

DHCD CHSW - Lighting and Camera

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Maryland Department of Housing and Community Development

Community Health and Safety Works:

LIGHTING AND CAMERA STRATEGIES AND RELATED COMMUNITY SAFETY SERVICES

The system WILL NOT allow more than one application to be submitted by an applicant.

By completing this application, you certify that the statements and answers within are true and accurate to the best of your knowledge and that you are authorized to apply for these funds on behalf of the applicant.

Applicants will be responsible to comply with any state or federal reporting requirements related to Community Health and Safety Works.

Additionally, DHCD may be required to disclose information about Community Health and Safety Works applicants and awardees to the Board of Public Works and the Maryland General Assembly and may desire to disclose such information to other state officials or their staff, local government officials or their staff, and other lenders and funding sources. DHCD is also required to disclose information in response to a request for information made pursuant to §4-101 et seq. of the Public Information Act of the General Provisions Article, Annotated Code of Maryland.

1) APPLICANT INFORMATION

Organization Name

Mailing Address

READ CAREFULLY: This mailing address **MUST** be the same as listed on the W-9 submitted with this application. Please carefully review and ensure that these items are correct before submitting.

Street

Street 2

City

State

Zip

Web Address

Please provide Social Media addresses for:

Facebook

Twitter

Instagram

Contact Information:

Please provide the primary contact for this application.

Contact Name

Contact Title

Contact Phone

Cell Phone

E-mail Address

Secondary Contact Information:

Please provide a secondary contact for this application.

Name

Title

Phone

Cell Phone

E-mail Address

2) Applicant Eligibility

To be eligible to apply, an applicant must meet at least one the following criteria:

- A tax-exempt nonprofit organization based in the state of Maryland; nonprofit organizations will be required to provide an IRS Determination Letter of tax-exempt status
- A community-based organization with a tax-exempt nonprofit fiscal sponsor; community-based organizations with a tax-exempt nonprofit fiscal sponsor will be required to upload 1) the IRS determination letter of their fiscal sponsor; and 2) a letter of support from their fiscal sponsor on letterhead signed by the Executive Director.
- Local government

What category below best describes your organization?

Tax-exempt nonprofit organization

Community-based organization with a tax-exempt nonprofit fiscal sponsor

Local Government

Other

3) Grant Narrative

Please provide answers for **EACH** each of the following:

1. Organizational Summary

a. What is your organization's official mission statement and purpose?

0/250 max characters

b. Provide your organization's recent accomplishments (2021 thru 2023) in the areas targeted by this application.

0/1000 max characters

c. Describe how your staff and/or Board demographically represent the community you serve. Consider demographics broadly including race, language, gender identity, age, socioeconomic status, ability/disability, etc. If your staff and Board do not demographically represent the community you serve, please describe strategies or initiatives that you plan to implement to ensure your staff and Board better reflect the community.

0/1000 max characters

What is your organization's current financial situation? Please describe the organization's ability to continue operations while managing and maintaining projects and activities for which you are requesting funding. Include an explanation about how your organization has managed prior grant awards and tracked grant expenses. If you are working with a fiscal sponsor, please answer this section from their perspective.

0/1000 max characters

2. Community Conditions

a. Describe the location of this project and the need to deter crime and promote community safety within the targeted area. Cite specific locations and issues and/or incidents that have impacted the area. Also provide crime statistics related to the violent crime and other illegal activity that you have described.

0/2500 max characters

Maryland Data Sources for Crime Statistics

Maryland Statistical Analysis Center

Governor's Office of Crime Control and Prevention

Violent Crime & Property Crime by Municipality

Maryland Open Data Portal

3. Project Information

a. Provide a summary of your project.

0/500 max characters

b. Provide a primary project address. All project addresses must be located within Baltimore City or within the boundaries of a designated Sustainable Community Area elsewhere in the state. Use the DHCD Neighborhood Revitalization Mapper website to identify if the project addresses are located in an eligible area.

b.1 Does your project have additional addresses?

Yes

No

c. Upload photos of the project site, if applicable

d. Is this a new activity or a phase of an ongoing project?

New Activity

Phase

e. Describe the need to deter crime and/or promote health and safety in the project location. What is the community challenge or need this project seeks to address? What evidence has your organization found that this project will be effective in overcoming the community challenges? Why is this project preferred for the community over other options?

0/1000 max characters

f. Describe why this project is important to your organization's strategy to prevent and reduce crime and improve safety. In this section, include how this project contributes to creating a more equitable community. Equitable communities are often defined as ones where everyone is included in the full benefits of society, treated with fairness and justice, and empowered to participate fully in social, cultural, and economic life.

0/1000 max characters

g. Describe the status of site control for the project and any permits or approvals needed to complete the project. If you have evidence of site control or permits and approvals for your project, please upload below.

0/1000 max characters

If you have evidence of site control or permits and approvals for your project, please upload here.

Please note if your project is located on land owned by Baltimore City Recreation and Parks, you must submit a required form and have approval by the submission date. [A link to the form is here.](#)

Is your project located on land owned by Baltimore City Recreation and Parks?

Yes

No

h. What is your plan for maintaining this project after the grant period ends.

0/1000 max characters

4. Project Results

a. List specific, measurable and realistic goals for this project and describe the activities you will implement related to those goals. Please list one goal and activities required to achieve the goal in the field below, then click "Add Another Goal" to list an additional goal and corresponding activities.

0/250 max characters

b. List the outcomes for this project. Each outcome statement should be specific and measurable and describe changes in knowledge, attitudes, skills, and behaviors that occur as a result of your project. Please list one outcome in the field below, then click "Add Another Outcome" to list your outcomes separately. Please list one outcome per field.

0/250 max characters

c. How will you track progress and evaluate the anticipated outcomes? List specific metrics.

0/2000 max characters

5. Project Engagement

a. Describe the level of community engagement and planning for the project that has been completed to date. If this is a new project, explain how community members will be involved in shaping the project.

0/2000 max characters

Will you have one or more partners that will help your organization implement the proposed project?

Yes

No

b. List any partners that will help your organization implement the project and describe their role in project implementation.

c. If needed, DHCD will offer technical assistance to awardees as they conceive and implement their projects.

c.1 Do you anticipate needing technical assistance for your project?

Yes

No

PREVENTION AND INTERVENTION UPLOAD:

Please upload any plans, studies, community presentations, mapping or crime data, support letters or other information that supports your overall crime and violence prevention and intervention strategy and request for funds. This is not required but encouraged if available and relevant.

4) Use of Funds

a. List separately each item/activity, including the dollar amount, which will be supported by this grant request. Be specific DO NOT write “Misc Expenses” or “Other”.

The minimum grant request amount is \$35,000 and the maximum grant request amount is \$100,000

	Requested Amount:
	\$
Item/Activity	
<input type="text"/>	<input type="text" value="0.00"/>
	TOTAL REQUESTED AMOUNT:
	\$
	<input type="text" value="0.00"/>

b. Budget Narrative: Describe the significant budget line items and how they contribute to addressing the project’s outcomes.

0/2000 max characters

5) TIMELINE

a. Timeline: Complete the table below including dates for key milestones.

Milestone	Expected Date of Completion
<input type="text"/>	<input type="text" value="MM/DD/YYYY"/>

b. Describe the timeline milestones and how they contribute to addressing the project’s outcomes.

DHCD Email Opt-in

Opt-in for email communication and updates from The Maryland Department of Housing and Community Development.