# Citizen Advisory Task Force Meeting July 5, 2018 4 p.m.

Attending:

Carol Galvin, Kimberly McMillan, Jennie Miller and Glenn

Smith

Absent:

Rebecca Vaughn

Others Attending:

Howard McKinnon and Shelia Evans

The meeting was called to order by Town Manager Howard McKinnon.

Mr. McKinnon explained the purpose of the meeting and the requirements of the task force committee.

He gave a brief overview and explained the CDBG grant process. Mr. McKinnon asked if the CATF had any suggestions for possible CDBG project. No one on the committee had any suggestions. Mr. McKinnon then mentioned that the Town's sewer treatment plant needed to be upgraded. The waste water treatment facility is approximately sixty (60) years old. The estimated cost of the upgrade is \$5.5 million. Based on the population, Havana is eligible to apply for \$650,000 in CDBG grant funds. If approved, the loan will assist and help soften the impact.

After discussion, the committee agreed to move forward with the treatment plant upgrade and recommend the council apply for the CDBG grant funds.

Motion to adjourn.

# **CATF MEETING AGENDA**

TOWN OF HAVANA FFY 2017 CDBG PROJECT JULY 5, 2018

## I. PURPOSE OF MEETING

- A. THE TOWN CAN APPLY FOR CDBG FUNDING IN ONE OF FOUR CATEGORIES:
  - HOUSING
  - 2. NEIGHBORHOOD REVITALIZATION
  - 3. COMMERCIAL REVITALIZATION
  - 4. ECONOMIC DEVELOPMENT

## B. HOW MUCH IS AVAILABLE TO HAVANA?

- BASED UPON POPULATION, HAVANA IS ELIGIBLE TO APPLY FOR UP TO \$650,000.00 IN CDBG GRANT FUNDS
- 2. THE TOWN MAY ALWAYS APPLY FOR ECONOMIC DEVELOPMENT, BUT MAY ONLY BE FUNDED FOR ONE ED PROJECT DURING A PROGRAM YEAR

## II. WHAT CAN THESE FUNDS BE USED FOR?

## A. POSSIBLE PURPOSES FOR THESE FUNDS

- 1. TO BENEFIT LOW AND MODERATE INCOME PERSONS; OR
- 2. TO AID IN THE PREVENTION OR ELIMINATION OR SLUMS OR BLIGHT; OR
- 3. TO MEET OTHER COMMUNITY DEVELOPMENT NEEDS HAVING A PARTICULAR URGENCY BECAUSE EXISTING CONDITIONS POSE A SERIOUS AND IMMEDIATE THREAT TO THE HEALTH OR WELFARE OF THE COMMUNITY AND WHERE OTHER FINANCIAL RESOURCES ARE NOT AVAILABLE TO MEET SUCH NEEDS.

## B. ELIGIBLE ACTIVITIES FOR EACH CATEGORY

- 1. HOUSING
  - a) REHABILITATION OF HOUSES OR PUBLICLY OWNED OR ACQUIRED PROPERTIES IN A TARGET AREA
  - b) DEMOLITION OF DILAPIDATED HOUSING AND RELOCATION OF RESIDENTS.
  - c) WEATHERIZATION AND ENERGY-EFFICIENCY IMPROVEMENTS.
  - d) CODE ENFORCEMENT.
  - e) INSTALLATION OF WELLS OR SEPTIC TANKS WHERE WATER OR SEWER SERVICE IS UNAVAILABLE.
- 2. NEIGHBORHOOD REVITALIZATION
  - a) WATER FACILITIES (WELL OR TANK)
  - b) WATER LINES

- c) SEWER FACILITIES (TREATMENT PLANT)
- d) SEWER LINES
- e) STORM DRAINAGE
- f) STREET PAVING
- g) CONSTRUCTION OR REHABILITATION OF NEIGHBORHOOD FACILITIES (SENIOR CENTERS, REC. CENTERS)
- COMMERCIAL REVITALIZATION
  - a) REPAIR AND REHABILITATION OF BUILDING FACADES
  - b) CORRECTION OF BUILDING CODE VIOLATIONS
  - c) ACQUISITION OF SUBSTANDARD OR BLIGHTED AREAS FOR CLEARANCE, DEVELOPMENT OR REDEVELOPMENT
  - d) INSTALL, CONSTRUCT OR RECONSTRUCT STREETS, UTILITIES, PARKS, PLAYGROUNDS, PUBLIC SPACES, PUBLIC PARKING FACILITIES, SIDEWALKS, BUST STOP SHELTERS, LIGHTING, BENCHES, TRASH RECEPTACLES, OR SHELTERS.
  - e) SELL, LEASE OR MAKE AVAILABLE LAND FOR REDEVELOPMENT
- 4. ECONOMIC DEVELOPMENT
  - a) ACQUISITION OF REAL PROPERTY
  - b) ACQUISITION, CONSTRUCTION OR REHABILITATION OF COMMERCIAL AND INDUSTRIAL BUILDINGS OR STRUCTURES
  - c) PURCHASE OF CAPITALIZED MACHINERY AND EQUIPMENT
  - d) ENERGY CONSERVATION IMPROVEMENTS
  - e) PUBLIC, COMMERCIAL OR INDUSTRIAL REAL PROPERTY IMPROVEMENTS
  - f) REMOVAL OF ARCHITECTURAL BARRIERS
- C. DISCUSSION
- D. RECOMMENDATION TO COUNCIL



# **Household Income Certification Form**

Form SC-49 April, 2015

# Section I

Name: Glenn + Lawson Smith Town		Local Government: Town of Havana
Own	Rent	=
	☐ Rent Street Address:	Map Key #:
206 E. 6th Are		Service Area #:
City: Harrie		Description of Unit:
7/5/18	Date of Survey:	Singl Family Housing

# Section II

(Circle the total household size and then answer whether total household income is or is not within each of the three ranges.)

7							
	Number of Persons in Household	2 Income Range (Moderate)	Is Total Household Income within this Range?	4 Income Range (Low)	Is <b>Total Household Income</b> within this Range?	6 Income Range (Very Low)	Is <b>Total Household Income</b> within this Range?
	1	0 - \$37,750	∏Yes ∏No	0 - \$23,600	☐ Yes ☐ No	0 - \$14,150	☐ Yes ☐ No
	2)	0 - \$43,150	□Yes ZNo	0 - \$27,000	Yes 4No	0 - \$16,460	Yes HNo
	ω(	0 - \$48,550	$\prod { m Yes}  \prod { m No}$	0 - \$30,350	☐ Yes ☐ No	0 - \$20,780	☐ Yes ☐ No
	4	0 - \$53,900	$\prod { m Yes}  \prod { m No}$	0-\$33,700	☐ Yes ☐ No	0 - \$25,100	☐ Yes ☐ No
	5	0 - \$58,250	☐ Yes ☐ No	0 - \$36,400	☐ Yes ☐ No	0 - \$29,420	☐ Yes ☐ No
	6	0 - \$62,550	Yes No	0 - \$39,100	☐ Yes ☐ No	0 - \$33,740	☐ Yes ☐ No
	7	0- \$66,850	☐ Yes ☐ No	0 - \$41,800	☐ Yes ☐ No	0 - \$38,060	☐ Yes ☐ No
	8	0 - \$71,150	$\prod { m Yes}  \prod { m No}$	0 - \$44,500	☐ Yes ☐ No	0 - \$42,380	☐ Yes ☐ No
		0 - \$	☐ Yes ☐ No	0 - \$	☐ Yes ☐ No	0 - \$	☐ Yes ☐ No
ı							

appropriate boxes in the bottom row. Income data is available from the following website: http://www.huduser.org/portal/datasets/il.html Note: For households of more than 8 persons, insert the household size and the correct income range for each of the three income levels in the



Form SC-49 April, 2015

# **Household Income Certification Form**

Other Multi-Racial Asian and White Native Hawaiian Pacific Islander Asian White in the household. Some household members may need to be counted in more than one category. Black/African American and White American Indian/Alaskan Native and White American Indian/Alaskan Native and Black/African American American Indian or Alaskan Native Black/African American Indicate how many people in each of the following categories reside Race Indicate race and ethnicity below: Section III Female Head of Household Total 7 5 # of Hispanic Handicapped Ethnicity 0 # Units Owner Occupied H For Housing Grants Only Elderly (60+) # Units Renter Occupied

Interviewer	any sewer or water facilities constructed as a part of this project and of any estimated costs or monthly fees associated with such hook up	the occupant. Additionally, if the proposed project includes water or sewer system.	ertification: I, the undersigned, certify that the information stated in this form is
Date:	ed costs or monthly fees associated with such hook up.	by the occupant. Additionally, if the proposed project includes water or sewer system improvements, each household has been advised that they may be required to hook up to	Certification: I, the undersigned, certify that the information stated in this form is true and accurately reflects the household composition and income data as presented to me

Totals

itervi
ewer:
Date:

to



**Household Income Certification Form** 

Form SC-49 April, 2015

	Section I			
Local Government: Town of Havana	Map Key #: Servi	Service Area #:	Description of Unit: Modell Hame	lome
Rent	Rent Street Address:			Date of Survey:
Gennie Thomas Killer & Own	612 Louch Main St.	main St	tavana-H.	July 5-18
	Section II			

(Circle the total household size and then answer whether total household income is or is not within each of the three ranges.)

Number of Persons in Household	Income Range (Moderate)	Is Total Household Income within this Range?	4 Income Range (Low)	Is Total Household Income within this Range?		6 Income Range (Very Low)
 1	0 - \$37,750	☐ Yes ☐ No	0 - \$23,600		☐ Yes ☐ No	
Ø	0 - \$43,150	Yes No	0 - \$27,000	ारा	Yes No	
3	0 - \$48,550	☐ Yes ☐ No	0 - \$30,350	П	☐ Yes ☐ No	
4	0 - \$53,900	☐ Yes ☐ No	0-\$33,700		☐ Yes ☐ No	
5	0 - \$58,250	☐ Yes ☐ No	0 - \$36,400		☐ Yes ☐ No	
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 7	0 - \$66,850	$\prod { m Yes}  \prod { m No}$	0 - \$41,800		Yes No	
8	0 - \$71,150	☐ Yes ☐ No	0 - \$44,500	П	☐ Yes ☐ No	
	0 - \$	☐ Yes ☐ No	0 - \$		☐ Yes ☐ No	

appropriate boxes in the bottom row. Income data is available from the following website: http://www.huduser.org/portal/datasets/il.html Note: For households of more than 8 persons, insert the household size and the correct income range for each of the three income levels in the



Form SC-49

# **Household Income Certification Form**

April, 2015

	Section III			
Indicate how many people in each of the following categories reside	Female Head of Household	Handicapped	Elderly (60+)	(60+)
in more than one category.		p	70 (	(2)
Indicate r	Indicate race and ethnicity below:	w:		
Race	Total	# of Hispanic Ethnicity	For Housing Grants Only	Grants Only
			# Units Owner Occupied	# Units Renter Occupied
White			-	
Black/African American	72			
Asian				
American Indian or Alaskan Native				
Native Hawaiian Pacific Islander				
American Indian/Alaskan Native and White		*		
Asian and White				
Black/African American and White				
American Indian/Alaskan Native and Black/African American				
Other Multi-Racial				
Totals				
Certification: I, the undersigned, certify that the information stated in this form is true and accurately reflects the household composition and income data as presented to me by the occupant. Additionally, if the proposed project includes water or sewer system improvements, each household has been advised that they may be required to hook up to any sewer or water facilities constructed as a part of this project and of any estimated costs or monthly fees associated with such hook up.	n is true and accurately ystem improvements, exated costs or monthly t	reflects the household co ach household has been a fees associated with such	household composition and income data as presented to me old has been advised that they may be required to hook up to ed with such hook up.	lata as presented to me required to hook up to

Interviewer: Date:

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