



SF 424

The SF 424 is part of the CPMP Appendix A - 2017 HUD Annual Plan

Annual Action Plan. SF 424 form fields are included in this document. Grantee information is linked from the 1CPMP.xls document of the CPMP tool.

SF 424

Complete the fillable fields (blue cells) in the table below. The other items are pre-filled with values from the Grantee Information Worksheet.

4/17/2017	B17-MC-06-0044	Type of Submission	
Date Received by state	State Identifier	Application	Pre-application
Date Received by HUD	Federal Identifier	<input checked="" type="checkbox"/> Construction	<input checked="" type="checkbox"/> Construction
		<input checked="" type="checkbox"/> Non Construction	<input checked="" type="checkbox"/> Non Construction
Applicant Information			
City of Merced		CA62250 MERCED	
678 West 18 th Street		Organizational DUNS: 169-211-554	
		Organizational Unit	
Merced	California	Department: Department of Economic Development	
95340	Country U.S.A.	Division: Housing Division	
Employer Identification Number (EIN):		County	
94-6000371		07/2015	
Applicant Type:		Specify Other Type if necessary:	
Local Government: City		Specify Other Type	
Program Funding		U.S. Department of Housing and Urban Development	
Catalogue of Federal Domestic Assistance Numbers; Descriptive Title of Applicant Project(s); Areas Affected by Project(s) (cities, Counties, localities etc.); Estimated Funding			
Community Development Block Grant		14.218 Entitlement Grant	
Community Development Block Grant Entitlement Grant		City of Merced	
CDBG Grant Amount: \$959,615	Additional HUD Grants:		
Additional Federal Funds Leveraged:		\$Additional State Funds Leveraged:	
Local Funds Leveraged: \$25,000		\$Grantee Funds Leveraged:\$526,738	
Anticipated Program Income: \$595,000		Other (Describe)\$83,127 – 2016 Carry-Over	
Total Funds Leveraged for CDBG-based Project(s) \$2,189,480			
Home Investment Partnerships Program		14.239 HOME	
HOME Project Titles: HOME Investment Partnerships Program Participating Jurisdiction		Description of Areas Affected by HOME Project(s): City of Merced	
HOME Grant Amount: \$329,958	Additional HUD Grant(s) Leveraged		Describe

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		\$Additional State Funds Leveraged	
\$Locally Leveraged Funds		\$Grantee Funds Leveraged	
\$Anticipated Program Income: \$70,000		Other (Describe)\$559,419 – 2016 Carry-Over	
Total Funds Leveraged for HOME-based Project(s): \$959,377			
Housing Opportunities for People with AIDS – N/A			
		14.241 HOPWA	
HOPWA Project Titles		Description of Areas Affected by HOPWA Project(s)	
\$HOPWA Grant Amount	\$Additional HUD Grant(s) Leveraged	Describe	
\$Additional Federal Funds Leveraged		\$Additional State Funds Leveraged	
\$Locally Leveraged Funds		\$Grantee Funds Leveraged	
\$Anticipated Program Income		Other (Describe)	
Total Funds Leveraged for HOPWA-based Project(s):\$1,088,107			
Emergency Shelter Grants Program – N/A			
		14.231 ESG	
ESG Project Titles		Description of Areas Affected by ESG Project(s)	
\$ESG Grant Amount	\$Additional HUD Grant(s) Leveraged	Describe	
\$Additional Federal Funds Leveraged		\$Additional State Funds Leveraged	
\$Locally Leveraged Funds		\$Grantee Funds Leveraged	
\$Anticipated Program Income		Other (Describe)	
Total Funds Leveraged for ESG-based Project(s)			
Congressional Districts of:		Is application subject to review by state Executive Order 12372 Process?	
Applicant Districts: 18	Project Districts 18		
Is the applicant delinquent on any federal debt? If "Yes" please include an additional document explaining the situation.		<input type="checkbox"/> Yes	This application was made available to the state EO 12372 process for review on DATE
		X	Program is not covered by EO 12372
<input type="checkbox"/> Yes	X	<input type="checkbox"/> N/A	Program has not been selected by the state for review
Person to be contacted regarding this application			
First Name: Steve	Middle Initial: S.	Last Name: Carrigan	
Title: City Manager	Phone: 209-385-6834	Fax:209-388-7607	
email: carrigans@cityofmerced.org	Grantee Website: www.cityofmerced.org	Other Contact: Mark Hamilton, Housing Program, 209-385-6863	
Signature of Authorized Representative		Date Signed	