

PROPOSED DESIGNATED TARGET NEIGHBORHOODS (DTN)

COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG)

INSTRUCTIONS and FORMS

GENERAL INFORMATION

1. All activities **must** be located in, or directly serve residents of Designated Target Neighborhoods (DTN's). A proposed DTN is an area or neighborhood having fifty-one (51%) or more low and moderate income persons, physical deterioration and economic disinvestment.
2. A survey of the area or neighborhood that is being proposed as a **new DTN must** be conducted and the survey **must** meet the following criteria.
 - a. A survey **must** contain only one block group within a census tract or for a specific area within a block group.
 - b. A Survey Questionnaire **must** be distributed to **all** residents, individual homes and apartments, within the survey area. A sample questionnaire can be found on page 4 of this document.
 - c. The survey can be conducted by mail or door-to-door.
 - d. **At least seventy-five (75%)** of the residents **must** respond to the questionnaire.

INSTRUCTIONS FOR COMPLETING "REQUEST FOR NEW DTN" FORM

PART I - GENERAL

1. Name of municipality submitting request for the creation of New DTN.
2. Date survey was completed.
3. Check the method by which the survey was conducted.
4. Person in-charge of survey.

5. Enter the Census Tract and Block Group in which the survey was conducted.
6. Provide the exact location of the survey. i.e. roads, bay, and/or river that form the boundary of the surveyed area.
Include a detailed map of the area.
7. Enter the total homes and individual apartments within the surveyed area.
8. How many questionnaires were completed.

PART II - SURVEY RESULTS

Extract the survey information from each returned questionnaire and record the results on the "**Survey Tally Worksheet**" which is attached. Follow the detailed instructions on the work sheet before proceeding with the following survey instructions.

9. Add the total of columns 1, 4, 7, 10, 13, 16, 19 and 22 together and enter the results in item 9.
10. Add the total of columns 2, 5, 8, 11, 14, 17, 20 and 23 together and enter the results in item 10.
11. Add items 9 and 10 together and enter the results in item 11.
12. Enter the total recorded in item 8.
13. What percent is item 9 of item 12? Divide the total in item 9 by the total in item 12 and enter the percent in item 13.
14. What percent is item 10 of item 12?
15. What percent is item 11 of item 12?

PART III, PART IV and PART V:

All parts are self-explanatory.

COMPLETENESS CHECKLIST

The "Request for NEW DTN" is acceptable for the creation of a New DTN only if the answers to **all** of the following are **YES**.

1. Column 15 of Part II reflects 51% or more. Yes __ No __
2. All sections of the form are complete and it has been signed by the appropriate official. Yes __ No __
3. Map of the surveyed area is attached. Yes __ No __
4. Copy of **all** returned questionnaires are attached. Yes __ No __
5. Copy of the "Survey Tally Worksheet" is attached. Yes __ No __

It is recommended that the questionnaire be printed on municipal stationery and signed by the Mayor.

SAMPLE QUESTIONNAIRE

Dear Resident:

Our municipality is planning to apply for funding for a project that will benefit your neighborhood. In order to meet all the requirements necessary to apply for funding, we are asking you to supply some general information about your household.

It is not necessary that you sign this document, but it is necessary that all of the following questions be answered correctly:

1. Number of persons living in your house. _____
2. Total yearly income for all persons living in your house. \$_____.

Note: Income includes all or any of the following:

Social Security, welfare, unemployment
interest, dividends, alimony, etc.

3. Is the head of the household one or all of the following:
4. Is any member in your household, other than yourself, handicapped or disabled? Enter yes or no. _____
5. What street is this house or apartment located on?

After completing the above, place this questionnaire in the enclosed stamped, self-addressed envelope and mail by _____.

Thank you very much for your anticipate cooperation and should you have any questions, please contact _____ at _____.