentucky Community Development Block Grant Public Facility Project Application Form Benefit Profile

## Household Benefit Profile

Please complete a Household Benefit Profile using the *Benefit Profile* spreadsheet that is a separate file. Use the following instructions in completing that spreadsheet. Identify families benefiting from the project and enter the number of **total households** for all CDBG funded activities (exclude engineering, planning, and administration). The numbers provided should be consistent with each specific housing survey. For each activity, household must be identified by racial and ethnic background. **The individual themselves make this determination.**

[https://kydlgweb.ky.gov/Documents/CDBG\\_cities/BenefitProfilewithBudgetInfo.xls](https://kydlgweb.ky.gov/Documents/CDBG_cities/BenefitProfilewithBudgetInfo.xls)

Replace this page with the completed Household Benefit Profile for this application

1. At the top of the page, list the **total** number of households for each activity.
2. List the proposed activity number (exclude engineering, planning, and administration).
3. List number of **White** households benefiting. (A person having origins in any of the original people of Europe, North Africa, or the Middle East.)
4. List number of **Black/African American** households benefiting. (A person having origins in any of the **black** racial groups of Africa.)
5. List number of **Asian** households benefiting. (A person having origins in any of the original people of the Far East, Southeast Asia, the Indian subcontinent, including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.)
6. List number of **American Indian/Alaskan Native** households benefiting. (A person having origins in any of the original peoples of North, Central and South America and who maintain tribal affiliation or community attachment.)
7. List number of **Native Hawaiian/Other Pacific Islander** households benefiting. (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)
8. List number of **American Indian/Alaskan Native & Other** households benefiting.
9. List number of **Asian & White** households benefiting.
10. List number of **Black/African American & White** households benefiting.
11. List number of **American Indian/Alaskan Native & Black/African American** households benefiting.
12. List number of **Other Multi-Racial** households benefiting.
13. Add together and **total** the number of households for all races for an activity and enter the number in the total space.
14. List number of **Hispanic** households benefiting. (A person of Mexican, Puerto Rican, Cuban, Central or South America or other Spanish culture or origin, regardless of race.). Each person listed in the Total for that race, must be determined to be Hispanic or not. Race is not a factor in this column. Show the number of that race who believe themselves to be Hispanic.

**Kentucky Community Development Block Grant  
Public Facility Project Application Form  
Benefit Profile**

15. Show the Total of all Hispanic households.
16. List number of **female head of households** benefiting.
17. List number of **households with disabled persons** benefiting.
18. List number and percent of **extremely low-income** households benefiting (0% to 30% of median).
19. List number and percent of **very low-income** households benefiting (31% to 50% of median).
20. List number and percent of **low-income** households benefiting (51% to 80% of median).
21. Add 17, 18, and 19 together and show the total number and percentage of LMI households.
22. List number of households who are not low to moderate income (above 81% and above).
23. List all sources of funding (CDBG, HOME, ESG, HOPWA, ARC, etc) and amount of funds to be expended **by project activity**.
24. Complete as many sections as necessary to report households for all CDBG funded project activities.

**Reminder:** Check all numbers for accuracy and consistency with other application paperwork, especially the worksheet and the customer report (question 10a.)

# Kentucky Community Development Block Grant Application

## Public Facility Project Application Form

### Public Facilities Project Overview

#### PROJECT NEED

1. When were plant and/or system which serves the proposed project originally constructed? 1960

List Major Improvements, if any	Year Completed	Funding Used	Approximate Cost
n/a			

2. List the areas within the proposed project to be served (i.e. names of roads, communities, neighborhoods) as indicated on maps. *(Attach additional page if necessary, using same format)*  
*Use the corresponding area letters as needed for questions 3, 5, and effectiveness question 12a*

Area	Road, Community or Neighborhood	Area	Road, Community or Neighborhood
a	Hwy 176 (Mose Rager Blvd)	g	
b	US 431/US 70 (John Prine Ave)	h	
c	City limits of Drakesboro	i	
d		j	
e		k	
f		l	

3. List and briefly discuss **problems** or **sickness** and identify areas. Include reference to sources of documentation as listed under methodology. *(Attach additional page if necessary, using same format)*

Area(s)	Type of Sickness or Problems	# of Cases	Documentation
a	Gas line leaks/breaks		
b	Gas line leaks/breaks		
c	Gas line leaks/breaks		

**Kentucky Community Development Block Grant Application**  
**Public Facility Project Application Form**  
**Public Facilities Project Overview**

4. Discuss the amount of water loss in the water distribution system, especially percentage of loss (i.e. 30% loss).

Gas system was at 60% gas loss earlier in 2019; has since been reduced to and remains around 10-15% gas loss by volume

If any correction is proposed, identify the percentage of water loss to be remedied.

Project would reduce additional gas loss by approximately 15% to remedy 100% of the gas losses within the Phase I area

5. Briefly describe areas with storage problems, pressure problems, or I & I problems and reference documentation as listed under methodology. (Examples: dates studies were conducted and conclusions, frequency and duration of pressure problems, actions taken to date to correct problems, public comments/complaints)

With a gas main there is no real storage aside from the product moving within the line itself. During the course of the past year, eight (8) separate leaks were repaired and five (5) leaks have already been repaired this calendar year. In addition, the system is fast approaching obsolescence and parts to repair the ongoing issues are becoming more and more difficult to procure.

6. Briefly discuss the level of contamination in regard to the water supply or sewage problems (Include number of tests/samples taken or studies conducted, type of contamination, source, type of problem, results of the tests/samples or studies conducted, etc. If inflow and infiltration are a problem, quantify the amount and the amount of reduction expected.)

Unlike a water or sewer system, a gas system will not have an I & I function, nor will it have a contamination factor. The real problem with a natural gas system is that any leak has the potential to become an explosive even at the cost of damage to property, infrastructure, and possible loss of life. Given the larger of the lines (4" diameter), were a punctured/leaking line to cause an explosive event, the blast radius has the potential to be upwards of 100' radius. What this means is that any person, building, etc within that area is in catastrophic danger should an event occur.

**Kentucky Community Development Block Grant Application  
Public Facility Project Application Form  
Public Facilities Project Overview**

7. Identify current sanctions and attach copy(ies)

	Date Imposed	Fines Levied to Date	Final Compliance Date
Administrative Order			
Agreed Order			
Tap-on Ban			
Line Extension Ban			
Other ( <i>Explain</i> ) PSC Order	2/28/19	\$30,150	

8. Additional Project Information:

- a. Identify the beneficiaries' source of raw and treated water.  
Drakesboro purchases all gas through contracts with natural gas providers; currently has contract with Constellation Energy for gas purchase\_\_\_\_\_
- b. Identify the location of the sewer system outfall.  
\_\_\_\_\_
- c. Is there a water management or facility plan for this project? System maintenance and operation plan exists  
If yes, when was the plan last updated? 2019 as required by PSC
- d. Identify the entity that will own and maintain the proposed infrastructure.  
\_\_\_\_\_
- e. In regards to operations and maintenance, does the responsible entity have the required number of operators? Yes, operation contracted with 3<sup>rd</sup> party that retains certified operators  
Are the operators certified at the required level? Yes  
Are there other maintenance issues other than those discussed under the Project Need?  
n/a

9. **Briefly** summarize **other** needs related to this project.

Should the PSC force the City to cease operation of the natural gas system, this would cause each household that is currently using natural gas to be forced to convert all appliances to electric, or switch to propane gas. These alternatives would prove to be cost prohibitive in many cases, given the income levels of the households in Drakesboro. In addition to the cost of conversion from natural gas to propane, propane trucks may not have access to all roads in Drakesboro for delivery during times of inclement weather, leaving homeowners without access to refill tanks in high demand seasons.



**Kentucky Community Development Block Grant Application**  
**Public Facility Project Application Form**  
**Public Facilities Project Overview**

10. Methodology: List how you determined your needs and sources of documentation used.  
*If a site visit is scheduled, these items will be reviewed*

Abacus Engineering conducted a review of the Drakesboro Natural Gas Distribution System. In the review, Abacus identified the areas of most concern and made a recommendation for Phase I remediation on the portion of said gas line.

**Kentucky Community Development Block Grant Application  
Public Facility Project Application Form  
Public Facilities Project Overview**

11. a. Show the number of customers to **benefit from the proposed project**.

	Existing Customers	New Customers
Households	507	
Other: Businesses, Churches, Schools, Industry, etc. <i>(Count as 1 each)</i>	110	
Miscellaneous <i>(Identify)</i>		
<b>Total Customers</b>	<b>617</b>	

b. Describe the method used to determine the numbers provided in 10.a. above. *(i.e. surveys, billing records, customer base, ...)*

Billing records

# Kentucky Community Development Block Grant Application

## Public Facility Project Application Form

### Public Facilities Project Overview

#### PROJECT EFFECTIVENESS

1. a. Cost of tap-on or hook-up fee \$250

Discuss what services the fee covers

\$250 covers cost of connection and service line of less than 30 ft.; if service line extends beyond 30 ft., additional \$3/ft. is charged for hookup

b. What is the amount of over-income tap fees/hook-up fees you expect to collect? \_\_\_\_\_  
 (Number of over income households per LMI Worksheet (Part B, #13) x tap fees)

2. Are you providing service lines? Yes  No   
 (Service lines are the lines installed from the property line to the residence.)

If yes,

a	Number of Households	
b	Estimated cost per foot	
c	Average feet per household	
d	How will they be paid	

2. a. Provide amount budgeted for acquisition. \$0

b. How were acquisition costs determined?

All repairs will be on lines currently in the ground; no additional easements required.

c. How many easements will be required? 0 Time Frame \_\_\_\_\_

d. How many acres of property will be required? 0 Time Frame \_\_\_\_\_

4. Does PSC have jurisdiction over this project? Yes  No   
 If yes, what is the time frame for approval? PSC is supportive of Phase I project

#### **QUESTIONS #5 AND #6 MUST BE COMPLETED FOR ALL PROJECTS**

5. a. List the rate for **WATER** service based on 4,000 gallons: **Current** \_\_\_\_\_ **Proposed** \_\_\_\_\_

b. Average residential customer monthly water usage: \_\_\_\_\_ gallons

c. Date of last rate increase \_\_\_\_\_

d. Rate for 4,000 gallons **prior** to last rate increase \_\_\_\_\_

e. Rate for 4,000 gallons if project is completed without CDBG funding \_\_\_\_\_

f. Provide rate calculation for proposed rates:  
 \_\_\_\_\_  
 \_\_\_\_\_

g. Provide rate calculation without CDBG assistance:  
 \_\_\_\_\_  
 \_\_\_\_\_



# Kentucky Community Development Block Grant Application

## Public Facility Project Application Form

### Public Facilities Project Overview

9. a. Briefly discuss current/proposed water purchase or sewer treatment agreements. Include the nature of arrangements and cost.

**CURRENT**

City has a current 3 year purchase agreement (beginning 10/1/20) with Constellation Energy to purchase gas at \$2.65 per decatherm (commodity rate)

**PROPOSED**

City will re-negotiate purchase agreement upon expiration in 2023

- b. Provide the following capacity and usage information for the water or sewer plant that serves the proposed project.

			<b>Current</b>		<b>Proposed</b>	
1.	Design Capacity	MGD				MGD
2.	Total existing customer usage	MGD				
3.	Total new customer usage					MGD
4.	Total of # 2 and # 3					MGD

- c. Explain project readiness. *(Include at minimum the status of other funds applications, engineering design, and environmental review.)*

The project engineer has been procured according to 2 CFR 200. Engineer has conducted preliminary review and estimate of cost; full design will begin once funding sources are committed.

**Kentucky Community Development Block Grant Application  
Public Facility Project Application Form  
Public Facilities Project Overview**

10. Discuss all local contributions to the project. *(Financial and other)*

The City of Drakesboro has applied for and is willing to accept loan funding as their match for the project. The City has expended a great deal of local funding on the system in order to avoid PSC fines; however, additional financial assistance is needed in order to complete the project identified.

11. a. Specify the provisions for LMI persons included in the project. Be specific and provide the number of subsidized service lines, tap fee assistance, etc.

This project will benefit all persons, including those LMI persons and households, that are served by the Drakesboro Natural Gas System. The City currently works with LMI families regarding payment of past due bills, offering payment plans for those that cannot afford large past due bills.

b. Have you formalized a policy outlining LMI provisions stated above? Yes  No   
*(Attach a copy of the draft or formalized provisions)*

12. a. For line extensions, provide the number of new customers to benefit per mile for each area. This section must correspond to areas as listed under Project Need. *(Attach additional pages if necessary, using same format)*

**No new line extensions will be added in this project**

Area	# of Customers to be Served	Miles of Line	Customers Per Mile
a	n/a		
b			
c			
d			
e			
f			
g			
h			
i			
j			
k			
l			

**Kentucky Community Development Block Grant Application**  
**Public Facility Project Application Form**  
**Public Facilities Project Overview**

- b. For those areas with less than 6 customers per mile in 12a above, provide the rationale for the economic feasibility of serving the areas.

n/a

13. a. Provide rationale for the manner in which the proposed project will (not) address system regionalization. *(Include discussion of feasibility of connecting to the nearest distribution, collection or treatment facility)*

There are no other publicly owned natural gas systems that would allow for regionalization. The only options are for the City to abandon the system, which would force residents to seek alternative, often expensive means for heating/cooling and other needs; or for a privately operated gas system to take over the system, which could potentially negatively affect the cost to customers.

- b. Will the proposed project eliminate any existing water or sewer treatment facilities?  
Yes  No

If yes, name each treatment facility. *(Include small package facilities)*

14. Mandatory connection of sewer customers is required for sewer projects. Does the applicant(s) have a mandatory sewer hookup/sewage use ordinance or other method to ensure sewer hookup for new customers in place or proposed?  Yes  No  N/A  
*(If yes, attach a copy)*

15. What percentage of households in the jurisdiction is currently served? 40 %

What percentage of households in the jurisdiction will be served upon completion of the project? 40 %

**Kentucky Community Development Block Grant  
Public Facility Project Application Form  
Detailed Engineer's Cost Estimate**

(This is a **SAMPLE** and is not all inclusive)  
**CHECK MATH and AGAINST COST SUMMARY**  
**Insert this page behind the Cost Summary**

Item	Unit	Quantity	Unit Price	Total Price
<b>Pump Station</b>				
Concrete	CY	90	\$500	\$45,000
Hatches	EA	7	\$3,000	\$21,000
Slide Gate	EA	1	\$8,000	\$8,000
6" Pipe	LF	60	\$50	\$3,000
6" Check Valve	EA	3	\$3,000	\$9,000
6" Isolation Valve	EA	3	\$2,400	\$7,200
10" x 10" tie in	EA	1	\$5,000	\$5,000
Pumps	EA	3	\$33,800	\$101,400
Building	EA	1	\$40,338	\$40,338
Electrical	LS	1	\$90,000	\$90,000
Misc	LS	1	\$15,000	\$15,000
Gravity Pipe (18")	LF	10	\$100	\$1,000
Gravity Pipe (15")	LF	65	\$75	\$4,875
Gravity Pipe (12")	LF	116	\$60	\$6,960
Manholes	EA	3	\$4,000	\$12,000
Force Main (10")	LF	50	\$60	\$3,000
Site work	LS	1	\$15,000	\$15,000
Demolition (by City)	LS	0	\$0	\$0
<b>Subtotal Construction</b>				<b>\$387,773</b>
<b>Total Construction with Contingency</b>				<b>\$58,227</b>
Preliminary Engineering (survey performed by City)				\$14,000
Final Design (10%)				\$45,000
Bidding/Construction Administration (Excluding Resident Rep.)				\$24,000
<b>Total Project Excluding Resident Representation</b>				<b>\$529,000</b>

Resident Representation	\$34,860
<b>Total Project Cost with Resident Representation</b>	<b>\$563,860</b>



**Kentucky Community Development Block Grant  
Public Facility Project Application Form  
TITLE VI Form**

**INSTRUCTIONS**

This form is used to define your community's overall housing and community development needs. All questions in each category must be answered even if your project is not designed to specifically address that category. All questions must be answered in respect to the entire jurisdiction of the applicant(s), not just the project area.

**A. ECONOMIC DEVELOPMENT**

1. Describe the overall economic development needs.

The major economic development needs for the City of Drakesboro are: increased number of high wage jobs, long term full time job opportunities, business development, and reversing the industrial decline in the area.

**Source/Rationale**

Local officials, Economic Development Officials.

2. Describe the overall economic development needs specific to LMI residents.

As stated above, one of the greatest needs is the opportunity for higher paying, long term, full time jobs. New job opportunities for LMI residents are especially scarce within the City of Drakesboro.

**Source/Rationale**

Local Officials, citizens, Western Kentucky Workforce Development Board, and Economic Development Board.

3. Describe the community's goals (methods for meeting needs) projected for three years.

1. Ensure the availability of adequate infrastructure for the citizens of the community and for new industry.
2. Identify economic development opportunities for the City.
3. Encourage cooperation with local, regional and state ED organizations.

4. Describe the relationship of the proposed project to the stated economic development goals.

The rehabilitation of the wastewater collection system and WWTP will allow for future opportunities in attracting new manufacturing plants that will pay higher wages and benefit in particular LMI families in Drakesboro and the surrounding area.

**B. HOUSING**

1. Describe the overall housing needs.

As the elderly population of Kentucky grows, the need for affordable, safe, sanitary and decent housing for the elderly continues to be a great concern for the Commonwealth of Kentucky as well as the City of Drakesboro. There is also a need for affordable, safe sanitary and decent housing for low to moderate income residents of the City. The City of Drakesboro has a high percentage of homes that were built

**Kentucky Community Development Block Grant  
Public Facility Project Application Form  
TITLE VI Form**

prior to 1950, resulting in a number of homes that are in poor condition.

**Source/Rationale**

Pennyrile Housing Corporation, Kentucky Housing Corporation, HUD and Local Officials.

**2. Describe the overall housing needs specific to LMI residents.**

Due to the age and condition of rental housing and affordable housing for purchase to low and moderate income residents, the greatest need would be the availability of affordable, safe, sanitary and decent housing for these residents. LMI are increasingly unable to afford the cost incurred from making required improvements to their homes. Solutions to these problems could be achieved through rehabilitation programs and affordable home ownership program.

**Source/Rationale**

Pennyrile Housing Corporation, Kentucky Housing Corporation, HUD and local officials

**3. Describe the community's goals (methods for meeting needs) projected for three years.**

1. Coordinate with housing agencies in developing rehabilitation programs.
2. Through the Pennyrile Housing Corporation, offer affordable, safe, sanitary and decent housing for first time low and moderate income homebuyers.
3. Apply for funding through the Pennyrile Area Development District, Kentucky Housing Corporation, and Department for Local Government for housing related grants and/or loans.

**4. Describe the relationship of the proposed project to the stated housing goals.**

The project will improve the overall quality of the City as a place to live and will assist the City in attracting potential employers to the area.

**C. PUBLIC FACILITIES**

**1. Describe the overall public facilities needs.**

1. Provide adequate water and wastewater services for the residents, industry and commercial land uses.
2. Improve current transportation routes.
3. Continue infrastructure development in existing industrial parks.

**Source/Rationale**

Local officials, citizens and Economic Development Council.

**Kentucky Community Development Block Grant  
Public Facility Project Application Form  
TITLE VI Form**

2. Describe the overall public facilities needs specific to LMI residents.

The City of Drakesboro currently provides public facilities service to adequately serve LMI residents of the City. The public facilities need assistance for funding projects in order to avoid increasing rates for LMI residents.

**Source/Rationale**

Local Officials, residents

3. Describe the community's goals (methods for meeting needs) projected for three years.

The overall public facility goal for the City of Drakesboro is to efficiently maintain the current condition of all facilities and upgrade where necessary in order to meet the needs of the public.

4. Describe the relationship of the proposed project to the stated public facilities goals.

The proposed project will maintain the level of public facility service to the residents of the City.

**Kentucky Community Development Block Grant  
Public Facility Project Application Form  
TITLE VI Form**

Form Approved  
OMB No.2506-0043

U. S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

INSTRUCTIONS FOR COMPLIANCE WITH TITLE VI

OF THE CIVIL RIGHTS ACT OF 1964

Title VI of the Civil Rights Act of 1964 states

“No person in the United States shall, on the grounds of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.”

Section 1.4(b) (2) (i) of the regulations of the Department of Housing and Urban Development issued pursuant to Title VI requires that:

“A recipient, in determining the types of housing, accommodations, facilities, services, financial aid, or other benefits which will be provided under any such program or activity, or the class of persons to whom, or the situations in which, such housing, accommodations, facilities, services, financial aid, or other benefits will be provided under any such program or activity, or the class of persons to be afforded an opportunity to participate in any such program or activity, may not, directly or through contractual or other arrangements, utilize criteria or other methods of administration which have the effect of subjecting persons to discrimination because of their race, color, or national origin, or have the effect of defeating or substantially impairing accomplishment of the objectives of the program or activity as respect to persons of a particular race, color, or national origin.”

As evidence of compliance with the above, the applicant shall provide the information as requested in a, b, c, and/or d below, as appropriate, to supplement the data relative to the locations of concentration of minority groups and proposed activities shown on the map submitted as part of the application. Additional pages should be used, if necessary. If there are no minorities in the community, check here  and disregard questions a through d.

**a. IDENTIFY THE MINORITY GROUP(S) POPULATION OR PORTION THEREOF, RESIDING IN THE APPLICANT’S JURISDICTION THAT WILL NOT BE SERVICED BY ONE OR MORE OF THE PROPOSED ACTIVITIES**

The project will benefit all citizens of the City of Drakesboro

**Kentucky Community Development Block Grant  
Public Facility Project Application Form  
TITLE VI Form**

b. EXPLAIN WHETHER THE MINORITY GROUP POPULATION, OR PORTION THEREOF, NOT SERVICED BY THE PROPOSED ACTIVITY (IES) ALREADY RECEIVES SUCH SERVICE. IF SO, DEFINE THE EXTENT OF EACH OF THESE EXISTING SERVICES AND INDICATE WHETHER THEY ARE EQUAL TO, GREATER THAN OR LESS THAN THE PROPOSED ACTIVITY(IES) RELATIVE TO THE LEVEL AND QUALITY OF SERVICES TO BE PROVIDED.

The project will benefit all citizens of the City of Drakesboro

c. IF THE MINORITY GROUP POPULATION, OR PORTION THEREOF, DOES NOT RECEIVE SUCH SERVICE(S) NOW AND WILL NOT RECEIVE THE BENEFIT OF THE PROPOSED ACTIVITY(IES), INDICATE THE APPROPRIATE TIME SUCH SERVICE(S) WILL BE PROVIDED TO SUCH RESIDENTS.

The project will benefit all citizens of the City of Drakesboro

d. IN THE EVENT NO FUTURE SERVICE(S) IS PLANNED FOR THE MINORITY GROUP POPULATION OR PORTION THEREOF, PROVIDE A STATEMENT OF THE REASONS WHY.

The project will benefit all citizens of the City of Drakesboro

The phrase "minority group" as used herein, refers to Black, not of Hispanic Origin; Hispanic (a person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture regardless of race); Asian or Pacific Islander; American Indian or Alaska Native.

\_\_\_\_\_  
Signature, Chief Executive Officer

**Kentucky Community Development Block Grant  
Public Facility Project Application Form  
Statement of Assurances**

**Statement of Assurances**

The applicant hereby assures and certifies that:

- (a) It possesses legal authority to apply for the grant, and to execute the proposed program, shall abide by all federal and state laws, executive orders, and regulations, including, but not limited to, those items listed in this section.
- (b) Its governing body has duly adopted or passed as an official act a resolution, motion or similar action authorizing the filing of the application, including all understandings and assurances contained therein, and directing and authorizing the applicant's chief executive officer to act in connection with the application and to provide such additional information as may be required.
- (c) It has complied with all the requirements of Executive Order 12372 and that either:
  - (1) Any comments and recommendations made by or through clearinghouses are attached and have been considered prior to submission of the application; or
  - (2) The required procedures have been followed and no comments or recommendations have been received prior to submission of the application.
- (d) It will facilitate citizen participation.
  - (1) Providing adequate notices for one or more public hearings, specifically to persons of low and moderate income;
  - (2) Holding one or more hearings at times and locations convenient to potential beneficiaries, convenient to the handicapped, and meeting needs of non-English speaking residents;
  - (3) Providing citizens information concerning the amount of funds available for proposed community development activities and the range of those activities;
  - (4) Providing citizens with information concerning the estimated amount of funds that will benefit persons of low and moderate income;
  - (5) Furnishing citizens with the plans made to minimize the displacement of persons and to assist persons actually displaced as a result of grant activities;
  - (6) Providing citizens with reasonable notice of substantial changes proposed in the use of grant funds and providing opportunity for public comment;
  - (7) Providing citizens with reasonable access to records regarding the past use of CDBG funds received; and
- (e) It will comply with the regulations, policies, guidelines and requirements of OMB Super Circular and the "Common Rule," 24 CFR, Part 85 as they relate to the application, acceptance, and use of Federal funds under this document.
- (f) It will comply with:

**Kentucky Community Development Block Grant  
Public Facility Project Application Form  
Statement of Assurances**

- (1) Section 110 of the Housing and Community Development Act of 1974, as amended, 24 CFR 570.603, and State regulations regarding the administration and enforcement of labor standards;
- (2) The provisions of the Davis-Bacon Act (40 U.S.C. S 276a-5) with respect to prevailing wage rates;
- (3) Contract Work Hours and Safety Standards Act of 1962, 40 U.S.C. 327 et. seq., requiring that mechanics and laborers (including watchmen and guards) employed on federally assisted contracts be paid wages of not less than one and one-half times their basic wage rates for all hours worked in excess of forty in a work-week;
- (4) Federal Fair Labor Standards Act, 29 U.S.C.S 102/et. seq., requiring that covered employees be paid at least the minimum prescribed wage, and also that they be paid one and one-half times their basic wage rate for all hours worked in excess of the prescribed work-week;
- (5) Anti-Kickback (Copeland) Act of 1934, 18 U.S.C.S 874 and 40 U.S.C.S 276c, which outlaws and prescribes penalties for "kickbacks" of wages in federally financed or assisted construction activities; and
- (6) KRS 337, with respect to Kentucky Prevailing Wage Rates and labor standards.

(g) It will comply with all requirements imposed by the State concerning special requirements of law, program requirements, and other administrative requirements.

(h) It will comply with:

Title VI of the Civil Rights Act of 1964 (Pub. L. 88-352), and the regulations issued pursuant thereto (24 CFR Part 1), which provides that no person in the United States shall on the grounds of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance and will immediately take any measures necessary to effectuate this assurance. If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended, or for another purpose involving the provision of similar services or benefits;

(i) It will to the greatest extent practicable under State law, comply with Sections 301 and 302 of Title III (Uniform Real Property Acquisition Policy) of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended with the final rule published February 3, 2005, and will comply with Sections 303 and 304 of Title III, and HUD implementing instructions at 24 CFR Part 42.

(j) It will:

- (1) Comply with Title II (Uniform Relocation Assistance) of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended, and HUD implementing regulations at 24 CFR Part 42 and 24 CFR 570.606;
- (2) Provide relocation payments and offer relocation assistance as described in the Uniform Relocation Assistance Act of 1970, as amended, to all persons displaced as a result of

**Kentucky Community Development Block Grant  
Public Facility Project Application Form  
Statement of Assurances**

acquisition of real property for an activity assisted under the Community Development Block Grant program. Such payments and assistance shall be provided in a fair and consistent and equitable manner that insures that the relocation process does not result in different or separate treatment of such persons on account of race, color, religion, national origin, sex, or source of income; and

- (3) Provide for reasonable benefits to any person involuntarily and permanently displaced as a result of the use of grant funds to acquire or substantially rehabilitate property.
  
- (k) It will comply with the provisions of the Hatch Act that limits the political activity of employees.
  
- (l) It will give the State, HUD and the Comptroller General, through any authorized representatives, access to and the right to examine all records, books, papers, or documents related to the grant.
  
- (m) Its chief executive officer or other officer of applicant approved by the State:
  - (1) Consents to assume the status of a responsible Federal official under the National Environmental Policy Act of 1969 (NEPA) (42 U.S.C. S 4321 et. seq.) and other provisions of Federal law, as specified in 24 CFR Part 58, which furthers the purposes of NEPA, insofar as the provisions of such Federal law apply to the Kentucky Community Development Block Grant Program; and
  - (2) Is authorized and consents on behalf of the applicant and himself to accept the jurisdiction of the Federal courts for the purpose of enforcement of his responsibilities as such an official.
  
- (n) It will comply with:
  - (1) The National Environmental Policy Act of 1969 (42 U.S.C. S 4321 et. seq.) and 24 CFR Part 58, and in connection with its performance of environmental assessments under the National Environmental Policy Act of 1969, comply with Section 106 of the National Historic Preservation Act of 1966 (16 U.S.C. 468), Executive Order 11593, and the Preservation of Archeological and Historical Data Act of 1974 (16 U.S.C. 469a-1, et. seq.) by:
    - (a) Consulting with the State Historic Preservation Officer to identify properties listed in or eligible for inclusion in the National Register of Historic Places that are subject to adverse effects (see 36 CFR Part 800.8) by the proposed activity; and
    - (b) Complying with all requirements established by the State to avoid or mitigate adverse effects upon such properties.
  - (2) Executive Order 11988, Floodplain Management;
  - (3) Executive Order 11990, Protection of Wetlands;
  - (4) Section 202(a) of the Flood Disaster Protection Act of 1973 (42 U.S.C. 4106) as it relates to the mandatory purchase of flood insurance for identified special flood hazard areas;



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Public Facility Project Application Form  
Statement of Assurances**

- (5) The Endangered Species Act of 1973, as amended;
  - (6) The Fish and Wildlife Coordination Act of 1958, as amended;
  - (7) The Wild and Scenic Rivers Act of 1968, as amended;
  - (8) The Safe Drinking Water Act of 1974, as amended;
  - (9) The Clean Air Act of 1970, as amended;
  - (10) The Federal Water Pollution Control Act of 1972, as amended;
  - (11) The Clean Water Act of 1977; and
  - (12) The Solid Waste Disposal Act, as amended by the Resource Conservation and Recovery Act of 1976.
- (o) It will comply with 24 CFR Part 570.489(j) concerning the change of use of real property purchased or improved in whole or in part with CDBG funds.
- (p) It will comply with all provisions of Title I of the Housing and Community Development Act of 1974, as amended, as well as with all other applicable State and Federal laws which have not been cited previously.

The applicant hereby certifies that it will comply with the above stated assurances.

\_\_\_\_\_  
Signature, Chief Executive Officer

**Mike Jones**

\_\_\_\_\_  
Name (typed or printed)

**Mayor**

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date