



Grants & Community Development  
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**REQUEST FOR PROPOSAL (RFP) FOR  
 COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG)  
 MICROENTERPRISE BUSINESS ACCELERATOR (MBA)**

**FY 2019**

(Program Year: July 1, 2019 – June 30, 2020)

**Proposal Deadline: July 12, 2019 by 4:00 p.m.**

**MICROENTERPRISE:** \_\_\_\_\_

**ACTIVITY:** \_\_\_\_\_

**CDBG Funds Requested \$** \_\_\_\_\_

**NOTE**

**CDBG funds available for activities within the city limits of Jonesboro.**

Please use the RFP- checklist and assembly instructions. Incomplete RFPs or RFPs without adequate information provided will be eliminated immediately without exception.

**FUNDING ELIGIBILITY (see MBA Program Requirements)**

- Microenterprise must be registered with the System for Award Management (SAM)  
 – To register: <https://www.sam.gov/SAM/>
- Must serve an **absolute verifiable minimum of 51% Low Income**
- Must create or retain one part-time or one full-time employment for LMI persons
- Must provide goods or services to residents of a low-and moderate-income (LMI)

Microenterprises that have been funded through CDBG Program for the past two continuous program years must wait to reapply after a two-year period.

## PROGRAM OVERVIEW CDBG MICROENTERPRISE BUSINESS ACCELERATOR

The City of Jonesboro may assist Microenterprises to undertake economic opportunities, job creation and/or retention activities that benefit underserved area or low-and moderate-income (LMI) individuals.

A Microenterprise is a commercial enterprise that has five (5) or fewer full-time employees, one (1) or more of which owns the enterprise at the time of application. Projects must result in the creation or retention of one part-time or one full-time employment for LMI persons. In the case where no jobs are to be created, the employer/owner or current employee base must be low-to moderate-income persons as established by CDBG. All entities submitting proposal must be able to provide goods and services to an area where the number of LMI persons served by the assisted business amounts to at least one LMI person per \$350 of CDBG funds used.

### LMI Benefit National Objective

Economic activities that benefit an LMI area may qualify under the Area Benefit of the national objective (i.e., a grocery store funded in a neighborhood that is at least 51% LMI). Additionally, the LMI Limited Clientele category may be used to qualify certain economic development activities (i.e., microenterprise activities may be undertaken if the owner of the business is LMI per income confirmation or job training and placement or other employment support services may qualify under Limited Clientele if at least 51% of the individuals benefiting from the activity are LMI).

Job Creation or Retention activity qualifies as Limited Clientele and it must be available to or held by at least 51% LMI persons.

## MBA PROGRAM REQUIREMENTS

All awarded microenterprises are required to enter into an agreement with the City of Jonesboro and comply with HUD regulations Title 24 CFR Part 570 CDBG Program Economic Development Guidelines (570.200 – 570.210), and other applicable local, state, and federal laws. Organizations must acquire and maintain information for the approved project, client eligibility, and reporting. The Department of Grants and Community Development conducts a risk assessment and monitor all funded projects.

- Applicant **must** comply with **all** the submission requirements and assembly instructions exactly as stated in the guidelines. **Failure to do so will result in immediate disqualification – with no review or comment.**
- There is a \$5,000 minimum and \$10,000 maximum funding request. Amount varies according to project specifics.
- For every \$7,500 award funding, the entity must create/retain employment for a full-time LMI person.
- Applicant must meet the public benefit requirement of providing goods and services to an area where the number of LMI persons served by the assisted business amounts to at least one LMI person per \$350 of CDBG funds used.

- Applicant (owner) may be LMI and must provide income verification along with application.
- Applicant who has previously received CDBG funding **must** report the status of that funding, including actual accomplishments and impact.
- Strongest consideration will be given to projects that meet HUD/Jonesboro goals/priorities, serve **70%+ very low/ low-income residents (absolute minimum 51%)** serve multiple “in need” populations, and/or are innovative “new” unduplicated services/programs. Follow HUD Income Limits below.

Area: City of Jonesboro FY 2019 Median Family Income: \$ 54,900								
-----ADJUSTED INCOME LIMITS (by household size)-----								
	1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 + Person
<b>Extremely Low Income (30% Limits)</b>	\$12,490	\$16,910	\$21,330	<b>\$25,750</b>	\$29,650	\$31,850	\$34,050	\$36,250
<b>Very Low Income (50%)</b>	\$19,250	\$22,000	\$24,750	<b>\$27,450</b>	\$29,650	\$31,850	\$34,050	\$36,250
<b>Low &amp; Moderate Income (80%)</b>	\$30,750	\$35,150	\$39,550	<b>\$43,900</b>	\$47,450	\$50,950	\$54,450	\$57,950

**Other requirements to follow if grant is awarded**

- Subrecipient (grant recipient) must abide by the Agreement.
- Subrecipient must use equal opportunity hiring practices. Evidence of outreach efforts to fill vacancies with minorities and females must be kept on file.
- Subrecipient must provide, to the greatest extent feasible, opportunities for job training and employment to LMI persons in connection with projects in their neighborhoods.
- Subrecipient must write and implement job descriptions (for positions related to the Agreement) and employee/volunteer hiring policy. Resumes, applications and documents must be kept on file.

**RFP Checklist and Assembly Instructions - *Project and Budget Narrative must be typed.***

- Completed Application (including Project and Budget Narrative)
- Completed and signed Conflict of Interest Statement
- Business License (copy)
- Proof of SAM.gov registration
- Article of Incorporation (copy)

**APPLICATION**

Has the business previously received CDBG funding from City of Jonesboro?  Yes  No

If yes, please indicate the years and amount funded:

Year Funded	Amount
	\$
	\$
	\$
	\$
	\$

**Organization Information**

Name: \_\_\_\_\_  
*Legal Name of Business*

Address: \_\_\_\_\_  
*Street Address* *Suite #*

\_\_\_\_\_ *City* *State* *Zip Code*

Phone: \_\_\_\_\_  
*Direct Line* *Email*

Contact Person: \_\_\_\_\_  
*Name* *Title*

Project Type: (please check one)

Microenterprise Assistance  Other: \_\_\_\_\_

DUNS Number: \_\_\_\_\_ Registered with SAM?  Yes  No

EIN Number: \_\_\_\_\_ Business Start Date: \_\_\_\_\_

**Project Information**

Activity Title: \_\_\_\_\_

Location: \_\_\_\_\_  
*Street Address* *City & State* *Zip Code*

Brief Project Description: \_\_\_\_\_  
*(A detailed project description will be attached as Project Narrative)*

Project Boundaries: \_\_\_\_\_  
*(Area Benefit only) – State street boundaries North/South/East/West and Census Block Group/Tract*

New Service/Goods/Program  Yes  No

If NO, please list start date of project and award amount with previous CDBG funding: \_\_\_\_\_

If YES, please list how this project is currently funded: \_\_\_\_\_

Duplicated Service/Goods/Program  Yes  No

If YES, please explain the expansion of the existing project: \_\_\_\_\_

### City of Jonesboro CDBG Objective

**National CDBG Objective:**  
Benefiting Low-and-Moderate-Income (LMI)

**National Benefit Objective:** *(refer to RFP Requirements for details)*

Limited Clientele  CDBG Area Benefit

#### Summary of projected outcomes

Will the project be undertaken in a low/mod area?  Yes  No

Will the project be undertaken in the urban renewal area?  Yes  No

How many low to moderate income jobs will be created? \_\_\_\_\_

How many low to moderate income jobs will be retained? \_\_\_\_\_

Project Beneficiaries: *(Enter the number of proposed persons to be served)*

a. \_\_\_\_\_ Persons to be served \_\_\_\_\_ Households *(Total # persons in household to be served indirectly)*

b. \_\_\_\_\_% Female \_\_\_\_\_% Male

c. \_\_\_\_\_% Extremely Low Income (30%) \_\_\_\_\_% Low Income (50%) \_\_\_\_\_% Low/Mod Income (80%)

d. \_\_\_\_\_% City of Jonesboro Residents \_\_\_\_\_% Within a CDBG Target Area

e. \_\_\_\_\_% With Disabilities

## PROJECT NARRATIVE

*For project and budget narratives use numbered questions. Include separate typed sheet of paper.*

The purpose of the Project Narrative is to describe the business plan or the microenterprise. The proposal should include the need or issue to be addressed in relation to the City's Consolidated Plan or other community development priorities (i.e. servicing LMI persons or area). The proposal should also include the description of the work to be performed addressing the activities to be undertaken or the services to be provided, the goals and objectives, method of approach, and the schedule for completion.

Describe your proposed project to include the following:

1. Is this a new service or a duplicated service (an expansion of an existing one)? Please explain how your organization will achieve its goals with the City of Jonesboro's CDBG Program.
2. Business background: Include the years of operation, the date of inception, the purpose of the business, and the type of company. Describe the services or products provided, the company's capabilities, the number and characteristics of clients served, and license to operate (if applicable).
  - a. Reason for opening business
  - b. Financing history and goals
  - c. Projection of business growth in 5 – 10 years (i.e., impact on working capital needs, equipment, and/or your current building)
3. Describe the advertising, marketing techniques, pricing strategies, and tolls you will use to promote your business.
4. Population to be served (Limited Clientele) or the area to benefit (Area Benefit). Indicate how you will identify clients. Provide an estimate as the number of clients to be served and describe their demographics such as age, gender, ethnicity, income level, and other defining characteristics.
5. Specify who (staff) will carry out the activities, location, period, frequency, and delivery in which services will be carried out.
6. Indicate how your project will increase quality of life for your clients and include how you will measure to report the increase. *Required for quarterly reports.*
7. Describe the site where the project will be implemented and how will clients get to the project location? What efforts will your business and partners make to promote the project and reach isolated individuals? Include how the building complies with Americans with Disabilities Act (ADA) requirements regarding accessibility.
8. Explain how you propose to coordinate your services with other community entities and leverage resources.

## BUDGET NARRATIVE

1. Identify the proposed project's cost estimates, leverage of funds, section 108 loan guarantee, other federal/state/local funds, private funds and any matches from other grants.
2. Specify how much money you can put towards the project, and how much money you can borrow.
3. Provide a timeline indicating when funds will be expended.
4. Specify cost associated with each line item budget requested. Each line item must include a brief description explaining the item (item, cost, need, usage, benefit, etc.).
  - a. Payroll (one designated employee/job description)
  - b. Overhead cost (i.e. building/office rent and/or utilities)

**CONFLICT OF INTEREST STATEMENT**

Federal law (24 CFR 570.611) prohibits persons who exercise or who have exercised any functions or responsibilities with respect to the Community Development Block Grant or who are in the position to participate in a decision making process or to gain inside information with regard to such activities, may obtain a financial interest or benefit from an assisted activity either for themselves or those whom they have family or business ties, during their tenure or for one year thereafter.

**If your entity has a conflict, please fill out A. Otherwise, go to B.**

**A.** Please provide the names of entity’s owner, partner, or board members that are currently serving on the CDBG Citizens Advisory Committee, a City employee or immediate family of a City employee, and/or on the City Council this includes prior service for one year: \_\_\_\_\_

I hereby verify the entity understands that City of Jonesboro must request in writing and HUD may grant an exception to the provisions under 24 CFR 570.611(d). The funds requested will not be guaranteed for the proposed project unless HUD grants an exception.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**B.** I hereby certify to the best of my knowledge and belief that no staff member, member of the Board of Director’s, nor officer of \_\_\_\_\_ (business) is currently, nor has been within one year of the date of this application, employed by the City of Jonesboro, a member of the CDBG Citizens Advisory Committee, nor a member of the Jonesboro City Council.

I further attest that no staff member, member of the Board of Director’s, nor officer of the applicant entity, is a business partner or immediate family of a City employee, a member of the Citizens Advisory Committee, or a member of the Jonesboro City Council.

Funds requested will not be used to pay the salaries of any of the applicant business’s staff who is or has been within one year of the date of this application a City employee, a member of the Citizens Advisory Committee, or a member of the Jonesboro City Council. Nor will the applicant business award a subcontract to any such individual.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_