

Initiative:

Empowerment Zone/Enterprise Community



Building Communities Together

Urban Application Forms



**U.S. Department of Housing
and Urban Development**
Andrew Cuomo, Secretary
Office of Community Planning
and Development

Nomination for an Urban Federal Empowerment Zone

Application Forms

Public reporting burden for this collection of information is estimated to average 50 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Paperwork Reduction Project (2506-0148), Office of Information Technology, U.S. Department of Housing and Urban Development, 451 Seventh Street, SW, Washington, DC 20410-3600. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.

Do not send this form to the above address.

If there appears to be a conflict between the language in this publication and the Empowerment Zones: Rule for Second Round Designation, the language of the rule shall take precedence.

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Note: Every urban community applying for Round II Empowerment Zone designation is required to submit an accurate “Nomination for an Urban Federal Empowerment Zone” form. Before beginning the process of filling out the forms contained in the nomination, we strongly urge you to carefully read all instructions.

Notice of Intent To Participate

Please send notice to:

U.S. Department of Housing and Urban Development
Office of Community Planning and Development
EZ/EC Team, Room 7130
451 Seventh Street, SW
Washington, DC 20410

Note: This notice may also be submitted via fax at 202-401-7615.

Please submit this information as soon as possible.

Location of Nominated Area:

Name & Address of City and State Nominating Entities

City: _____

Address: _____

Contact: _____

Phone: _____

Fax: _____

E-mail: _____

State: _____

Address: _____

Contact: _____

Phone: _____

Fax: _____

E-mail: _____

Attach separate sheets, as necessary, to provide identical information for all governments nominating the area.
Number the additional sheets 1a, 1b, etc.

Submission Requirements

Submissions

In order to be considered for designation, in general, nominations that are completed and acceptable for processing must be received by **5:00 p.m., Eastern Time, Friday, October 9, 1998**. Special instructions for delivered applications, mailed applications, and applications sent by overnight delivery are contained in the Notice of Funding Availability (NOFA). Nominations must be submitted in the general format that follows:

- **Nomination Form Parts I through IV**, including required certifications and written assurances.
- The **Strategic Plan**, which is the narrative submission and the core of the nomination. It is recommended that an index or table of contents identify major components and that the pages be numbered sequentially. Tabs or other separations may be used as appropriate. (For more information on how to prepare a nomination, applicants are referred to the "Application Guide," "Strategic Planning Guide," "Federal Programs Guide," "Performance Measurement System Guide," Internal Revenue Service Publication 954 "Tax Incentives for Empowerment Zones and Other Distressed Communities," U.S. Department of Health and Human Services' Guidelines for Uses of EZ/EC SSBG Funds, Empowerment Zones: Rule for Second Round Designation, and the Notice of Funding Availability, published in the *Federal Register*. These publications may be downloaded from the HUD Web site at <http://www.hud.gov/ezec/ezec.html>. These publications may be ordered by calling Community Connections at 800-998-9999.)
- **Map(s)**: Attach a copy of the 1990 census map(s) showing (1) the boundaries of the local government(s) discussed in Part I: State and Local Government Identification and (2) the boundaries of the nominated area, including developable sites, if any.

Applicants are required to send an original and two copies of the nomination to:

Office of Community Planning and Development
c/o Processing and Control Unit
Room 7255
U.S. Department of Housing and Urban Development
451 Seventh Street, SW
Washington, DC 20410

Nomination Forms

for Urban Federal Empowerment Zone Designation

U.S. Department of Housing
and Urban Development
Office of Community Planning
and Development

Number of years of designation requested (maximum of 10 years): <input type="text"/>	Nomination Categories (mark as applicable): <input type="checkbox"/> Urban Indian Reservation yes ___ no ___
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Part I: State and Local Government Identification

A. Nominating State Government(s), Tribal Governing Body, or State Chartered Economic Development Corporation

Name of Entity:	Authorized Official:
Contact Person (Name and Title):	Telephone Number:
Address (Street / PO Box, City, State, & Zip Code):	

Name of Entity:	Authorized Official:
Contact Person (Name and Title):	Telephone Number:
Address (Street / PO Box, City, State, & Zip Code):	

B. Nominating Local Government(s) Enter the total number of nominating local governments.

Name of Jurisdiction:	Metropolitan Statistical Area Name (if in an MSA):
Authorized Official:	
Contact Person (Name and Title):	Telephone Number:
Address (Street / PO Box, City, State, & Zip Code):	County:

Name of Jurisdiction:	Metropolitan Statistical Area Name (if in an MSA):
Authorized Official:	
Contact Person (Name and Title):	Telephone Number:
Address (Street / PO Box, City, State, & Zip Code):	County:

Attach separate sheet(s), as necessary, to provide identical information for all governments nominating the area. Number the additional sheets 4a, 4b, etc.

Part II: Eligibility Information

This form incorporates the information necessary to demonstrate that the nominated area meets the statutory eligibility requirements. Procedures for identifying the population and poverty rate data are given in Part IV. Use the results to answer the appropriate items below.

A. Size & Location of the Nominated Area

- | | Yes | No |
|---|--------------------------|--------------------------|
| 1. What is the square mileage of the nominated area? | <input type="text"/> | |
| 2. Is the nominated area located wholly within the jurisdiction of the government(s) listed in Part I: State and Local Government Identification? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is the nominated area located in no more than two contiguous States? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Is the boundary of the nominated area continuous? | <input type="checkbox"/> | <input type="checkbox"/> |
| a. If "no," does the nominated area, excluding developable sites, consist of not more than three noncontiguous parcels? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Does the nominated area include developable sites that are exempt from the poverty rate criteria? | <input type="checkbox"/> | <input type="checkbox"/> |
| a. If "yes," are there no more than three noncontiguous parcels that are developable sites? | <input type="checkbox"/> | <input type="checkbox"/> |
| b. If "yes," are they 2,000 acres or less in the aggregate? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Is the nominated area a Metropolitan Statistical Area? | <input type="checkbox"/> | <input type="checkbox"/> |
| a. If "no," has the nominating local government documented the urban character of the area? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are there any census tracts within a central business district? | <input type="checkbox"/> | <input type="checkbox"/> |
| a. If "yes," is the poverty rate at least 35% for such tracts? | <input type="checkbox"/> | <input type="checkbox"/> |

B. Population & Poverty Rate of the Nominated Area

- | | | |
|---|--------------------------|--------------------------|
| 1. Do any of the census tracts included in the nominated area have a population of less than 2,000? | <input type="checkbox"/> | <input type="checkbox"/> |
| a. If "yes," is more than 75% of the tract zoned commercial/industrial? | <input type="checkbox"/> | <input type="checkbox"/> |
| b. If "yes," is the tract contiguous to one or more other census tracts that have a poverty rate of at least 25%? | <input type="checkbox"/> | <input type="checkbox"/> |

- | | Yes | No |
|--|--------------------------|--------------------------|
| 2. From the Part IV population form, provide the following information for the entire area nominated: | <input type="text"/> | |
| a. Total 1990 census population | <input type="text"/> | |
| b. Excluding census tracts containing developable sites, do all census tracts in the nominated area have a poverty rate of at least 20%? | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Excluding census tracts containing developable sites, do at least 90% of all the census tracts in the nominated area have a poverty rate of at least 25%? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. What is the population of the most populous city in the nominated area? | <input type="text"/> | |
| a. What is the name of that city? | <input type="text"/> | |

C. Distress of the Nominated Area

- | | | |
|---|--------------------------|--------------------------|
| 1. Is the pervasive poverty of the area detailed in the Strategic Plan? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is the unemployment of the area detailed in the Strategic Plan? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is the general distress of the area, including the physical and social conditions that demonstrate it, detailed in the Strategic Plan? | <input type="checkbox"/> | <input type="checkbox"/> |

D. Alaska and Hawaii Nominations Only

- | | | |
|--|--------------------------|--------------------------|
| Do at least 20% of the families in each census tract within the nominated area have incomes at or below 50% of the statewide median family income? | <input type="checkbox"/> | <input type="checkbox"/> |
|--|--------------------------|--------------------------|

Part III: Certifications

I hereby certify that the portion of the nominated area that I represent meets all Federal eligibility requirements and that to the best of my knowledge and belief:

- a. the information in this nomination is true and correct;
- b. each nominating entity has the authority, with respect to the nominated area, to:
 - (1) nominate such area for designation as an Empowerment Zone;
 - (2) make the State, local, or tribal commitments that the Strategic Plan will be implemented; and
 - (3) provide assurances that such commitments will be fulfilled;
- c. the nominating entities shall comply with State, local, and Federal program requirements and have agreed in writing to carry out the Strategic Plan if designated;
- d. the nominating entities will administer the EZ/EC Initiative in a manner that affirmatively furthers fair housing on the basis of race, color, national origin, religion, sex, disability, and familial status (presence of children);
- e. the nominated areas meet each of the eligibility criteria, including special exceptions, set forth in the program regulations:
 - (1) the geographic area satisfies the population requirements;

- (2) the geographic area is one of pervasive poverty, unemployment, and general distress;
- (3) the geographic area meets the size and boundary test; and
- (4) the geographic area meets the poverty rate criteria;
- f. each noncontiguous parcel (except for up to three noncontiguous parcels identified as “developable sites”) being nominated meets the poverty rate criteria;
- g. the amount of EZ/EC SSBG funds provided to the State for the area will not be used to supplant other Federal or non-Federal funds;
- h. the nominating entities agree to make all information available as requested by the designating Secretaries to aid in evaluation of progress in implementation of the Strategic Plan and reporting on the use of EZ/EC SSBG funds;
- i. the nominating State or tribal government agrees to distribute the EZ/EC SSBG funds in accordance with the Strategic Plan of the designated Zone; and
- j. no portion of the nominated area is included in an Empowerment Zone or any other area currently nominated for designation as an Empowerment Zone.

Authorized Nominating State, Tribal Governing Body, or Economic Development Corporation Official(s) type or print

Name of Entity:	Signature & Date:
Name of Authorized Official & Title:	X
Name of Entity:	Signature & Date:
Name of Authorized Official & Title:	X

Authorized Nominating Local Government(s) and Official(s) type or print

Governmental Unit & State Name:	Signature & Date:
Name of Authorized Official and Title:	X
Governmental Unit & State Name:	Signature & Date:
Name of Authorized Official and Title:	X
Governmental Unit & State Name:	Signature & Date:
Name of Authorized Official and Title:	X

Attach separate sheet(s), as necessary, to provide identical information and official signatures for all governments nominating the area. Number the sheets 6a, 6b, etc.

Part IV: Population Data Form

Duplicate this page for each noncontiguous parcel in the nominated area. Number the added pages 7a, 7b, etc. Enter the total number of census tracts listed on all pages in the block to the right.

Name of City:

Name of State:

1. Census Tract Number	2. 1990 Population	3. Land Area (sq. miles)	Poverty		5. Special Code, if Applicable	1. Census Tract Number	2. 1990 Population	3. Land Area (sq. miles)	Poverty		5. Special Code, if Applicable
			4a. No. of Persons in Each Tract	4b. Percent Below Poverty Level					4a. No. of Persons in Each Tract	4b. Percent Below Poverty Level	
1.						21.					
2.						22.					
3.						23.					
4.						24.					
5.						25.					
6.						26.					
7.						27.					
8.						28.					
9.						29.					
10.						30.					
11.						31.					
12.						32.					
13.						33.					
14.						34.					
15.						35.					
16.						36.					
17.						37.					
18.						38.					
19.						39.					
20.						40.					
						Totals					

Number of census tracts that have a poverty rate of 20% or greater.

Number of census tracts that have a poverty rate of 25% or greater.

Number of census tracts with a population of less than 2,000.

General Instructions for the Population Data Form

The Population Data Form is used to demonstrate eligibility of the nominated area.

A nominated urban area shall have a maximum population that is the lesser of (1) 200,000, or (2) the greater of 50,000 or 10 percent of the population of the most populous city located within the nominated area.

The nominated area boundaries must include full census tracts. Census tracts cannot be split. Nominated area boundaries follow census tract boundaries. Separate Population Data Forms must be submitted for each noncontiguous parcel that makes up the nominated area. Also, where a nominated area is located in more than one city, a separate Population Data Form must be completed for each city.

To complete this form, applicants should refer to the Bureau of the Census CPH-3 series of publications from the **1990 Census of Population and Housing: Population and Housing Characteristics for Census Tracts**. The 1990 CPH-3 printed reports are out of print; however, they are available at State data centers and at most local libraries. CPH-3 information also can be obtained through the U.S. Census Bureau Web site. The site contains the link to the State listings with the census data from CPH-3 Tables 1 and 19 and can be accessed via <http://www.census.gov/geo/www/ezinter.html>. For further information regarding this Web site, call the U.S. Bureau of the Census, Geography Division, at 301-457-1128.

To establish consistency in data reporting, use only the data contained in CPH-3, which provides all the necessary information needed to fill out the Population Data Forms. No other sources of data will be accepted. Since this information will not be updated until the next census in the year 2000, it is understood that in certain instances the 1990 CPH-3 information will be outdated.

Note: CPH-3 Tables 1 and 19 contain the elements needed to complete the Population Data Form. These include square mile area, population, and percent below poverty level. Only the CPH-3 tables and lines specified are acceptable to HUD for completing the Population Data Form on page 7 of the nomination package.

For Alaska and Hawaii, use the percent of families with income at or below 50 percent of the statewide median family income.

1990 Census Tract Outline Maps.

The 1990 census tract outline maps can be ordered by calling the U.S. Bureau of the Census at 301-457-4100. When ordering, please recognize that these maps are plotted on demand and therefore may not be available immediately. These maps may also be available at State data centers. Information on these centers can be obtained via the U.S. Census Bureau Web site at <http://www.census.gov/sdc/www/>.

Specific Instructions for the Population Data Form

Column 1. Census Tract Number. List each census tract number contained in the nominated area as shown on the census tract outline map accompanying the nomination. In cases where the nominated area has no census tracts, block group numbering areas may be used.

Column 2. 1990 Population. Use the number from CPH-3 Table 1, line 3 (subhead “All persons” under the “Age” heading) to fill in column 2.

Column 3. Land Area (sq. miles). Use the number from CPH-3 Table 1, line 2 (subhead “Square mile” under the “Land Area” heading) to fill in column 3.

Column 4a. Persons in Each Tract. Use the number from CPH-3 Table 19, the 10th line from the bottom (labeled “Persons” under the heading “Poverty Status in 1989,” subhead “Income in 1989 Below Poverty Level”) to fill in column 4a.

Column 4b. Percent Below Poverty Level. Use the number from CPH-3 Table 19, the ninth line from the bottom (labeled “Percent Below Poverty Level,” immediately below the “Persons” line used for 4a) to fill in column 4b. Round this number to the nearest whole number; for example, 34.5 and above is 35 percent.

Note: Do not attempt to calculate the percent below poverty. Use the number from the census table.

Column 5. Special Code (SP/AH/DS/CBD). Enter, if applicable, one of the four codes listed to identify a census tract that is subject to any of the special conditions: Poverty rate exemptions for populations of less than 2,000 (SP); for Alaska and Hawaii (AH); for developable sites (DS); and for Central Business Districts (CBD).

For each census tract that has a population of less than 2,000, enter SP in column 5.

For each census tract that is in Alaska or Hawaii, enter AH in column 5.

For each census tract that contains a developable site, enter DS in column 5.

For each census tract that contains any portion of a Central Business District, enter CBD in column 5.

Central Business Districts are defined by the U.S. Bureau of the Census.

Consult the 1982 Census of Retail Trade, RC82-C-5, Major Retail Centers in Standard Metropolitan Statistical Areas, publication for your State/Metropolitan area for current designation of Central Business Districts. State data centers should have this publication.

Notes



U.S. Department of Housing and Urban Development
Andrew Cuomo, Secretary