

Overview

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Case Id: 30777

Name: George test - 2027

Address: *No Address Assigned

Overview



County of San Luis Obispo Public Facilities and Infrastructure Program

Department of Social Services
Adult and Homeless Services
Branch
PO Box 8119
San Luis Obispo, CA 93403-
8119
HSDGrants@co.slo.ca.us

Community Development Block Grant (CDBG) funding is available. [The County of San Luis Obispo 2027 Action Plan Notice of Funding Availability \(NOFA\)](#) is posted on the County's Department of Social Services – Homeless Services Division website at slocounty.gov/HomelessServicesGrants.

Please review the Notice of Funding Availability (NOFA) before submitting your application. All applications must meet the eligibility criteria and requirements set forth in the NOFA. The Urban County of San Luis Obispo receives funding from local, state, and federal sources including Community Development Block Grant (CDBG), HOME Investment Partnership (HOME), and Emergency Solutions Grant (ESG). Please be aware that CDBG, HOME, and ESG funding sources are not permitted to support activities or projects located in the City of Grover Beach.

Applications for the 2027 Action Plan NOFA will be accepted until **5:00 pm on Friday, October 30, 2026**.

If you have any questions about the applications process, please contact the Homeless Services Division directly at HSDGrants@co.slo.ca.us.

For Public Facilities and Infrastructure projects, CDBG funds may be used by the grantee or other public or private nonprofit entities for acquisition (including long term leases for periods of 15 years or more), construction, reconstruction, rehabilitation (including removal of architectural barriers to accessibility), emergency shelters, transitional housing, or installation of public improvements or facilities (except for buildings for the general conduct of government). Reference: [§ 570.201\(c\)](#). Subject to site visit during application review.

Eligible types of facilities and improvements include:

- Infrastructure improvements (construction or installation) including, but not limited to, streets, curbs, water and sewer lines;
- Neighborhood facilities including, but not limited to, public schools, libraries, recreational facilities, parks,

playgrounds; and

- Facilities for persons with special needs such as facilities for the homeless or domestic violence shelters, nursing homes, or group homes for the disabled.

Please note that all documents uploaded into this application **must be less than 100 MB in file size**. We cannot accept documents via email or through another platform, such as Dropbox or Google Drive. Applicants may split larger documents into multiple smaller files, label them appropriately with “part X of X” and then upload them directly into this application.

Do not upload password-protected documents into this application. All password-protected documents will be removed during threshold review. This may negatively impact scoring of your application.

A. Applicant Information

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A. Applicant Information

Please provide the following information.

PRIMARY APPLICANT INFORMATION-LEAD AGENCY

A.1. Organization Name

A.2. Type of Organization (No selections made)

Non-Profit

For Profit

Government Entity

Public Entity

A.3. UEI Number: For more information, visit [SAM.GOV](https://sam.gov)

A.3a. Please upload your organization's Proof of Active SAM.gov Registration:



Proof of Active SAM.gov Registration ***Required**

****No files uploaded**

A.4. Address

A.5. Is the organization faith based? (No selections made)

Yes

No

A.6. Annual Operating Budget

\$0.00

CONTACT INFORMATION

A.7. Contact Person Name

A.7a. Contact Person Title

A.7b. Phone Number

A.7c. Email

B. Applicant Capacity

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B. Applicant Capacity

Please provide the following information.

B.1. Summary of Experience Managing Public Funds. (Describe past grants or contracts from county, state or federal sources).

B.2. Please upload the following documentation:



Most Recent Financial Audit ***Required**

***No files uploaded*

B.3. Describe your project staff's plan to comply with Build America, Buy America Act requirements. Include any procurement policies or contractor oversight that will be used for the project.

B.4. Describe project staff's experience with Section 3.

B.5. How do you plan to fund the operation and maintenance costs (if any) associated with this project? Are these funds available now? If not, when will they be available?

C. Proposed Project & Project Details

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C. Proposed Project & Project Details

Please provide the following information.

C.1. Name of Proposed Project

C.2. Project/Program Address

C.3. Accessor's Parcel Number(s), if applicable.

C.4. Areas Served-Select all that apply

- ☐ City of Arroyo Grande
- ☐ City of Atascadero
- ☐ City of Grover Beach (Restrictions apply if selecting the City of Grover Beach. Please refer to NOFA.)
- ☐ City of Morro Bay
- ☐ City of Paso Robles
- ☐ City of Pismo Beach
- ☐ City of San Luis Obispo
- ☐ Countywide
- ☐ Unincorporated Community

C.5. Please select which eligible category applies to the project: (No selections made)

New Sanitary Sewer Systems – Construct new sewage treatment plants and collections systems.

Sanitary Sewer System Extensions – Extend sanitary sewage collection lines beyond existing service areas.

Public Water System Distribution and Extensions – Construction of a new public water treatment plant, filtration plant, distribution system or extension project.

Neighborhood Improvement Projects – Curb and sidewalk replacement, major storm water management improvements, street reconstruction, or water main and sewer main replacement.

Parks and Recreational Facilities – Construct new facilities or purchase new equipment.

Public Facility Improvements

New Public Facility

Printed By: George Solis on 9/28/2026

C.6. Please describe the Scope of Work for the proposed project.

C.6a. Please upload a complete set of drawings/plans for the proposed project

☐ Maps, Photos, Drawings, Plans

***No files uploaded*

C.7. Please upload a timeline for key steps of project implementation:

☐ Timeline ***Required**

***No files uploaded*

C.8. Will residential or commercial occupants be displaced by the project? (No selections made)

Yes

No

C.9. What is the current zoning of the project site?

C.10. Is the project site zoned correctly for the proposed activity? (No selections made)

Yes

No

N/A

C.11. Have necessary Land Use Permits and/or Construction Building Permits been issued? (No selections made)

Yes

No

N/A

C.12. Is the project required to pay a prevailing wage: (No selections made)

Yes

No

C.13. Describe how the project will align with a (or multiple) Line(s) of Effort to support the [San Luis Obispo Countywide Plan to Address Homelessness \(2022-2027\)](#).

C.14. Select all population(s) expected to be served through this project:

☐ Low-/moderate-income households

☐ Multifamily

☐ Age Restricted (including seniors)

☐ Persons Experiencing Homelessness

- ☐ Persons Experiencing Chronic Homelessness
- ☐ Persons with Disabilities
- ☐ Veterans
- ☐ Domestic Violence Survivors
- ☐ Unaccompanied Youth (under 25 years of age)

C.15. Describe collaborations with local jurisdictions and community partners.

C.15a. Please upload any letters of support for the project.

☐ Letters of Support

***No files uploaded*

C.16. How will you collect demographic data on the beneficiaries of the proposed project?

C.17. Has CEQA environmental review been completed? (No selections made)

Yes – CEQA review complete

No – CEQA review not complete

C.18. Has NEPA environmental review been completed? (No selections made)

No – NEPA review not complete

Yes – NEPA review completed

C.19. Has a Phase I or Phase II archeological/historical survey been conducted at the project site? (No selections made)

N/A

No

Yes

C.20. Has a Phase I or Phase II environmental assessment been conducted for the property? (No selections made)

Yes

No

N/A

C.21. List and describe any known hazards-e.g., asbestos, lead-based paint, storage tanks – aboveground, underground. Please enter “N/A” if not applicable.

C.22. Is the project on a property designated or been determined to be potentially eligible for designation as a local, state, or national historical site? (No selections made)

Yes

No

N/A

C.23. Are the building(s)/structure(s) located on a historic site or within a local historic district? (No selections made)

Yes

No

N/A

C.24. Is the project located within a 100-year flood plain? (No selections made)

Yes

No

N/A

C.25. Will demolition or excavation be required? (No selections made)

Yes

No

C.26. Are there any existing buildings on the project property that were constructed prior to 1978? (No selections made)

Yes

No

C.27. Describe how the project will meet ADA and Section 504 standards for accessibility by the disabled. Describe the methods, funding, and timetable to be utilized to address the problems.

D. Funding & Eligible Activities

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D. Funding & Eligible Activities

Please provide the following information.

D.1. Total Project Funding (include all sources and uses of funding)

\$0.00

D.1a. Upload: Project Budget.

Must Include:

- All project costs

Total cost of full project (not only requested funds)



Project Budget *Required

**No files uploaded

D.2. Amount of CDBG funds requested:

\$0.00

D.2a. Please indicate the amount you are requesting for each jurisdiction:

Jurisdiction	Amount	Approximate Persons Served	Approximate Households Served
Total	\$0.00	0	0

D.3. Estimated number of unduplicated persons in Low – Moderate Income, 80% or less of the County Median Income, who will benefit from CDBG funds:

D.4. Please select the national objective that best applies to the proposed project.

Please refer to ["Basically CDBG"](#) or the ["CDBG Guide to National Objectives and Eligible Activities"](#) for more information regarding CDBG national objectives. (No selections made)

Urgent Need - e.g. after a national disaster

Slum or Blight

Low Moderate Income

Submit

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Submit

Once an application is submitted, it can only be "Reopened" by an Administrator.

The authorized representative certifies that:

- ☐ The information submitted is true and complete
- ☐ The applicant is eligible for the funding requested
- ☐ The organization agrees to comply with all applicable federal, state, and local requirements.
- ☐ All activities and outcomes described in the application will be implemented if funds are awarded.

Authorized Representative Signature

***Not signed*

Authorized Representative Title