



Community Development Block Grant Program (CDBG)

LAKE COUNTY · PLANNING & COMMUNITY DEVELOPMENT OFFICE

105 Main Street · Painesville, OH 44077
 Phone (440) 350-2740 · Fax (440) 350-2606

GRANT APPLICATION REVIEW FORM

Applicant Organization:
Amount Requested:
Project Title:

CATEGORY	TOTAL POSSIBLE POINTS	TOTAL POINTS EARNED
1. Application completed in its entirety	16	
2. All appropriate documentation attached	15	
3. Leverages/matches	12	
4. Collaboration	12	
5. Agency Capacity and project feasibility	20	
6. Meeting a need and fulfilling a goal based on the ConPlan	20	
Internal Controls	5	
Past Performance (maximum deduction of 5 points)	0	
TOTAL	100	



Community Development Block Grant Program (CDBG)

LAKE COUNTY · PLANNING & COMMUNITY DEVELOPMENT OFFICE

105 Main Street · Painesville, OH 44077
 Phone (440) 350-2740 · Fax (440) 350-2606

1. Application Completed in its entirety (16 points)	
a. Applicant Information	Yes ___ (2 points) No ___ (0 points)
b. Project Specific Information	Yes ___ (2 points) No ___ (0 points)
c. Narrative Section	Yes ___ (2 points) No ___ (0 points)
d. Organizational Capacity	Yes ___ (2 points) No ___ (0 points)
e. Budget	Yes ___ (2 points) No ___ (0 points)
f. Schedule	Yes ___ (2 points) No ___ (0 points)
g. Threshold Criteria/Application Checklist	Yes ___ (2 points) No ___ (0 points)
h. Authorization	Yes ___ (2 points) No ___ (0 points)
Notes:	
2. All appropriate documentation attached (15 points)	
a. Has the applicant attached all required documents that are applicable to the proposed project?	All required documents were attached ___ (15 points) Some documents were attached ___ (5 points) No documents were attached ___ (0 points)
Notes:	
3. Leverages/matches with funding from another source (12 points)	
a. Was leverage or match identified in the budget section?	High level of leverage (over 50%) ___ (12 points) Some leverage (under 50%) ___ (5 points) Zero leverage ___ (0 points)
Notes:	
4. Collaboration (12 points)	
a. Does the applicant obtain community investments through its partnerships or other type of involvement in project development?	Yes ___ (12 points) No ___ (0 points)
Notes:	



LAKE COUNTY · PLANNING & COMMUNITY DEVELOPMENT OFFICE

105 Main Street · Painesville, OH 44077
 Phone (440) 350-2740 · Fax (440) 350-2606

5. Agency capacity and project feasibility (20 points)	
a. Does the applicant identify individuals responsible for the success of the project that have relevant experience and that will fulfill all the needs of the project?	Yes___ (4 points) No___ (0 points)
b. Does the applicant have a clear plan in place to track and monitor the progress of the project?	Yes___ (4 points) No___ (0 points)
c. Do project estimates explain all costs necessary to support project activities and the achievement of project objectives?	Yes___ (4 points) No___ (0 points)
d. Do project milestones explain all activity necessary to complete the project within the program year?	Yes___ (4 points) No___ (0 points)
e. Is applicant able to proceed with the project based on the applicant's level of readiness?	Yes___ (4 points) No___ (0 points)
Notes:	
6. Meeting a need and fulfilling a goal based on the ConPlan (20 points)	
a. Does this application support the overall intent, goals, and purpose of the CDBG program as it relates to the Consolidated Plan?	Yes___ (10 points) No___ (0 points)
b. Does the applicant describe its ability to meet AFFH obligations by fulfilling one or more fair housing metric?	Yes___ (10 points) No___ (0 points)
Notes:	



Community Development Block Grant Program (CDBG)

LAKE COUNTY · PLANNING & COMMUNITY DEVELOPMENT OFFICE

105 Main Street · Painesville, OH 44077
 Phone (440) 350-2740 · Fax (440) 350-2606

<p>Internal Controls (+5 points): Applicant has the ability to manage a federally funded project, as indicated by responses on the application for assistance.</p>	
<p>Past Performance (-5): Applicant has prior history of negative administrative and programmatic performance.</p> <ul style="list-style-type: none"> • ___ Did not have capacity to carry out service • ___ Project was not completed during program year • ___ Projected outcomes were not accomplished • ___ Reporting requirements were not met • ___ Federal directives were not followed 	

TOTAL APPLICATION SCORE (100 Possible)	
-----------------------------------------------	--

Reviewer Name	
Review Date	

Reviewer Comments: