

E-4

2016 Grantee Handbook

PRINT

Louisiana Community Development Block Grant Program—Applicant Data Form*			
		1. Name of Grantee	
		2. Contract Number	
		3. Name of Activity	
4. Persons in Applicant Households	All Income Levels	#	
5. Persons in Applicant Households	Moderate, Low, & Extremely Low Income Levels	#	0
		%	0.00%
6-A. Persons in Applicant Households	Moderate Income Level	#	0
		%	0.00%
		Own	
		Rent	
6-B. Persons in Applicant Households	Low Income Level	#	0
		%	0.00%
		Own	
		Rent	
6-C. Persons in Applicant Households	Extremely Low Income Level	#	0
		%	0.00%
		Own	
		Rent	
Items 7 & 8 will be based on all persons in applicant households regardless of income level			
7-A. American Indian or Alaskan Native	Total	#	
	Hispanic	#	
7-B. Asian	Total	#	
	Hispanic	#	
7-C. Black or African American	Total	#	
	Hispanic	#	
7-D. Native Hawaiian or Other Pacific Islander	Total	#	
	Hispanic	#	
7-E. White	Total	#	
	Hispanic	#	
7-F. American Indian and White	Total	#	
	Hispanic	#	
7-G. Asian and White	Total	#	
	Hispanic	#	
7-H. Black and White	Total	#	
	Hispanic	#	
7-I. American Indian and Black	Total	#	
	Hispanic	#	
7-J. Other Multi-Racial	Total	#	
	Hispanic	#	
8-A. Disabled Persons		#	
8-B. Disabled Head of Households		#	
8-C. Female-Headed Households		#	
8-D. Elderly Occupied Households		#	
8-E. Total Households		#	
9. Source for determining applicant data:			
*This form must be completed only for housing programs and public facilities programs which include work undertaken on private property.			

INSTRUCTIONS FOR THE APPLICANT DATA FORM

In accordance with the federal regulations governing the Community Development Block Grant Program, the Applicant Data Form must be completed by all LCDBG recipients who utilized LCDBG funds for a housing program or for a public facilities program which included the activity of rehabilitation loans and grants. The information reported on this form must include the data for all persons who applied for financial assistance for housing rehabilitation or replacement housing and all persons who applied for financial assistance for the installation and/or repair of water and/or sewer service lines on private property. The numbers on this form will include all persons who applied for financial assistance, including those who received the assistance and those who did not receive the assistance. Often, the number of persons who applied for assistance will exceed the number of beneficiaries since all who applied may not have received the assistance.

Any time an activity is included on this form, the same activity must also be listed on the Program Beneficiary Form. Whereas the Applicant Data Form identifies all applicants, the Program Beneficiary Form identifies only those applicants who received assistance (beneficiaries).

1. Grantee: Enter the name of the local government.
2. Contract Number: Enter the grantee's contract number.
3. Name of Activity: Enter the name of the activity. The only activities applicable to this form are housing rehabilitation loans and grants, public facilities rehabilitation loans and grants (hook-ups), and relocation payments and assistance. If the program did not have monies budgeted for any of these activities, do not complete this form. Any activity listed on this form should also be listed on the Program Beneficiary Form.
4. Persons In Applicant Households—All Income Levels: For the activity shown in row 3, provide the total number of persons in applicant households for “All Income Levels”. “All Income Levels” includes the following four income levels: High, Moderate, Low, and Extremely Low. This means that all persons in the households applying for assistance, regardless of income level, must be shown.
5. Persons in Applicant Households—Moderate Plus Low Plus Extremely Low Income: Enter the total number and percent of moderate, low and extremely low income persons in the applicant households.
6. Component Listing of Persons in Applicant Households: Enter the number and percent of persons in applicant households according to the following income level components: (6-A) Moderate, (6-B) Low and (6-C) Extremely Low. This data can be obtained from the applications for assistance which were completed by the applicants. The numbers in these three categories, when combined, should equal the number on row 5. **For housing rehabilitation, relocation, and public facilities rehabilitation activities which take place on private property, the number of owners and renters must also be identified by each income category.**
7. Racial/Ethnic Origin: Item 7 pertains to all persons in applicant households regardless of income level. Enter the number of persons in the applicant households by their racial origin (7-A through 7-J); then enter the number of persons in that racial origin that are of Hispanic or Latino ethnicity. All persons who applied for assistance will be included whether they received assistance or not. The total number of persons listed in rows 7-A through 7-J by racial/ethnic characteristics should equal the number of persons listed in row 4.
8. Household Characteristics: Item 8 pertains to all households/persons who applied for assistance regardless of income level. In 8-A, enter the number of disabled persons who reside in households which applied for assistance. In 8-B, enter the number of applicant households which were headed by disabled persons. In 8-C, enter the number of applicant households which were headed by females. In 8-D, enter the number of households which have at least one elderly (age 62+) occupant. In 8-E, enter the total number of applicant households.
9. Source: State the source/methodology used for determining the applicant data.

Definitions: Refer to the back of the “Program Beneficiary Form” for definitions on race, ethnicity, disabled and elderly.