

# **City of Houston**

## **Neighborhood Matching Grant Program**

### **2009 Application**

Please print or type. Please answer each question briefly. You may use one additional 8 1/2" x 11" sheet to complete your answers. Be sure to number the question/answer on the extra sheet. If the question does not apply to your project, put NA (not applicable).

**APPLICATION DEADLINE: 5:00 p.m., Friday, October 30, 2009**

#### **Part I**

##### **General Information**

Name of neighborhood association: \_\_\_\_\_

Name of Super Neighborhood Area: \_\_\_\_\_

Contact person for the application: \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (day): \_\_\_\_\_ (evening): \_\_\_\_\_

E-mail Address \_\_\_\_\_

Title of Project: \_\_\_\_\_

City Match Requested (Not to exceed \$3,000) \$ \_\_\_\_\_

What Council District is your project located in? \_\_\_\_\_

Have you ever received funding from the Neighborhood Matching Grant Program? \_\_\_\_\_

If yes, what was the matching grant year and amount awarded?

Year \_\_\_\_\_ Amount \$ \_\_\_\_\_

***Please give a brief project description:***

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### **Certification by Organization**

By signing this application, I/we certify that the information contained in this application is true and correct to the best of my/our knowledge. I/we also understand and agree to the requirements of the Neighborhood Matching Grant Program and to invite the City to any promotional activities associated with our project.

President/Board Chair Name: \_\_\_\_\_

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

Project Manager Name: \_\_\_\_\_

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

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## **Qualifying Information for Organizations**

Your organization must be a Neighborhood Association/Civic Club with a 501(c) (3) or a 501(c) (4) Certificate of Incorporation from the State of Texas to qualify for this grant. Does your organization fit these criteria? Yes  No

*If no, please have your partnering 501(3) or 501(c)(4) organization complete the following.*

**Note:** Please attach a copy of your organization's State Certificate of Incorporation and IRS Department of Treasury tax exempt status, or that of your partnering organization, if applicable.

1. Name of Organization: \_\_\_\_\_

Contact person: \_\_\_\_\_

Address: \_\_\_\_\_

Phone (day): \_\_\_\_\_ (evening): \_\_\_\_\_

E-mail Address: \_\_\_\_\_

2. Please list the current officer(s), name(s) and title(s). Also list committees and chairpersons.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Organization's annual operating budget: \$ \_\_\_\_\_ Year: \_\_\_\_\_

4. Organization's Federal Identification No. \_\_\_\_\_

**Select One:** We are a 501 (c) (3)  501 (c) (4)

## **Certification by a 501(c) (4) Organization**

By signing this application, I declare that our organization is not a political action committee; all grant monies will be used for a project that will benefit the community. *(Applies only to 501 (c)(4) organizations)*

President/Board Chair Name: \_\_\_\_\_

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

## **Part II**

### **Qualifying Information for Projects**

1. Title of Project: \_\_\_\_\_

2. Briefly describe your project:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. What is the physical address of your project? Please include a picture of project site.

\_\_\_\_\_

4 The property is owned by:

\_\_\_\_\_

Do you have permission of the property owner to make the proposed improvements?  
Yes  No

**\*\*\*\*\*Note\*\*\*\*\***

***A copy of the written permission from the property owner is required. The property owner may be a government agency, the owner of private property, or an association if the property is a common area. Property and project must be accessible to all residents of Houston.***

5. Does your project require upkeep/maintenance beyond the grant period? If so, how will you maintain the project (funding, volunteers, etc.)? Please be specific.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Part III

### Project Information

1. With your project in mind, describe the current condition of project site? How will your proposed project improve it? Please be specific.

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2. Describe your project after completion. What is your end goal or visible result?

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3. How will the proposed project contribute to improving the quality of life of the neighborhood?

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4. List the ways in which you involved the rest of the neighborhood in **selecting** and **planning** this project. How did you get their input (meetings, door-to-door surveys or flyers, etc.)?

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# **Neighborhood Matching Grant Program Check List**

- Organization has State of Texas Certificate of Incorporation and IRS Department of Treasury tax exempt designation as a 501(c)(3) or 501(c)(4) or is partnering with an organization that is registered with the State of Texas as a 501(c)(3) or 501(c)(4). (please provide both documents)**

**\*\*\*\*\*Note\*\*\*\*\***

*If you are partnering with a 501 (c)(3) or 501(c)(4) organization, please ensure their portion in the application is completed.*

- Operating budget is included & explains funding needs; include partnering 501(c) (3) or 501(c) (4) operating budget.**
- A letter of support is included from the sponsoring organization(s) & from other area organizations (minimum of 3 support letters), including permission of the abutting property owner(s), if applicable.**
- Included a color photo along with the physical address of the project site.**
- Included rendering / drawing of project with application.**
- Included a copy of documents from appropriate city departments approving projects.**