COMPETITIVE GRANT ASSISTANCE PROGRAM

An Applicant's Guide

May 2014

Introduction

The Competitive Grant Assistance Program (CGAP) provides incentive-based grant funding to offset the costs associated with mergers, inter-local agreements, and cooperative efforts for cities, villages, townships, counties, authorities, school districts, intermediate school districts, public community colleges, and public universities that elect to combine government operations.

This presentation will serve as your guide to submitting a complete and detailed application.

Purpose of CGAP

To stimulate smaller, more efficient government.

To encourage new mergers, consolidations and cooperations between two or more qualified jurisdictions.

Understanding The Application

The application packet, form 4921, can be found on the Web at:

http://www.michigan.gov/documents/treasury/4921_CGAP_Grant_Application_Packet_FY_2014_Round2_050114_454971_7.pdf?20140501133052

Be sure to read all informational pages prior to completing the application forms. Detailed instructions, with corresponding application numbers, begin on page 9 of the application packet.

PART 1: PRIMARY INFORMATION		$\overline{}$		
1. Primary Applicant Name		2. Primary Applicant Code)	
3. Primary Applicant FEIN		4. Primary Applicant Coun	ty	
5. Mailing Address	6. City		7. State	8. ZIP Code

- I. <u>Primary Applicant Name</u>: This is the applicant that has the authority and the responsibility for the project. They will receive the correspondence from Treasury and it is their duty to keep all other participating applicants informed. See the application instructions for a definition of qualified applicants.
- 2. Primary Applicant Code: The local unit codes can be found on the Web at:

http://www.michigan.gov/documents/treasury/LocalUnitNamesCodes_I10812_403341_7.pdf

School districts and intermediate school districts should use their school district code.

PART 2: PROJE	CT OVERVIEW		
9. Project Title			
10. Project Type	Merger	Consolidation	Cooperative Effort/Collaboration

- 9. Project Title: This is the short, but descriptive, name of the work to be completed.
- 10. **Project Type:** Select the appropriate definition of the project:
 - "Merger": complete combination of 2 or more local units into a single local unit.
 - "Consolidation": combination of 2 or more department service units between 2 or more applicants, where there is a decrease in the number of service units.
 - "Cooperative Effort/Collaboration": sharing of services between 2 or more applicants.

11. Estimated Start Date

12. Estimated Completion Date

13. Estimated Total Project Cost

14. Erant Amount Requested

- 11. Estimated Start Date: Priority will be given to projects that start after October 1, 2013.
- 13. Estimated Total Project Cost: Estimated cost of the total project. This number must tie to the information in application line 31.
- 14. **Grant Amount Requested:** Amount you are requesting for this specific project. This number must tie to the information in application line 31.

15. Additional Applicants Participating in Project (include county and local unit code or school district code). Attach letters of support from each of the participating applicants.

15. Additional Applicants Participating in Project:

Include the applicant name, county and local unit code or school district code for all applicants participating in the project. All participants must be qualified public entities. A letter from every participating applicant, signed by their Chief Administration Officer, must be attached to the application to verify their knowledge and support of the project. See the application instructions for box I for a definition of qualified applicants.

16.	Are the applican	t(s) involved willing to devote appropriate resources and time to this project?
	Yes	No If no, explain why the applicant(s) are unable to devote appropriate resources and time to the project.
	_	
17.	there potentia	I for expansion of the project to include additional applicant(s) at a later date?
Γ	Yes	No If yes, explain how the project would be expanded to include additional applicants at a later date.

- 16. Are the applicant(s) involved willing to devote appropriate resources and time to this project? If selecting 'NO', include an explanation. Use application line 32 if additional space is needed.
- 17. Is there potential for expansion of the project to include additional applicant(s) at a later date? If selecting 'YES', include a summary of how this would be accomplished and list the potential additional applicants. Use application line 32 if additional space is needed.

PART 3: PROJECT CONTACT INFORMATION Note: The project contact individual should be a vital part of the grant project and will be the Michigan Department of Treasury's contact. 18. Contact Name 19. Contact Title 20. Contact Telephone Number 21. Contact Fax Number 22. Contact E-mail Address

- 18. <u>Contact Name:</u> First and last name of the individual that will be responsible for the project and for submitting all required documents. This is the individual that Treasury will contact if there are questions about the application or the project.
- 23. <u>Contact Entity Name:</u> The applicant name the contact individual is affiliated with/contracted by, and/or the company that employs the contact individual.

PART 4: PROJECT DETAILS

24. Current Services: How are the services currently being provided?

24. <u>Current Services: How are the services currently</u> being provided? Be detailed and specific. Include details about the current services, including the current process efficiencies and inadequacies. If the project involves more than one applicant, provide the same level of detail for all applicants participating. Include additional pages, if necessary.

25. Shared Service Analysis: Describe the status of any shared service analysis undertaken to date related to this project. If a shared service analysis has been completed, attach a copy of the shared service analysis or feasibility study.

25. Shared Service Analysis: Describe the status of any shared service analysis undertaken to date related to this project. Provide details of the feasibility study or shared service analysis that has been performed, including when it was completed and how it relates to this project. A copy of the analysis and/or feasibility study must be attached to the grant application, if completed.

26. Project Description:

26. **Project Description:** Be detailed and specific. Include additional pages, if necessary. This information is an important factor in the grant selection process.

What exactly is the project?

Why are you doing the project?

What are the benefits/outcomes of the project?

27. coals, Measures, and Business Objectives of this Project: What are the outcomes you hope to achieve? How will you measure the outcomes? Provide the measures which will be used to determine the success of the project.

27. Goals, Measures, and Business Objectives of this Project: Include specific goals! Explain how each goal will be measured and provide details about how each goal relates to the proposed project.

28. Potential Barriers: Describe any barriers that currently exist that may have an impact on the implementation of the proposed project.

28. <u>Potential Barriers:</u> Describe specific barriers that currently exist, how they may impact implementation of the proposed project, and how the barriers will be overcome.

29. Cost Savings: Will the project save money?	Yes	☐ No
		Estimated Short-Term Savings
A. SHORT - TERM (1 year or less) Yes	No	
B. LONG - TERM (Greater than 1 year) Yes	No	Estimated Annual Long-Term Savings Note: This amount is an annual savings.
		Estimated 5 Year Total Savings
C. Dd you attach a detailed calculation of the cost savings and provide an explanation of how the cost savings were calculated?		

29c. Attach a detailed calculation of the cost savings and provide an explanation of how the cost savings were calculated. Do not include the requested grant funding in your savings calculation. Cost Savings Example:

Consolidating Assessing Offices	Current \$	Projected \$	Savings \$
Local Unit 2 Assessor Salary	35,000	0	35,000
Local Unit 2 Contract with Local Unit 1:	0	(20,000)	(20,000)
Savings/(Expense)			15,000

Cost Savings Explanation: Savings will occur from elimination of one assessor, offset by cost of contract with Local Unit 1 to perform the services.

30. Work Plan and Project Timeline: What are the implementation steps to ensure this project's success? What are the projected outcomes at each step?

30. Work Plan and Project Timeline: Be specific and clear on dates, deliverables and outcomes, from the start of the project through the completion date. Example:

Start Date	Length	Phase/Task
60 days after Intent to Award		Submit to Treasury: required inter-local agreements/board resolution/meeting minutes (for every participating local unit)
April 1, 2013	30 days	RFP for Feasibility Study
May 1, 2013	30 days	Review & Select Consultant
June 1,2013	90 days	Perform Feasibility Study
September I, 2013	30 days	Delivery & Review of Feasibility Study Results

31.)otal Grant Budget Worksheet: For each budget category, attach a detailed list of proposed expenditures. Explain how the expenditures support and are essential to the merger, consolidation, or cooperative effort/collaboration.

Budget Category	Estimated Total Project Cost	Grant Budget Amount Requested
	TOTAL ESTIMATED PROJECT COST \$0.00	TOTAL GRANT AMOUNT REQUESTED \$0.00

31. Total Grant Budget Worksheet. The budget worksheet must include an itemized and detailed listing of all proposed expenditures. Include a brief explanation of why the expenditures are required to proceed with the project. The following pages (19 and 20) provide examples for the grant budget worksheet and the expenditure explanation.

Grant Budget Worksheet (application line 31) Example

Budget Category	Estimated Total Project Cost	Grant Budget Amount Requested
(list specific categories/expenses)	(only include expenses related to this project)	(amount requesting)
Feasibility Study		
Contracted Services		
Administrative Costs		
Training		
Merger Expenses		
Equipment & Infrastructure		
Other		
	Total Estimated Project Cost: this amount must tie to application line 13	Total Grant Amount Requested: this amount must tie to application line 14

Attach additional sheets with a detailed breakdown of a budget category, if it is not readily apparent what all the expenses would be for a given budget category.

Grant Budget Worksheet, Expenditure Explanation, Example:

Budget Category	Expenditure Explanation
(list specific categories/expenses)	(provide specific <u>detail</u> why the expense is required to proceed with the project)
Feasibility Study	determine if there will be a cost savings/benefit
Contracted Services	manage and implement project
Administrative Costs	coordinate between local units
Training	train employees on new equipment/processes
Merger Expenses	cost of updating letterhead, business cards, signs
Equipment & Infrastructure	one new server to handle increased storage needs due to consolidation
Other	

The above chart is an example and should be modified as necessary to include specific details about your project. The more detail provided, the better the understanding of your project.

32. Additional Information and Comments:

32. Additional Information and Comments:

Use this space to include any additional information you feel is pertinent to the proposed project. This is your opportunity to sell your idea!

PART 5: CERTIFICATION

33. I certify that all statements in this application, including all requested supplemental information, are true, complete and accurate to the best of my knowledge. If awarded, I agree to allow the Michigan Department of Treasury and the State Auditor General's Office (and/or any of their duly authorized representatives) access, for the purposes of inspection, audit, and examination, to any books, documents, papers, and records of the grantee which are related to this project. I agree to allow the Michigan Department of Treasury to conduct periodic program reviews of the project. The purpose of these reviews will be to determine adherence to stated project goals and to review progress of the project in meeting its objectives. I agree to submit quarterly and final narrative and financial status reports and a one-year Final Follow-up Report to the Michigan Department of Treasury. I understand that failure to submit any required reports may result in the termination of the grant. I understand that this grant may be terminated if the Michigan Department of Treasury concludes that I am not in compliance with the conditions and provisions of this grant, or have falsified any information. By way of signature, I agree with all conditions of this grant program.

Primary Applicant's Chief Administrative Officer Signature (as defined in MCL141.422b)	Date
Printed Name of Primary Applicant's Chief Administrative Officer (as defined in MCL 141.422b)	Title

33. Primary Applicant's Chief Administrative Officer
Signature (as defined in MCL 141.422b): MCL 141.422b

includes the following: village president or manager; city manager or mayor; school district/ISD superintendent; township manager or supervisor; county elected executive, appointed manager or controller.

Summary

Some things to keep in mind as you prepare your grant application packet:

- Thoroughly read all information prior to completing the application.
- Be detailed and concise!
- Complete the entire application and include all required attachments.
- The more relevant information you provide, the less questions there will be.
- Submit your completed original application on time!
 Deadline: June 25, 2014; 11:59 p.m.