# GA-32-15

|   | BRIEFING DOCUM  |                           | rev. 2/13/13          |          |                     |  |  |  |  |
|---|---|---------------------------|-----------------------|----------|---------------------|--|--|--|--|
| From:<br>Name   | : Theresa Wellman   | Dept:                     | Planning and Zoning   | _ Phone: | 410-263-7961 x 7798 |  |  |  |  |
| This is a request to  review, approve, and/or sign a grant agreement/award  other   |   |                           |                       |          |                     |  |  |  |  |
| Grant title: Strategic Demolition and Smart Growth Impact Fund Program Agreement  |   |                           |                       |          |                     |  |  |  |  |
| Grantor:  | Grantor: Maryland Department of Housing and Community Developm Amount: \$ 100,000 |                           |                       |          |                     |  |  |  |  |
| A   | ttestation:   |                           |                       |          |                     |  |  |  |  |
|   | Match is <i>not</i> require   | d.                        |                       |          |                     |  |  |  |  |
|   | Match is required. Match will be met in the form of 1                             |                           |                       |          |                     |  |  |  |  |
|   | I attest that this asset has been approved/appropriated in <sup>2</sup>           |                           |                       |          |                     |  |  |  |  |
|   |   |                           |                       |          |                     |  |  |  |  |
|   |   |                           |                       | •        |                     |  |  |  |  |
|   | Department Dire   | ector signature           | Dept                  |          | Date                |  |  |  |  |
| Routing   | Department Dire   | ector signature  Initials | Dept  Date In Out     | Comments |                     |  |  |  |  |
|   | Department Director   |                           | Date                  |          |                     |  |  |  |  |
| ✓ ori <sub>į</sub>  |   |                           | Date                  |          |                     |  |  |  |  |
| ✓ orig  | ginating Dept Director  | Initials -                | Date                  | Comments |                     |  |  |  |  |
| ✓ orig  | ginating Dept Director  | Initials -                | Date In Out  (//5//5/ | Comments |                     |  |  |  |  |
| ✓ orig ✓ Gra ✓ Fin ✓ Cit  | ginating Dept Director ants Coordinator ance Director                             | Initials -                | Date In Out  (//5//5/ | Comments |                     |  |  |  |  |
| ✓ origing original o | ginating Dept Director ants Coordinator ance Director y Attorney                  | Initials -                | Date In Out  (//5//5/ | Comments | 22 approval         |  |  |  |  |
| ✓ original  | ginating Dept Director ants Coordinator ance Director y Attorney y Manager        | Initials -                | Date In Out  (//5//5/ | Comments | 22 approval         |  |  |  |  |
| ✓ original  | ginating Dept Director ants Coordinator ance Director y Attorney y Manager yor    | Initials -                | Date In Out  (//5//5/ | Comments | 22 approval         |  |  |  |  |
| ✓ origing original o | ginating Dept Director ants Coordinator ance Director y Attorney y Manager yor    | Initials -                | Date In Out  (//5//5/ | Comments | 22 approval         |  |  |  |  |

# **GRANT Briefing Document, continued**

Provide a short narrative. Include:

| -program description  | - purpose of funds          | - due dates |  |  |  |  |
|---|-----------------------------|-------------|--|--|--|--|
| -grant period   | -amount of request or award |             |  |  |  |  |
| -special features, e.g., environmental impact implications, notarization required |                             |             |  |  |  |  |

## 1. Project Description:

Demolish existing building in the Clay street neighborhood to construct affordable housing units for veterans.

#### 2. Project Address( es):

61-63 West Washington Street, Annapolis, Maryland

#### 3. Scope of the project:

The complete project will involve the demolition, site prep and construction of affordable housing within the Washington Street Corridor. The current building was constructed in the 1950s and has not been renovated since its initial construction. The building has been owned by the Bowman CDC since April 2008. It is zoned correctly for six units and was approved by the city within the last few years.

For this initial phase the City of Annapolis will use the funding for the demolition and site prep. The City is working with Bowman CDC and also looking to CDA for additional funding towards the construction of the units. This building is not located in the historic district and has been cleared by the Historic Registry of not being historic. After numerous surveys and evaluations, it was determined that new construction would be cheaper and more cost efficient than renovating the existing structure as well as green and energy efficient.

## 4. Project Financing (Evidence & Use of Funding Sources):

The \$100,000 of the SDSGIF funds will be used towards the project. The City of Annapolis will partner with the Bowman CDC for the project. The total project cost is \$100,000. There is no match requirement or special conditions

Examples: cash match, equipment loan, staff salaries, volunteer time, contribution from non-City agency.

<sup>&</sup>lt;sup>2</sup> Examples: FY\_\_Operating Budget, a memorandum of understanding, City Council resolution/ordinance.

**Grant Title** 

# **GRANT BUDGET FORM**

6/11/2015

| Grant Title Strategic Demolition and Smart Growth Impact Fund Program - Bowman Building |  |   |  |                                |              |  |  |  |  |  |
|---|--|---|--|--------------------------------|--------------|--|--|--|--|--|
| Grant Award (\$) 100,000.00 Originating Department(s):                                  |  |   |  |                                |              |  |  |  |  |  |
| Dept Contact (Name/Phone):  |  |   |  |                                |              |  |  |  |  |  |
| Form Warran   | Fallows  |   | Revenue Source<br>Local  | enue Source<br>Local Total per |              |  |  |  |  |  |
| Expenditure Account   | Federal  | State                                   | (Matching)   | Other                          | Expend. Type | Comments   |  |  |  |  |
| Salaries  |  |   | WILL TO SECURE A SECU |                                | 0.00         |  |  |  |  |  |
| Benefits  | <u> </u>   |   |  |                                | 0.00         |  |  |  |  |  |
| Overtime  |  |   | Alle   |                                | 0.00         |  |  |  |  |  |
| Supplies  | <u> </u>   |   |  |                                | 0.00         |  |  |  |  |  |
| Telephone   |  |   |  |                                | 0.00         |  |  |  |  |  |
| Electricity   |  |   |  |                                | 0.00         | The state of the s |  |  |  |  |
| Fuel and Oil  |  |   |  |                                | 0.00         |  |  |  |  |  |
| Training & Education  |  |   |  |                                | 0.00         |  |  |  |  |  |
| R & M - Equipment   |  |   |  |                                | 0.00         | 1 MAY 10  |  |  |  |  |
| Special Programs  |  |   |  |                                | 0.00         |  |  |  |  |  |
| Contract Services   |  |   |  |                                | 0.00         |  |  |  |  |  |
| Capital Outlay  | :  | *************************************** |  | withing                        | 0.00         |  |  |  |  |  |
| Demolition  |  | 100,000.00                              | 0.00   |                                | 100,000.00   |  |  |  |  |  |
| other (fill-in)   | Lancación de la constante de l |   |  |                                | 0.00         |  |  |  |  |  |
| other (fill-in)   |  |   |  |                                | 0.00         |  |  |  |  |  |
| other (fill-in)   |  |   |  | . 11                           | 0.00         |  |  |  |  |  |
| other (fill-in)   |  |   | , , t  | . t (a)                        | 0.00         | , g.a.   |  |  |  |  |
| other (fill-in)   |  |   |  |                                | 0.00         | ,  |  |  |  |  |
| Total   | 0.00   | 100,000.00                              | 0.00   | 0.00                           | 100,000.00   |  |  |  |  |  |
|   |  |   | XPENDITURES*:  | 100,0                          | 00.00        |  |  |  |  |  |
| ,   | be different from Grant.   | Award \$ if there is a                  | match requirement.   |                                |              |  |  |  |  |  |
| Match is not required.  | 67 11  | 1                                       |  |                                |              |  |  |  |  |  |
| Department Director Si  | Wiley -  |   |  |                                |              |  |  |  |  |  |
| Behalittlett Dilector Si  |  |   | Department   |                                |              |  |  |  |  |  |
| Match is required. Match will be met in the form of (1)                                 |  |   |  |                                |              |  |  |  |  |  |
| I attest that this asset has been approved/appropriated in (2)                          |  |   |  |                                |              |  |  |  |  |  |
|   |  | · · -                                   |  |                                |              |  |  |  |  |  |
| Department Director Si  | -  |   | Department   |                                |              |  |  |  |  |  |
|   | • · · · · · ·  |   |  | [                              |              |  |  |  |  |  |
| COMMENTS:   |  |   |  |                                |              |  |  |  |  |  |
|   |  |   |  |                                |              |  |  |  |  |  |
| VELVANIMA EN ANTA ANTA ANTA ANTA ANTA ANTA ANTA   |  |   |  | **                             | <del></del>  |  |  |  |  |  |
|   |  |   |  |                                |              |  |  |  |  |  |
|   |  |   |  |                                |              |  |  |  |  |  |

<sup>(1)</sup> Examples (include dollar amounts if applicable): Cash match, equipment loan, staff salaries, volunteer time, contribution from non-City agency.

<sup>(2)</sup> Examples: FY \_\_ operating budget, a memorandum of understanding, City Council resolution/ordinance.