



**COMMUNITY DEVELOPMENT BLOCK GRANTS  
2013-2014 QUARTERLY REPORTING FORM  
Bricks & Mortar Projects**

**DATE OF REPORT** \_\_\_\_\_

Please indicate which quarter this report covers.

\_\_\_\_\_ October 1– December 31 *due on Jan. 15th*

\_\_\_\_\_ January 1– March 31 *due on Apr. 15th*

\_\_\_\_\_ April 1 – June 30 *due on Jul. 15th*

\_\_\_\_\_ July 1 – September 30 *due on **Oct. 10th***

**AGENCY NAME and ADDRESS:**

**A.** Total Amount of 2013 Grant \$ \_\_\_\_\_

Grant Balance \$ \_\_\_\_\_

**B. Description of Work Accomplished**

1. Describe the work that has been accomplished during this reporting period. If no work has taken place, please indicate a target starting date. Describe any challenges prohibiting the start of the project.

2. How many housing units have been **constructed or rehabilitated** for each income level during this reporting period? *Skip if report is for a Public Facility*

Income Level	# Units	Income Level	# Units		
0% - 30% AMI		51% - 80% AMI			
31% - 50% AMI		Market Rate		TOTAL # constructed or rehabilitated	

If the housing project included rehabilitation and the total project cost was \$5,000 or more (all funding, not just CDBG), please complete the table below. If the total cost of the project was \$5,000 or less, just complete the address column. *Skip if report is for a Public Facility or Land Acquisition*

Address of rehabilitated property	Year Built	Ages of Occupants Head of Household only (Seniors and persons with disabilities excluded)	Total cost of rehab project (not just CDBG \$)

**C. Recipient Documentation**

Provide the following data about clients served with CDBG funds using current HUD income guidelines. Please provide this information cumulatively beginning October 1, 2013 – present.

**RECIPIENT INCOME DOCUMENTATION BY HEAD OF HOUSEHOLD**

INCOME LEVEL	Housing: # of Individuals in Owned Unit	Housing: # of Individuals in Rental Unit	Public Facility: # of Individuals Served	TOTAL by Head of Household	# of female-headed households
Extremely low income (30% AMI or less, per HUD income guidelines)					
Low income (31-50% AMI, per HUD income guidelines)					
Moderate income (51-80% AMI, per HUD income guidelines)					
<b>TOTAL of 0% - 80% AMI Clients</b>					
Non-low/mod income (81-100% AMI, per HUD income guidelines)					

**RACE/ETHNICITY OF HOUSEHOLDS SERVED WITH CDBG FUNDS (OCT. 1, 2013 - PRESENT)**  
TOTAL MUST MATCH NUMBER OF HOUSEHOLDS GIVEN IN PREVIOUS TABLE'S BLUE SHADED ROW

\*According to HUD, Hispanic is not a separate race but is categorized with another race, e.g. White/Hispanic.

# of Persons with Disabilities	# of Homeless	# of Seniors	# of Veterans

<p>Expected project revenue included:</p> <ul style="list-style-type: none"> <li>• CDBG - \$11,500</li> <li>• Other Federal Funding - \$27,000</li> <li>• Donations/Other - \$12,800</li> </ul>	<p>Actual project revenue included:</p> <ul style="list-style-type: none"> <li>• CDBG - \$10,000</li> <li>• Other Federal Funding - \$27,000</li> <li>• Donations/Other - \$14,300</li> </ul>
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[illegible]

**E. Certification**

I hereby certify that all of the above information is true, that all City of Loveland Grant funds were expended for the project as defined in the Recipient Contract with the City of Loveland, and that all income guidelines have been met.

Electronic Signature\_\_\_\_\_

Date\_\_\_\_\_