

City of Buffalo ESG (Emergency Solutions Grant) – Part 1  
 Funding Application for Year 48 (2022-2023)



EMERGENCY SOLUTIONS GRANT (ESG)  
 FUNDING APPLICATION – **PART 1** FOR YEAR 48 (2022-2023)

Agency: \_\_\_\_\_

Please enter the # served and funding requests for each program included in your application:

Program	Proposed # Served	Requested Amount
Emergency Shelter (Includes Code Blue)		
HMIS		
Homelessness Prevention		
Rapid Re-Housing		
Street Outreach (Includes Coordinated Entry)		
<b>Total</b>		

THIS IS **PART 1** OF THE ESG APPLICATION WHICH INCLUDES GENERAL INFORMATION ABOUT YOUR AGENCY. **PART 2** OF THE APPLICATION WILL FOCUS ON PROGRAM SPECIFICS.

**APPLICATIONS ARE DUE BY EMAIL NO LATER THAN WEDNESDAY, MAY 4, 2022 AT 4PM. EMAIL ALL FILES TO [CONTRACTADMINISTRATION@BUFFALONY.GOV](mailto:CONTRACTADMINISTRATION@BUFFALONY.GOV). LATE SUBMISSIONS WILL NOT BE ACCEPTED.**

- For additional information about ESG (Emergency Solutions Grant), please go to: <https://www.hudexchange.info/programs/esg/>
- It is highly recommended that you use Adobe Acrobat Reader to complete this application. There are components of application which only function properly while using Adobe software. Can be found here: <https://get.adobe.com/reader/>
- If you are having technical issues while completing the application, please reach out to Sean Tulumello.

City of Buffalo  
 Department of Community Services and Recreational Programming  
 Contract Administration Unit

Staff

- Sue Lumadue, Senior HR Planner [slumadue@city-buffalo.com](mailto:slumadue@city-buffalo.com)
- Rebecca Harris, HR Planner [rharris@city-buffalo.com](mailto:rharris@city-buffalo.com)
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**I. AGENCY INFORMATION**

Agency Legal Entity:	
Main Site Address:	City, State, Zip:
Main Phone:	Fax:
Agency Website:	
DUNS #	
Tax ID #	
City of Buffalo Vendor ID #	

1. What is your agency’s mission statement?

2. What Common Council District is your main site located in?

\_\_\_\_\_

3. Did your program receive ESG funding in Year 47 (2021-2022)? \_\_\_\_\_

4. Please describe your experience with any federal, state, or local, COC, OTDA grants.

5. Please provide contact information for this program below.

CEO/Executive Director:

Email:

Phone:

Board President: Email: Phone:
Program Contact: Title: Email: Phone:
Finance Contact: Title: Email: Phone:

**II. BOARD INFORMATION**

1. What is your agency’s minimum required number for Board Members according to your bylaws?

\_\_\_\_\_

2. How many members currently serve on your Board of Directors?

\_\_\_\_\_

3. How often is your Board required to meet according to your bylaws?

\_\_\_\_\_

4. How often did your board meet in the year 2021-2022?

\_\_\_\_\_

**STOP**

THE FOLLOWING SECTIONS ARE THE FINAL STEPS FOR THIS APPLICATION. YOU WILL ALSO NEED TO COMPLETE ESG APPLICATION – **PART 2** WHICH IS A SEPARATE ATTACHMENT.

### III. ATTACHMENTS

All attachments must be submitted digitally to [contractadministration@buffalony.gov](mailto:contractadministration@buffalony.gov). There is a 10 MB limit on emails. If it fails to deliver, please re-send attachments in batches to stay within limit.

**Provide one digital copy of each:**

- ESG 48 Application Part 1 + 2
- ESG Budget (separate attachment): Fill out all three columns. The first column is for funding you are requesting for this program, the second column is for the additional funding resources you have secured for this program, and the third column is for the total amount of funding used for this program.
- Organizational Chart: Highlight staff who will be funded through ESG
- List of Board Members: Include names, positions, organization or business affiliation, and years on the board
- Board Meeting Attendance: List of Board's attendance for the past 12 months
- Board Authorization to request funds
- Audited financial statements or most recent audit
- Most recent 990 and CHAR 500 (no earlier than 2018, or copy of extension request)
- Copy of Internal Controls Policy
- COVID-19 Health & Safety Protocol

### IV. SIGNATURES

To the best of my knowledge and belief, the information in this application is true and correct, and its submission has been duly authorized by the governing body of the applicant. With this submission, we agree to follow all rules and regulations that govern federal entitlement funding.

We also agree to participate in any technical assistance training or seminars for staff and board members that the City of Buffalo offers during the program year; and understand that failure to attend this training may result in the loss of eligibility for future funding.

Finally, the person signing below has been authorized by the governing body of the applicant to negotiate on behalf of the organization.

**Applicant Signature (Must be Executive Director or another Authorized Signee)**

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*Signature*

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*Name and Title*

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*Date*