



**CITY OF PASSAIC**  
**COMMUNITY DEVELOPMENT BLOCK GRANT**  
**(CDBG)**

**2026 FUNDING APPLICATION**

**Mayor**

Hector C. Lora

**City Council**

Gary Schaer, President

Jose Garcia

Thania Melo

Chaim M. Munk

Terrance L. Love

Daniel Mayer

Maritza Colon Montañez

**Business Administrator**

Ricardo Fernandez

**Community Development Director**

Joyce Gregory-Hunt

# CDBG Program

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## About the Program

The Federal Housing and Community Development Act of 1974, as amended, created a new Community Development funding program administered by the U.S Department of Housing and Urban Development (HUD). The City of Passaic (The City) is an Entitlement Community, and receives an annual formula allocation of Community Development Block Grant Funds (CDBG), for the creation and implementation of eligible activities that benefits very low, low and moderate income persons. The City, under the program requirements, must submit a yearly application to HUD for approval of the proposed activities to be undertaken during the program year.

## The Objective

The Primary Objective of the CDBG program is to create suitable living environments and economic opportunities, for very low, low and moderate income persons.

## Project & Activity Qualifications

To qualify for CDBG funding, proposed projects and activities must satisfy the following criteria:

- Principally benefit very low, low or moderate income persons ( as defined by American Fact Finder.gov)
- Urgent Need ( Natural Disaster, Floods, etc)
- Prevention and/or elimination of Slums and Blight

## Activity Eligibility

Community Development Block Grant rules and regulations specify eligible activities as follows:

- Acquisition of property
- Clearance, Demolition, and Removal
- Public Facilities and Improvements
- Rehabilitation and Preservation
- Economic Development
- Economic opportunities for low and very low income persons
- Removal of architectural barriers
- Public Services

# APPLICATION DUE 2/13/2026

## Section I – General Information

### APPLICANT INFORMATION

Contact Name:

Title:

Address:

Phone Number:

Email Address:

### ORGANIZATIONAL INFORMATION

Organization Name:

Address:

Executive Officer:

Website:

Phone Number:

DUNS#:

Tax ID #:

Is your organization a 501 (c)(3) non-profit?  Yes  No (if yes, please provide a copy of the State and Federal Tax exemption letter with this application)

Is your organization a governmental agency?  Yes  No

Does your agency owe any taxes or other debts to the City of Passaic?  Yes  No

If yes, describe debt owed and amount: \_\_\_\_\_

### ACTIVITY INFORMATION

Activity Name:		
Activity Costs:	Amount of CDBG Funds Requested: \$	
Source of Other Funds ( Type)	Amount of Other Sources:	Funds Committed (Yes/No)
1.	\$	1.
2.	\$	2.
3.	\$	3.
If any source of funds has not been committed to the project, please indicate when the funds will be committed.		
Activity Overview (attach summary sheet as necessary):		
Activity Start Date:	Activity End Date:	
Target Population ( Census Tract/area of activity):	Number of Participants to be served:	

*I hereby certify that all information and documentation submitted as part of this proposal is correct and true to the best of my information, knowledge and belief and further understand that the City of Passaic shall use this information, in confidence, to make its determination of this organization's eligibility for funding under the CDBG/HOME program. I also certify that this organization will comply with all federal rules and regulations if awarded funding under the CDBG/HOME program. If any information contained in this proposal is determined, at any time during or after the grant period, to be incorrect, misleading or a false statement or, in the event that HUD should determine that CDBG/HOME funds were improperly spent, and that money should be reimbursed to the U.S. Treasury, this organization will be responsible for the reimbursement of any and all CDBG/HOME funds expended.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## SECTION II — ACTIVITY ELIGIBILITY

### CDBG NATIONAL OBJECTIVES

Please indicate (check box) which eligibility criteria apply to this proposal. Your proposal must meet one of these National Objectives.

#### 1. Benefit to Low- to Moderate-Income Persons

- Direct Benefit for Low to Moderate Income Persons. This Activity will directly benefit low to moderate income persons as shown by actual beneficiary income documentation.
- Direct Benefit to Limited Clientele. This Activity will directly benefit a class of persons who, by federal regulation, are presumed to be low to moderate income persons (e.g. abused children, battered persons, severely disabled persons, homeless persons, or elderly persons).
- Area Wide Benefit. This Activity will benefit residents of a particular low to moderate income neighborhood or area (attach a City map showing the boundaries of the area that will be served by the Activity).

#### 2. Prevent or Eliminate Slums or Blight

- If your Activity meets this objective, attach a map showing the City designated blighted area, and the location of the Activity within the blighted area.

#### 3. Urgent Need

This category is reserved for City Activities that meet a serious and immediate threat to public health, safety or welfare. The condition must have occurred within the last 18 months. The City's chief executive officer and financial officer must certify that the City is unable to finance the Activity and that no other funding sources are available

**CLIENT DEMOGRAPHICS**

Please complete the following tables to show the number of clients in each category for your activity. Current income limits can be found at <https://www.hudexchange.info/onecpd>

**Number of Persons or Households served, Income Group**

	<b>Extremely Low Income Level &lt;30% of Median</b>	<b>Very Low Income level &gt;30% &amp; &lt;50% of Median</b>	<b>Low Income Level &lt;50% &amp; &lt;80% of Median</b>	<b>At or above Income level = or &gt; 80% of Median</b>	<b>Total</b>
<b>Persons</b>					
<b>Households</b>					

If your organization received CDBG funding last year, please identify how you plan to increase the number of people served or describe how the proposed services in this application are different from the activities your organization offered last year.

Please mark which of the following specific objectives would be addressed by this Activity. Your application must meet one of these specific objectives to conform to the City's Action Plan.

**A. Homeless and Special Needs Populations Goals:**

Provide housing opportunities, improve living conditions and promote self-sufficiency among homeless and at-risk homeless individuals and families with children.

**Maintain** the existing supply of emergency shelters and permanent housing units by providing financial assistance to agencies serving the homeless

**Provide** technical assistance and financial support to agencies providing housing placement, life skills training, and other supportive services to homeless individuals and families

**Improve** housing affordability and living conditions for low to and moderate income elderly and physically disabled persons in the City of Passaic by addressing housing quality, safety and accessibility

**Rehabilitation** of building (interior and exterior façade) and/or emergency-efficiency improvements including providing handicapped accessibility for low-income and special needs individuals/families.

**B. Non-Housing Community Development Goals:**

Work with residents and neighborhood organizations to create more livable, safe, clean and attractive neighborhoods in the City of Passaic

**Sewer** Services in low to moderate income neighborhoods and Census Tracts in the City of Passaic

**Improve** park and recreation facilities in low to moderate income neighborhoods in the City of Passaic

**Repair** and improve street surfaces, sidewalks, crosswalks, street-lighting and safety improvements in low to moderate income neighborhoods or Census Tracts

**Slum and Blight Elimination** through either demolition or clearance of vacant abandoned buildings and properties that pose an immediate threat to the safety of the area residents in the neighborhood

**C. Public Services addressing the needs of low to moderate income individuals/families**

**Provide** funding to public service providers to assist low to moderate income households with landlord/tenant counseling, housing counseling, transportation services, nutrition services, recreation services, and/or neighborhood clean ups

**Youth** development center/services in low to moderate income neighborhoods in the City of Passaic

**Other**, please describe: \_\_\_\_\_

**Section III Narratives:**

Describe how your proposal will accomplish the specific objective(s) checked above and how your projects meets the needs and goals outlined in the City of Passaic 5-Year Consolidated Plan or 1-Year Annual Action Plan.

Please provide a detailed description of your activity. Describe the need or the demand the project will fulfill. Describe how you plan to monitor your organization’s activities, measure outcomes and document the results of your efforts in meeting your goals and objectives.

Please describe your organization's experience in working with the target population and undertaking similar projects. Provide, as an attachment to this proposal, financial statements for the organization that evidence financial wherewithal to undertake the activities described in this proposal. If your organization has undertaken this type of activity in the past or has used City of Passaic CDBG funds, please describe the activities here. For projects providing services, please describe the readiness of your organization to implement the services or project that you are proposing. For real estate development or construction projects, please describe your development team (contractor, architect, engineer, etc.) and demonstrate your readiness to begin construction. Do you have site control? Have you completed all of the necessary environmental assessments and remediation of any hazardous materials? Are plans and specifications complete? Is all financing committed?

Provide the location of where the services will be provided or where the project will be undertaken. Please provide the Block #, the Lot # and the Ward. Identify the geographical area(s) the project will serve including an estimation of the number of total residents and low to moderate income residents (be as specific as possible). For proposals requesting CDBG funds to deliver services, describe how your organization plans to reach the target population.

City of Passaic CDBG funds must be spent entirely within the City, and all people directly served with City CDBG funds must be City residents. Will any people living outside the City be directly served under this Activity?

Yes\*  No \*If Yes, what other funds will be used to serve these people?

Please describe how you will collaborate with other entities on this activity (include other social supportive service providers, outreach efforts and community organizations). For real estate development or construction projects, identify any minority business enterprises, women-owned business enterprises or disabled business enterprises that you will contract with. Describe your efforts to promote and document local hiring.

Please explain how your clients will provide evidence and verification of their eligibility and income. If your project will serve special needs populations, please describe the population served, how you plan to track the number of participants and your plans to provide social supportive services.

**TIMETABLE**

Identify the implementing stages and completion for the proposed activity. Please demonstrate that the organization is ready to begin delivering the services or start the project immediately upon receiving an award of CDBG funds.

**Actions needed**

**Target Completion Date**


**SECTION IV - PERFORMANCE MEASUREMENTS**

**GOALS:**

The proposed Activity meets which of the following goals (select **only** one):

- Create Suitable Living Environment:** Activities designed to benefit communities, families, or individuals by addressing issues in their living environment (such as poor quality infrastructure) or social issues such as crime prevention, literacy, or elderly health services.
- Provide Decent Affordable Housing:** Housing activities where the purpose of the Activity is to meet individual, family, or community needs and not activities where housing is an element of a larger effort, since such activities would be more appropriately reported under suitable living environment.
- Create Economic Opportunities:** Activities related to economic development, commercial development and job creation for low to moderate income households.

**OBJECTIVES:**

Select the most appropriate objective for the proposed Activity (select **only** one):

**Availability/Accessibility:** Activities that make services, infrastructure, public facilities, housing, or shelters available or accessible to low- and moderate-income people, including persons with disabilities. In this category, accessibility does not refer only to physical barriers, but also to making the affordable basics of daily living available and accessible to low- and moderate-income people where they live.

**Affordability:** Activities that provide affordability in a variety of ways in the lives of low- and moderate-income people. It can include the creation or maintenance of affordable housing, basic infrastructure hook-ups, or services such as transportation or daycare

**Sustainability:** Activities aimed at improving communities or neighborhoods, helping to make them livable or viable by providing benefit to persons of low- and moderate-income, by removing or eliminating slums or blighted areas through multiple activities, or services that sustain communities or neighborhoods

**SECTION V – BUDGET**

Summarize your project budget below. For real estate development and construction projects, attach a detailed sources and uses of funds identifying all sources (including CDBG funds) and uses of funds for the proposed project.

Use of Funds	CDBG Funds Requested	Other Funding \$\$ and Source(s)	Total

**CONTINGENCY PLAN**

What is your organization's contingency plan if your agency does not receive the requested CDBG funding, or receives less than the amount requested?

## APPLICATION CHECKLIST

You must provide a copy of the following sections in the order listed

- Application and all pertaining information** - complete and sign the application.
- Non-profit status verification** — include your proof of non-profit status with an official document (copy) from the Internal Revenue Service (IRS), DUN and BRADSTREET NUMBER (DUNs), TAX ID Number.
- Board of Directors** — Provide a list of the Board of Directors or equivalent and their respective contact information (telephone numbers and addresses).
- Bylaws** — provide a copy of the organization's current bylaws or equivalent. 111 Organizational Chart or Organization Structure.
- Organization's total fiscal budget (current year) and most recent audit**
- Certificate of Incorporation.**
- Financial Statements** - include the most recent audited financial statement and a current year budget
- Job Descriptions** - include job descriptions of all staff members to be paid with City of Passaic ESG funds.
- Additional information** — if you feel the questions or information required by the application are not sufficient to describe your Activity completely, feel free to submit additional information. Plus attach any letters of support or other applicable information, if needed.

### Questions about this application

If you have questions about this application, please contact:

## Submission of this application

All application should be submitted to the following person:

Joyce Gregory-Hunt, Director  
City of Passaic Department of Community Development  
330 Passaic Street  
Passaic, NJ 07055  
[Jhunt@cityofpassaicnj.gov](mailto:Jhunt@cityofpassaicnj.gov)  
(973) 365-5641