



**FY2020-
2021**

**COMMUNITY
DEVELOPMENT
BLOCK GRANT (CDBG)
APPLICATION FOR
FUNDING
2020-2021 Program Year**

Prepared by:

OFFICE OF HOUSING AND URBAN
IMPROVEMENT

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PART A – APPLICANT INFORMATION

1. Applicant Agency Legal Name

2. Main Administrative Address

3. City & State

4. Zip Code:

5. Mailing Address, City, State, Zip Code

6. Email address

7. Administrative Telephone Number ()

8. Fax Number ()

9. CEO/Executive Officer

10. Office Phone Number ()

11. Chief Financial Officer

12. Office Phone Number ()

13. Contact Person's Name

14. Phone Number including area code ()

15. Type of Entity (check all that apply)

Private For-Profit Private Not-for-Profit

Public Agency Other (Specify) _____

Attach certificate of incorporation from the Secretary of State (of Florida), or a printout from Corporations Online, www.sunbiz.org, Public Inquiry dated within twelve months of due date of this Application, stating that Applicant Agency is active as Exhibit "C". Omission of this document will result in removing the proposal from further review. (N/A only for units of government.)

16. Federal Identification Number: _____

17. DUNS #: _____

DUNS NUMBER REQUIREMENT

All organizations applying for federal dollars must provide their Dun & Bradstreet (D&B) Data Universal Numbering System (DUNS) number in the application for funding. Organizations should verify that they have a DUNS number or take steps needed to obtain one as soon as possible. Applicants may obtain a DUNS number by calling 1-866-705-5711.

PART B – ORGANIZATION INFORMATION

Total Organization Annual Operating Budget (Previous Year):	\$
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If your organization received CDBG funds for their program in the past, please list amount below:

Year	Amount of Award
2019-2020	\$
2018-2019	\$
2017-2018	\$

PART C – PROGRAM SUMMARY

Program Name:

CDBG funds requested: (\$15,000 Minimum Request) \$ _____

National Objective Claimed:

- Benefit low moderate income persons
- Prevent/Eliminate Slum or Blight

Program Category:

- Public Services
- Public Facilities & Improvements
- Disposition
- Clearance
- Fair Housing
- Economic Development
- Rehabilitation/Preservation
- Acquisition
- Historic Preservation
- Code Enforcement
- Housing

**Proposed output type and number
(SELECT ONLY ONE OUTPUT TYPE):**

- Persons served
- Households served

- Housing units rehabilitated/acquired
- Jobs created / retained
- Other: _____

ESTIMATED NUMBER OF SELECTED OUTPUT TYPE TO BE ASSISTED:

Designated Project Area if less than Citywide: (Provide a detailed map that shows the project site and defines service area. For Capital Improvement Projects, please include photos.)

AREA BENEFIT: (If applicable) Total number of low and moderate income persons served in the Area:

CENSUS TRACT	BLOCK GROUP	TOTAL POPULATION	LOW/MOD INCOME POPULATION	% LOW/MOD INCOME

LIMITED CLIENTELE BENEFIT: (If applicable)

1. Presumed Benefit:

Qualifying Group	
Number of persons served	

-OR-

2. Low- and Moderate-Income Persons *Served:

Moderate-Income	
Low-Income	
Very Low-Income	
Extremely Low-Income	
TOTAL SERVED (ADD ABOVE LINES)	
Number of Female-Headed Households:	

*How will income be verified? Check below:

- Income Verification Request Forms (Attach Sample)
- Eligibility Status for other Governmental Assistance Program
- Self-Certification (Must request source documentation of 20% of certifications and must inform beneficiary that all sources of income and assets must be included when calculating annual income)
- Presumed benefit (HUD presumes the following to be low and moderate-income: abused children, battered spouses, elderly persons*, severely disabled persons**, homeless persons, persons living with AIDS, migrant farm workers)

* Elderly persons are defined by HUD as the following: a) 65 years of age or older; or b) on Medicare; or c) on Social Security benefits

**** Severely disabled adults are defined by HUD as the following:** a) if a person uses a wheelchair or another special aid for six months or longer; b) are unable to perform one or more "functional activities" or need assistance with activities of daily life such as getting around the home, bathing, cooking, eating, and toileting, It includes seeing, hearing, have one's speech understood, lifting and carrying, walking up a flight of stairs, and walking; c) are prevented from working at a job or doing housework; or d) have a selected condition including autism, cerebral palsy, Alzheimer's disease, senility or dementia, or mental retardation. Persons under 65 years of age and who are covered by Medicare or receive Social Security Income (SSI) are considered to meet "severely disabled".

ESTIMATE OF POPULATION TO BE SERVED:

RACE AND ETHNICITY DATA FOR PY 2020-2021		
RACE	TOTAL	
Single Race	All	Hispanic
(1) White		
(2) Black/African American		
(3) Asian		
(4) American Indian/Alaskan Native		
(5) Native Hawaiian/Other Pacific Islander		
(6) American Indian/Alaskan Native & White		
(7) Asian and White		
(8) Black/African American and White		
(9) American Indian/Alaskan Native and Black/African American		
(10) Other Multi-racial		
TOTAL NUMBER		
NUMBER OF FEMALE-HEADED HOUSEHOLDS		

Fair Housing Activities: must be completed by all applicants. Describe what actions will be taken to further Fair Housing.

PART D - PROGRAM DESCRIPTION (PLEASE LIMIT NARRATIVE RESPONSES TO 200 WORDS)

Provide an overview of the program that seeks CDBG funding:

Describe how the requested CDBG funds will be utilized within the program; list ALL activities for which the CDBG funds will be used (salaries/fringes, rehabilitation costs, direct assistance, etc.)

Complete the following table to demonstrate that portion of the requested CDBG award will fund each activity described

above:

Program Activity	CDBG Award Allotment
	\$
	\$
	\$
	\$
	\$
	\$

Describe how your agency coordinates with other agencies to avoid duplication of services:

Submit a complete timetable of all significant activities: *(Please note: Public Services and organizations funded with administrative funds must complete their activities within 12-month grant year)*

Check one HUD-defined objective that best relates to your potential CDBG-Funded Program:

- Create Suitable Living Environment ⇒ applies to programs that benefit communities, families, or individuals by addressing issues in their environment, including social and physical barriers.
- Provide Decent Affordable Housing ⇒ applies to programs that involve meeting individual, family, or neighborhood housing needs, rather than community-wide housing needs.
- Expand Economic Opportunity ⇒ applies to programs that promoted community economic development, including business expansion, commercial revitalization, or job creation.

Check one HUD-defined outcome that best relates to your potential CDBG-funded program:

- Availability/Accessibility ⇒ applies to programs that make basic services, more readily available and/or accessible low- and moderate-income persons, including elderly and disabled.
- Affordability ⇒ applies to programs that make basic services more affordable for low- and moderate-income persons in a variety of ways, including housing assistance or transportation.
- Sustainability ⇒ applies to programs that improve the overall viability of communities through elimination of blighted areas and/or provision of benefits to low- and moderate-income persons.

State your primary objective(s) and outcome(s) associated with the program that seeks CDBG funding:

Briefly describe data that will be collected and/or analysis used to measure success in achieving your objectives and outcomes for the target population identified above.

Will any households or businesses be temporarily or permanently displaced by the proposed activity? Yes No

If yes, explain:

Will the proposed activity involve the testing for or abatement/mitigation of any environmental hazard, i.e.: Lead-based paint, asbestos, or petroleum contamination? Yes No

If yes, explain:

Economic Development

Complete this section ONLY if you are proposing to provide an "Economic Development" project

1.	Please list the DUNS Number of your business:			
2.	This is a:	non-profit	for-profit	faith-based
3.	Describe how your project will make the most effective use of CDBG funds?			
4.	Is there leverage of other funds?			
5.	How will you assure that CDBG funds are not substituted for other non-federal investment?			
6.	Can you demonstrate that your project will meet the minimum federal CDBG threshold of providing one full time equivalency job (32 hours per week) per \$35,000 of CDBG funds, or provide goods or services to residents of a low-moderate income (LMI) area, such that the number of LMI persons residing in the area served amounts to at least one LMI person per \$350 of CDBG investment, and that at least more than one half (51%) of the total jobs created will be filled by very low, low and moderate-income persons? How will you make sure that the jobs will be made available to very low, low and moderate-income persons?			
7.	Is your request being used for business incentives or for recruitment of a business from another city or state? If yes, describe in detail. Are the proposed jobs existing positions or are they new?			
8.	Show the number of new permanent jobs projected to be created (seasonal jobs do not count):			

Job Title	# FTE Jobs Created	# Part Time Jobs Created	# FTE Jobs Filled by LMI	# Part Time Jobs Filled by LMI

** LMI jobs refer to any job that can be held by a person with no advanced training or education beyond high school – or a job that the business agrees to hire unqualified persons for and provide training.

PART E – PROJECT BUDGET

Project Budget			
<input type="checkbox"/>	New Project	<input type="checkbox"/>	One-Time Funding Request
<input type="checkbox"/>	Ongoing Project with CDBG Support	<input type="checkbox"/>	On-going Project with Other Support

**** NOTE: Another budget form may be substituted for this FORM**

An alternative format providing the information below is acceptable
(must include all itemized costs above \$500)

PLEASE IDENTIFY ALL SOURCES OF LEVERAGING

	Source: CDBG/HOME	Source: Fundraising	Source: Grants	Source: Other	Total Project Cost:
<i>Revenue Sources</i>	\$	\$	\$	\$	\$
<i>Is this source confirmed and committed to the project?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No				

Project Costs (include all costs directly related to delivering this service or accomplishing this project)

Salaries & Wages					
Employee Benefits					
Professional Contract Services					
Office Supplies					
Postage / Printing					
Notices / Subscriptions					
Utilities					
Travel / Training					
Rent / Facility Costs					
Insurance, Legal & Financial Services					
Fundraising					
Subtotal: Project Costs					

Explain Other Costs

(include other costs over \$500 needed to implement this service or project)

Subtotal: Other Costs					
Grand Total:					

A budget justification narrative that thoroughly explains the rationale or basis for all proposed line item budget costs for the proposed project MUST accompany the budget. The narrative should explain:

- a) line item costs for the CDBG funds requested;*
- b) matching funds (or staff in-kind or citizen volunteer services in lieu of cash match, to be supplied by applicant);*
- c) Other sources and amounts of County, state, federal, or private funds to be involved.*

Please attach the following information relating to your organization:

- Audited financial audit with management letter (most current)
- Articles of Incorporation and Bylaws
- Board of Directors
- Current Certificate of Good Standing
- Conflict of Interest Statement
- Mission Statement
- Scope of Work
- Annual Report of your organization (most current)
- Organizational Budget (most current)
- IRS 501 (c) (3) Determination Letter

Submit six (6) copies paper and one (1) original of each application with attachments.

PART G - CERTIFICATIONS AND AUTHORIZATION

I hereby certify by reading and initialing each statement listed below that the:	Please check each box as applicable
Information contained in this application is complete and accurate.	<input type="checkbox"/>
Applicant has read and understands the application instructions and requirements of the program.	<input type="checkbox"/>
Project will serve low- to moderate-income residents in the qualified CDBG areas.	<input type="checkbox"/>
Applicant acknowledges that only an executed contract with the City authorizes the initiation of project services or activities and incurring expenditures.	<input type="checkbox"/>
Applicant acknowledges that a National Environmental Policy Act (NEPA) review may be required for CDBG funded projects, which may delay the project start.	<input type="checkbox"/>
Applicant acknowledges that the project should be completed within the fiscal year awarded; if not CDBG funds <u>may</u> be subject to reprogramming.	<input type="checkbox"/>
Applicant will comply with all federal and City statutes, regulations and requirements imposed on the project funded in full or in part by the CDBG program.	<input type="checkbox"/>
Applicant certifies that the organization has the capacity to comply with all requirements of the program.	<input type="checkbox"/>
Applicant will not use funds for grant writing, fundraising or lobbying per OMB Circular A-87.	<input type="checkbox"/>
Applicant confirms that the organization has an antidiscrimination policy.	<input type="checkbox"/>
Applicant acknowledges that current policies for general liability, automobile and workers compensation insurance are required to contract with the City.	<input type="checkbox"/>
Applicant acknowledges that CDBG funds are subject to review of supporting expenditure documentation and must be approved by City staff prior to payment.	<input type="checkbox"/>
Applicant has the ability to perform the duties for the activity or services applied for in accordance with CDBG program regulations.	<input type="checkbox"/>
Applicant possesses the legal authority to apply for CDBG funds and to execute the project.	<input type="checkbox"/>
Applicant does not have any unresolved audit findings for prior CDBG or other federally-funded project.	<input type="checkbox"/>
Applicant has no pending lawsuits that would impact the implementation of this project.	<input type="checkbox"/>
Person named below is authorized to execute the application on behalf of the agency.	<input type="checkbox"/>

PART H – STATEMENT OF ASSURANCES

I, _____ certify that _____
(Name / Title) (Organization)

- Will minimize displacement of persons or businesses as a result of activities associated with CDBG funds;
- Will conduct and administer its program in conformance with Title IV of the Civil Rights Act of 1964 and Title VIII of the Civil Rights Act of 1968, and affirmatively further fair housing;
- Will comply with 24 CFR 570.608 regarding notification, inspection, testing and abatement procedures concerning Lead-Based Paint;
- Will comply with the other provisions of the CDBG program, including Labor Standards;
- Documentation of compliance with the above certification will be maintained in the organization's files.

Signature of Authorized Signatory:

Date:

CERTIFICATION #1

CERTIFICATION REGARDING CIVIL RIGHTS ACT, AMERICANS WITH DISABILITIES ACT AND LOBBYING

The Applicant certifies that:

(a) It possesses legal authority to make a grant submission and to execute a community development and housing program.

(b) Its governing body has in an official meeting open to the public duly adopted or passed as an official act a resolution, motion or similar action authorizing the person identified as the official representative of the sub-recipient to submit the final statement and all understandings and assurances contained therein, and directing and authorizing the person identified as the official representative of the sub-recipient to act in connection with the submission of the final statement and to provide such additional information as may be required.

(c) The grant will be conducted and administered in compliance with:

- (1) Title VI of the Civil Rights Act of 1964 (Pub. L. 88-352; 42 U.S.C. Subsection 2000 et seq.);
- (2) The Fair Housing Act (42 U.S.C. 3601-20).

(d) It will affirmatively further fair housing.

(e) It has developed its proposed activity so as to give maximum feasible priority to activities that benefit low- and moderate-income families or aid in the prevention or elimination of slums or blight. The proposed use of funds may also include activities which the sub-recipient certifies are designed to meet other community development needs having a particular urgency because existing conditions pose a serious and immediate threat to the health or welfare of the community, where other financial resources are not available to meet such needs.

(f) It will not attempt to recover any capital costs of public improvements assisted in whole or in part with funds provided under section 106 of the Act or with amounts resulting from a guarantee under section 108 of the Act by assessing any amount against properties owned and occupied by persons of low- and moderate-income, including any fee charged or assessment made as a condition of obtaining access to such public improvements, unless: (1) funds received under section 106 of the Act are used to pay the proportion of such fee or assessment that relates to the capital costs of such public improvements that are financed from revenue sources other than Title 1 the Act; or (2) for purposes of assessing any amount against properties owned and occupied by persons of moderate income, the grantee certifies to the Secretary that it lacks sufficient funds received under section 106 of the Act to comply with the requirements of subparagraph (1).

(g) It will comply with the acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1990 as required under Section 570.606(a) and Federal implementing regulations; the requirements in Section 570.606(b) governing the residential anti-displacement and relocation assistance plan under section 104(d) of the Act (including a certification that the sub-recipient is following such a plan); the relocation requirements of Section 570.606(c) governing

displacement subject to section 104(k) of the Act; and the relocation requirements of Section 570.606(d) governing optional relocation assistance under section 105(a)(11) of the Act.

(h) To the best of my knowledge and belief that:

- No Federal appropriated funds have paid or will be paid, by or on behalf of it, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement;
- If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant loan, or cooperative agreement, it will complete and submit Standard Form - LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions; and
- It will require that the language of paragraph (h) of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

(i) It will comply with the other provisions of the Act and with other applicable laws.

Signature of Authorized Agent

Date

Please Print Name and Title

Certification #2
Certification of Compliance with the City of Pompano Beach
Conflict of Interest and Procurement Policies

Name of applicant: _____

HEREBY TAKES NOTICE OF AND WARRANTS that it is not in violation of, or has not participated, and will not participate, in the violation of any of the following Conflict of Interest and Procurement Policies:

I. City of Pompano Beach and HUD Requirements

(A) Conflict of Interest - It shall be unlawful for any employee of the city to participate, directly or indirectly, through decision, approval, disapproval, recommendation, preparation of any part of a purchase request, influencing the content of any specification or purchase standard, rendering advice, investigation, auditing or otherwise, in any proceeding or application, request for ruling or other determination, claim or controversy or other matter pertaining to any contract or subcontract and any solicitation or proposal therefore to the employee's knowledge there is a financial interest possess by:

- (1) The employee or the employee's immediate family;
- (2) A business other than a public agency in which the employee or a member of the employee's immediate family serves as an officer, director, trustee, partner or employee; or
- (3) Any other person or business with whom the employee or a member of the employee's immediate family is negotiating or has an arrangement concerning prospective employment.

(B) Gratuities and Kickbacks Prohibited.

Gratuities - It is unlawful for any person to offer, give or agree to give to any person, while a city employee, or for any person, while a city employee, to solicit, demand, accept or agree to accept from another person, anything of a pecuniary value for or because of:

- (1) An official action taken, or to be taken, or which could be taken;
- (2) A legal duty performed, or to be performed, or which could be performed; or
- (3) A legal duty violated, or to be violated, or which could be violated by such person while a city employee.

Anything of nominal value shall be presumed not to constitute a gratuity under this section.

Kickback - It is unlawful for any payment, gratuity or benefit to be made by or on behalf of a subcontractor or any person associate therewith as an inducement for the award of a subcontract or order.

(C) 24 CFR 576.57(d) and 24 CFR 92.356 - Conflict of interest

No person who is an employee, agent, consultant, officer, or elected or appointed official of the grantee, nonprofit recipient that receives emergency shelter grant amounts and who exercises or has exercised any functions or responsibilities with respect to assisted activities, or who is in a position to participate in a decision making process or gain inside information with regard to such activities, may obtain a personal or financial interest or benefit from the activity, or have an interest in any contract, subcontract, or agreement with respect to thereto, or the proceeds there under, either for him or herself or for those with whom he or she has family or business ties, during his or her tenure, or for one year thereafter. HUD may grant an exception to this exclusion as provided in 24 CFR 570.611 (d) and (e) and/or 92 CFR 92.356 (f) (2).

(D) OMB Supercircular - Code of Conduct and Procurement

The recipient shall maintain written standards of conduct governing the performance of its employees engaged in the award and administration of contracts. No employee, officer, or agent shall participate in the selection, award, or administration of a contract supported by federal funds if a real or apparent conflict of interest would be involved. Such a conflict would arise when the employee, officer, or agent, any member of his or her immediate family, his or her partner, or an organization which employs or is about to employ any of the parties indicated herein, has a financial or other interest in the firm selected for an award. The officers, employees, and agents of the recipient shall neither solicit nor accept gratuities, favors, or anything of monetary value from contractors, or parties to sub-agreements. However, recipients may set standards for situations in which the financial interest is not substantial or the gift is an unsolicited item of nominal value. The standards of conduct shall provide for disciplinary actions to be applied for violations of such standards by officers, employees, or agents of the recipient.

The recipient shall maintain written procurement procedures, which comply with both state and Federal laws and regulations, and at least prescribe the following five procurement methods, described in more detail at 24 CFR 200.318:1. Procurement by micro-purchases (new procedure, \$3,000 threshold, no competition required).

- 2. Procurement by small purchase procedures (simplified acquisition threshold).
- 3. Procurement by sealed bids (formal advertising).
- 4. Procurement by Competitive Proposal (used when sealed bid method ID is not appropriate).
- 5. Procurement by noncompetitive proposals (sole source).

Applicant address: _____

Authorized signature: _____

Print Name of Authorized Signer: _____ Date signed: _____

Certification #3

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, PROPOSED DEBARMENT, INELIGIBILITY AND OTHER RESPONSIBILITY MATTERS

1. By signing and submitting these certifications, the undersigned certifies to the best of its knowledge and belief, that it and its principals:
 - a) Are not presently debarred, suspended, proposed for debarment, or declared ineligible for the award of contracts by any Federal agency;
 - b) Have not within a three-year period preceding this award, been convicted of or had a civil judgment rendered against them for: commission of fraud or criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, State, local) contract or subcontract; violation of federal or State antitrust statutes relating to the submission of offers; or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, tax evasion, or receiving stolen property;
 - c) Are not presently indicted for or otherwise criminally or civilly charged by a government entity (federal, State, or local) with commission of any of the offenses enumerated in b) above;
 - d) Have not within a three-year period preceding this award, had one or more contracts (federal, State, or local) terminated for cause or default;
 - e) Will not knowingly enter into any subcontract with a person who is, or organization that is, debarred, suspended, proposed for debarment, or declared ineligible from award of contracts by any federal agency; and
 - f) Will require that the language of this certification to be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.
2. "Principals", for the purposes of this certification, means officers, directors, owners, partners, and persons having primary management or supervisory responsibilities within a business entity.
3. Where the undersigned is unable to certify to the statements listed in section (1) in this certification, an explanation shall be attached. The Agency shall provide immediate written notice if, at any time prior to or during the negotiated contract period, the Agency learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render, in good faith, the certification required by paragraph (1) of this provision. The knowledge and information of Agency is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

5. This certification submitted to the City of Pompano Beach is a material representation of fact upon which reliance will be placed when evaluating Agency's application and entering into a contract agreement upon an award of funds. If it later determined that the Agency knowingly rendered an erroneous certification, in addition to other remedies available, the City of Pompano Beach may terminate the contract for default.

Applicant address: _____

Authorized signature: _____

Print Name of Authorized Signer: _____ **Date signed:** _____

Certification #4

CERTIFICATION FOR A DRUG-FREE WORKPLACE

Every Agency awarded a contract or grant by the City of Pompano Beach for the provision of services shall certify to the City that it will provide a drug-free workplace. By signing and submitting this certification, the undersigned certifies that it, and its subcontractors, shall provide a drug-free workplace by doing all of the following:

- 1) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance is prohibited in the Agency's workplace and specifying the actions that will be taken against employees for violations of the prohibition.
- 2) Establishing a drug-free awareness program to inform employees about all of the following:
 - a) The dangers of drug abuse in the workplace.
 - b) The Agency's policy of maintaining a drug-free workplace.
 - c) Any available drug counseling, rehabilitation, and employee assistance programs.
 - d) The penalties that may be imposed upon employees for drug abuse violations
- 3) Posting the statement required by Section A.1) of this certification in a prominent place at the Agency's main office. For projects large enough to necessitate a construction trailer at the job site, the required signage would also be posted at the job site.

B. Agencies shall include in each subcontract agreement language which indicates the subcontractor's agreement to abide by the provisions of Sections A. 1) through 3) of this certification. Agencies and subcontractors shall be individually responsible for their own drug-free workplace programs.

C. This certification submitted to the City of Pompano Beach is a material representation of fact upon which reliance will be placed when evaluating Agency's application and entering into a contract agreement upon an award of funds. If it later determined that the Agency knowingly rendered an erroneous certification, in addition to other remedies available, the City of Pompano Beach may terminate the contract for default.

Applicant address: _____

Authorized signature: _____

Print Name of Authorized Signer: _____ **Date signed:** _____