

Application for Federal Assistance SF-424

* 1. Type of Submission:

- Preapplication
 Application
 Changed/Corrected Application

* 2. Type of Application:

- New
 Continuation
 Revision

* If Revision, select appropriate letter(s):

* Other (Specify):

* 3. Date Received:

4. Applicant Identifier:

SD461392 B-20-MC-46-0002

5a. Federal Entity Identifier:

5b. Federal Award Identifier:

B-20-MC-46-0002

State Use Only:

6. Date Received by State:

7. State Application Identifier:

8. APPLICANT INFORMATION:

* a. Legal Name:

Rapid City

* b. Employer/Taxpayer Identification Number (EIN/TIN):

46-6000380

* c. Organizational DUNS:

0572221190000

d. Address:

* Street1:

300 Sixth Street

Street2:

* City:

Rapid City

County/Parish:

Pennington County

* State:

SD: South Dakota

Province:

* Country:

USA: UNITED STATES

* Zip / Postal Code:

57701-5035

e. Organizational Unit:

Department Name:

Community Development

Division Name:

CDBG Program Division

f. Name and contact information of person to be contacted on matters involving this application:

Prefix:

MS.

* First Name:

Michelle

Middle Name:

* Last Name:

Schuelke

Suffix:

Title:

CDBG Program Division Manager

Organizational Affiliation:

City of Rapid City - Community Development Department

* Telephone Number:

605-394-4181

Fax Number:

605-355-3520

* Email:

Michelle.Schuelke@rcgov.org

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*** 9. Type of Applicant 1: Select Applicant Type:**

C: City or Township Government

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

*** 10. Name of Federal Agency:**

11. Catalog of Federal Domestic Assistance Number:

14.218

CFDA Title:

Community Development Block Grant

*** 12. Funding Opportunity Number:**

* Title:

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

Add Attachment

Delete Attachment

View Attachment

*** 15. Descriptive Title of Applicant's Project:**

Property Acquisition; Acquisition Rehabilitation; Public Facilities and Improvements; Infrastructure; Economic Development; and Public Services that benefit low-income individuals and households.

Attach supporting documents as specified in agency instructions.

Add Attachments

Delete Attachments

View Attachments

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16. Congressional Districts Of:
* a. Applicant * b. Program/Project

Attach an additional list of Program/Project Congressional Districts if needed.

17. Proposed Project:
* a. Start Date: * b. End Date:

18. Estimated Funding (\$):

* a. Federal	522,456.00
* b. Applicant	
* c. State	
* d. Local	
* e. Other	0.00
* f. Program Income	87,988.00
* g. TOTAL	610,444.00

*** 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**
 a. This application was made available to the State under the Executive Order 12372 Process for review on .
 b. Program is subject to E.O. 12372 but has not been selected by the State for review.
 c. Program is not covered by E.O. 12372.

*** 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)**
 Yes No
If "Yes", provide explanation and attach

21. *By signing this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**
 ** I AGREE
** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix:	Mr.	* First Name:	Steve
Middle Name:			
* Last Name:	Allender		
Suffix:			
* Title:	Mayor, City of Rapid City		
* Telephone Number:	605-394-4110	Fax Number:	605-394-6973
* Email:	Steve.Allender@rcgov.org		
* Signature of Authorized Representative:	<input type="text"/>	* Date Signed:	<input type="text"/>

Pauline Sumption, Finance Director

Date