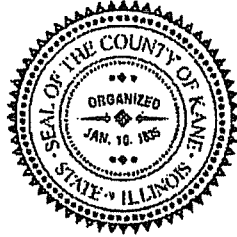


COUNTY OF KANE

Christopher J. Lauzen
Kane County Board Chairman



Kane County Government Center
719 South Batavia Avenue
Geneva, IL 60134
P: (630) 232-5930
F: (630) 232-9188
clauzen@kanecoboard.org
www.countyofkane.org

DOCUMENT VET SHEET

for
Christopher J. Lauzen
Chairman, Kane County Board

Name of Document: Application for Federal Assistance Resolution No.: 13-102

Submitted by: Josh Beck, (630)444-2960

Dept. Head Signature: *Scott Berg*

Date Submitted: 05-31-2013

Dept. Head Sign-off Date: 6-3-13

Examined by: *Joseph Lukes*

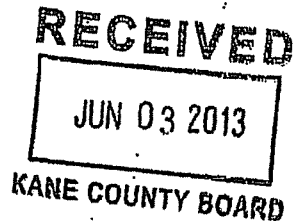
(Print name)

Joseph F. Lukes

(Signature)

6-6-13

(Date)



Post on the Web: YES NO Atty. Initials: *VT*

Comments:

Please find two copies of the Application for Federal Assistance for Chairman Lauzen's review and signature. These forms are a required submission to the Department of Housing & Urban Development in order to obtain Community Development Block Grant (CDBG) and Home Investment Partnership Program (HOME) funding.

Chairman signed: YES NO 6/9/13
(Date)

Document returned to: Josh Beck
(Name/Department)

STATE OF ILLINOIS

COUNTY OF KANE

RESOLUTION NO. 13 - 102

APPROVING A HOUSING AND COMMUNITY DEVELOPMENT ANNUAL ACTION PLAN FOR PROGRAM YEAR 2013

WHEREAS, the Kane County Board adopted Resolution No. 97-344, which established the Kane County Community Development Block Grant (CDBG) Program, and Resolution No. 04-06, which established the Kane-Elgin HOME Consortium; and

WHEREAS, the Kane County Board adopted a Housing and Community Development Consolidated Plan for Program Years 2010-2014, which identified priority needs and strategies to be addressed with funds from the U.S. Department of Housing and Urban Development (HUD) over a five-year period; and

WHEREAS, the County prepared a draft Action Plan for Program Year 2013, including budgets for the use of HUD funds; and

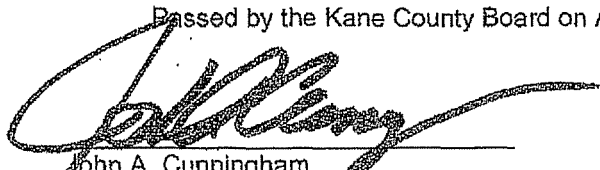
WHEREAS, said budgets include specific programs and projects that are consistent with the priority needs and strategies identified in the Consolidated Plan for Program Years 2010-2014; and

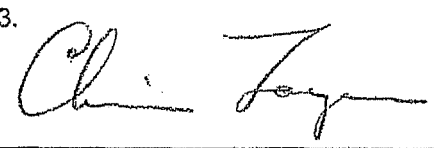
WHEREAS, a summary of the plan was published and made available for public review and comment as required by the County's Citizen Participation Plan.

NOW, THEREFORE, BE IT RESOLVED by the Kane County Board that the Housing and Community Development Annual Action Plan for Program Year 2013, including activities to be undertaken with HUD funds, are hereby approved.

BE IT FURTHER RESOLVED that the Kane County Board Chairman is authorized to sign agreements necessary to complete the activities described in the plan, and to execute certifications and other documents required by the U.S. Department of Housing and Urban Development.

Passed by the Kane County Board on April 9, 2013.


John A. Cunningham
Clerk, County Board
Kane County, Illinois


Christopher J. Lauzen
Chairman, County Board
Kane County, Illinois

Vote:
Yes 21
No 0
Voice 0
Abstentions 0

**APPLICATION FOR
FEDERAL ASSISTANCE**

Version 7/03

1. TYPE OF SUBMISSION: Application <input checked="" type="checkbox"/> Construction <input type="checkbox"/> Non-Construction		Pre-application <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction	2. DATE SUBMITTED	Applicant Identifier
			3. DATE RECEIVED BY STATE	State Application Identifier
			4. DATE RECEIVED BY FEDERAL AGENCY	Federal Identifier

5. APPLICANT INFORMATION

Legal Name: Kane County, Illinois		Organizational Unit: Department: Office of Community Reinvestment	
Organizational DUNS: 010221786		Division:	
Address: Street: 719 Batavia Avenue		Name and telephone number of person to be contacted on matters involving this application (give area code)	
City: Geneva		Prefix: Mr.	First Name: Scott
County: Kane		Middle Name W.	
State: Illinois		Last Name Berger	
Zip Code 60134	Suffix:		
Country: USA		Email: bergerscott@co.kane.il.us	

6. EMPLOYER IDENTIFICATION NUMBER (EIN): 36-6006585	Phone Number (give area code) 630-208-5351	Fax Number (give area code) 630-232-3411
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8. TYPE OF APPLICATION: <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) (See back of form for description of letters.) Other (specify) <input type="checkbox"/> <input type="checkbox"/>	7. TYPE OF APPLICANT: (See back of form for Application Types) B Other (specify)
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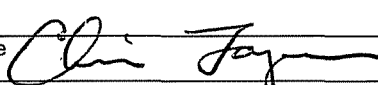
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: TITLE (Name of Program): HOME Investment Partnerships Program	11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: Program Year 2013 HOME activities include owner-occupied housing rehabilitation, the redevelopment and resale of vacant/foreclosed housing, and program administration.
---	---

12. AREAS AFFECTED BY PROJECT (Cities, Counties, States, etc.): Kane County CDBG Program Area and the City of Elgin.	9. NAME OF FEDERAL AGENCY: U.S. Department of Housing and Urban Development
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13. PROPOSED PROJECT Start Date: 06/01/2013 Ending Date: 05/31/2014	14. CONGRESSIONAL DISTRICTS OF: a. Applicant 14th b. Project 14th
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15. ESTIMATED FUNDING:	16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?
a. Federal \$ 576,444 ⁰⁰	a. Yes. <input type="checkbox"/> THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON
b. Applicant \$ 0 ⁰⁰	DATE:
c. State \$ 0 ⁰⁰	b. No. <input checked="" type="checkbox"/> PROGRAM IS NOT COVERED BY E. O. 12372
d. Local \$ 0 ⁰⁰	<input checked="" type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW
e. Other \$ ⁰⁰	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?
f. Program Income \$ ⁰⁰	<input type="checkbox"/> Yes If "Yes" attach an explanation. <input checked="" type="checkbox"/> No
g. TOTAL \$ 576,444 ⁰⁰	

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.

a. Authorized Representative		
Prefix	First Name Christopher	Middle Name J.
Last Name Lauzen	Suffix	
b. Title Chairman, Kane County Board	c. Telephone Number (give area code) 630-208-5351	
d. Signature of Authorized Representative 	e. Date Signed 6-9-13	