



**Illinois
Department of Commerce
& Economic Opportunity**

DCEO Use Only:

Application #: _____

Grant #: _____

GRANT APPLICATION PROJECT NARRATIVE

Office of Grants Management

Applicant Legal Name: Village of Niles

(Name used for DUNS registration and grantee pre-qualification)

Applicant GATA ID#: 686527

Applicant Attorney General (AG) Charitable Trust Bureau CO/Registration #: N/A

(for Non-profit entities)

SECTION 1: SCOPE OF WORK

1. PROJECT TITLE: Flock Automated License Plate Reader Cameras

Description of project (Please use the space below to describe what you intend to do with the funding. This must include a detailed narrative description of the activities which will be funded by the grant (e.g., land, property, easement, right-of-way acquisition; construction/renovation activities [including all ADA compliance covered by the project]; equipment; development/delivery of programs and services [including administrative activities]; or other activities). This information will be included in the Grant Agreement as the Scope of Work.

Utilization of appropriated funds will be used to purchase 10 new flock cameras (automated license plate readers) with a contract of 2 years. The flock cameras will be posted in strategic locations throughout the Village to help deter crime and to assist in solving crime. The cameras offer real time alerts when stolen vehicles, missing person vehicles, etc. travel through town. Niles already has 13 flock cameras and we are looking to add additional.

2. Project Location - (**Must** provide an electronic/digital photo of project location)

Address various addresses City Niles County Cook Zip Code + 4 60714+5300

If the property is being improved, is the property owned by the grantee? ☐ Yes ☐ No, or leased by the grantee? ☐ Yes ☐ No

NOTE: Purchase of Real Property. If permitted by the Award Budget and scope of activities provided in this Agreement, a Grantee may use the Grant Funds during the Award Term for the costs associated with the purchase of real property (as defined by 2 CFR 200.1) either through the use of reimbursement or advanced funds as permitted in Exhibit C of this Agreement for the following purposes and consistent with the Grantor's bondability guidelines and 2 CFR 200:

- (a) Cash payment of the entirety or a portion of the real property acquisition;
- (b) Cash Payment of a down payment for the acquisition;
- (c) Standard and commercially reasonable costs required to be paid at the acquisition closing (i.e., closing costs); or
- (d) Payments to reduce the debt incurred by Grantee to purchase the real property.

Non-governmental entities must complete questions 3, 4 and 5. All other entities, skip to question 6.

3. What is your Secretary of State (SOS) File #? N/A

4. Your Organization

a) What is your organization's mission statement?

N/A

b) What are the primary goals of your organization?

N/A

5. Your Participants

a) Describe any eligibility criteria for participation in your program(s) (i.e., income level, age, employment status, etc.).

N/A

b) Describe how participants are identified or recruited, or describe who refers participants to your organization for services.

N/A

c) If services cannot be provided to all that apply, describe the manner in which participants are selected (i.e., standardized testing; first-come, first-served).

N/A

d) State the costs to participants for these programs and services, and specify whether a sliding scale (i.e. cost for services is reduced or waived, based on income or ability to pay) is enacted.

N/A

6. Public Purpose

a) What is the public purpose of the proposed project?

The purpose of this project is to obtain additional flock cameras (Automated License Plate Readers) to deter crime and assist in solving crime.

b) Why is this proposed project necessary?

With rising crime rates everywhere, this tool is crucial in assisting with investigations. Currently with our existing flock cameras, NPD has been able to identify vehicles used in crimes, helped us to solve investigations, and find a missing person as their car entered into Niles.

c) What is the expected benefit of this proposed project (i.e., *city will no longer be on IEPA restricted status list; unemployed persons will receive job training, etc.*)?

The expected benefit would be that NPD would be able to more easily and readily identify vehicles that have committed crimes, vehicles that are stolen, vehicles of missing persons, and will act as a deterrent to crime.

7. Public Benefit

a) Estimate the number of persons to benefit or be served by the proposed project.

29,805 (Niles population from U.S. Census Bureau)

i. State the percentage of current or projected participants who are disadvantaged or low-income.

7.9%

ii. State the percentage of participants who receive (or *will receive*) services at no cost or a reduced fee.

100%

8. Has your organization secured all necessary federal, state and local permits and approvals to proceed with this project? ☒ Yes ☐ No

If *no*, please identify permits/approvals to be obtained and provide a reasonable, estimated timetable to secure such permits/approvals.

9. If grant funds are to be utilized to make capital improvements to real property structures/land) **that your organization does not own**, please provide a copy of the lease or other agreement (i.e., easements, rights-of-way, etc.) between your organization and the property owner that will allow your organization to continue to use the improved premises, for an appropriate length of time, consistent with applicable state law and rules.

* Lease must be for a *minimum* of ten (and preferably at least fifteen) years into the future, not counting available term extensions identified within the lease.

N/A

10. If the project involves the purchase of land or building(s), you must respond to items a) through e) below and attach supplementary explanatory materials as needed.

- a) Does your organization have an executed contract for the purchase/acquisition of the land/building in question? ☐ Yes ☐ No

If *no*, when do you expect to have an executed contract?

- b) Provide at least one appraisal conducted by a neutral third-party prior to closing – and as close to the closing date as possible – as an estimate of the property's fair market value. The appraisal documentation must be submitted to the Department as soon as available, and preferably prior the actual closing date.

- c) If your organization is a governmental entity, is it acquiring the land/building through an outright purchase, or through eminent domain/condemnation proceedings? ☐ Yes ☐ No

If acquiring through eminent domain/condemnation, when do you **realistically** expect to finalize the acquisition?

- d) Is your organization aware of any existing (or reasonably anticipated) legal proceedings such as zoning issues, objections of nearby property owners, etc., relating to the proposed use of the land/building being purchased with grant funds? ☐ Yes ☐ No

If *yes*, please attach a detailed explanation.

- e) Provide the name, address, phone number and email address (if applicable) of the individual or entity from which the land/building(s) is/are being purchased. If multiple owners, please provide this information for each.

11. Local Opposition

- a) Do you anticipate any opposition to this project? ☐ Yes ☒ No

If yes, please describe:

12. Grantee Financial Report Table

The end month and day of your entity's fiscal year. (ex: June 30)	April 30
The amount of State-funded grant awards your entity is expected to receive during your current fiscal year.	\$2,723,641.83
The amount of federally-funded grant awards (direct federal and federal pass-through combined) your entity is expected to receive during your current fiscal year.	\$4,500,000.00

13. Other Funding Sources (In addition to these Grant Funds)

- a) Are other funds necessary to complete the **grant scope of work** (i.e., the activities for which this grant is being used)? ☐ Yes ☒ No

If yes, please indicate the source, status and amount of those funds below in c) Sources of Funding. **This information MUST correlate with your answers to question 1 on page 1.**

- b) Are other funds necessary to complete the **overall project** (of which this grant is just one component)? ☐ Yes ☒ No

If yes, please indicate the source, status and amount of those funds below in c) Sources of Funding. **This information MUST correlate with your answers to question 1 on page 1.**

c) Sources of Funding

FUNDING SOURCES	Approved/Secured	Pending	Not Yet Applied For	If Funds Not Yet Approved/Secured, Provide Estimated Date.	Activities in Grant Scope of Work – see page 1 of project narrative, question 1.	Overall Project – see page 1 of project narrative, question 1.
Federal Funds (list)						
	☐	☐	☐		\$	\$
	☐	☐	☐		\$	\$
	☐	☐	☐		\$	\$
Other State Funds (list funds from <i>any</i> state source /program)						
	☐	☐	☐		\$	\$
	☐	☐	☐		\$	\$
	☐	☐	☐		\$	\$
Other Funds						

(list your organization's funds, bank and other loans, fundraising, donations, etc.)						
	☐	☐	☐		\$	\$
	☐	☐	☐		\$	\$
	☐	☐	☐		\$	\$
TOTALS					\$	\$

14. Description of Tasks

BRIEF TASK DESCRIPTION	ESTIMATED COMPLETION DATE (MM/DD/YYYY)
Task 1. Request additional cameras from Flock.	10/1/2023
Task 2. Flock will come out to do a site survey to see where to place cameras.	11/1/2023
Task 3. Flock will place additional cameras in pre-determined location.	11/15/2023
Task 4.	
Task 5.	
Task 6.	
Task 7.	
Task 8.	

SECTION 2: PROJECTED EMPLOYMENT IMPACT (FTE VALUE TABLE) — SEE INSTRUCTIONS SECTION 2

		Created Positions in FTE Categories				Retained Positions in FTE Categories			
		Column A	Column B	Column C	Column D	Column E	Column F	Column G	Column H
		Permanent Full Time	Permanent Part Time	Temporary Full Time	Temporary Part Time	Permanent Full Time	Permanent Part Time	Temporary Full Time	Temporary Part Time
Row 1 (To be completed by applicant)	# of positions in each FTE category (A - H)	0	0	0	0	0	0	0	0
Row 2	Auto calculation of FTE subtotals	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Row 3	Auto Calculation: Created FTEs:	0.00							
Row 4	Auto Calculation: Retained FTEs:	0.00							
Row 5	Auto Calculation: Permanent Full Time Jobs Created:	0.00							
Row 6	Auto Calculation: Permanent Full Time Jobs Retained:	0.00							
Row 7 (cell to be completed by applicant)	Other anticipated employment impacts of DCEO grant:								

SECTION 3: PROGRAMMATIC RISK ASSESSMENT QUESTIONS

➤ **Financial Stability**

- a) How significant are these specific Grant funds in relation to your organization's overall budget?
Very, as we do not have money budgeted this year for additional Flock cameras.
- b) Is the entirety of funding necessary to complete this overall project diversified across multiple sources including your entity's own funds, fundraising, endowments, etc., or is this grant funding the only source of funds for the project?
NPD currently pays for the existing Flock cameras we have, but we are requesting additional.

➤ **Ability to effectively implement requirements**

a) History of Performance

- Has your organization successfully performed the same or substantially the same type of grant activities in the last 3 years, or is this the first time performing such activities?
Unknown

b) Key Staff

- Does your organization's key existing staff have experience with the same or substantially the same type of activities as those to be covered by this grant? If so, how many years of that experience do they have?
Yes, NPD first started using Flock cameras in 2023. NPD is looking to add additional flock cameras.

c) Capacity

- If this grant is for a programmatic (non-capital) purpose, is adequate staffing planned to allow these specific grant activities to be completed?
Yes
- If this grant is for a programmatic (non-capital) purpose, will the grant funds be less than 25% of your organization's budget?
Yes
- If this grant is for a programmatic (non-capital) purpose, will the grant activities require scaling up (50% of staffing) or is a major (50% or more) part of your organization's overall budget?
No
- If this grant is for a programmatic (non-capital) purpose, does your organization have to scale up significantly (more than 100% increase in staffing/resources) in order to perform the grant activities to be completed?
No.
- If this grant is for a programmatic (non-capital) purpose, does your organization have the ability to track personnel time applied to the grant activities to be completed?

N/A

➤ **External Partnerships**

- a) If this grant is for a programmatic (non-capital) purpose, how dependent is your organization on external partners (through contracts, procurements, or subgranting) to meet program goals and performance for the activities to be covered by this grant?
We already have an existing Flock cameras and are looking to add 4 additional.
- b) If the answer to that question was 'Yes', does your organization have experience working with the external partner(s)?
Yes.
- c) If this grant is for a programmatic (non-capital) purpose, does your organization acknowledge that it is responsible for the performance of any sub-recipient(s) or other external partner(s) and must ensure adequate monitoring accordingly?
Yes.

➤ **Reporting**

a) Reporting History

- Has your organization submitted financial and programmatic reporting in a timely manner and as required, for prior grant awards it has received (always, sometimes, or never)?
* If this would be your organization's first grant award this question would not be applicable (N/A)
I believe so.

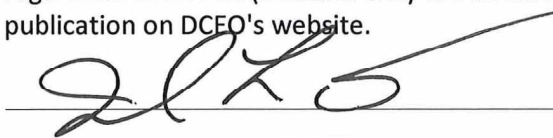
b) Reporting Capacity

- Has someone been designated to oversee performance reporting for the activities which are intended or coverage via this grant? Is there segregation of duties to ensure accurate and validated reporting?
Yes.
- Are staff who will be preparing the reports familiar with program/project requirements, deliverables, and outcomes for the activities to be covered by this grant?
Yes.
- Are there mechanisms in place to ensure data accuracy and integrity for reporting related to the activities to be covered by this grant?
Yes.

SECTION 4: APPLICANT CERTIFICATION

Under penalty of perjury, I certify that I have examined this application and the document(s), schedule(s), and statement(s) submitted in conjunction herewith, and that, to the best of my knowledge and belief, the information submitted herewith is true, correct, and complete. I represent that I am the person authorized to submit this application on behalf of the applicant and that I am authorized to execute a legally binding grant agreement on behalf of the applicant if this application is approved for funding.

I hereby release to DCEO the rights to and use of photographs and/or any written statements or information, regardless of format (whether they are direct quotes or paraphrased by DCEO), contained in or provided after the grant application for the purpose of publication on DCEO's website. I hereby also release any and all claims against DCEO, its officers, agents, employees and/or affiliates arising out of, or in connection with, the usage of photographs and/or written statements or information, regardless of format (whether they are direct quotes or paraphrased by DCEO), for the purpose of publication on DCEO's website.



Signature

Joseph LaMargo, Village Manager

Printed Name & Title

Date

The applicant should read and understand the certification statement provided in this section.

The individual who signs this section should be the individual that is authorized to sign the grant agreement if grant funds are awarded. The authorized individual should sign their name, print their name and title and date of certification. **Digital signatures are not accepted.*

Please note the certification authorizes DCEO to publish a copy of the completed application on DCEO's website, as specified above.

NOTICE OF GRANT REQUIREMENTS

Prevailing Wage Act (820 ILCS 130/0.01 et seq.): "All projects for the construction of fixed works which are financed in whole or in part with funds provided by this Agreement shall be subject to the Prevailing Wage Act (820 ILCS 130/0.01 et seq.) unless the provisions of that Act exempt its application. In the construction of the project, the Grantee shall comply with the requirements of the Prevailing Wage Act, including, but not limited to, inserting into all contracts for such construction a stipulation to the effect that not less than the prevailing rate of wages as applicable to the project shall be paid to all laborers, workers and mechanics performing work under the contract and requiring all bonds of contractors to include a provision as will guarantee the faithful performance of such prevailing wage clause as provided by contract." The Department and the Illinois Department of Labor will work with the grantee to ensure compliance prior to the establishment of the grant agreement as well as through the life of the grant. The Act may be found in its entirety at <https://labor.illinois.gov/laws-rules/conmed/prevailing-wage-act.html>.

The Comptroller's Office requirement derives from Attorney General Opinion No. 00-018 that states, where a non-governmental entity receives a grant of public funds for the construction of a fixed work, the provisions of the Prevailing Wage Act (820 ILCS 130/0.01 et seq.) (56 Ill Admin Code 270) apply to the project. NOTE: Public bodies continue to be subject to Prevailing Wage requirements.

Please be advised that DCEO will not render a legal opinion as to applicability of the Prevailing Wage Act to any project. You should consult your own legal counsel for such an opinion. Questions regarding the applicability of Prevailing Wage requirements may also be referred to the Illinois Department of Labor at 312/793-1585 or 217/782-1710. Attorney General Opinion No. 00-018 may be accessed on the Attorney General's web site at <https://illinoisattorneygeneral.gov/opinions/opinions-archive>.

Employment of Illinois Workers on Public Works Act (30 ILCS 570/0.01 et seq.): If an entity receives state funds for construction related activities, the entity must employ at least 90% Illinois laborers on such projects during periods of excessive unemployment in Illinois. The Act may be found in its entirety at <https://labor.illinois.gov/laws-rules/conmed/illinois-preference-act.html>. Any questions regarding the Act should be directed to the Illinois Department of Labor's Conciliation and Mediation Division at (217) 782-1710. For further information, please visit the IDOL website at: <https://labor.illinois.gov>.

Public Act 96-1064 - Business Enterprise Program: Public Act 96-1064 mandates that each award by grant or loan of State funds of \$250,000 or more for capital construction costs or professional services is conditioned upon the recipient's written certification that the recipient shall comply with the business enterprise program practices for minority-owned businesses, female-owned business, and businesses owned by persons with disabilities of the Business Enterprise for Minorities, Females and Persons with Disabilities Act (30 ILCS 575/0.01 et seq.) and the equal employment practices of Section 2-105 of the Illinois Human Rights Act (775 ILCS 5/2-105).

Illinois Works Jobs Program Act (30 ILCS 559/Art. 20): For Awards with an estimated total project cost of \$500,000 or more, the Grantee will be required to comply with the Illinois Works Apprenticeship Initiative (30 ILCS 559/20-20 to 20-25) and all applicable administrative rules (see 14 Ill. Admin. Code Part 680). The "estimated total project cost" is a good faith approximation of the costs of an entire project being paid for in whole or in part by appropriated capital funds to construct a public work. Grantee must submit a Budget Supplement Form (available on the DCEO website) to the Grantor within ninety (90) days of the execution of a Grant Award (Agreement).

The goal of the Illinois Works Apprenticeship Initiative is that apprentices will perform either 10% of the total labor hours worked in each prevailing wage classification or 10% of the estimated labor hours in each prevailing wage classification, whichever is less. Grantee is permitted to seek from the Grantor a waiver or reduction of this goal in certain circumstances pursuant to 30 ILCS 559/20-20(b). The Grantee must ensure compliance for the life of the entire project, including during the term of the Award and after the Term ends, if applicable, and will be required to report on and certify its compliance.

More on the Act may be found at:

[Illinois Works Jobs Program Act - Illinois Works](#)

NOTICE OF GRANT REQUIREMENTS (cont.)

§ 200.326 Bonding requirements:

For construction or facility improvement contracts or subcontracts exceeding the Simplified Acquisition Threshold, the Federal awarding agency or pass-through entity may accept the bonding policy and requirements of the non-Federal entity provided that the Federal awarding agency or pass-through entity has made a determination that the Federal interest is adequately protected. If such a determination has not been made, the minimum requirements must be as follows:

- (a) A bid guarantee from each bidder equivalent to five percent of the bid price. The "bid guarantee" must consist of a firm commitment such as a bid bond, certified check, or other negotiable instrument accompanying a bid as assurance that the bidder will, upon acceptance of the bid, execute such contractual documents as may be required within the time specified.
- (b) A performance bond on the part of the contractor for 100 percent of the contract price. A "performance bond" is one executed in connection with a contract to secure fulfillment of all the contractor's requirements under such contract.
- (c) A payment bond on the part of the contractor for 100 percent of the contract price. A "payment bond" is one executed in connection with a contract to assure payment as required by law of all persons supplying labor and material in the execution of the work provided for in the contract.

Environmental Review Requirements: Capital grants will be reviewed to determine environmental review requirements. Based on the scope of the project, the grantee may be required to complete additional environmental approvals before disbursement of grant funds can be initiated.

- In addition to the above, any contractual agreement between the Grantee and another party (being paid with grant funds) must include special language to allow DCEO access to the other party's records, relative to the grant. This includes construction subcontractors, consultants who provide services, and any other entity with which the grantee has a legal agreement to expend grant funds. Please see the separately attached pdf document entitled "Third Party Contractual Requirements" for this language (to incorporate into your legal subcontracts).

Purchases of real property (land and/or buildings) will require submission of at least one appraisal conducted by a neutral third-party prior to closing – and as close to the closing date as possible – as an estimate of the property's fair market value. The appraisal documentation must be submitted to the Department as soon as available, and preferably prior the actual closing date.

IMPORTANT GRANT INFORMATION

- The grant award may not be finalized, and grant funds may not be disbursed, until all necessary approvals have been obtained and a Grant Agreement has been executed between DCEO and the Grantee. The time required to finalize this process depends largely upon the completeness and accuracy of the information submitted.
- The grant term should begin no earlier than July 1, 2023. The initial grant term cannot exceed two years. All project activities must be completed within this time.
- All project activities and all expenditures of grant funds must be consistent with the Scope of Work and Budget included in the Grant Agreement. The Scope of Work and the Budget will be developed based upon the information provided in the Grantee's completed application.
- Proceeds of tax-exempt bonds can be used to reimburse for expenditures previously made. The reimbursement can be made for a period of up to 18 months after the date of expenditures were made or when the property is placed in service, but no later than three years after the date of the expenditures.
- All environmental approvals must be submitted and cleared by the appropriate state agency prior to payment of costs related to renovation of a building/structure or "dirt-moving" costs.
- Payment provisions will be specified in the Grant Agreement. Payment for bond fund projects will be disbursed on a reimbursement basis, unless otherwise approved by DCEO.
- Any contractual agreement between the Grantee and another party (being paid with grant funds) must include special language to allow DCEO access to the other party's records, relative to the grant. This includes construction subcontractors, consultants who provide services, and any other entity with which the grantee has a legal agreement to expend grant funds. Please contact your grant manager if you need a copy of this language (to incorporate into your legal subcontracts) prior to receiving your grant agreement.
- Grantee shall be subject to the audit requirements contained in the Single Audit Act Amendments of 1996 (31 USC 7501-7507) and Subpart F of 2 CFR Part 200, and the audit rules and policies set forth by the Governor's Office of Management and Budget. *See* 30 ILCS 708/65(c); 44 Ill. Admin. Code 7000.90.
- The Grantee shall ensure that grant funds are expended in accordance with generally accepted sound, business practices, arms-length bargaining, applicable federal and state laws and regulations. Grant expenditures should conform to the terms and conditions of the grant agreement and should not exceed the amount that would be incurred by a prudent person under the circumstances prevailing at the time the decision is made to incur the costs. Grant accounting should be consistent with generally accepted accounting principles.
- **NOTE:** Please be aware that until a Grant Agreement has been executed by the Grantee and DCEO, the Grantee is at risk for any costs incurred that it intends to be paid for from grant funds. Thus, recipients of grant appropriations are advised not to begin project activities and not to incur costs until they have received a fully executed Grant Agreement reflecting the agreed upon Scope of Work and Budget.

SUBMIT APPLICATION WITH THE FOLLOWING SUPPORTING DOCUMENTATION:

- ☐ List of Principal Individuals and Board Members – for *Non-governmental entities only*. This list must include each individual's name, home address, home phone number and daytime phone number.
- ☐ Job Descriptions of Staff Positions to be Funded by Grant Funds
- ☒ W-9 form (revised October 2018) – **REQUIRED FOR ALL GRANTEES**
- ☒ IRS Letter or Verification of Entity Name on File with the Internal Revenue Service – **REQUIRED**
- ☐ Attorney General Charitable Trust letter (*for Non-profit entities ONLY*)

INSTRUCTIONS

All questions in the following sections must be completed by the applicant. Additional documentation should be attached as necessary to adequately respond to the question or to provide the detail requested.

SECTION 1: SCOPE OF WORK - INSTRUCTIONS

Provide the Project Title, it needs to be the same as or consistent with the title provided in the Proposal Information above.

Provide a detailed description of the proposed project and the intended use of grant funds. The information provided in this description will assist DCEO in developing the Scope of Work for the grant agreement if the grant is awarded. It will also facilitate the periodic reporting that will be required to update DCEO on the status of the project's major milestones if the grant is awarded.

Briefly describe each task in the Description of Tasks column. These tasks will be used to develop the grant agreement. The applicant should assign an estimated completion date for each task. If a grant is awarded, the applicant will have the opportunity to modify these dates prior to the execution of the grant.

SECTION 2: PROJECTED EMPLOYMENT IMPACT – INSTRUCTIONS - FTE Value Table

DCEO uses Section 2. Projected Employment Impact of the standard grant application form to document the estimated economic benefits of a proposed grant project based on the projected employment impact. The FTE (Full Time Equivalent) Value Table in Section 2 standardizes the DCEO process for collecting and reporting job count data for projected (estimated) jobs at the grant level.

For DCEO purposes, an FTE is a measurement unit for assigning a numerical value to an individual employment position (both projected and/or certified jobs; both created and/or retained jobs). For example, while DCEO assigns an FTE value of 1.0 to a permanent full time position, other categories of positions that are estimated to involve a fewer number of hours to be worked over the course of a year will be assigned a lower FTE value of either .5 or .25. DCEO uses this approach so that a job count that includes various categories of jobs is more accurate and is not inflated or overstated. Applicants should be realistic when estimating the number of projected FTEs that may result directly from a grant. For example, when projecting FTEs, the applicant must consider that if approved for funding the grantee will be required at a later date to certify FTE data for all created and retained positions, using the DCEO Job Count FTE Certification Form. Please remember that the FTE count includes only positions that are a direct result of a DCEO grant, meaning the positions would not be created or retained **but for** the DCEO grant provided.

Key Definitions

Created Job: A new position, not in existence prior to the DCEO grant, to be developed and filled, or an existing unfilled position to be filled; the position could not be filled **but for** the DCEO grant provided.

Retained job: An existing position projected to be maintained that otherwise would be eliminated by the grantee **but for** the DCEO grant provided. **Note:** *a job previously reported as retained during the course of a previous DCEO grant cannot be projected again as retained in the current DCEO grant application if the end date of the previous DCEO grant is less than 24 months prior to the current application date. However, a job reported as retained during the course of a previous DCEO grant can be reported as retained in the current DCEO grant application, if the end date of the previous DCEO grant occurred more than 24 months prior to the date of the current DCEO application.*

Other Employment Impacts: This is an optional text field where you can identify other significant employment impacts that are not reported as an FTE value. These impacts may include a positive impact on non-certified jobs, or other positive economic impacts with the applicant organization or elsewhere in the Illinois economy. This area can also be used to identify the number of Temporary Part time Positions that do not meet the minimum requirement of 200 hours of work per position.

SECTION 3: APPLICANT CERTIFICATION - INSTRUCTIONS

The applicant should read and understand the certification statement provided in this section.

The individual that signs this section should be the individual that is authorized to sign the grant agreement if grant funds are awarded. The authorized individual should sign their name, print their name and title and date of certification. **Digital signatures are not accepted.*

Please note the certification authorizes DCEO to publish a copy of the completed application on DCEO's website.



**Illinois
Department of Commerce
& Economic Opportunity**

Uniform Application for State Grant Assistance

Agency Completed Section

1. Type of Submission ☐ Pre-Application
☒ Application
☐ Changed / Corrected Application

2. Type of Application ☒ New
☐ Continuation (i.e. multiple year grant)
☐ Revision (modification to initial application)

3. Date/Time Received By State (Completed by State Agency upon Receipt of Application)

4. Name of Awarding State Agency

Department of Commerce and Economic Opportunity

5. Catalog of State Financial Assistance (CSFA) Number

6. CSFA Title

Catalog of Federal Domestic Assistance (CFDA) ☒ Not Applicable (No federal funding)

7. CFDA Number

8. CFDA Title

9. CFDA Number

10. CFDA Title

Additional CFDA
Number, if required

Additional CFDA
Title, if required

Funding Opportunity Information

11. Funding Opportunity Number

12. Funding Opportunity Title

Competition Identification ☒ Not Applicable

13. Competition Identification Number N/A

14. Competition Identification Title N/A

Applicant Completed Section

Applicant Information

15. Legal Name (Name used for DUNS registration and grantee pre-qualification) Village of Niles

16. Common Name (DBA) Village of Niles

17. Employer/Taxpayer Identification number (EIN, TIN) 36-6006016

18. Organizational DUNS Number 020949178

19. SAM Cage Code

20. Business Address (Address 1) 1000 Civic Center Drive
(Address 2) Niles, Illinois 60714
(City), (State), (zip - 4)

Applicant's Organizational Unit

21. Department Name Niles Police Department

22. Division Name Operations

Applicant's Name and Contact Information for Person to be Contacted for **Program** Matters involving this Application.

23. First Name Kelly

24. Last Name Eckardt

25. Suffix

26. Title Commander

27. Organizational Affiliation Niles Police Department

28. Telephone Number 847-588-6545

29. Fax Number 847-588-6555

30. E-mail Address kae@vniles.com

Applicant's Name and Contact Information for Person to be Contacted for **Business/Administrative Office** Matters Involving the Application.

31. First Name Joseph

32. Last Name

33. Suffix

34. Title

35. Organizational Affiliation

36. Telephone Number

37. Fax Number

38. E-mail Address

Areas Affected

39. Areas Affected by the Project (cities, counties, state-wide, add attachments e.g. maps)

40. Legislative and Congressional District of Applicant

41. Legislative and Congressional Districts or Program Project

Applicant's Project

42. Description Title of Applicant's Project

43. Proposed Project Term

Start Date

End Date

44. Estimated Funding (Include all that apply)

☒ Amount Requested from the State

☐ Applicant Contribution (e.g., in kind, matching)

☐ Local Contribution

☐ Other Source of Contribution

☐ Program Income

Total Amount

Applicant Certification:

By signing this application, I certify (1) to the statements contained in the list of certifications* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances* and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil or administrative penalties. (U.S. Code, Title 18, Section 1001)

(*) The list of certification and assurances, or an internet site where you may obtain this list is contained in the Notice of Funding Opportunity. If a NOFO was not required for the award, the state agency will specify required assurances and certifications as an addendum to the application.

☒ I Agree

Authorized Representative

45. First Name

46. Last Name

47. Suffix

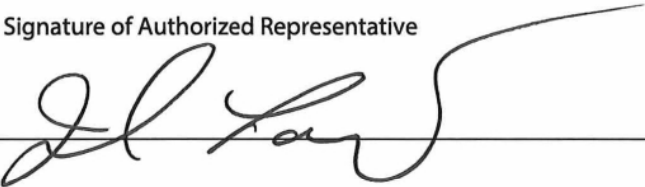
48. Title

49. Telephone Number

50. Fax Number

51. E-mail Address

52. Signature of Authorized Representative



53. Date Signed

9/12/2023

Mandatory Disclosure

Award applicants and recipients of awards from the State of Illinois (collectively referred to herein as "Grantee") must disclose, in a timely manner and in writing to the State awarding agency, all violations of State or federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the award. See 30 ILCS 708/40; 44 Ill. Admin. Code § 7000.40(b)(4); 2 CFR § 200.113. Failure to make the required disclosures may result in remedial action.

Are there any violations of State or federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the awarding of a grant to your organization? ☒ No ☐ Yes

If there any violations of State or federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the awarding of a grant to your organization, please describe them all here:

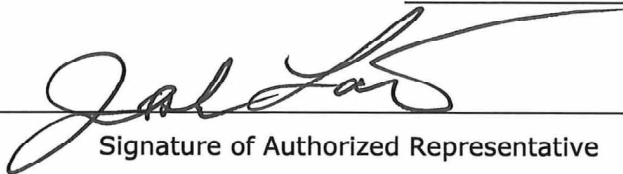
N/A

Grantee has a continuing duty to disclose to the Department of Commerce and Economic Opportunity (the "Department") all violations of criminal law involving fraud, bribery or gratuity violations potentially affecting this grant award.

By signing this document, below, as the duly authorized representative of the Grantee, I hereby certify that:

- All of the statements in this Mandatory Disclosure form are true, complete and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil or administrative penalties. (U.S. Code, Title 18, Section 1001).
- There is no action, suit or proceeding at law or in equity pending, nor to the best of Grantee's knowledge, threatened, against or affecting the Grantee, before any court or before any governmental or administrative agency, which will have a material adverse effect on the performance required by the grant award.
- Grantee is not currently operating under or subject to any cease and desist order, or subject to any informal or formal regulatory action, and, to the best of the Grantee's knowledge, it is not currently the subject of any investigation by any state or federal regulatory, law enforcement or legal authority.
- If Grantee becomes the subject of an action, suit or proceeding at law or in equity that would have a material adverse effect on the performance required by an award, or an investigation by any state or federal regulatory, law enforcement or legal authority, Grantee shall promptly notify the Department in writing.

Grantee Organization (Company Name) Village of Niles


Signature of Authorized Representative

Joseph La Margo

Printed Name (Authorized Signator Name)

Village Manager

Printed Title (Authorized Signator Title)

9/12/2023
Date

CSFA Number

Conflict of Interest Disclosure

Award applicants and recipients of awards from the State of Illinois (collectively referred to herein as "Grantee") must disclose in writing to the awarding State agency any actual or potential conflict of interest that could affect the State award for which the Grantee has applied or has received. See 30 ILCS 708/35; 44 Ill. Admin Code § 7000.40(b)(3); 2 CFR § 200.112. A conflict of interest exists if an organization's officers, directors, agents, employees and/or their spouses or immediate family members use their position(s) for a purpose that is, or gives the appearance of, being motivated by a desire for a personal gain, financial or nonfinancial, whether direct or indirect, for themselves or others, particularly those with whom they have a family business or other close associations. In addition, the following conflict of interest standards apply to governmental and non-governmental entities.

Definitions:

Governmental Entity. If the Grantee is a governmental entity, no officer or employee of the Grantee, member of its governing body or any other public official of the locality in which the award objectives will be carried out shall participate in any decision relating to a State award which affects his/her personal interest or the interest of any corporation, partnership or association in which he/she is directly or indirectly interested, or which affects the personal interest of a spouse or immediate family member, or has any financial interest, direct or indirect, in the work to be performed under the State award.

Non-governmental Entity. If the Grantee is a non-governmental entity, no officer or employee of the Grantee shall participate in any decision relating to a State award which affects his/her personal interest or the interest of any corporation, partnership or association in which he/she is directly or indirectly interested, or which affects the personal interest of a spouse or immediate family member, or has any financial interest, direct or indirect, in the work to be performed under the State award.

The Grantee shall also establish safeguards, evidenced by policies, rules and/or bylaws, to prohibit employees or officers of Grantee from engaging in actions, which create or which appear to create a conflict of interest as described herein.

The Grantee has a continuing duty to immediately notify the Department of Commerce and Economic Opportunity (the "Department") in writing of any actual or potential conflict of interest, as well as any actions that create or which appear to create a conflict of interest.

Are there any current potential conflict(s) of interest, or any actions that create or which appear to create a conflict of interest, related to the State award for which your organization has applied?

☒ No

☐ Yes

If there are any current potential conflict(s) of interest, or any actions that create or which appear to create a conflict of interest, related to the State award for which your organization has applied, please describe them all here:

N/A

If the Grantee provided information above regarding a current potential conflict of interest or any actions that create or appear to create a conflict of interest, the Grantee must immediately provide documentation to the applicable Department grant manager to support that the potential conflict of interest was appropriately handled by the Grantee's organization. If at any later time, the Grantee becomes aware of any actual or potential conflict of interest, the Grantee must notify the Department's grant manager immediately, and provide the same type of supporting documentation that describes how the conflict situation was or is being resolved.

Supporting documentation should include, but is not limited to, the following: the organization's bylaws; a list of board members; board meeting minutes; procedures to safeguard against the appearance of personal gain by the organization's officers, directors, agents, and family members; procedures detailing the proper internal controls in place; timesheets documenting time spent on the award; and bid documents supporting the selection of the contractor involved in the conflict, if applicable.

By signing this document, below, as the duly authorized representative of Grantee, I hereby certify that:

- All of the statements in this Conflict of Interest Disclosure form are true, complete and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil or administrative penalties. (U.S. Code, Title 18, Section 1001).
- If I become aware of any situation that conflicts with any of the representations herein, or that might indicate a potential conflict of interest or create the appearance of a conflict of interest, I or another representative from my organization will immediately notify the Department's grant manager for this award.
- I have read and I understand the requirements for the Conflict of Interest Disclosure set forth herein, and I acknowledge that my organization is bound by these requirements.

Village of Niles

Grantee Organization (Company Name):



Signature of Authorized Representative

9/12/2023

Date

Village Manager

Printed Title (Authorized Signator Title):

Joseph LaMargo

Printed Name (Authorized Signator Name):

CSFA Number

State of Illinois -- Uniform Capital Budget Template -- General Instructions

Village of Niles

This form is used to apply to individual State of Illinois discretionary grant programs. Applicants should submit budgets based upon the total estimated costs for the project including all funding sources. Pay attention to applicable program specific instructions, if attached. The applicant organization should refer to 2 CFR 200, "Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards" cited within these instructions.

You must consult with your Business Office prior to submitting this form for any award restrictions, limitations or requirements when filling out the narrative and Uniform Budget Template.

Section A – Budget Summary

STATE OF ILLINOIS FUNDS

STATE OF ILLINOIS GRANT FUNDS

All applicants must complete Section A and provide a break-down by the applicable budget categories shown in lines 1-18. **Please read all instructions before completing form.**

Provide a total requested State of Illinois Grant amount in the Revenue portion of Section A. The amount entered in Line (a) will equal the total amount budgeted on Line 12 of Section A.

All applicants must complete Section A and provide a break-down by the applicable budget categories shown in lines 1-18.

Row 6: Show the total budget request for which funding is requested.

Please use detail worksheet and narrative section for further descriptions and explanations of budgetary line items

Section A (continued) Indirect Cost Information *(This information should be completed by the applicant's Business Office).* If the applicant is requesting reimbursement for indirect costs on line 18, the applicant's Business Office must select one of the options listed on the Indirect Cost Information page under Section-A Indirect Cost Information (1-5).

Option (1): The applicant has a Negotiated Indirect Cost Rate Agreement (NICRA) that was approved by the Federal government. A copy of this agreement must be provided to the State of Illinois' Indirect Cost Unit for review and documentation. This NICRA will be accepted by all State of Illinois Agencies up to any statutory, rule-based or programmatic restrictions or limitations. *If this option is selected by the applicant, basic information is required for completion of this section. See bottom of "Section-A Indirect Cost Information"*

NOTE: The applicant may not have a Federally Negotiated Indirect Cost Rate Agreement. Therefore, in order for the applicant to be reimbursed for Indirect Costs from the State of Illinois the applicant must either:

- A) Negotiate an Indirect Cost Rate with the State of Illinois' Indirect Cost Unit with guidance from our State Cognizant Agency on an annual basis.
- B) Elect to use the de minimis rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois Awards.
- C) Use a Restricted Rate designated by programmatic statutory policy. (See Notice of Funding Opportunity for Restricted Rate Programs)

Option (2a): The applicant currently has a Negotiated Indirect Cost Rate Agreement with the State of Illinois that will be accepted by all State of Illinois Agencies up to any statutory, rule-based or programmatic restrictions or limitations. The applicant is required to submit a new Indirect Cost Rate Proposal to the Indirect Cost Unit within six (6) months after the close of each fiscal year (2 CFR 200 Appendix IV (C)(2)(c)). *Note: If this option is selected by the applicant, basic information is required for completion of this section. See bottom of "Section-A Indirect Cost Information"*

OR

Option (2b): The applicant currently does not have a Negotiated Indirect Cost Rate Agreement with the State of Illinois. The applicant must submit its initial Indirect Cost Rate Proposal (ICRP) immediately after the applicant is advised that the State award will be made and, in no event, later than three (3) months after the effective date of the State award (2 CFR 200 Appendix IV (C)(2)(b)). The initial ICRP will be sent to the State of Illinois' Indirect Cost Unit. *Note: The applicant should check with the State of Illinois awarding Agency for information regarding reimbursement of indirect costs while its proposal is being negotiated*

Option (3): The applicant elects to charge the de minimis rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois awards (2 CFR 200.414 (c)(4)(i) & (200.68). *Note: The applicant must be eligible, see 2 CFR 200.414 (j), and submit documentation on the calculation of MTDC within your Budget Narrative under Indirect Costs. Note the applicant may only use the 10 percent de minimis rate if the applicant does not have an Approved Indirect Cost Rate Agreement. The applicant may not use the de minimis rate if it is a Local government, or if your grant is funded under a training rate or restricted rate program .*

Option (4): If you are applying for a grant under a Restricted Rate Program, indicate whether you are using a restricted indirect cost rate that is included on your approved Indirect Cost Rate Agreement, or whether you are using a restricted indirect cost rate that complies with statutory or programmatic policies. *Note: See Notice of State Award for Restricted Rate Programs*

Option (5): If you are not seeking or not allowed any Indirect.

Section B - Budget Summary

NON-STATE OF ILLINOIS FUNDS

NON-STATE OF ILLINOIS FUNDS: If the applicant is required to provide or volunteers to provide cost-sharing or matching funds or other non-State of Illinois resources to the project, the applicant must provide a revenue breakdown of all Non-State of Illinois funds in lines (b)-(d), the total of "Non-State Funds" should equal the amount budgeted on Line 19 of Section B. If a match percentage is required, the amount should be entered in this section.

BUDGET SUMMARY – NON STATE OF ILLINOIS FUNDS

If the applicant is required to provide or volunteers to provide cost-sharing or matching funds or other non-State of Illinois resources to the project, these costs should be shown for each applicable budget category on lines 1-18 of Section B.

Lines 1-11: For which matching funds or other contributions are provided, show the total contribution for each applicable budget category.

Line 12: Show the total matching or other contribution.

Please see detail worksheet and narrative section for further descriptions and explanations of budgetary line items

Section C - Budget Worksheet & Narrative

[Attach separate sheet(s)]

Pay attention to applicable program specific instructions, if attached.

All applicants are required to submit a budget narrative along with Section A and Section B. The budget narrative is sometimes referred to as the budget justification. The narrative serves two purposes: it explains how the costs were estimated and it justifies the need for the cost. The narrative may include tables for clarification purposes. The State of Illinois recommends using the State of Illinois Uniform Budget Template worksheet and narrative guide provided.

1. Provide an itemized budget breakdown, and justification by project year, for each budget category listed in Sections A and B.
2. For non-State of Illinois funds or resources listed in Section B that are used to meet a cost-sharing or matching requirement or provided as a voluntary cost-sharing or matching commitment, you must include:
 - a. The specific costs or contributions by budget category;
 - b. The source of the costs or contributions; and
 - c. In the case of third-party in-kind contributions, a description of how the value was determined for the donated or contributed goods or services.

[Please review cost sharing and matching regulations found in 2 CFR 200.306.]

3. If applicable to this program, provide the rate and base on which fringe benefits are calculated.
4. If the applicant is requesting reimbursement for indirect costs on line 18, this information should be completed by the applicant's Business Office. Specify the estimated amount of the base to which the indirect cost rate is applied and the total indirect expense. Depending on the grant program to which the applicant is applying and/or the applicant's approved Indirect Cost Rate Agreement, some direct cost budget categories in the applicant's grant application budget may not be included in the base and multiplied by your indirect cost rate. Please indicate which costs are included and which costs are excluded from the base to which the indirect cost rate is applied.
5. Provide other explanations or comments you deem necessary.

Keep in mind the following—

Although the degree of specificity of any budget will vary depending on the nature of the project and State of Illinois agency requirements, a complete, well-thought-out budget serves to reinforce your credibility and increase the likelihood of your proposal being funded.

- A well-prepared budget should be reasonable and demonstrate that the funds being asked for will be used wisely.
- The budget should be as concrete and specific as possible in its estimates. Make every effort to be realistic, to estimate costs accurately.
- The budget format should be as clear as possible. It should begin with a budget narrative, which you should write after the entire budget has been prepared.
- Each section of the budget should be in outline form, listing line items under major headings and subheadings.
- Each of the major components should be subtotaled with a grand total at the end.

Your budget should justify all expenses and be consistent with the program narrative:

- Salaries should be comparable to those within the applicant organization.
- If new staff is being hired, additional space and equipment are considered, as necessary.
- If the budget lists an equipment purchase, it is the type allowed by the agency.
- If additional space is rented, the increase in insurance is supported.
- If an indirect cost rate applies to the proposal, the division between direct and indirect costs is not in conflict, and the aggregate budget totals refer directly to the approved formula. Indirect costs are costs that are not readily assignable to a particular project, but are necessary to the operation of the organization and the performance of the project (like the cost of operating and maintaining facilities, depreciation, and administrative salaries).

§200.308 Revision of budget and program plans

(e) The Federal/State awarding agency may, at its option, restrict the transfer of funds among direct cost categories or programs, functions and activities for Federal/State awards in which the Federal/State share of the project exceeds the Simplified Acquisition Threshold and the cumulative amount of such transfers exceeds or is expected to exceed 10 percent or \$1,000 per detail line item, whichever is greater of the total budget as last approved by the Federal/State awarding agency. The Federal/State awarding agency cannot permit a transfer that would cause any Federal/State appropriation to be used for purposes other than those consistent with the appropriation.

STATE OF ILLINOIS		UNIFORM CAPITAL GRANT BUDGET TEMPLATE		Commerce & Economic Opportunity	
Organization Name:	Village of Niles	DUNS # and UEI #	020949178, E8H3TENBTB48	NOFO #	
CSFA Number:		CSFA Description:		Fiscal Year:	FY24
SECTION A -- STATE OF ILLINOIS FUNDS					
Revenues			TOTAL REVENUE		
(a). State of Illinois Grant Amount Requested			\$ 50,000.00		
BUDGET SUMMARY STATE OF ILLINOIS FUNDS					
Budget Expenditure Categories				TOTAL EXPENDITURES	
1. Design/Engineering (usually limited to 10% - 15% of total State Grant funds in this budget)				\$ -	
2. Building/Land Purchase				\$ -	
3. Wiring/Electrical				\$ -	
4. Equipment/Materials/Labor				\$ 50,000.00	
5. Paving/Concrete/Masonry				\$ -	
6. Construction Management/Oversight (limited to 10% - 15% of total State Grant funds in this budget)				\$ -	
7. Mechanical System				\$ -	
8. Excavation/Site Prep/Demo				\$ -	
9. Plumbing				\$ -	
10. Other Construction Expenses				\$ -	
11. Contingency (limited to maximum 10% of total State Grant funds in this budget)				\$ -	
12. Total Costs State Grant Funds				\$ 50,000.00	

SECTION - A (continued) Indirect Cost Rate Information

If your organization is requesting reimbursement for indirect costs on line 17 of the Budget Summary, please select one of the following options.

- 1) ☐ Our Organization receives direct Federal funding and currently has a Negotiated Indirect Cost Rate Agreement (NICRA) with our Federal Cognizant Agency. A copy of this agreement will be provided to the State of Illinois' Indirect Cost Unit for review and documentation before reimbursement is allowed. This NICRA will be accepted by all State of Illinois Agencies up to any statutory, rule-based or programmatic restrictions or limitations.

NOTE: (If this option is selected, please provide basic Negotiated Indirect Cost Rate Agreement information in area designated below)

Your Organization may not have a Federally Negotiated Indirect Cost Rate Agreement. Therefore, in order for your Organization to be reimbursed for Indirect Costs from the State of Illinois, your Organization must either:

- A. Negotiate an Indirect Cost Rate with the State of Illinois' Indirect Cost Unit with guidance from your State Cognizant Agency on an annual basis.
B. Elect to use the de minimis rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois Awards.
C. Use a Restricted Rate designated by programmatic or statutory policy. (See Notice of Funding Opportunity for Restricted Rate Programs)

- 2a) ☐ Our Organization currently has a Negotiated Indirect Cost Rate Agreement with the State of Illinois that will be accepted by all State of Illinois Agencies up to any statutory, rule-based or programmatic restrictions or limitations. Our Organization is required to submit a new Indirect Cost Rate Proposal to the Indirect Cost Unit within six (6) months after the close of each fiscal year (2 CFR 200 Appendix IV (C)(2)(e)).

NOTE: (If this option is selected, please provide basic Indirect Cost Rate information in area designated below)

- 2b) ☐ Our Organization currently does not have a Negotiated Indirect Cost Rate Agreement with the State of Illinois. Our Organization will submit our initial Indirect Cost Rate Proposal (ICRP) immediately after our Organization is advised that the State award will be made and, in no event, later than three (3) months after the effective date of the State award (2 CFR 200 Appendix IV (C)(2)(b)). The initial ICRP will be sent to the State of Illinois' Indirect Cost Unit.

NOTE: (Check with your State of Illinois Agency for information regarding reimbursement of indirect costs while your proposal is being negotiated)

- 3) ☐ Our Organization has never received a Negotiated Indirect Cost Rate Agreement from either the Federal government or the State of Illinois and elects to charge the de minimis rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois awards (2 CFR 200.414 (c)(4)(f) & (200.68)).

NOTE: (Your Organization must be eligible, see 2 CFR 200.414 (f), and submit documentation on the calculation of MTDC within your Budget Narrative under Indirect Costs)

For Restricted Rate Programs (check one) -- Our Organization is using a restricted indirect cost rate that:

- 4) ☐ Is included as a "Special Indirect Cost Rate" in our NICRA (2 CFR 200 Appendix IV (5)) Or;
Complies with other statutory policies (please specify): _____

The Restricted Indirect Cost Rate is _____ %

- 5) ☒ No reimbursement of Indirect Cost is being requested. (Please consult your program office regarding possible match requirements)

Basic Negotiated Indirect Cost Rate Agreement information

if Option (1) or (2a) is selected

Period Covered by the NICRA: From: _____ To: _____ (mm/dd/yyyy)

Approving Federal/State agency (please specify): _____

The Indirect Cost Rate is: _____ 0 % The Distribution Base is: _____

STATE OF ILLINOIS		UNIFORM CAPITAL GRANT BUDGET TEMPLATE	Commerce & Economic Opportunity
Organization Name: Village of Niles		NOFO #	Fiscal Year FY24
SECTION B -- NON STATE OF ILLINOIS FUNDS			Grant Number:
Revenues		TOTAL REVENUE	
Grantee Match Requirement = 0 %			
(a) -Cash		\$	-
(b) -Non-cash		\$	-
(c) Other Funding & Contributions		\$	-
NON-STATE Funds Total		\$	-
BUDGET SUMMARY NON-STATE OF ILLINOIS FUNDS			
Budget Expenditure Categories		TOTAL EXPENDITURES	
1. Design/Engineering		\$	-
2. Building/Land Purchase		\$	-
3. Wiring/Electrical		\$	-
4. Equipment/Materials/Labor		\$	-
5. Paving/Concrete/Masonry		\$	-
6. Construction Management/Oversight		\$	-
7. Mechanical System		\$	-
8. Excavation/Site Prep/Demo		\$	-
9. Plumbing		\$	-
10. Other Construction Expenses		\$	-
11. Contingency		\$	-
12. Total Costs NON-State Grant Funds		\$	-

CERTIFICATION		STATE OF ILLINOIS UNIFORM CAPITAL GRANT BUDGET TEMPLATE		AGENCY: Commerce & Economic Opportunity	
Organization Name: Village of Niles		CSFA Description:		NOFO #	
CSFA #:		DUNS # and UEI # 020949178, E8H3TENBTR48		Fiscal Year(s): FY24	

(2 CFR 200.415)

"By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate and that any false, fictitious, or fraudulent information or the omission of any material fact, could result in the immediate termination of my grant award(s).

Village of Niles
Institution/Organization
Signature *Joseph La Margo*
Joseph La Margo
Name of Official
Village Manager
Title
Chief Financial Officer (or equivalent)
Date of Execution *9/12/2023*

Village of Niles
Institution/Organization
Signature *Freddie Darnelle*
Kenneth Oliven
Name of Official
Finance Director
Title
Executive Director (or equivalent)
Date of Execution *9/12/23*

Note: The State awarding agency may change required signers based on the grantee's organizational structure. The required signers must have the authority to enter into contractual agreements on behalf of the organization.

Village of Niles

Purpose	Description of Work	Item Cost
		\$ -
		\$ -
		\$ -
		\$ -
		\$ -
	State Total	\$ -
		\$ -
		\$ -
		\$ -
	NON-State Total	\$ -
	Design/Engineering Total	\$ -

Narrative (State):	

Narrative (Non-State) i.e. "March" or "Other Funding"

Village of Niles

2). **Building/Land Purchase** -- Costs to purchase, either in whole or in part a building, structural shell, condominium, land, and/or easement including, but not limited to: the net purchase price itself, closing costs charged to the buyer on the closing document, legal fees, etc. Additionally, costs associated with Right-of-Way, appraisals, property/boundary surveys, legal fees, etc. * *Copies of appraisal documentation must be submitted to the Department as soon as available, and preferably prior the actual closing date.*

Purpose	Description of Work	Item Cost
		\$ -
		\$ -
		\$ -
		\$ -
		\$ -
	<i>State Total</i>	\$ -
		\$ -
		\$ -
		\$ -
	<i>NON-State Total</i>	\$ -
	<i>Total</i>	\$ -

Narrative (State):

Narrative (Non-State) i.e. "Match" or "Other Funding"

[illegible]

Village of Niles

[illegible]

Narrative (State):	

Narrative (Non-State) i.e. "Match" or "Other Funding"

Section C - Budget Worksheet & Narrative

- 4). Equipment/Materials/Labor (2 C/F R 200.474)-- Purchase of materials and/or purchase/lease of equipment, to use or install for the project, such as: steel, drywall, lumber, wiring, doors, windows, roofing, rock, etc. including labor/installation costs, as identified - within the project description

Item	Quantity	Cost Rate	Item Cost
<i>Flock ALPR Cameras - Year 1</i>	<i>10</i>	<i>\$ 2,500.00</i>	<i>\$ 25,000.00</i>
<i>Flock ALPR Cameras - Year 2</i>	<i>10</i>	<i>\$ 2,500.00</i>	<i>\$ 25,000.00</i>
			<i>\$ -</i>
			<i>\$ -</i>
		<i>State Total</i>	<i>\$ 50,000.00</i>
			<i>\$ -</i>
			<i>\$ -</i>
		<i>NON-State Total</i>	<i>\$ -</i>
		<i>Total</i>	<i>\$ 50,000.00</i>

Narrative (State):

This is for 10 flock cameras over a period of two years.

Narrative (Non-State) i.e. "Match" or "Other Funding"

Section C - Budget Worksheet & Narrative

Village of Niles

5). **Paving/Concrete/Masonry** (2 CFR 200.459) -- Purchase of materials necessary for completion of the project scope such as bituminous pavement, concrete, rock, bricks, blocks, mortar, tuckpointing, etc. including associated labor/installation costs, as identified within the project description.

Item	Quantity	Cost per Item	Item Cost
			\$ -
			\$ -
			-
		<i>State Total</i>	\$ -
			\$ -
			\$ -
			-
		<i>NON-State Total</i>	\$ -
		<i>Total</i>	\$ -

Narrative (State):

--

Narrative (Non-State) i.e. "Match" or "Other Funding"

--

Purpose	Description of Work	Item Cost
		\$ -
		\$ -
		\$ -
		\$ -
	<i>State Total</i>	\$ -
		\$ -
		\$ -
		\$ -
	<i>NON-State Total</i>	\$ -
	<i>Total</i>	\$ -

Narrative (State):	

Narrative (Non-State) i.e. "Match" or "Other Funding"

[illegible]

Narrative (State):	

[illegible]

Section C - Budget Worksheet & Narrative

Village of Niles

8). Excavation/Site Prep/Demo -- Costs associated with demolition of existing structures on the project site and/or preparation of the project site including excavation, etc. ahead of actual new construction/renovation activities.

Purpose	Description of Work	Item Cost
		\$ -
		\$ -
		\$ -
		\$ -
	<i>State Total</i>	\$ -
		\$ -
		\$ -
		\$ -
	<i>NON-State Total</i>	\$ -
	<i>Total</i>	\$ -

Narrative (State):

Narrative (Non-State) i.e. "Match" or "Other Funding"

Village of Niles

- 9). **Plumbing**--Purchase of materials necessary for completion of the project scope such as internal or external pipes for water, gas, and/or sewage; fixtures; etc. including associated labor/installation costs, as identified within the project description.

Item	Quantity	Cost per Item	Item Cost
			\$ -
			\$ -
		<i>State Total</i>	\$ -
			\$ -
			\$ -
			\$ -
		<i>NON-State Total</i>	\$ -
		<i>Total</i>	\$ -

Narrative (State):

Narrative (Non-State) i.e. "Match" or "Other Funding"

Narrative (Non-State) i.e. "Match" or "Other Funding"

Village of Niles

10). **Other Construction Expenses** --- Costs that cannot be easily broken out to or covered by individual/specific budgetary line items such as landscaping, hauling, equipment, rental, insurance, environmental fees, loan payments, etc. as identified within the project description.

Purpose	Description of Work	Item Cost
		\$ -
		\$ -
		\$ -
		\$ -
	<i>State Total</i>	\$ -
		\$ -
		\$ -
		\$ -
	<i>NON-State Total</i>	\$ -
	<i>Total</i>	\$ -

Narrative (State):	

Narrative (Non-State) i.e. "Match" or "Other Funding"

Village of Niles

11) Contingency - Coverage of potential cost overruns in any of the other utilized grant budget line items. * The State portion of this category is limited to a maximum 10% of the total State-funded portion in this overall budget.

[illegible]

Narrative (State):	

Narrative (Non-State) i.e. "Match" or "Other Funding"

Section C - Budget Worksheet & Narrative

Village of Niles

Budget Narrative Summary--When you have completed the budget worksheet, transfer the totals for each category to the spaces below to the uniform template provided (SECTION A & B). Verify the total costs and the total project costs. Indicate the amount of State requested funds and the amount of non-State funds that will support the project.

<i>Budget Category</i>	<i>State</i>	<i>NON-State</i>	<i>Total</i>
1. Design/Engineering	\$ -	\$ -	-
2. Building/Land Purchase	\$ -	\$ -	-
3. Wiring/Electrical	\$ -	\$ -	-
4. Equipment/Materials/Labor	\$ 50,000.00	\$ -	50,000.00
5. Paving/Concrete/Masonry	\$ -	\$ -	-
6. Construction Management/Oversight	\$ -	\$ -	-
7. Mechanical System	\$ -	\$ -	-
8. Excavation/Site Prep/Demo	\$ -	\$ -	-
9. Plumbing	\$ -	\$ -	-
10. Other Construction Expenses	\$ -	\$ -	-
11. Contingency	\$ -	\$ -	-
<i>State Request</i>	\$ 50,000.00	\$ -	
<i>Non-State Amount</i>			
TOTAL PROJECT COSTS			50,000.00

Agency Approval		STATE OF ILLINOIS UNIFORM CAPITAL GRANT BUDGET TEMPLATE		AGENCY: Commerce & Economic Opportunity	
Organization Name: Village of Niles		CSFA Description:		NOFO #	
CSFA #		DUNS # and UEI # 020949178, E8H3TENBTB48		Fiscal Year: FY24	
Grant Number		0			

<u>Final Budget Amount Approved</u>	<u>Program Approval Signature</u>	<u>Date</u>	<u>Fiscal & Administrative Approval</u>	<u>Date</u>
\$ 50,000.00			<u>Signature</u>	

<u>Budget Revision Approved</u>	<u>Program Approval Signature</u>	<u>Date</u>	<u>Fiscal & Administrative Approval</u>	<u>Date</u>
			<u>Signature</u>	

\$200.308 Revision of budget and program plans

(e) The Federal/State awarding agency may, at its option, restrict the transfer of funds among direct cost categories or programs, functions and activities for Federal/State awards in which the Federal/State share of the project exceeds the Simplified Acquisition Threshold and the cumulative amount of such transfers exceeds or is expected to exceed 10 percent or \$1,000 per detail line item, whichever is greater of the total budget as last approved by the Federal/State awarding agency. The Federal/State awarding agency cannot permit a transfer that would cause any Federal/State appropriation to be used for purposes other than those consistent with the appropriation.