**City Pre-Application – LCDA Predevelopment Grants**

**City of Saint Paul**

**NO PAYMENT IS DUE ATTHIS TIME. FEE IS DUE AT FINALL APPLICATION SUBMITTED TO THE METROPOLITAN COUNCIL.**

**This City pre-application and compliance acknowledgement letter must be submitted via email to** [**developmentgrants@stpaul.gov**](mailto:developmentgrants@stpaul.gov) **along with:**

* **Site Plan and Renderings** if Available or other Vicinity Map
* **Compliance Acknowledgement Agreement** by the Executive Director, Owner, or C Level corporate official authorized to enter into contract with the City of Saint Paul as the Eligible Applicant, while you understand you are the Proposer. See top of [**State and Regional Grant Participation**](https://www.stpaul.gov/departments/planning-and-economic-development/regional-and-state-grants)  for the Word document for cutting and pasting into your organizational letterhead, that you acknowledge, after reading the dollar award thresholds in our legal compliance matrix, also included in this Word document, your receipt from the City of Saint Paul this accompany legal requirements for award acceptance and can impact the cost of the project.
* **Saint Paul pre-application.** This form below must be filled out in its entirety and initialed with your acknowledgement and concurrence with each statement at the last page. If you have an assigned Project Manager, they should assist you with this grant sponsorship request prior to submission to the Grants Team.
* E**xcel Budget Tools for LCDA Predevelopment is required: an .xls file** as posted on the programs line item underneath the Word pre-application. Please fill this format out and DO NOT USE ADOBE to PDF in submission of the proposed budget - please keep the cell functions in an .xls file format along with the Word or PDF file formats in your email attachments at your preference. Depending on the size of files, some may need to be compressed PDF, but you may keep the preapplication in Word or PDF.
* **Insufficient packages** will not be accepted and reviewed for steering committee consideration. Grant staff will work with the proposer if submitted by deadline (before midnight on business day) and if insufficiencies are rectified within a short number of days, the Grant Administrator may choose to accept the proposal for consideration.
* **Revolving policy in receipt of proposals:** for state and regional grant program sponsorship request, Proposers may be submitted at any time, recommended to be earlier than at City deadline to provide staff with additional time in vetting eligibility and competitiveness.
* **Patience Request:** please expect a day or two for reply as proposals are received for confirmation but you are welcome to request confirmation if you have not received information within 2-4 days after submission depending on the volume of the submissions for the given round.

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| **General Information** | |
| Applicant/Developer Name: |  |
| Applicant Address: |  |
| Primary Contact Name: |  |
| Primary Contact Address: |  |
| Primary Contact Telephone Number: |  |
| Primary Contact Email Address: |  |
| Planning and Economic Development Department Project Manager Assignment Status:  “I have a Project Manager” or “None” or “I do not know”.  If yes, name your Project Manager with whom you have spoken to in the past on the subject property. |  |
| **Property Information** | |
| Project Address: |  |
| Number of Parcels: |  |
| Property Identification Numbers: |  |
| Area of project (in acres): |  |
| Are any of the properties City-owned? | Yes  No |
| Are any of the properties in a federal, state, or locally designated historic district or individually listed historic property? | Yes  No |
| If not, has this property been evaluated and determined a potential historic resource? | Yes  No |
| Level of Site Control: | Property Owner  Speculator without formal control  In negotiations with Purchase Option  Purchase Agreement ☐ |
| **Current Land Use:** | |
| Current Use of Parcel(s): |  |
| Number of Structures if any:  Is Demolition Proposed: | Yes  No |
| If Yes, has a Hazmat Survey been accomplished? | Yes  No |
| Has an Environmental Site Assessment (ESA) began with environmental consultants? | Yes  No |

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| --- | --- | --- | --- |
| Proposed Number of Housing Units: |  | | |
| Estimated Number of FTE Jobs: |  | | |
| Floor Area of Commercial/Industrial Space: | Commercial:  Industrial: | | |
| **Project Information:** |  | | |
| Project Name: |  | | |
| Who: Project Team and Roles (names, titles, bios): | | | |
| How: Eligible Activities (include a .xls file of the corresponding budget tool). Summary: | | | |
| What: Predevelopment Activity Outcomes | | | |
| Estimated Number of New Housing Units: |  | | |
| Estimated Number of New or Preserved Affordable Housing Units: |  | | |
| Estimated Floor Area of New Commercial/Industrial Development: | Commercial:  Industrial: | | |
| Estimated Number of FTE Jobs to be Created/Retained: | Created: Retained: | | |
| Will buildings be demolished or altered as part of this project? | Yes  No | | |
| Is this project within an [ACP 50 area](https://www.stpaul.gov/sites/default/files/Media%20Root/Planning%20&%20Economic%20Development/ACP50.pdf)? | Yes  No | | |
| Is this project within an [Opportunity Zone](https://mn.gov/deed/business/financing-business/tax-credits/opp-zones/census-opp-zone-tracts.jsp)? | Yes  No | | |
| Proximity to Existing or Planned Transit: |  | | |
| How does this project further the City’s racial equity goals?  *Racial Equity Goals:* Saint Paul will be a city where race does not predetermine opportunities in education, employment, housing, health and safety. |  | | |
| **Project Readiness** |  | | |
| Level of site control? (Check box that applies.) | Ownership  Purchase agreement  Purchase option  Tentative Developer Status (City-owned property)  No formal control | | |
| City approvals needed, if any beyond building permits? (e.g. rezoning, variances, conditional use permits, etc.) | Yes  No | If yes, what? | |
| Are funds committed to this project? | Yes ☐  No ☐ | If yes, how much and by whom? | |
| What is the financial gap for this project for required predevelopment activities? | Amount: | | |
| What is the estimated financial project gap for plan implementation overall: | Click here to enter a date. | | |
| What additional questions or comments do you have for the grants team? | Click here to enter a date. | | |
| **Grant Information** | | | |
| Is the site in a TOD-eligible area? Go to: [TOD Grant Area Mapping Tool](https://giswebsite.metc.state.mn.us/publicmaps/lca/) | Yes ☐  No ☐ | | |
| Total Amount of Grant Request: |  | | |
| Project Budget: Include in submittal email the requested proposed grant budget in .xls file form – do not PDF this file. List out each proposed use of fun by name with comma: | | | |
| Who will be responsible for preparing the grant application? |  | | |
| What is their level of experience in preparing these grant applications? (50 words or less) |  | | |
| Outline the names with full contact information of any private sector team member who is proposing to work on the final grant in Webgrants Application should the steering committee and PED leadership approve your proposal to move forward in sponsorship this programs grant cycle.  Webgrants Registration Status:  Has this individual worked in Saint Paul’s portal for LCA grants withing Webgrants before? Answer Yes or No  If not, authorization through grant staff is required prior to submission of request for Registration Authorization to the Metropolitan Council and additional process is required for approval access. | Team Member Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Development or Consulting Firm: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Webgrants Status:  Yes ☐  No ☐  ----------please repeat for each who need our access approval to our St. Paul grant portal ------- | | |
| **Comprehensive Planning and Livable Communities** | | | |
| Explain how this project is in alignment with Saint Paul For All Comprehensive Plan (Up to 100 words.) | | | |
| Explain how this project serves as a model of LCDA program goals. (Up to 100 words.) | | | |
| **Acknowledgements** | | | |
| The applicant understands that submission of this pre-application does not guarantee that the City will submit an application on the applicant’s behalf. | | | Initial: |
| The applicant understands that if selected to partner with the City they are responsible for preparing the application. | | | Initial: |
| The applicant understands that, if selected, they are required to pay the application fee with the draft application. | | | Initial: |
| The applicant understands that if the application is not prepared to minimum standards, the applicant misses deadlines, or the project is deemed not ready for grant funds the City will not submit the application to the funding agency. | | | Initial: |
| The applicant understands that approval to move forward with a grant application does not eliminate the need to meet all applicable city requirements and does not guarantee future approvals. | | | Initial: |
| The applicant understands that if the city passes through grant funds to them, they are subject to the City’s compliance requirements. | | | Initial: |