



City of Norfolk
Block-by-Block Neighborhood Pride Grant Program
50/50 Matching Grant Application
Requests of \$500 or more (up to \$2,500)

Title of Project/Activity:

Neighborhood Organization:

Please be thorough but direct in answering the following questions. Attachments with supplemental information are strongly encouraged. Where applicable, please attach the following:

- Necessary permits, approvals and certificates showing authorization for your project by appropriate governing body
- Copies of maps, site plans, and/or construction drawings, as appropriate
- Documented verification of matching funds and/or in-kind services

Project Description

- I. Please describe your proposed project. What do you want to do? How do you intend to make this improvement? (1500 character limit)

2. What issue will the project address? Please select *one* category that best describes the issue your project will address:

- Landscaping/Beautification
- Capacity/Skill Building workshops
- Community Outreach
- Neighborhood Pride/Celebrations
- Neighborhood Safety
- Other: _____

3. Which one of the City of Norfolk's priorities does your project address? Please select as many categories as applicable:

- Resilient Norfolk
- Infrastructure and Connectivity
- Economic Opportunity For Residents and Businesses
- Learning and Enrichment Opportunities for Residents and Visitors
- Safe, Engaged, and Informed Community
- Community Support and Well-Being
- Efficient and Responsive Government

Project Location

4. Please describe the physical location of your proposed project. Why was this location selected? Is this private property or city-owned property? (1000 character limit)

Neighborhood Benefit/Involvement

5. Please describe how your neighborhood/residents will benefit from this project? (1500 character limit)

6. How many neighborhood residents are/were involved in planning the project?
How many will be involved in implementing the project?
What tasks will they complete? (1500 character limit)

BLOCK-BY-BLOCK PROJECT WORK PLAN

- List, in chronological order, the steps required to complete this project and who will be responsible for carrying out the step or activity.
- Estimate the date/ how much time it will take to complete each step.
- Provide the date the project will be completed (month and year). Remember, all funds must be used within six months of issuance of the Block-By-Block check (unless a waiver or special permission is given by the Department of Neighborhood Services).

STEP/ACTIVITY	RESPONSIBLE PARTY	COMPLETION DATE	AMOUNT OF TIME TO COMPLETE

Project Sustainability

7. Provide an ongoing maintenance plan for your project. Explain the long-term impact of this project on your community. How do you intend to sustain your project and its benefits beyond the current year and the use of the Block-By-Block funds? (1200 character limit)

Project Budget Narrative

8. What is the total funding amount requested? Please provide a narrative explaining how you arrived at the figures for purchasing materials. Describe how you plan to spend this money. *Please complete Budget and Match Forms below.* (1200 character limit)

Budget

A. Project Costs (Please list all cash expenditures required for the project including cost of permits, fees, etc.)

1.	\$
2.	\$
3.	\$
4.	\$
5.	\$
Total Project Cost	\$

Total Project Income must be greater than or equal to the Total Project Cost

B. Project Income (Please list all cash available to cover the Project Costs. This does not include in-kind matches or donated materials.)

Neighborhood Grant Request	\$
Cash from Neighborhood	\$
Cash from other sources	\$
Total Project Income	\$

Match

A. Project Match (Please include all cash – excluding the grant request) and the value of volunteer hours and donated goods, supplies, and other in-kind matches. Match must equal or exceed the grant request).

Cash from the neighborhood and other sources	\$
Proposed volunteer hours (hours x \$22.50)	\$
Donated goods and/or services	\$
Total Neighborhood Match (sum of lines 1-3 above)	\$

Please describe any donated goods and services in the area below: (800 character limit)

Neighborhood Contact Information

Contact Person:

(Suggestion: Select a person who is available to answer questions prior to and during proposal review, and who will receive and address all correspondence related to the project.)

Email:

Phone:

Mailing Address:

Alternate Contact Person:

Email:

Phone:

Mailing Address:

Civic League Endorsement:

By signing below, I/we certify that we have reviewed this proposal and it has the full endorsement and support of Civic League.

Civic League President Name

Email:

Phone:

Date:

Signature

Neighborhood Development Specialist Endorsement:

Please have your Neighborhood Development Specialist sign the application as verification that they have previewed the application.

Neighborhood Development Specialist Name:

Signature

**BLOCK-BY-BLOCK
SUBMISSION CHECKLIST**

Item	No	Yes
Read all grant instructions carefully.	<input type="checkbox"/>	<input type="checkbox"/>
Have provided documentation that the civic league or organization is a legal entity listed on the Virginia State Corporation Commission website.	<input type="checkbox"/>	<input type="checkbox"/>
Group approval is achieved on the grant project from the civic league(s) of the neighborhood(s) involved. [The project cannot be a lone individual's idea.]	<input type="checkbox"/>	<input type="checkbox"/>
Conducted due diligence in identifying any necessary permissions or permits needed for the project from government departments or property owners.	<input type="checkbox"/>	<input type="checkbox"/>
Have provided documentation of specific and accurate cost estimates for the budget.	<input type="checkbox"/>	<input type="checkbox"/>
Obtained your Neighborhood Development Specialist's signature as verification they have previewed the application.	<input type="checkbox"/>	<input type="checkbox"/>
Have preliminary commitment of volunteers for the project.	<input type="checkbox"/>	<input type="checkbox"/>
Have obtained preliminary commitment of matching source(s) to meet the matching requirement.	<input type="checkbox"/>	<input type="checkbox"/>
Have the W-9 signed and prepared to submit.	<input type="checkbox"/>	<input type="checkbox"/>

If the answer to any of the above is “No,” your grant is not ready to submit.