

Grant Evaluation Form
Arapahoe County Government
_____ (Dept Code-Year-Number)

Overview

Grant Name Housing Planning Grant Program - Funding Round 3
Grantor Colorado Department of Local Affairs
Amount applied for \$150,000
Application/submission deadline 12/3/25
Does application/proposal require/imply acceptance? No
Office/Department/Division applying Public Works and Community Resources
Grant period (time to expend funds) 2 years
New grant X Renew existing _____ Expand existing _____
Previous grant name and dates, if applicable _____
Federal grant _____ If so, federal agency _____
If so, CFDA #(s) _____
If on grants.gov, Opportunity # _____
State grant X If so, state agency Department of Local Affairs
Are federal funds passed through _____
If so, CFDA #(s) _____
Apply via COGMS online? _____
Other grantor _____

Benefits

What is grant expected to accomplish? Understand County housing needs and develop housing needs assessments (HNAs), housing action plans (LHAPs), and comprehensive plan elements.
How does it align with County and department goals and objectives? _____
Aligns with Public Works and Community Resources goals for increasing affordable housing
How will success be measured Development of a housing needs assessment
What constituency is expected to benefit? Residents of Arapahoe County
New service _____ Existing service _____ Expanded service X
Alternatives to using grant to accomplish this benefit General funds

Cost/Budget

Matching funds
Matching funds required – Cash 25% In-kind _____ Funding source General
FTE's
New FTE's? None Duration _____
If not grant funded, describe funding plan _____
Are benefits covered? _____ How much? _____ If not, plan to cover _____
Describe any potential workman's comp risk _____
If occurred, plans to fund _____
Anticipated unemployment costs when termed _____
Plans to fund unemployment or workman's comp after grant is closed _____
Describe space and equipment available for new FTE _____
Are additional space or equipment costs covered in grant? _____

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Fixed/capital asset

Describe asset None
Estimated dollar amount & how derived _____
Did process of estimating costs meet federal or grant requirements? _____
Specific purchasing requirements _____
Requirements for use of asset _____
Requirements for disposition of asset _____
Plan to replace when expired? ____ When? ____ How? ____ How much? ____
Plan for funding IG rents _____
IT hardware/software _____
Anticipated implementation costs and how funded _____
Anticipated implementation timeline _____ Corroborated with IT? _____
Priority ranking _____
Staff dedicated to implementation _____
Anticipated asset maintenance costs _____ Plan to fund them _____

Advance or reimbursement grant Not discussed in application materials

If reimbursement, how often will requests be filed _____
Is there a time frame to be met after which it becomes nonreimbursable? ____
How plan to meet that deadline _____
How plan to fund nonreimbursable expenditures _____

Allowable costs

Anticipated administration costs None
What are allowable costs for reimbursement _____
If subject to single audit, will grant pay fees? _____
If audit and admin costs are not covered, plans for funding them _____

Compliance Requirements

Does the grant require:

EEOP Not discussed in application materials - Review grant agreement, if funding is received

Drug-free workplace Not discussed in application materials - Review grant agreement, if funding is received

Davis-Bacon Not discussed in application materials - Review grant agreement, if funding is received

Minority & women owned preferences or Historically Underutilized Business (HUBS) purchases Not discussed in application materials - Review grant agreement, if funding is received

Does acceptance of the grant obligate the County to provide goods/services/service levels/standards beyond the grant period or funding? No

If so, describe _____

Plans for funding _____

Other compliance requirements specific to this grant _____

Impact on County Operations

Does the grant require IT support to implement or support? No

Describe plans _____

Describe plans for tracking and reporting Public Works building and code data will be tracked

Requesting Finance to assist in setting up grant tracking system in SAP _____

Describe the training and experience of the staff responsible for the tracking and reporting of this grant Extensive experience with code review

Does the grant require FFM assistance for additional space for FTE or equipment

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Describe plans No

Will the grant require any change in County or department/office policy? No

If so, describe _____

Describe any other potential impact on other departments/offices None

Other Considerations

Is there an automatic renewal in subsequent years? No

Is it a regional grant benefiting more than just Arapahoe County No

If so, describe _____

Is the County acting as fiscal agent? _____

If so, attach narrative describing entities covered, responsibilities, how admin costs are funded, benefits & exposure _____

Are funds being passed through to another agency/partner/subgrantee? No

If so, describe _____

Describe plans to monitor subgrantee compliance _____

Are others participating in costs? _____ How? _____

Are there any other potential liabilities No

Name and title of person authorized/responsible for

Grant application Lizze Loomis and Jason Reynolds

Required reporting Lizze Loomis and Jason Reynolds

Reimbursement requests _____

Plan for approval

Drop-in 11/17

Study Session _____

Dept/Office signature only  Katherine Smith (Nov 6, 2025 09:18:36 MST)

Staff Contacts Involved in Evaluation Process

Dept/Office applying for grant Public Works and Community Resources

Attorney's Office _____

Attorney's Office – Risk Mgmt _____

Facilities & Fleet Management _____

Finance – Grants _____

Finance – Budget _____

Finance – Purchasing _____

HR _____

IT _____

Attachments

List attachments

Grant application form _____

Grant application instructions _____

Specific compliance requirements _____

Other, describe <https://dlg.colorado.gov/housing-planning-grant-program>

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Signature

Grant submitted by

Name Lizze Loomis and Jason Reynolds
Title Division Manager
Elected Official/Department Director/Designee Katherine Smith and Bryan Wiemer
Date 10/29/2025

Reviewed by

County Attorney's Office

Name Tiffanie Bleau
Title Attorney
Date 10/29/2025
Comments _____

Finance Department

Accounting – Grants

Name Gustano Guzman
Title Grant Accountant
Date 11/03/2025
Comments _____

Budget

Name _____
Title _____
Date _____
Comments _____

Purchasing

Name _____
Title _____
Date _____
Comments _____

Grant Evaluation Form - Housing Planning Grant

Final Audit Report

2025-11-06

Created:	2025-11-06
By:	Elizzebeth Loomis (eloomis@arapahoegov.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAA4dr0MTnaAh9ohZon3NWaj4H0bOMjU5wg

"Grant Evaluation Form - Housing Planning Grant" History

-  Document created by Elizzebeth Loomis (eloomis@arapahoegov.com)
2025-11-06 - 4:01:52 PM GMT
-  Document emailed to ksmith@arapahoegov.com for signature
2025-11-06 - 4:02:50 PM GMT
-  Email viewed by ksmith@arapahoegov.com
2025-11-06 - 4:10:06 PM GMT
-  Signer ksmith@arapahoegov.com entered name at signing as Katherine Smith
2025-11-06 - 4:18:34 PM GMT
-  Document e-signed by Katherine Smith (ksmith@arapahoegov.com)
Signature Date: 2025-11-06 - 4:18:36 PM GMT - Time Source: server
-  Agreement completed.
2025-11-06 - 4:18:36 PM GMT