

ACTIVITY SUMMARY INFORMATION

PERIOD COVERED: **September 1, 2010 – August 31, 2011**

CONSORTIUM MEMBER: **Town Of North Hempstead Community Development Agency**

ACTIVITY CODE: **NH33-07**

ACTIVITY NAME: **RELOCATION**

ALLOCATED FUNDS EXPENDED: **\$3,558.55**

BENEFICIARY TYPE:

One

Direct Benefit – Attach Public Services and Direct Benefit Worksheet

Area Benefit – Attach Area Benefit Reporting Form

Is activity complete? (Yes/No) **NO**

Are funds remaining? (Yes/No) **YES**

ACTUAL ACCOMPLISHMENTS: Please report on the proposed and actual accomplishments of the subject activity by inserting the corresponding **number** on the line provided. Actual accomplishments should be for the twelve-month period from 09/01/2010 through 8/31/2011.

Proposed Accomplishments

(Select Only One)

- # _____ People
- _____ Youth
- _____ Elderly
- 2 _____ Households (General)
- _____ Large Households
- _____ Small Households
- _____ Elderly Households
- _____ Businesses
- _____ Organizations
- _____ Housing Units
- _____ Public Facilities
- _____ Feet of Public Facilities
- _____ Jobs
- _____ Loans
- _____ Low/Mod Persons
- _____ Low/Mod Jobs

Actual Accomplishments

(Select Only One)

- # _____ People
- _____ Youth
- _____ Elderly
- 2 _____ Households (General)
- _____ Large Households
- _____ Small Households
- _____ Elderly Households
- _____ Businesses
- _____ Organizations
- _____ Housing Units
- _____ Public Facilities
- _____ Feet of Public Facilities
- _____ Jobs
- _____ Loans
- _____ Low/Mod Persons
- _____ Low/Mod Jobs

ACCOMPLISHMENTS NARRATIVE FOR THIS ACTIVITY (Please be specific): Project delivery costs for pre-relocation activities for relocation of families from 335 Rose place.

Minority Impact: Families are Hispanic.

ACTIVITY SUMMARY INFORMATION

PERIOD COVERED: **September 1, 2010 – August 31, 2011**

CONSORTIUM MEMBER: **Town Of North Hempstead Community Development Agency**

ACTIVITY CODE: **NH-34-06**

ACTIVITY NAME: **PUBLIC FACILITIES IMPROVEMENT**

ALLOCATED FUNDS EXPENDED: **\$4,062.10**

BENEFICIARY TYPE:

One

Direct Benefit – Attach Public Services and Direct Benefit Worksheet

Area Benefit – Attach Area Benefit Reporting Form

Is activity complete? (Yes/No) **NO** Are funds remaining? (Yes/No) **YES**

ACTUAL ACCOMPLISHMENTS: Please report on the proposed and actual accomplishments of the subject activity by inserting the corresponding **number** on the line provided. Actual accomplishments should be for the twelve-month period from 09/01/2010 through 8/31/2011.

Proposed Accomplishments

(Select Only One)

- #
- 17,000 People
- Youth
- Elderly
- Households (General)
- Large Households
- Small Households
- Elderly Households
- Businesses
- Organizations
- Housing Units
- Public Facilities
- Feet of Public Facilities
- Jobs
- Loans
- Low/Mod Persons
- Low/Mod Jobs

Actual Accomplishments

(Select Only One)

- #
- 17,000 People
- Youth
- Elderly
- Households (General)
- Large Households
- Small Households
- Elderly Households
- Businesses
- Organizations
- Housing Units
- Public Facilities
- Feet of Public Facilities
- Jobs
- Loans
- Low/Mod Persons
- Low/Mod Jobs

ACCOMPLISHMENTS NARRATIVE FOR THIS ACTIVITY (Please be specific): Project delivery for new roadway, parking lot and parking meters for community at large.

Minority Impact: Positive impact on Black and Hispanic minority person.

ACTIVITY SUMMARY INFORMATION

PERIOD COVERED: **September 1, 2010 – August 31, 2011**

CONSORTIUM MEMBER: **Town Of North Hempstead Community Development Agency**

ACTIVITY CODE: **NH35-06, NH36-08**

ACTIVITY NAME: **CODE ENFORCEMENT**

ALLOCATED FUNDS EXPENDED: **\$17,653.50**

BENEFICIARY TYPE:

One

Direct Benefit – Attach Public Services and Direct Benefit Worksheet

Area Benefit – Attach Area Benefit Reporting Form

Is activity complete? (Yes/No) NO

Are funds remaining? (Yes/No) YES



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



ACTIVITY SUMMARY INFORMATION

PERIOD COVERED: **September 1, 2010 – August 31, 2011**

CONSORTIUM MEMBER: **Town Of North Hempstead Community Development Agency**

ACTIVITY CODE: **NH-30-09, NH33-08, MH34-08**

ACTIVITY NAME: **Residential Rehabilitation**

ALLOCATED FUNDS EXPENDED: **\$12,712.07**

BENEFICIARY TYPE:

One

Direct Benefit – Attach Public Services and Direct Benefit Worksheet

Area Benefit – Attach Area Benefit Reporting Form

Is activity complete? (Yes/No) **NO** Are funds remaining? (Yes/No) **YES**



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



ACTUAL ACCOMPLISHMENTS: Please report on the proposed and actual accomplishments of the subject activity by inserting the corresponding **number** on the line provided. Actual accomplishments should be for the twelve-month period from 09/01/2010 through 8/31/2011.

Proposed Accomplishments

(Select Only One)

- #
- People
- Youth
- Elderly
- 10** Households (General)
- Large Households
- Small Households
- Elderly Households
- Businesses
- Organizations
- Housing Units
- Public Facilities
- Feet of Public Facilities
- Jobs
- Loans
- Low/Mod Persons
- Low/Mod Jobs

Actual Accomplishments

(Select Only One)

- #
- People
- Youth
- Elderly
- 5** Households (General)
- Large Households
- Small Households
- Elderly Households
- Businesses
- Organizations
- Housing Units
- Public Facilities
- Feet of Public Facilities
- Jobs
- Loans
- Low/Mod Persons
- Low/Mod Jobs

ACCOMPLISHMENTS NARRATIVE FOR THIS ACTIVITY (Please be specific): Fourteen
household applications are being reviewed for eligibility, six households are in various stages
of write-up, and five households are in various stages of percent-complete.

Minority Impact: Positive impact on Black and Hispanic minority persons.



**NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting**



RESIDENTIAL REHABILITATION WORKSHEET

ACTIVITY CODE: NH-30-09, NH33-08, MH34-08

Please list all projects for which funds were expended during the reporting period. Attach additional sheets if necessary.

Total # of residences rehabilitated during PY2010: 6

Of the residences assisted, enter the number of:

Units occupied by the Elderly:	<u>3</u>
Units with Female Head of Household:	<u>4</u>
Units that were brought into compliance with lead safety rules (24 CFR Part 35):	<u>6</u>
Units Qualified as Energy Star:	<u>0</u>
Units Made handicapped accessible:	<u>0</u>
Units moved from substandard to standard (HQS or Local Code):	<u>6</u>

Name of Resident	Race/Ethnicity ¹	Street Address	Funds Expended	Loan or Grant	Project Complete (Yes/No)	Extremely Low Income <30% AMI	Low Income ≤50% AMI	Moderate Income <50% & ≥80% AM	Program Income Used?
<i>Hardy</i>	2	<i>169 Sylvester Street</i>	0	L/G	No			✓	
<i>Longmire</i>	5	<i>184 Elizabeth Street</i>	5244	L/G	No			✓	
<i>Yaqub</i>	9	<i>26 Lakeville Road</i>	18,991	L/G	Yes			✓	
<i>Garr</i>	2	<i>21 Elton Street</i>	8,768	L/G	No			✓	
<i>Paige</i>	2	<i>247 Grand Street</i>	0	L/G	No			✓	
<i>Turin</i>	1	<i>1006 N. Fourth Street</i>	0	G	No			✓	

¹ Race/Ethnicity Codes: 1 = White; 2 = Black/African American; 3 = Asian; 4 = American Indian/Alaskan Native; 5 = Native Hawaiian/Other Pacific Islander; 6 = American Indian/Alaskan Native & White; 7 = Asian & White; 8 = Black/African American & White; 9 = Other Multi-Racial; 10 = American Indian/Alaska Native & Black/African American
Also, please indicate if any residents are also Hispanic.



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



ACTIVITY SUMMARY INFORMATION

PERIOD COVERED: **September 1, 2010 – August 31, 2011**

CONSORTIUM MEMBER: **Town Of North Hempstead Community Development Agency**

ACTIVITY CODE: **NH35-04, NH34-05, NH33-06,**

ACTIVITY NAME: **ECONOMIC DEVELOPMENT**

ALLOCATED FUNDS EXPENDED: **\$387,378.38**

BENEFICIARY TYPE:

One

Direct Benefit – Attach Public Services and Direct Benefit Worksheet

Area Benefit – Attach Area Benefit Reporting Form

Is activity complete? (Yes/No) **NO** Are funds remaining? (Yes/No) **YES**



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



ACTUAL ACCOMPLISHMENTS: Please report on the proposed and actual accomplishments of the subject activity by inserting the corresponding **number** on the line provided. Actual accomplishments should be for the twelve-month period from 09/01/2010 through 8/31/2011.

Proposed Accomplishments
(Select Only One)

- #
 _____ People
 _____ Youth
 _____ Elderly
 _____ Households (General)
 _____ Large Households
 _____ Small Households
 _____ Elderly Households
7 _____ Businesses
 _____ Organizations
 _____ Housing Units
 _____ Public Facilities
 _____ Feet of Public Facilities
 _____ Jobs
 _____ Loans
 _____ Low/Mod Persons
 _____ Low/Mod Jobs

Actual Accomplishments
(Select Only One)

- #
 _____ People
 _____ Youth
 _____ Elderly
 _____ Households (General)
 _____ Large Households
 _____ Small Households
 _____ Elderly Households
5 _____ Businesses
 _____ Organizations
 _____ Housing Units
 _____ Public Facilities
 _____ Feet of Public Facilities
 _____ Jobs
 _____ Loans
 _____ Low/Mod Persons
 _____ Low/Mod Jobs

ACCOMPLISHMENTS NARRATIVE FOR THIS ACTIVITY (Please be specific):

Supermarket closed on condo space at 735 Prospect, New Cassel (Site B) with the assistance of grant and loan from NH CDA and is scheduled to open in early 2012.

Department Store scheduled to open in November 2011 in (Site A) 701 Prospect Avenue New Cassel. CDA is providing funding for Master Plan for remaining retail space at Site A. A Hair Salon and Dentist who takes insurance, adjust rates for those that don't have insurance and sometime provide free services for emergency situation has opened and a Jamaican Restaurant is scheduled to open in December.

NH CDA continues to assist with lease of remaining new and old Urban Renewal Area retail space.



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



ECONOMIC DEVELOPMENT WORKSHEET – FOR LOW/MOD
AREA BENEFIT

ACTIVITY CODE: _____

Assistance to Businesses:

	Total	Number Expanding	Number Relocating
New Businesses Assisted	6		
Existing Businesses Assisted	1	1	1
Total	7	1	1

Number of businesses assisted that provide goods or services to meet the needs of a service area, neighborhood, or community: 3

Name of Business	Project Description and Use of Funding	Duns #
Stop 1(one) Supermarket	Relocation & expansion admin for project delivery	
Department Store	Expansion of Store Chain	
Shipman's Pharmacy	Relocation and expansion, admin for project delivery	
Project Kicks	Relocation and expansion admin for project delivery	
Dental Office	Expansion of existing business	
Hair Salon	Expansion of existing business and admin for project delivery	
Jamaican Restaurant	New business and admin for project delivery	



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



ECONOMIC DEVELOPMENT WORKSHEET – FOR LOW/MOD JOBS BENEFIT

ACTIVITY CODE: _____

Assistance to Businesses:

	Total	Number Expanding	Number Relocating
New Businesses Assisted			
Existing Businesses Assisted			
Total			

Number of businesses assisted that provide goods or services to meet the needs of a service area, neighborhood, or community: _____

Job Creation/Retention:

	Total Job Count		Total Weekly Hours	
	Full Time	Full Time Low/Mod	Part Time	Part Time Low/Mod
Actually Created	2			2
Actually Retained				

Created:

	Total
Of the jobs created, number of jobs with Employer sponsored health care benefits	4
Of the jobs created, number of persons unemployed prior to taking jobs created under this activity	4

Retained:

	Total
Of the jobs retained, number of jobs with employer sponsored health care benefits	



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



Types of Jobs Created/Retained:

Job Category	# Jobs Created	# Jobs Retained
Officials and Managers	2	
Professional		
Technicians		
Sales		
Office and Clerical	2	
Craft Workers (skilled)		
Operatives (semi-skilled)		
Laborers (unskilled)		
Service Workers		

Name of Business	Project Description and Use of Funding	Duns #
<u>Nu Cassel Pharmacy</u>	<u>Working Capital Grant</u>	



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



ACTIVITY SUMMARY INFORMATION

PERIOD COVERED: September 1, 2010 – August 31, 2011

CONSORTIUM MEMBER: Town Of North Hempstead Community Development Agency

ACTIVITY CODE: NH-35-02, NH34-02, NH33-02

ACTIVITY NAME: ACQUISITION

ALLOCATED FUNDS EXPENDED: \$197,919.25

BENEFICIARY TYPE:

One

Direct Benefit – Attach Public Services and Direct Benefit Worksheet

Area Benefit – Attach Area Benefit Reporting Form

Is activity complete? (Yes/No) NO Are funds remaining? (Yes/No) YES



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



ACTUAL ACCOMPLISHMENTS: Please report on the proposed and actual accomplishments of the subject activity by inserting the corresponding **number** on the line provided. Actual accomplishments should be for the twelve-month period from 09/01/2010 through 8/31/2011.

Proposed Accomplishments

(Select Only One)

#

- _____ People
- _____ Youth
- _____ Elderly
- _____ Households (General)
- _____ Large Households
- _____ Small Households
- _____ Elderly Households
- _____ Businesses
- _____ Organizations
- 7 - 10_ Housing Units
- _____ Public Facilities
- _____ Feet of Public Facilities
- _____ Jobs
- _____ Loans
- _____ Low/Mod Persons
- _____ Low/Mod Jobs

Actual Accomplishments

(Select Only One)

#

- _____ People
- _____ Youth
- _____ Elderly
- _____ Households (General)
- _____ Large Households
- _____ Small Households
- _____ Elderly Households
- _____ Businesses
- _____ Organizations
- 0_ Housing Units
- _____ Public Facilities
- _____ Feet of Public Facilities
- _____ Jobs
- _____ Loans
- _____ Low/Mod Persons
- _____ Low/Mod Jobs

ACCOMPLISHMENTS NARRATIVE FOR THIS ACTIVITY (Please be specific): Acquisition of non compliant, dilapidated housing and structures, 335 Rose acquisition completed, legal and staff work for acquisition of 336 Rose and 215 Brooklyn Ave , 714 Prospect Avenue Parking lot complete..

335/336 Rose Place will result in 7 or more housing units and a parking lot..

Minority Impact: Positive impact on Black and Hispanic minority persons.



**NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting**



AREA BENEFIT ACTIVITY INFORMATION

ACTIVITY TYPE:

- One
- Acquisition
- Disposition
- Clearance
- Code Enforcement

- Relocation
- Public Facility Improvements ("PF&I")

LOCATION OF ACTIVITY: 335 Rose Pl, 714 Prospect, 215 Brooklyn Avenue New Cassel

PLANNED USE OF PROPERTY/FACILITY: For Acquisition/Disposition/ Clearance/Relocation Activities indicate the proposed use of the property, and how it is eligible under the CDBG Program. For Public Facilities Improvements Activities — indicate how the public facility and the improvements benefit an eligible population.

Construction of: seven to ten affordable homes, and a community parking lot.

FOR PF&I ACTIVITY ONLY:

Of the total number of persons assisted, enter the number that:

- Now have new access to this type of public facility or infrastructure improvement: _____
- Now have improved access to this type of public facility or infrastructure improvement: _____
- Are served by public facility or infrastructure that is no longer substandard: _____

TARGET AREA SERVED: New Cassel, Urban Renewal Area

CENSUS DATA

CENSUS TRACT	BLOCK GROUP(S)							
<u>3042.01</u>	<u>5</u>	<u>6</u>	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



ACTIVITY SUMMARY INFORMATION

PERIOD COVERED: September 1, 2010 – August 31, 2011

CONSORTIUM MEMBER: Town of North Hempstead

ACTIVITY CODE: NH-34-04, NH33-05

ACTIVITY NAME: DEMOLITION AND SITE CLEARANCE

ALLOCATED FUNDS EXPENDED \$3,151.37

BENEFICIARY TYPE:

One

Direct Benefit – Attach Public Services and Direct Benefit Worksheet

Area Benefit – Attach Area Benefit Reporting Form

Is activity complete? (Yes/No) NO Are funds remaining? (Yes/No) YES



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



ACTUAL ACCOMPLISHMENTS: Please report on the proposed and actual accomplishments of the subject activity by inserting the corresponding **number** on the line provided. Actual accomplishments should be for the twelve-month period from 09/01/2010 through 8/31/2011.

Proposed Accomplishments

(Select Only One)

- #
- People
- Youth
- Elderly
- 8-10** Households (General)
- Large Households
- Small Households
- Elderly Households
- Businesses
- Organizations
- Housing Units
- Public Facilities
- Feet of Public Facilities
- Jobs
- Loans
- Low/Mod Persons
- Low/Mod Jobs

Actual Accomplishments

(Select Only One)

- #
- People
- Youth
- Elderly
- 0** Households (General)
- Large Households
- Small Households
- Elderly Households
- Businesses
- Organizations
- Housing Units
- Public Facilities
- Feet of Public Facilities
- Jobs
- Loans
- Low/Mod Persons
- Low/Mod Jobs

ACCOMPLISHMENTS NARRATIVE FOR THIS ACTIVITY (Please be specific): _____

Continue project delivery work for 276 and 275 Sohmer Place and 336 Rose Place. Work in progress shall result in development of (8) to (10) affordable housing units. 215 Brooklyn Avenue project delivery environmental testing, this property will be combined with other property's for mixed use redevelopment. Parking lot (714 and 706 Prospect) completed, pending disposition to Town of North Hempstead

Minority Impact: Positive impact on black and Hispanic persons.



**NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting**



ACTIVITY SUMMARY INFORMATION

PERIOD COVERED: **September 1, 2010 – August 31, 2011**

CONSORTIUM MEMBER: **Town Of North Hempstead Community Development Agency**

ACTIVITY CODE: **NH-34-03, NH35-03,**

ACTIVITY NAME: **DISPOSITION OF REAL PROPERTY**

ALLOCATED FUNDS EXPENDED: **\$136,846,27**

BENEFICIARY TYPE:

One

Direct Benefit – Attach Public Services and Direct Benefit Worksheet

Area Benefit – Attach Area Benefit Reporting Form

Is activity complete? (Yes/No) NO Are funds remaining? (Yes/No) YES



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



ACTUAL ACCOMPLISHMENTS: Please report on the proposed and actual accomplishments of the subject activity by inserting the corresponding **number** on the line provided. Actual accomplishments should be for the twelve-month period from 09/01/2010 through 8/31/2011.

Proposed Accomplishments

(Select Only One)

- # _____ People
- _____ Youth
- _____ Elderly
- _____ Households (General)
- _____ Large Households
- _____ Small Households
- _____ Elderly Households
- _____ Businesses
- _____ Organizations
- 81 _____ Housing Units
- _____ Public Facilities
- _____ Feet of Public Facilities
- _____ Jobs
- _____ Loans
- _____ Low/Mod Persons
- _____ Low/Mod Jobs

Actual Accomplishments

(Select Only One)

- # _____ People
- _____ Youth
- _____ Elderly
- _____ Households (General)
- _____ Large Households
- _____ Small Households
- _____ Elderly Households
- _____ Businesses
- _____ Organizations
- 14 _____ Housing Units
- _____ Public Facilities
- _____ Feet of Public Facilities
- _____ Jobs
- _____ Loans
- _____ Low/Mod Persons
- _____ Low/Mod Jobs

ACCOMPLISHMENTS NARRATIVE FOR THIS ACTIVITY (Please be specific): Continued administrative, legal work and property management under disposition of real property. This work results in approximately (81) housing units and new downtown retail spaces. New retail space to improve and make available new community goods and service.

Minority Impact: Positive impact on Black and Hispanic minority persons.



**NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting**



AREA BENEFIT ACTIVITY INFORMATION

ACTIVITY TYPE:

- One
- Acquisition
- Disposition
- Clearance
- Code Enforcement
- Relocation
- Public Facility Improvements ("PF&I")

LOCATION OF ACTIVITY: Prospect Avenue Sites B,C,H,D and M

PLANNED USE OF PROPERTY/FACILITY: For Acquisition/Disposition/ Clearance/Relocation Activities indicate the proposed use of the property, and how it is eligible under the CDBG Program. For Public Facilities Improvements Activities — indicate how the public facility and the improvements benefit an eligible population.

Project delivery expenses for disposal of real property and for completion of urban renewal projects. Property is for affordable rental housing, affordable housing new businesses, relocation, and rental of existing neighborhood business

FOR PF&I ACTIVITY ONLY:

Of the total number of persons assisted, enter the number that:

- Now have new access to this type of public facility or infrastructure improvement: _____
- Now have improved access to this type of public facility or infrastructure improvement: _____
- Are served by public facility or infrastructure that is no longer substandard: _____

TARGET AREA SERVED: New Cassel, Urban Renewal Area

CENSUS DATA

CENSUS TRACT	BLOCK GROUP(S)						
<u>3042.01</u>	<u>5</u>	<u>6</u>	_____	_____	_____	_____	_____



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



ACTIVITY SUMMARY INFORMATION

PERIOD COVERED: **September 1, 2009 – August 31, 2010**

CONSORTIUM MEMBER: **Town Of North Hempstead**

ACTIVITY CODE: **NH33- 09b, NH 34-01b, NH 35—07b**

ACTIVITY NAME: **P.S. Concerned Citizens for Roslyn Youth**

ALLOCATED FUNDS EXPENDED: **\$15,894.49**

BENEFICIARY TYPE:

- One
- Direct Benefit – Attach Public Services and Direct Benefit Worksheet
- Area Benefit – Attach Area Benefit Reporting Form

Is activity complete? (Yes/No) **No** Are funds remaining? (Yes/No) **Yes**



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



ACTUAL ACCOMPLISHMENTS: Please report on the proposed and actual accomplishments of the subject activity by inserting the corresponding **number** on the line provided. Actual accomplishments should be for the twelve-month period from 09/01/2010 through 8/31/2011.

Proposed Accomplishments
(Select Only One)

- # _____ People
- 103 Youth
- _____ Elderly
- _____ Households (General)
- _____ Large Households
- _____ Small Households
- _____ Elderly Households
- _____ Businesses
- _____ Organizations
- _____ Housing Units
- _____ Public Facilities
- _____ Feet of Public Facilities
- _____ Jobs
- _____ Loans
- _____ Low/Mod Persons
- _____ Low/Mod Jobs

Actual Accomplishments
(Select Only One)

- # _____ People
- 103 Youth
- _____ Elderly
- _____ Households (General)
- _____ Large Households
- _____ Small Households
- _____ Elderly Households
- _____ Businesses
- _____ Organizations
- _____ Housing Units
- _____ Public Facilities
- _____ Feet of Public Facilities
- _____ Jobs
- _____ Loans
- _____ Low/Mod Persons
- _____ Low/Mod Jobs

ACCOMPLISHMENTS NARRATIVE FOR THIS ACTIVITY (Please be specific): _____

Provided various services to the Community; Strengthening Families Program. These services

include after school academic support for grades 5th – 9th grade, A Youth Action After School

Program for K-5th grade, cultural and vocational services to youths, adults, and seniors,

Summer Recreation Program & Youth Employment, Peer Mediation Training and

Certification; CPR Training and Certification



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



PUBLIC SERVICES WORKSHEET

Instructions: This form must be completed for every public service activity that receives CDBG funding under the CDBG program.

- A. Municipality: Town Of North Hempstead
- B. Entity Carrying Out Public Service: Concerned Citizens for Roslyn Youth
 (e.g., Name of Non-Profit or Municipal Agency)
- C. Name of Public Service: Concerned Citizens for Roslyn Youth
- D. Public Service Activity Number (i.e.; HT35-02): _____
- E. Address of Public Service: 53 Orchard Street, Roslyn Heights, New York 11577
- F. Public Service Administrator or Director: Janice Miles
- G. Public Service organization phone number: (516)621-3419
- H. List all funding sources for subject activity below **(Attach Additional Sheets if Necessary)**

Federal Funding Sources (List Agency & Program Names)	Grant or Loan	Amount (000s)	One time award? Yes/No
1)			
2)			
3)			
State Funding Sources (List Agency & Program Names)	Grant or Loan	Amount (000s)	One time award? Yes/No
2)			
3)			
Local (County/Town/Village) Funding Sources (List Agency & Program Names)	Grant or Loan	Amount (000s)	One time award? Yes/No
1) <i>Nassau County Youth Board</i>	<i>Grant</i>	<i>130,970</i>	<i>Yes</i>
2) <i>T.O.N.H.C.D.A.</i> <small>^{34th Yr 34,000, 35th Yr 10,000,}</small>	<i>Grant</i>	<i>44,000.00</i>	<i>Yes</i>
3)			
Private Funding Sources (Include fund raising, foundation grants, annual pledges, etc.)	Grant or Loan	Amount (000s)	One time award? Yes/No
1) <i>Fundraiser</i>	<i>N/A</i>	<i>37,240</i>	<i>Yes</i>
2)			
3)			



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



DIRECT BENEFIT WORKSHEET

ACTIVITY NAME: Concerned Citizens for Roslyn Youth

Beneficiary Totals By Income Group
Classification Categories #

Total Non Low/Mod Income	
Total Moderate Income = <50% AMI >80% AMI	
Total Low Income = <50% AMI	63
Total Extremely Low Income = <30% AMI	
TOTAL PERSON ASSISTED PY2010	103

Beneficiary Totals By Racial/Ethnic Group
Classification Categories # #Hispanic*

White	5	
Black/African American	63	
Asian	21	
American Indian/Alaska Native		
Native Hawaii/Other Pacific Islander		
American Indian/Alaska Native & White		
Asian & White		
Black/African American & White		
American Indian/Alaska Native & Black/African American		
Other/Multi Racial		14
Total Persons Assisted	103	
*Of the # of persons counted in each Racial/Ethnic Group, how many are also of Hispanic origin		

Data Collection Source/Eligibility Info:

Please explain how income eligibility information was collected (i.e. Referral Agency – NC DSS, Household Income) Be specific about what records are kept to determine eligibility of clientele.

Are activity beneficiaries presumed to be low/mod income? If yes, please check the eligible category:

Abused Children ___ Battered Spouses ___ Elderly ___ Severely Disabled Adults ___ Homeless ___
 Illiterate Persons ___ Persons Living With AIDS ___ Migrant Farm Workers ___

Is the activity eligible based on the nature and location of the activity? ___ If yes, please explain:

Of the total benefiting for Program Year 2010, enter the number that:

Now has new or continuing access to this service or benefit: _____

Now has improved access to this service or benefit: _____

Now receive a service or benefit that is no longer substandard: _____



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



ACTIVITY SUMMARY INFORMATION

PERIOD COVERED: **September 1, 2010 – August 31, 2011**

CONSORTIUM MEMBER: **Town Of North Hempstead**

ACTIVITY CODE: **NH36-09**

ACTIVITY NAME: **P.S. Unified New Cassel Community Revitalization Corp (U.N.C.C.R.C)**

ALLOCATED FUNDS EXPENDED: **\$22,457.96**

BENEFICIARY TYPE:

One

Direct Benefit – Attach Public Services and Direct Benefit Worksheet

Area Benefit – Attach Area Benefit Reporting Form

Is activity complete? (Yes/No) Yes Are funds remaining? (Yes/No) Yes



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



ACTUAL ACCOMPLISHMENTS: Please report on the proposed and actual accomplishments of the subject activity by inserting the corresponding **number** on the line provided. Actual accomplishments should be for the twelve-month period from 09/01/2010 through 8/31/2011.

Proposed Accomplishments (Select Only One)	Actual Accomplishments (Select Only One)
#	#
<u>13,420</u> People	<u>13,420</u> People
_____ Youth	_____ Youth
_____ Elderly	_____ Elderly
_____ Households (General)	_____ Households (General)
_____ Large Households	_____ Large Households
_____ Small Households	_____ Small Households
_____ Elderly Households	_____ Elderly Households
_____ Businesses	_____ Businesses
_____ Organizations	_____ Organizations
_____ Housing Units	_____ Housing Units
_____ Public Facilities	_____ Public Facilities
_____ Feet of Public Facilities	_____ Feet of Public Facilities
_____ Jobs	_____ Jobs
_____ Loans	_____ Loans
_____ Low/Mod Persons	_____ Low/Mod Persons
_____ Low/Mod Jobs	_____ Low/Mod Jobs

ACCOMPLISHMENTS NARRATIVE FOR THIS ACTIVITY (Please be specific):

U.N.C.C.R.C. operates under a Memorandum of understanding with the CDA and the Town for the Revitalization of New Cassel under the New Cassel Vision Plan. U.N.C.C.R.C. has organized several "clean up days" in New Cassel, ranging from dissemination of literature, performs substantial services to achieve community participation in the revitalization of New Cassel, assisted in marketing of the Residential Rehab Program's concentrating in the New Cassel Urban Renewal Plan, and continues to assist in code enforcement activities through its block captains and increased community participation in the revitalization process. Participated in the selection process for the Arts of Media project for Prospect Ave. March of 2011 started the process the Farmers Market in New Cassel to open in September 2011.



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



PUBLIC SERVICES WORKSHEET

Instructions: This form must be completed for every public service activity that receives CDBG funding under the CDBG program.

- A. Municipality: Town Of North Hempstead
- B. Entity Carrying Out Public Service: Unified New Cassel Community Revitalization Corp (U.N.C.C.R.C.)
 (e.g., Name of Non-Profit or Municipal Agency)
- C. Name of Public Service: Unified New Cassel Community Revitalization Corp (U.N.C.C.R.C.)
- D. Public Service Activity Number (i.e.; HT35-02): _____
- E. Address of Public Service: 211 Garden Street, Westbury, NY 11590
- F. Public Service Administrator or Director: Kennetha Pettus
- G. Public Service organization phone number: (516) 997 - 9399
- H. List all funding sources for subject activity below (Attach Additional Sheets if Necessary)

Federal Funding Sources (List Agency & Program Names)	Grant or Loan	Amount (000s)	One time award? Yes/No
1)			
2)			
3)			
State Funding Sources (List Agency & Program Names)	Grant or Loan	Amount (000s)	One time award? Yes/No
1)			
2)			
3)			
Local (County/Town/Village) Funding Sources (List Agency & Program Names)	Grant or Loan	Amount (000s)	One time award? Yes/No
1) <i>T.O.N.H.C.D.A.</i>	<i>Grant</i>	<i>50,000.00</i>	<i>Yes</i>
2) <i>C.H.D.O.</i>	<i>Grant</i>	<i>50,000.00</i>	<i>Yes</i>
3)			
Private Funding Sources (Include fund raising, foundation grants, annual pledges, etc.)	Grant or Loan	Amount (000s)	One time award? Yes/No
1) <i>Fundraiser</i>		<i>1,000.00</i>	<i>Yes</i>
2)			
3)			



NASSAU COUNTY URBAN CONSORTIUM
Community Development Block Grant (CDBG) Program
End of Year Accomplishments Reporting



DIRECT BENEFIT WORKSHEET

ACTIVITY NAME: _____

Beneficiary Totals By Income Group
Classification Categories #

Total Non Low/Mod Income	
Total Moderate Income = <50% AMI ≥80% AMI	
Total Low Income = ≤50% AMI	
Total Extremely Low Income = <30% AMI	
TOTAL PERSON ASSISTED PY2009	

Beneficiary Totals By Racial/Ethnic Group
Classification Categories # #Hispanic*

White		
Black/African American		
Asian		
American Indian/Alaska Native		
Native Hawaii/Other Pacific Islander		
American Indian/Alaska Native & White		
Asian & White		
Black/African American & White		
American Indian/Alaska Native & Black/African American		
Other/Multi Racial		
Total Persons Assisted		
*Of the # of persons counted in each Racial/Ethnic Group, how many are also of Hispanic origin		

Data Collection Source/Eligibility Info:

Please explain how income eligibility information was collected (i.e. Referral Agency – NC DSS, Household Income) Be specific about what records are kept to determine eligibility of clientele.
None collected

Are activity beneficiaries presumed to be low/mod income? If yes, please check the eligible category:

Abused Children ___ Battered Spouses ___ Elderly ___ Severely Disabled Adults ___ Homeless ___
 Illiterate Persons ___ Persons Living With AIDS ___ Migrant Farm Workers ___

Is the activity eligible based on the nature and location of the activity? If yes, please explain:
 Urban Renewal Area

Of the total benefiting for Program Year 2009, enter the number that:

Now has new or continuing access to this service or benefit: _____
 Now has improved access to this service or benefit: _____
 Now receive a service or benefit that is no longer substandard: _____