COMMUNITY IMPROVEMENT GRANTS
SMALL COMMUNITY FUND

Full program guidelines are available at www.gobroomecounty.com/planning/communitygrants

All applications MUST be submitted by the deadline detailed in the guidelines via email to communitygrants@broomecountyny.gov or will be deemed ineligible.

ORGANIZATION AND CONTACT INFORMATION

1. **Type of Applicant**
   - ☐ Municipality
   - ☐ Non-Profit Organization
   - ☐ School

For Non-Profit Organizations (both required):
- ☐ Registered with the Internal Revenue Service
- ☐ Registered with the NYS Charities Bureau

2. **Organization Name:** _____
3. **Organization Address:** _____
   _____
4. **Contact Name/Title:** _____
5. **Email Address:** _____
6. **Phone Number:** _____

PROJECT INFORMATION

7. **Project Name:** _____
8. **Amount Requested:** $_____
9. **Project Location:** _____
10. **Project Timeline: List the date(s) or timeframe for your project.**

_____

11. **Project Description:**

Describe the project, the specific location and/or service area, what agency or organization is going to be responsible for carrying the project out, and a list of key personnel.

PROJECT GOALS

12. Which of the Vision Items will your project address (check all that apply):

- ☐ Making Broome County an Inviting Place to Live, Work, and Play
- ☐ Engaging Our Students and Young Professionals
- ☐ Taking Pride in Our Urban and Village Centers
- ☐ Taking Pride in our Scenic Beauty
- ☐ Investing in Our Legacy Sites
- ☐ Making a Commitment to High Standards in Services
- ☐ Making a Commitment to High Standards in Building Design and Renovation
- ☐ Becoming More Resilient
- ☐ Investing in Our Workforce, Entrepreneurship, and Innovation

13. Explain how your project will address these Vision Items?

14. Which of the following initiatives does your project support (check all that apply)?

- ☐ **Improving streetscape, bike and pedestrian amenities, commercial facades**
- ☐ **Supporting and coordinating marketing efforts for rural village centers**
- ☐ **Combating blight in primary and secondary corridors and gateway areas**
- ☐ **Improving access to recreational and scenic resources**
- ☐ **Supporting small retail and restaurants**
- ☐ **Addressing substandard housing**
- ☐ **Promoting elder-friendly development**
- ☐ **Attracting and retaining artists, entrepreneurs, and retirees**
- ☐ **Supporting events and festivals**
- ☐ **Fostering public art**
- ☐ **Enhancing innovative community services**
- ☐ **Establish Broome County as a unique destination**

15. Explain how your project addresses one (or more) of these initiatives:

PROJECT BUDGET

ALL APPLICANTS SHOULD REVIEW ELIGIBLE EXPENSES IN THE PROGRAM GUIDELINES DOCUMENT PRIOR TO DEVELOPING A PROPOSED BUDGET. IT IS THE RESPONSIBILITY OF THE APPLICANT TO ENSURE THAT REQUESTED FUNDS ARE ELIGIBLE PRIOR TO MAKING PROJECT EXPENDITURES.

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16. **Please complete the Budget Worksheet. See the form at the end of this application.**

☐ *I confirm that I have fully completed the budget worksheet.*

17. **Budget Narrative: Elaborate on the expenditures and funding sources outlined on the Project Budget Form:**

18. **Budget Justification: Describe why funds from Broome County are needed for this project? What other funding sources will be used for the project? Will the project be able to move forward without the requested grant funds or partial funding?**

19. **Self-sufficiency and Maintenance: Funds are intended to be short term investments in projects that ultimately become self-sufficient. Explain your plan for self-sufficiency independent of County support. If physical improvements are proposed, how will they be maintained? How will the project support programs or initiatives into the future?**

ADDITIONAL DOCUMENTS

20. **Please provide a current W-9 Tax Form.**

21. **If you have additional documentation you would like to provide in support of your documentation, please attach.**

SMALL COMMUNITY FUND

PROJECT BUDGET FORM

Please complete this form to document all expenditures and sources of funding anticipated for the project. "Total Expenditures" should be equal to the "Total From All Sources".

Elaboration must be provided in the application under Budget Narrative and Justification.

Changes to this budget must be approved by Broome County. Recipients of these funds may be subject to an audit by Broome County or its agents.

EXPENDITURES (from all funding sources)

Category	Amount	Notes (if applicable)
Personnel Services (project related expenses ONLY)		
Salaries		
Other		
Non-personnel Expenses		
Supplies and Materials		
Equipment		
Professional Services		
Construction		
Printing/Advertising		
Other (describe in notes)		
Other (describe in notes)		
TOTAL EXPENDITURES	$ 0.00	

SOURCES OF FUNDS

Category	Amount	Percent	Status
Broome County SCF			
State Grants			
Federal Grants			
Local Municipal Funds			
Other Grants			
Private Funds/Donations			
In-kind Contribution			
TOTAL FROM ALL SOURCES	$ 0.00	0	