

**SOUTHWICK**  
**TOWN OF SOUTHWICK**

**COMMUNITY DEVELOPMENT BLOCK GRANT**

**Request For Proposals For Public Social Service Programs**

The Town of Southwick is seeking proposals from qualified public social service organizations that are in need of funding assistance in order to provide needed services to area residents. Proposals may be included as part of a grant application through the FY 2022 Massachusetts Department of Housing and Community Development Block Grant Program (CDBG). The Pioneer Valley Planning Commission (PVPC), on behalf of Southwick, will accept proposals for activities that are designed to benefit residents. Any proposed project or activity must also primarily benefit low to moderate income residents of the town in which the grant program serves.

The Town may choose to fund all, any or none of the proposals submitted and at the funding level deemed appropriate for this program. Agencies or organizations identified for inclusion in any of the grant proposals will be required to submit additional information as part of the full CDBG application to be submitted to the Massachusetts Department of Housing and Community Development (DHCD) by Friday, March 3, 2023. Programs funded by the MA DHCD are anticipated to begin in the fall of 2023. The PVPC is assisting these communities in the coordination and administration of their community development programs. For more information or to receive a proposal request form and copies of the Community Development Strategies, please contact PVPC Senior Planner, Gabriel Filer, at (413) 781-6045 or e-mail [gfiler@pvpc.org](mailto:gfiler@pvpc.org).

**All proposals must be submitted via email to [gfiler@pvpc.org](mailto:gfiler@pvpc.org) or mailed to the Pioneer Valley Planning Commission, 60 Congress Street, 1<sup>st</sup> Floor, Springfield, MA 01104-3419 by 3:00 P.M., Friday, February 3, 2023.**

Southwick FY 2022 CDF Public Social Services Proposal  
c/o Pioneer Valley Planning Commission  
60 Congress Street – 1<sup>st</sup> Floor  
Springfield, MA 01104

Attn: Gabriel Filer

Available upon request are the Community Development Strategy, low to moderate income thresholds and the DHCD's procurement guidance for Public Social Service projects.

For questions: Contact Gabriel Filer at (413)781-6045.

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**PROPOSAL RESPONSE FORM**

Organization/Agency: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

Contact Person: \_\_\_\_\_ EMAIL: \_\_\_\_\_

Title of Contact Person: \_\_\_\_\_

1. Name/Type of Project:
2. Description of Program/Services:
3. Number of Clients to be served:
4. CDBG Funds Requested:
  - 4a. The Town(s) may be unable to provide CDBG funding to your organization in the full amount requested due to grant budget constraints. Explain briefly how partial funding may impact your ability to deliver services, and note the minimum CDBG funding level suggested by your organization in order to provide a basic level of service.
5. Matching Funds Being Provided (amount and source):
6. In-Kind Resources Being Provided:

7. **Description of Beneficiaries (total #, # of low to moderate income persons, etc...):**
8. **Demonstrate Consistency with the Town's (or Towns') Community Development Strategy:**
9. **What is/are the Community Action Agency(s) that serves the area where the service is being provided?**
10. **Has that agency (or agencies) conducted a needs assessment for the area where the services is being proposed? If so, describe how the proposed services are consistent with the needs assessment.**

The applicant certifies that:

(a) the proposed project will be a new service, an expansion of an existing service or a continuation of a project presently funded with Massachusetts CDBG funds. Public Social Service Projects are eligible for CDBG assistance under Section 105(a)(8) of Title I of the Housing and Community Development Act of 1974, as amended, if such services have not been funded with local funds -- i.e., not funded by the municipality using locally raised funds or state funds that pass through the municipality -- within the twelve-month period prior to the date of the application;

and

(b) the proposed project is not provided by other state and federal agencies, or are provided but not available to CDBG-eligible residents in the applicant community(ies)

**Submitted By:**

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Agency/Organization

\_\_\_\_\_  
Date