



TOWN OF CARY NEIGHBORHOOD IMPROVEMENT PROGRAM APPLICATION FOR MATCHING GRANT

Please complete all pages of this application in its entirety and have your representative sign below. This information is needed to determine your eligibility for the Town of Cary's Neighborhood Improvement Program. Applications will be processed on a first-come, first-served basis. If you need assistance in completing this application, please contact the Town of Cary Neighborhood Improvement Program at (919) 380-5991. Please see the program guidelines at the end of this document to ensure a complete application.

Date:

APPLICANT INFORMATION

Please indicate the Chair, President, or Director of your organization and a contact person (if different). The contact person should be able to answer specific questions regarding your project and application. Please note that if this project is approved, the approved funds will be mailed to this contact at this address.

| | |
|--|-------------------------|
| Name of Applicant/Organization: | |
| President/Chairperson (If applicable): | |
| Address: (Number) (Street) | (City) (State) (Zip) |
| Phone Number (Day): | Phone Number (Evening): |
| Email: | |

PROJECT SUMMARY

Please indicate name of the project and the specific neighborhood or physical location of the project. A person authorized by the organization, such as President, Chairperson, Vice Chairperson, Director, etc must sign the application.

| | |
|---|------------------------------------|
| Name and Short Description of the Project: | |
| Neighborhood and/or Physical Location of the Project: | |
| Total Project Cost: | Amount Requested from NIP: |
| Estimated Project Start Date: | Estimated Project Completion Date: |
| Has your organization applied for Neighborhood Improvement Program funding previously? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" please indicate when and the name of the project: | |

Signature (& Date) of Authorized Representative

Printed Name (& Title) of Authorized Representative

Please provide a response to the following questions. Attach additional sheets as necessary.

PLEASE PROVIDE A DESCRIPTION OF THE PROJECT

DESCRIPTION OF THE APPLICANT

Please provide a brief description of your organization; how is it organized, how long it has been established, etc. Applicant should demonstrate how the project will be managed by the organization and how the match requirements will be met in a timely manner.

We are a:

- Neighborhood Association
- Neighborhood Watch Group
- Homeowners Association
- Committee of Concerned Citizens

NEIGHBORHOOD INVOLVEMENT

Please describe how involvement from the neighborhood residents was obtained in the selection of this project. Include documentation showing the neighborhood involvement such as neighborhood flyers, minutes of any meetings where the project was discussed, sign-in sheets, etc.

WHAT WILL THE PROJECT ACCOMPLISH

Please describe what need this project addresses and how the neighborhood will benefit from the project. Will there be any spillover benefits to the Town? If possible please provide specific numbers of persons benefiting or other measures to demonstrate the success of the project.

FUTURE MAINTENANCE OF THE PROJECT

If you are proposing a physical project such as a neighborhood sign or landscaping/beautification project please describe how the project will be maintained once the project is completed. If the project is organizational in nature describe how you plan to maintain what is gained from the project after it is completed.

MATCH REQUIREMENTS

Applicants requesting funding under the Neighborhood Improvement Program must provide a 100% match (\$1.00 in matching funds for each \$1.00 requested in funding). The match provided must be directly related to the project being undertaken. Matching resources may include the following:

- Cash contributions;
- Donated or Discounted Materials or Services, provided that price quotes are provided from the vendor substantiating the value of the item(s);
- Donated land, with assessment information documenting the value of the donation;
- Donated professional services, such as architectural, engineering, construction, etc., valued at the full cost of the service provided;
- Volunteer labor, valued at \$17.25 per hour.

Briefly describe the matching resources you have identified to meet the match requirement.

BUDGET WORKSHEET

The Budget Worksheet may be found on the following page. The budget should provide a total picture of your project and the resources needed to complete it. All related costs must be covered in the budget. The applicant is required to identify the source of funding for each line item with an explanation if necessary. The value and type of any in-kind contributions should be thoroughly explained and should include supporting documentation as needed. Your budget should clearly relate to the activities described in your project description.

Instructions for completing the Budget Worksheet:

- (A) Budget Item:** Provide a brief description of each item needed to complete the proposed project, including labor and materials.
- (B) Actual Cost:** The actual cost or value of the item. Please detail material and labor costs separately where applicable.
- (C) Requested in Matching Grant Funding:** Amount of money requested for each line item from Neighborhood Improvement Program funds
- (D) Matching Resources Provided by the Applicant:** Indicate the value of the matching resources being provided by the applicant through volunteer labor, cash donations, donated goods or services, etc.

Note for Columns (C) and (D): Some budget line items may be entirely funded by Neighborhood Improvement Program funds or by Matching resources. Each line item does not need to show a 100% match. Match requirements only apply to the total project cost.

- (E) Specify Matching Resources:** Indicate the source of the volunteer labor, cash donation, discount in material costs, etc. If donated or discounted materials or services, identify vendor.
- (F) Total:** The Total is the sum of columns (C) and (D).

Neighborhood Improvement Program

Project Guidelines

In order to receive matching funds from the Town, the project must meet the following minimum guidelines:

- 1. The project must have support of the HOA or Neighborhood Association (where applicable).**
- 2. The project must involve residents in all phases of implementation including volunteer labor or “sweat equity,” where possible. Work that can be completed by residents as opposed to an outside contractor is highly preferred.**
- 3. Replacement or maintenance-related projects such as replacement of mail boxes, entrance signs or plant removal are not eligible.**
- 4. The project must meet all Town codes and conform to all departmental policies.**
- 5. The project must obtain all Town permits required for construction (Minor Alteration, Sign Permit, etc.)**
- 6. Future maintenance will be the responsibility of the applicant or a designee.**
- 7. Project must be completed within six months of approval.**
- 8. Applications from the same HOA/Neighborhood Group may be submitted each grant cycle (July 1 – June 30). If an HOA/Neighborhood Group submits additional applications during a grant cycle, these applications will be held and, if funds are still available, considered at the end of the cycle unless the new request demonstrates a critical safety need.**

***Please Note:** If your proposed project will change a part of your neighborhood which is subject to a previously approved site plan then you will also need to complete a Minor Alteration application (landscaping, lighting, building facades). This application may be found on our [Plan Review Web page](#) or [here](#). Please contact Kevin Hales, Site Planner (919) 462-3955, with any questions you have about this application. The Minor Alteration application has a \$75 processing fee and may be included as one of the items included in your project budget.

Please Send All Completed Applications To:

Will Hartye, Planner II
Neighborhood Improvement Program
Planning Department
Town of Cary, NC
P.O. Box 8005, Cary, NC 27512-8005
Will.Hartye@townofcary.org