

**NOTICE TO THE PUBLIC
Community Development Block Grant Program**

Passaic County

Passaic County New Jersey intends to amend the FY 2015 Action Plan for the Community Development Block Grant (CDBG) Program. Passaic County will utilize the \$50,000 in funds previously allocated to West Milford for an elevator at the Westbrook Teen Center. The funds will now be used for the installation of ADA accessible bathrooms and an ADA accessible entrance way at the Municipal Complex Building number 2 located at 549 Ridge Road, West Milford, NJ.

Copies of the amendment are available for public inspection and review at the following locations for a thirty-day period from November 22, 2017 to December 21, 2017.

PASSAIC COUNTY DEPARTMENT OF PLANNING AND ECONOMIC DEVELOPMENT
930 Riverview Drive, Totowa, NJ, Suite 250
AND
OFFICE OF THE MUNICIPAL CLERK in
Township of West Milford
AND
<http://www.passaiccountynj.org>

Any individuals interested on commenting on the Substantial Amendment may do so in writing to Passaic County Department of Planning and Economic Development, 930 Riverview Drive, Suite 250, Totowa, NJ 07512. All comments received by 4:00 pm on December 21, 2017 will be considered. La información será proporcionada en español a petición.



PASSAIC COUNTY

**COMMUNITY DEVELOPMENT BLOCK
GRANT PROGRAM**

**A SUBSTANTIAL AMENDMENT TO THE FY 2015 ACTION
PLAN FOR THE PASSAIC COUNTY COMMUNITY
DEVELOPMENT BLOCK GRANT PROGRAM, TO RE-
ALLOCATE A TOTAL OF \$50,000 IN FUNDING TO THE FY
2017 WEST MILFORD ADA ACCESSIBILITY PROJECT FOR
MUNICIPAL COMPLEX BUILDING 2 LOCATED AT 649 RIDGE
ROAD, WEST MILFORD, NJ**

**DOCUMENTS
ON PUBLIC DISPLAY
BETWEEN NOVEMBER 22, 2017
AND DECEMBER 21, 2017**

PLEASE DO NOT REMOVE

APPLICANT INFORMATION AND PROJECT ABSTRACT			
1.	Project Name: Building #2 Renovations – West Milford Municipal Complex		
2.	Eligible CDBG Activity: Category #6, A.D.A. accessibility (See Exhibit A)		
3.	CDBG Funding Year: FY 2017 <i>Reprogram of FY 2015 Funds</i>		
4.	Name of Applicant (Municipality or Non-profit): Township of West Milford		
5.	Address: 1480 Union Valley Road, West Milford, New Jersey 07480		
6.	Telephone: 973-728-2858	7.	Facsimile: 973-728-2876
8.	Federal Tax ID No.: 22-6002392	8a.	DUNS No.: 067506949
8b.	Attach SAM.gov Proof of Registration and CAGE Number: 6CEW3	8c.	Non-Profits: Attach BRC and W-9
9.	Type of Organization: <input checked="" type="checkbox"/> Municipality <input type="checkbox"/> Non-profit		
10.	Name of Principal Contact Person: Eric Miller		
11.	Title: Supervising Engineering Aide	12.	Email address: engineering1@westmilford.org
13.	Amount of CDBG funds requested: \$50,000		
14.	Funds committed from other sources: \$300,000		
15.	Total project cost (Line 13 + Line 14): \$350,000		
16.	Location of proposed project: (For purposes of GIS mapping, please provide a specific, US Post Office recognized address in or near the project site – i.e.: 132 Main St. Please do not provide a range or intersection) #649 Ridge Road, West Milford, NJ 07480		
17.	Attach photographs or email photos of the project site including streetscapes surrounding the project location		
<p>The applicant certifies that to the best of its knowledge and belief, the information included in this application is true and correct, and that the applicant will comply with all federal requirements should this application be approved for funding.</p> <p><i>[Signature]</i> <u>20 Nov 2017</u> Eric Miller, Supervising Engineering Aide Signature Date Typed Name and Title</p>			

PROJECT DESCRIPTION

Briefly describe the proposed project. The narrative should include: 1) the need or problem to be addressed, 2) the population to be served or the area to benefit, 3) the work to be performed, including the activities to be undertaken or the services to be provided, 4) the method of approach, and 5) the implementation schedule. **Attach additional sheets if necessary.**

The Township of West Milford has recently completed construction of a new Library within the Municipal Complex. The former Library is now available for use by the municipality. The current Town Hall is not fully ADA accessible with certain offices in basements. The goal of this project is to reconfigure and relocate municipal offices within Town Hall and the former Library to provide accessibility to the offices most frequently visited by the public.

Check here if the structure is historic Year constructed _____

Check here if the project is located in a flood plain , attach flood plain map as applicable.

CDBG ELIGIBLE ACTIVITIES

1. Place a checkmark in one or more of the following boxes that describes your proposed activity.

Public Facilities:

- | | |
|--|--|
| <input type="checkbox"/> Streets, curbs, sidewalks | <input type="checkbox"/> Community centers, senior centers |
| <input type="checkbox"/> Storm and sanitary sewers | <input type="checkbox"/> Parking lots |
| <input type="checkbox"/> Water lines | <input type="checkbox"/> Fire Stations |
| <input type="checkbox"/> Parks | <input checked="" type="checkbox"/> ADA Improvements for Municipal Offices |

Public Services:

- | | |
|--|---|
| <input type="checkbox"/> Child care | <input type="checkbox"/> Health care |
| <input type="checkbox"/> Recreation programs | <input type="checkbox"/> Education programs |
| <input type="checkbox"/> Public safety services | <input type="checkbox"/> Fair housing activities |
| <input type="checkbox"/> Services for senior citizens | <input type="checkbox"/> Services for homeless people |
| <input type="checkbox"/> Drug abuse counseling | <input type="checkbox"/> Energy conservation counseling and testing |
| <input type="checkbox"/> Welfare | <input type="checkbox"/> Other, specify |
| <input type="checkbox"/> Paying for the cost of operating and maintaining that portion of a facility in which one or more of the above services are provided | |

Other:

- | | |
|---|--|
| <input type="checkbox"/> Acquisition | <input type="checkbox"/> Homeownership assistance (down payment and closing costs) |
| <input type="checkbox"/> Demolition | <input type="checkbox"/> Planning |
| <input type="checkbox"/> Housing Rehabilitation | <input type="checkbox"/> Economic Development |

US HUD CDBG STATUTORY OBJECTIVE JUSTIFICATION *

LMI Area Benefit | # Persons Served: N/A

Census Data – (Please reference the LMI Area map provided by Passaic County)

Census Tract and Block Group #: _____

Area population: _____ LMI Population: _____ Percent LMI: _____

OR

Survey Data – Check this box if you intend to utilize household income surveys to document the size and annual income of each person receiving the benefit. Note: at least 51% of the program beneficiaries must be persons whose family income does not exceed the limits summarized in **Exhibit C – National Objective Qualifiers**.

****Note:** Public service activities CANNOT be qualified through the Area Benefit National Objective.

LMC Limited Clientele | # Persons Served: N/A

If the proposed activity is a public service and is limited to a specific group of people, at least 51% of whom are low- and moderate-income persons, indicate which of the three categories of limited clientele activities best describes the activity by placing a checkmark in the appropriate box.

Presumed benefit - place a checkmark in the box that describes the beneficiaries of the proposed service: (NOTE: Handicap Barrier Removal Projects should check Presumed Benefit/Severely Disabled Adults below).

- | | |
|---|---|
| <input type="checkbox"/> Abused children | <input type="checkbox"/> Battered spouses |
| <input type="checkbox"/> Elderly persons | <input type="checkbox"/> Severely disabled adults (use census population report definition) |
| <input type="checkbox"/> Homeless persons | <input type="checkbox"/> Illiterate adults |
| <input type="checkbox"/> Persons living with AIDS | <input type="checkbox"/> Migrant farm workers |

Family size and income – check this box if you intend to utilize household income surveys to document the size and annual income of each person receiving the benefit. Note: at least 51% of the program beneficiaries must be persons whose family income does not exceed the limits summarized in **Exhibit C – National Objective Qualifiers**.

Nature and location of activity – check this box if the nature and location of the activity are such that it will be used predominantly by low- and moderate-income persons. For example, a day care center designed to serve residents of a public housing development. Attach an explanation of how the activity meets this objective.

LMH Housing | # Households Served: N/A

Housing – check this box if you will use funds to benefit low – and moderate income homeowners or renters. Each unit must be occupied by a low- and moderate income household.

Slums/Blight | # Buildings Assisted: N/A

Only Public Facility building rehabilitation or demolition can be qualified as a "slums and blight" activity.

*See Exhibit B – National Objectives for additional information.

BUDGET NARRATIVE ATTACHMENT

1. Describe your plans to use other funds on this project. In this section, only describe funds that have been secured. Provide the source of funds, amounts, and how these funds will be used. Describe your use of donated goods and services. Estimate the value of these goods and services. (Note: Engineering costs must be paid for by the municipality or agency. All construction projects require an engineer to prepare bid specifications and documents required by federal funding).

In 2014 the Township of West Milford commissioned a building study from Element Architectural Group (EAG) to evaluate municipal office needs post new Library implementation. The EAG construction cost estimate of \$368,000 includes reconfiguration of the former Library first floor to municipal offices, including mechanical, electrical and ADA improvements. The exterior of Building #2 (former Library) is accessible, however the entry and the interior of the building is not. It is estimated that the 2015 CDBG allotment for \$50,000 will be sufficient to provide the two required ADA restrooms and main entry automatic door actuators.

2. Explain why you consider your program to be a local priority.

There is currently no ADA accessibility to municipal offices located in the Town Hall basements. The goal has long been to eliminate basement offices and provide full accessibility to the public.

NON-PROFIT APPLICANT ORGANIZATIONAL INFORMATION

Project Administration

Describe the staff, volunteers, consultants, or board members who will be directly associated with this project/service and their responsibilities. Provide an organization chart, including employee names and titles, to characterize how this program/service fits into the overall organizational structure. Describe overall program delivery strategy.

N/A

Monitoring

Briefly describe how you will monitor progress in implementing the program. Attach copies of all data collection tools that will be used to verify achievement of program goals and objectives. Describe who will be responsible for monitoring progress.

N/A

Insurance/Bonding/Worker's Compensation

State whether or not the agency has liability insurance coverage, in what amount, and with what insuring agency. State whether or not the agency pays all payroll taxes and worker's compensation as required by federal and state laws. State whether or not the agency has fidelity bond coverage for principal staff who handle the agency's accounts, in what amount, and with what insuring agency.

N/A

NON-PROFIT APPLICANT ORGANIZATIONAL INFORMATION

CONTINUED

Financial Capacity

Describe the agency's current operating budget, itemizing revenues, and expenses. Identify commitments for ongoing funding. Describe the agency's fiscal management, including financial reporting, record keeping, accounting systems, payment procedures, and audit requirements.

N/A

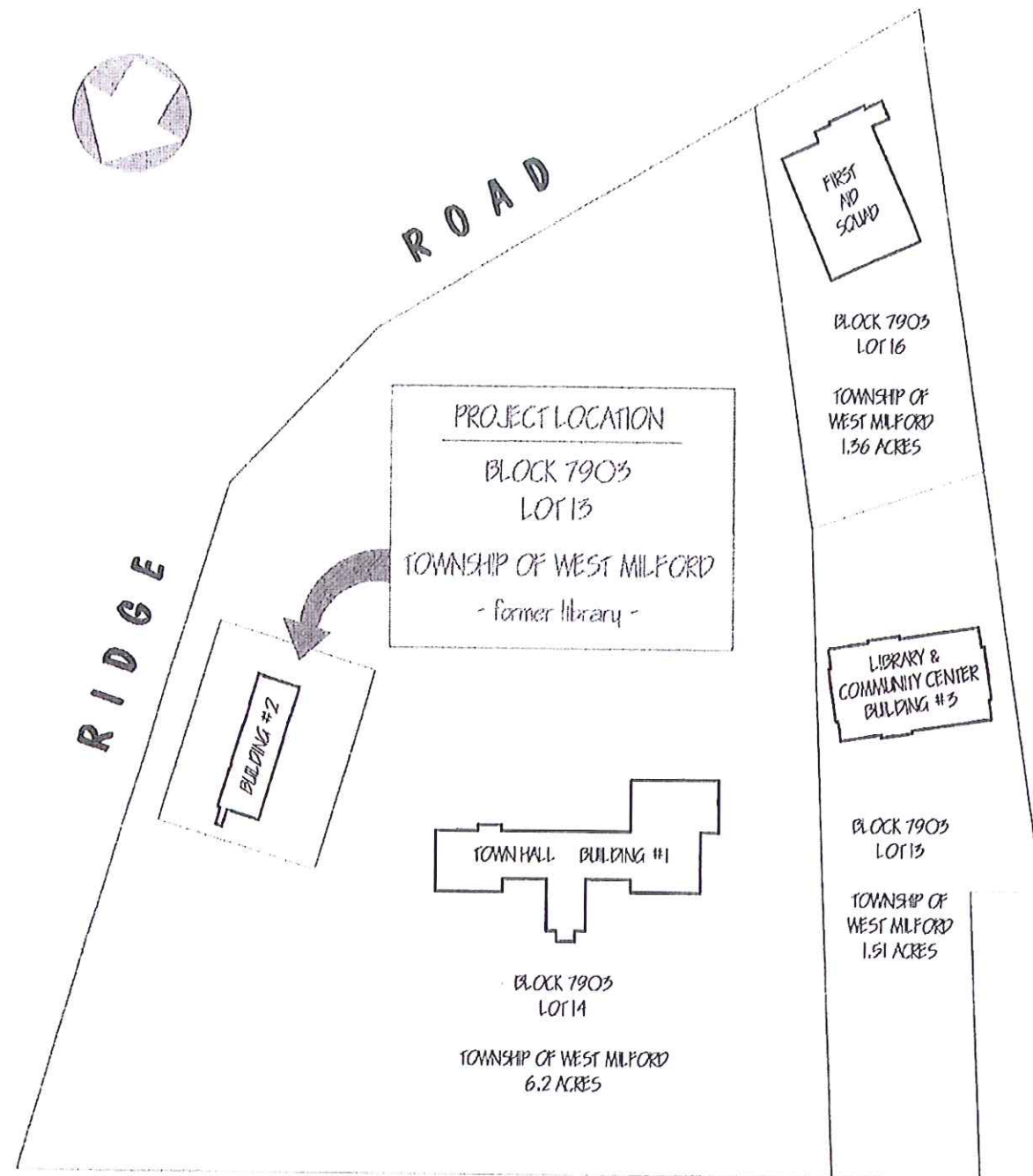
Please attach the following information to your application:

Application Checklist: (non-profit applicants only)

- Articles of Incorporation / Bylaws
- Non-profit determinations (tax exempt letter from IRS and/or state)
- List of Board of Directors
- Organizational chart
- Resumes of chief program administrator and chief fiscal officer
- Financial statement and audit
- W-9 Form
- Business Registration Certificate (BRC)
- Resolution from Board of Directors authorizing grant application
- SAM.gov proof of registration and CAGE number

**APPLICATION CHECKLIST
MUNICIPAL FACILITIES PROJECTS**

	Yes	No	N/A
• Application completed and certification signed	X		
• Project location map attached	X		
• Architect / Engineer cost estimates	X		
• Provide photographs in print and electronic format	X		
• Municipal Council Resolution approving submission of application	X		
• Municipal Council Resolution supporting fair housing regulations	X		
• SAM.gov proof of registration and CAGE number	X		



UNION VALLEY ROAD
PASSAIC COUNTY ROUTE #513

DRAFT

Township of West Milford Municipal Complex

NOT TO SCALE

USER NAME: PASSWORD:
Federal User Name? Federal Password?

[Create an Account](#)

Search Results

Quick Search Results

Your search returned the following results...

Notice: This printed document represents only the first page of your SAM search results. More results may be available. To print your complete search results, you can download the PDF and print it.

Entity:

Status: Active (2)

DUNS: 067506949
Has Active Exclusion?: No
Expiration Date: 12/19/2017
Purpose of Registration: Federal Assistance Awards Only

CAGE Code: 6CEW3
Do DAAC:
Delinquent Federal Debt? No

[View Details](#)

Glossary

- [Search Results](#)
- [Entity](#)
- [Exclusion](#)
- [Search Filters](#)
- [By Record Status](#)
- [By Record Type](#)

SAM | System for Award Management 1.0

IRM V.1.P.56.2016111-0945
WWW1

Note to all Users: This is a Federal Government computer system. Use of this system constitutes consent to monitoring at all times.







Township of West Milford

Passaic County, New Jersey

~ Resolution 2017 – 339 ~

RESOLUTION OF THE TOWNSHIP OF WEST MILFORD, COUNTY OF PASSAIC AND STATE OF NEW JERSEY AUTHORIZING THE SUBMITTAL AND ACCEPTANCE OF A 2017 COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) FOR ADA IMPROVEMENTS TO THE FORMER LIBRARY

WHEREAS, the Township received a 2015 allotment through the Passaic County CDBG program in the amount of \$50,000 to fund a portion of the Teen Center elevator; and

WHEREAS, competitive bids received for the elevator project were rejected due to the availability of funds; and

WHEREAS, the Passaic County Division of Economic Development has advised that consideration to redirect the 2015 CDBG allotment to ADA improvements at the former Library will be given upon submittal of a 2017 CDBG application.

NOW, THEREFORE, BE IT RESOLVED, that the Mayor and the Township Council of the Township of West Milford hereby authorize the submittal of a 2017 Community Development Block Grant application entitled Building #2 Renovations – West Milford Municipal Complex to redirect the 2015 CDBG allotment from the Westbrook Teen Center elevator to ADA improvements for the former Library; and

BE IT FURTHER RESOLVED that the Mayor and the Township Clerk be authorized and directed to approve the acceptance of said grant should it be awarded.

Adopted: November 8, 2017

Adopted this 8th day of November, 2017
and certified as a true copy of an original.



Antoinette Battaglia, Township Clerk

Township of West Milford
Passaic County, New Jersey

~ Resolution 2015- 389 ~

RESOLUTION OF THE TOWNSHIP OF WEST MILFORD, COUNTY OF PASSAIC, STATE OF NEW JERSEY REGARDING MUNICIPAL COUNCIL FAIR HOUSING

WHEREAS, the Township of West Milford supports Title VIII of the Civil Rights Act of 1968 (Federal Fair Housing Law) and the New Jersey Law Against Discrimination. It is the policy of Township of West Milford to implement programs to ensure equal opportunity in housing for all persons regardless of race, color, religion, ancestry, sex (including pregnancy), national origin, nationality, familial status, marital or domestic partnership status, affectional or sexual orientation, atypical hereditary cellular or blood trait, genetic information, liability for military service, mental or physical disability, perceived disability, AIDS/HIV status and Lawful Income or Source of Lawful Rent Payment (Section 8). The Township of West Milford further objects to discrimination in the sale, rental, leasing, financing of housing or land to be used for construction of housing, or in the provision of brokerage services because of race, color, religion, ancestry, sex, national origin, handicap or disability as prohibited by Title VIII of the Civil Rights Act of 1968 (Federal Fair Housing Law) and the New Jersey Law Against Discrimination. Therefore, the Township Council of the Township of West Milford do hereby approve the following:

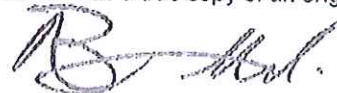
BE IT RESOLVED, that within available resources, the Township of West Milford will assist all persons who feel they have been discriminated against under one of the aforementioned categories, to seek equity under federal and state laws by filing a complaint with the New Jersey Division on Civil Rights and the U.S. Department of Housing and Urban Development, as appropriate; and

BE IT FURTHER RESOLVED, that the Township of West Milford shall publicize this resolution and through this publicity shall cause owners of real estate, developers, and builders to become aware of their respective responsibilities and rights under the Federal Fair Housing Law, the New Jersey Law Against Discrimination, and any local laws or ordinances; and

NOW THEREFORE BE IT RESOLVED, that the municipality will at a minimum include, but not be limited to: (1) the printing and publicizing of this resolution, a fair housing public notice and other applicable fair housing information through local media, community contacts and placement on the Municipal website and in other social media; (2) distribution of posters, flyers, and any other means which will bring to the attention of those affected, the knowledge of their respective responsibilities and rights concerning equal opportunity in housing.

Adopted: December 16, 2015

Adopted this 16th day of December
and certified as a true copy of an original.



Antoinette Battaglia, Township Clerk