

## Round 3: Application Form

# Local Government Innovation Fund

Step One: Fill out this Application Form in its entirety.

Step Two: Fill out the online submission form and submit your application materials. All supplemental application materials should be combined into one file for submission.

### LGIF: Applicant Profile

<b>Lead Applicant</b>	
<b>Project Name</b>	
<b>Type of Request</b>	
<b>Funding Request</b>	
<b>JobsOhio Region</b>	
<b>Number of Collaborative Partners</b>	

#### Office of Redevelopment

Website: <http://development.ohio.gov/Urban/LGIF.htm>

Email: [LGIF@development.ohio.gov](mailto:LGIF@development.ohio.gov)

Phone: 614 | 995 2292

Lead Applicant		<b>Round 3</b>	
Project Name		Type of Request	

Lead Applicant				
<b>Mailing Address:</b>	Address Line 1			
	Address Line 2			
	City	State	Zip Code	
City, Township or Village			Population (2010)	
County			Population (2010)	
Did the lead applicant provide a resolution of support?		Yes (Attached)	No (In Process)	

Project Contact				
Complete the section below with information for the individual to be contacted on matters involving this application.				
	Project Contact		Title	
<b>Mailing Address:</b>	Address Line 1			
	Address Line 2			
	City	State	Zip Code	
Email Address			Phone Number	

Fiscal Officer				
Complete the section below with information for the entity and individual serving as the fiscal agent for the project.				
	Fiscal Officer		Title	
<b>Mailing Address:</b>	Address Line 1			
	Address Line 2			
	City	State	Zip Code	
Email Address			Phone Number	
Is your organization registered in OAKS as a vendor?		Yes	No	

Section 1  
Contacts

Lead Applicant		<b>Round 3</b>	
Project Name		Type of	

<b>Single Applicant</b>		
Is your organization applying as a single entity?	Yes	No
Participating Entity: (1 point) for single applicants		

<b>Collaborative Partners</b>		
Does the proposal involve other entities acting as collaborative partners?	Yes	No
<p>Applicants applying with a collaborative partner are required to show proof of the partnership with a partnership agreement signed by each partner and resolutions of support from the governing entities. If the collaborative partner does not have a governing entity, a letter of support from the partnering organization is sufficient. Include these documents in the supporting documents section of the application.</p> <p>In the section below, applicants are required to identify population information and the nature of the partnership.</p> <p>Each collaborative partner should also be clearly and separately identified on pages 4-5.</p>		
Number of Collaborative Partners who signed the partnership agreement, and provided resolutions of support.		
Participating Entity: (5 points) allocated to projects with collaborative partners.		

<b>Population</b>		
The applicant is required to provide information from the 2010 U.S. Census information, available at: <a href="http://factfinder2.census.gov/">http://factfinder2.census.gov/</a>		
Does the applicant (or collaborative partner) represent a city, township or village with a population of less than 20,000 residents?	Yes	No
	List Entity	
	Municipality/Township	Population
Does the applicant (or collaborative partner) represent a county with a population of less than 235,000 residents?	Yes	No
	List Entity	
	County	Population
Population: (3-5 points) determined by the smallest population listed in the application. Applications from (or collaborating with) small communities are preferred.		

Section 2 Collaborative Partners

Lead Applicant		<b>Round 3</b>	
Project Name		Type of Request	

**Nature of Partnership (2000 character limit)**

**As agreed upon in the partnership agreement, please identify the nature of the partnership, and explain how the main applicant and the partners will work together on the proposed project.**

Section 2 Collaborative Partners

**List of Partners**

**The applicant applying with collaborative partners (defined in §1.03 of the LGIF Policies) must include the following information for each applicant:**

- **Name of collaborative partners**
- **Contact Information**
- **Population data (derived from the 2010 U.S. Census)**

**If the project involves more than 12 collaborative partners, additional forms are available on the LGIF website.**

Lead Applicant		<b>Round 3</b>		
Project Name		Type of Request		

<b>Collaborative Partners</b>					
Number 1					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Collaborative Partners</b>					
Number 2					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Collaborative Partners</b>					
Number 3					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Collaborative Partners</b>					
Number 4					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Section 2 Collaborative Partners

Lead Applicant		<b>Round 3</b>		
Project Name		Type of Request		

<b>Collaborative Partners</b>					
<b>Number 5</b>					
Address Line 1				<b>Population</b>	
Address Line 2				Municipality /Township	Population
City	State	Zip Code	County	Population	
Email Address				Phone Number	
Resolution of Support	<input type="checkbox"/> Yes <input type="checkbox"/> No			Signed Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No

<b>Collaborative Partners</b>					
<b>Number 6</b>					
Address Line 1				<b>Population</b>	
Address Line 2				Municipality /Township	Population
City	State	Zip Code	County	Population	
Email Address				Phone Number	
Resolution of Support	<input type="checkbox"/> Yes <input type="checkbox"/> No			Signed Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No

<b>Collaborative Partners</b>					
<b>Number 7</b>					
Address Line 1				<b>Population</b>	
Address Line 2				Municipality /Township	Population
City	State	Zip Code	County	Population	
Email Address				Phone Number	
Resolution of Support	<input type="checkbox"/> Yes <input type="checkbox"/> No			Signed Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No

<b>Collaborative Partners</b>					
<b>Number 8</b>					
Address Line 1				<b>Population</b>	
Address Line 2				Municipality /Township	Population
City	State	Zip Code	County	Population	
Email Address				Phone Number	
Resolution of Support	<input type="checkbox"/> Yes <input type="checkbox"/> No			Signed Agreement	<input type="checkbox"/> Yes <input type="checkbox"/> No

Section 2 Collaborative Partners

Lead Applicant		<b>Round 3</b>		
Project Name		Type of Request		

<b>Collaborative Partners</b>					
Number 9					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Collaborative Partners</b>					
Number 10					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Collaborative Partners</b>					
Number 11					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Collaborative Partners</b>					
Number 12					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Section 2 Collaborative Partners

Lead Applicant		<b>Round 3</b>	
Project Name		Type of Request	

<b>Identification of the Type of Award</b>	
<b>Targeted Approach</b>	

**Project Description (4000 character limit)**

Please provide a general description of the project. The information provided will be used for council briefings, program, and marketing materials.

Section 3  
Project Information

Lead Applicant		<b>Round 3</b>	
Project Name		Type of Request	

<b>Past Success</b>	Yes	No
<b>Past Success (5 points)</b>		
Provide a summary of past efforts to implement a project to improve efficiency, implement shared services, coproduction, or a merger. (1000 character limit)		

<b>Scalable/Replicable Proposal</b>	Scalable	Replicable	Both
<b>Scalable/Replicable (10 points)</b>			
Provide a summary of how the applicant's proposal can be replicated by other local governments or scaled for the inclusion of other local governments. (1000 character limit)			

Section 3  
Project Information

<b>Probability of Success</b>	Yes	No
<b>Probability of Success (5 points)</b>		
Provide a summary of the likelihood of the grant study recommendations being implemented. Applicants requesting a loan should provide a summary of the probability of savings from the loan request. (1000 character limit)		

Lead Applicant		<b>Round 3</b>	
Project Name		Type of Request	

<b>Performance Audit Implementation/Cost Benchmarking</b>	Yes	No
<b>Performance Audit/Benchmarking (5 points)</b>		
<p>If the project is the result of recommendations from a performance audit provided by the Auditor of State under Chapter 117 of the Ohio Revised Code or a cost benchmarking study, please attach a copy with the supporting documents. In the section below, provide a summary of the performance audit or cost benchmarking study. (1000 character limit)</p>		

<b>Economic Impact</b>	Yes	No
<b>Economic Impact (5 points)</b>		
<p>Provide a summary of how the proposal will promote a business environment (through a private business relationship) and/or provide for community attraction. (1000 character limit)</p>		

Section 3  
Project Information

<b>Response to Economic Demand</b>	Yes	No
<b>Response to Economic Demand (5 points)</b>		
<p>Provide a summary of how the project responds to substantial changes in economic demand for local or regional government services. The narrative should include a description of the current service level. (1000 character limit)</p>		

# Budget Information

## General Instructions

- Both the Project Budget and Program Budgets are required to be filled out in this form.
- Consolidate budget information to fit in the form. Additional budget detail may be provided in the budget narrative or in an attachment in Section 5: Supplemental Information.

### Project Budget:

- The Project Budget justification must be explained in the Project Budget Narrative section of the application. This section is also used to explain the reasoning behind any items on the budget that are not self explanatory, and provide additional detail about project expenses.
- The Project Budget should be for the period that covers the entire project. The look-back period for in-kind contributions is two (2) years. These contributions are considered a part of the total project costs.
- For the Project Budget, indicate which entity and revenue source will be used to fund each expense. This information will be used to help determine eligible project expenses.
- Please provide documentation of all in-kind match contributions in the supporting documents section. For future in-kind match contributions, supporting documentation will be provided at a later date.

### Program Budget:

- Six (6) years of Program Budgets should be provided. The standard submission should include three years previous budgets (actual), and three years of projections including implementation of the proposed project. A second set of three years of projections (one set including implementation of this program, and one set where no shared services occurred) may be provided in lieu of three years previous if this does not apply to the proposed project.
- Please use the Program Budget Narrative section to explain any unusual activities or expenses, and to defend the budget projections. If the budget requires the combining of costs on the budget template, please explain this in the narrative.

### Return on Investment:

- A Return on Investment calculation is required, and should reference cost savings, cost avoidance and/or increased revenues indicated in the budget projection sections of the application. Use the space designated for narrative to justify this calculation, using references when appropriate.

### For Loan Applications only:

- Using the space provided, outline a loan repayment structure.
- Attach three years prior financial documents related to the financial health of the lead applicant (balance sheet, income statement, and a statement of cash flows).

<b>Lead Applicant</b>		<b>Round 3</b>	
<b>Project Name</b>		<b>Type of Request</b>	

## Project Budget

### Sources of Funds

LGIF Request:

Cash Match (List Sources Below):

Source:	<input style="width: 100%;" type="text"/>

In-Kind Match (List Sources Below):

Source:	<input style="width: 100%;" type="text"/>
Source:	<input style="width: 100%;" type="text"/>
Source:	<input style="width: 100%;" type="text"/>

Total Match:   
Total Sources:

### Uses of Funds

	<u>Amount</u>	<u>Revenue Source</u>
Consultant Fees:	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Legal Fees:	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Other: _____	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Other: _____	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Other: _____	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Other: _____	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Other: _____	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Other: _____	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Other: _____	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Total Uses:   
Local Match Percentage:

\* Please note that this match percentage will be included in your grant/loan agreement and cannot be changed after awards are made.

Local Match Percentage = (Match Amount/Project Cost) \* 100 (10% match required)  
10-39.99% (1 point)      40-69.99% (3 points)      70% or greater (5 points)

**Project Budget Narrative: Use this space to justify expenses (1200 character max).**

Section 4 Financial Information

<b>Lead Applicant</b>		<b>Round 3</b>	
<b>Project Name</b>		Type of Request	

## Program Budget

Actual ___ Projected ___	FY _____	FY _____	FY _____
Expenses	Amount	Amount	Amount
Salary and Benefits			
Contract Services			
Occupancy (rent, utilities, maintenance)			
Training and Professional Development			
Insurance			
Travel			
Capital and Equipment Expenses			
Supplies, Printing, Copying, and Postage			
Evaluation			
Marketing			
Conferences, meetings, etc.			
Administration			
*Other - _____			
*Other - _____			
*Other - _____			
<b>TOTAL EXPENSES</b>			
Revenues	Revenues	Revenues	Revenues
<b>Contributions, Gifts, Grants, and Earned Revenue</b>			
Local Government: _____			
Local Government: _____			
Local Government: _____			
State Government			
Federal Government			
*Other - _____			
*Other - _____			
*Other - _____			
Membership Income			
Program Service Fees			
Investment Income			
<b>TOTAL REVENUES</b>			

Lead Applicant		Round 3
Project Name		Type of Request

## Program Budget

Actual ___ Projected ___	FY _____	FY _____	FY _____
Expenses	Amount	Amount	Amount
Salary and Benefits			
Contract Services			
Occupancy (rent, utilities, maintenance)			
Training and Professional Development			
Insurance			
Travel			
Capital and Equipment Expenses			
Supplies, Printing, Copying, and Postage			
Evaluation			
Marketing			
Conferences, meetings, etc.			
Administration			
*Other - _____			
*Other - _____			
*Other - _____			
<b>TOTAL EXPENSES</b>			
Revenues	Revenues	Revenues	Revenues
Contributions, Gifts, Grants, and Earned Revenue			
Local Government: _____			
Local Government: _____			
Local Government: _____			
State Government			
Federal Government			
*Other - _____			
*Other - _____			
*Other - _____			
Membership Income			
Program Service Fees			
Investment Income			
<b>TOTAL REVENUES</b>			

<b>Lead Applicant</b>		<b>Round 3</b>
<b>Project Name</b>		Type of Request

### Program Budget

Use this space to justify the program budget and/or explain any unusual revenues or expenses (6000 characters max).

#### Section 4: Financial Information Scoring

(5 points) Applicant provided complete and accurate budget information and narrative justification for a total of six fiscal years.

(3 points) Applicant provided complete and accurate budget information and for at least three fiscal years.

(1 point) Applicant provided complete and accurate budget information for less than three fiscal years.

<b>Lead Applicant</b>		<b>Round 3</b>	
<b>Project Name</b>		Type of Request	

## Return On Investment

Return on Investment is a performance measure used to evaluate the efficiency of an investment. To derive the expected return on investment, divide the net gains of the project by the net costs. For these calculations, please use the implementation gains and costs, NOT the project costs (the cost of the feasibility, planning, or management study)--unless the results of this study will lead to direct savings without additional implementation costs. The gains from this project should be derived from the prior and future program budgets provided, and should be justified in the return on investment narrative.

### Return on Investment Formulas:

Consider the following questions when determining the appropriate ROI formula for the project. Check the box of the formula used to determine the ROI for the project. These numbers should refer to savings/revenues illustrated in projected budgets.

Do you expect cost savings from efficiency from the project?

Use this formula: 
$$\frac{\text{Total \$ Saved}}{\text{Total Program Costs}} * 100 = \text{ROI}$$

Do you expect cost avoidance from the implementation of the project/program?

Use this formula: 
$$\frac{\text{Total Cost Avoided}}{\text{Total Program Costs}} * 100 = \text{ROI}$$

Do you expect increased revenues as a result of the project/program?

Use this formula: 
$$\frac{\text{Total New Revenue}}{\text{Total Program Costs}} * 100 = \text{ROI}$$

Expected Return on Investment = \_\_\_\_\_ \* 100 = \_\_\_\_\_

**Return on Investment Justification Narrative:** In the space below, briefly describe the nature of the expected return on investment, using references when appropriate. (1300 character limit)

Expected Return on Investment is:

Less than 25% (10 points)
25%-74.99% (20 points)
Greater than 75% (30 points)

Questions about how to calculate ROI? Please contact the Office of Redevelopment at 614-995-2292 or [lgif@development.ohio.gov](mailto:lgif@development.ohio.gov)

Section 4  
Financial Information

<b>Lead Applicant</b>		<b>Round 3</b>	
<b>Project Name</b>		Type of Request	

## Loan Repayment Structure

Please outline the preferred loan repayment structure. At a minimum, please include the following: the entities responsible for repayment of the loan, all parties responsible for providing match amounts, and an alternative funding source (in lieu of collateral). Applicants will have two years to complete the project upon execution of the loan agreement, and the repayment period will begin upon the final disbursement of the loan funds. A description of expected savings over the term of the loan may be used as a repayment source.

Section 4  
Financial Information

Applicant demonstrates a viable repayment source to support loan award. Secondary source can be in the form of a debt reserve, bank participation, a guarantee from a local entity, or other collateral (i.e. emergency, rainy day, or contingency fund, etc).

Applicant clearly demonstrates a secondary repayment source (5 points)	Applicant does not have a secondary repayment source (0 points)
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<b>Lead Applicant</b>		<b>Round 3</b>	
<b>Project Name</b>		Type of Request	

## Scoring Overview

### Section 1: Collaborative Measures

Collaborative Measures	Description	Max Points		Applicant Self Score
<b>Population</b>	Applicant's population (or the population of the area(s) served) falls within one of the listed categories as determined by the U.S. Census Bureau. Population scoring will be determined by the <b>smallest</b> population listed in the application. Applications from (or collaborating with) small communities are preferred.	5		
<b>Participating Entities</b>	Applicant has executed partnership agreements outlining all collaborative partners and participation agreements and has resolutions of support. (Note: Sole applicants only need to provide a resolution of support from its governing entity.	5		

### Section 2: Success Measures

<b>Past Success</b>	Applicant has successfully implemented, or is following project guidance from a shared services model, for an efficiency, shared service, coproduction or merger project in the past.	5		
<b>Scalable/Replicable Proposal</b>	Applicant's proposal can be replicated by other local governments or scaled for the inclusion of other local governments.	10		
<b>Probability of Success</b>	Applicant provides a documented need for the project and clearly outlines the likelihood of the need being met.	5		

### Section 3: Significance Measures

<b>Performance Audit Implementation/Cost Benchmarking</b>	The project implements a single recommendation from a performance audit provided by the Auditor of State under Chapter 117 of the Ohio Revised Code or is informed by cost benchmarking.	5		
<b>Economic Impact</b>	Applicant demonstrates the project will a promote business environment (i.e., demonstrates a business relationship resulting from the project) and will provide for community attraction (i.e., cost avoidance with respect to taxes)	5		
<b>Response to Economic Demand</b>	The project responds to current substantial changes in economic demand for local or regional government services.	5		

### Section 4: Financial Measures

<b>Financial Information</b>	Applicant includes financial information (i.e., service related operating budgets) for the most recent three years and the three year period following the project. The financial information must be directly related to the scope of the project and will be used as the cost basis for determining any savings resulting from the project.	5		
<b>Local Match</b>	Percentage of local matching funds being contributed to the project. This may include in-kind contributions.	5		
<b>Expected Return</b>	Applicant demonstrates as a percentage of savings (i.e., actual savings, increased revenue, or cost avoidance ) an expected return. The return must be derived from the applicant's cost basis.	30		
<b>Repayment Structure (Loan Only)</b>	Applicant demonstrates a viable repayment source to support loan award. Secondary source can be in the form of a debt reserve, bank participation, a guarantee from a local entity, or other collateral (i.e., emergency fund, rainy day fund, contingency fund, etc.).	5		

**Total Points**

**Automated Timekeeping Feasibility Study Grant Proposal**

Sherman Micsak Moved and Cynthia Walker  
Seconded the motion that the following resolution be adopted:

WHEREAS, the North Coast Council desires to complete a feasibility study of a shared Automated Time and Reporting Solution with other entities in northeast Ohio; and

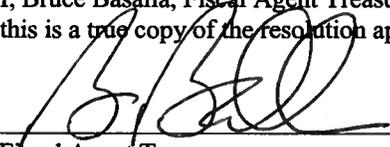
WHEREAS, the study would evaluate the feasibility of a single shared implementation of a Automated Time and Reporting Solution that interfaces with multiple, locally hosted payroll solutions; and

WHEREAS, the North Coast Council will initiate a proposal to the Local Government Innovation Fund as a lead agency; and

RESOLVED, that the Board of Education hereby authorizes and directs the Executive Director to take the appropriate action to implement this Resolution.

16-12 Yeas: Nancy Wingenbach, Robert Mengerink, Sherman Micsak, Allen Sluka, Cynthia Walker  
Nays: None

I, Bruce Basalla, Fiscal Agent Treasurer of the North Coast Council, Cuyahoga County, Ohio, do certify that this is a true copy of the resolution approved by the North Coast Council Board of Directors.

  
\_\_\_\_\_  
Fiscal Agent Treasurer  
North Coast Council  
Cuyahoga County

State of Ohio Local Innovation Grant Fund  
Ohio Department of Development  
77 S. High St. 26<sup>th</sup> Floor  
Columbus, OH 43215-6130

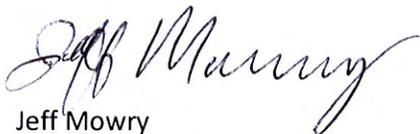
March 1, 2012

This first year under new executive leadership has been a hallmark in Cuyahoga County government. While the County has ushered in a new era of transparency and affected the way government is conducted, the County strives to do more to move the region in terms of the economic development, educational achievement, and the health and well being of our residents. In County Executive Ed FitzGerald's State of the County speech on February 1, 2012, a plan was outlined for the County to develop and offer a set of shared services that could be used across municipalities. The goal of these shared services is to reduce redundancy, create efficiencies and finally achieve the prospect of becoming a cohesive metropolitan area that many have discussed for so long.

To that end, one of the first initiatives we undertake is within the scope of Information Technology. The specific technology and services the County Information Technology (IT) department will examine is the creation of an Enterprise Geographic Information Services (GIS)/Shared Service program. We choose GIS because local governments, both counties and cities are location-focused. The location of land, infrastructure and people and how they relate to each other is critical in most every program and process of local government. We understand that GIS, as a support tool and basic building-block for information systems, can be a great resource not only to local governments, but also in our collective effort to increase communication and data-sharing across municipal boundaries to better understand the region. Creating an Enterprise GIS/Shared Service program allows the County to provide a high quality, non-core and essential set of technology services to the municipalities and agencies that realizes cost savings and a higher quality of services and products they may have otherwise obtained.

The State of Ohio's Local Government Innovation Grant provides an excellent opportunity for the County to continue to work together with various municipalities to develop an Enterprise GIS/Shared Services Feasibility Plan to design this shared service. The County and its partners look forward to working together to bring this plan to fruition and begin a new era of collaboration.

Sincerely,

A handwritten signature in black ink, appearing to read "Jeff Mowry". The signature is fluid and cursive, with the first name "Jeff" and last name "Mowry" clearly distinguishable.

Jeff Mowry  
Chief Information Officer  
Cuyahoga County

**Title: AUTHORIZING THE CLEVELAND MUNICIPAL SCHOOL DISTRICT TO PARTICIPATE IN THE STATE OF OHIO LOCAL GOVERNMENT INNOVATION FUND**

The Chief Executive Officer of the Cleveland Municipal School District presents the following resolution for adoption:

**WHEREAS**, the State of Ohio has established the Local Government Innovation Fund to provide financial assistance to Ohio political subdivisions for planning and implementing projects that are projected to create more efficient and effective service delivery within a specific discipline of government services; and

**WHEREAS**, projects are also expected to facilitate improved business environments and promote community attraction; and

**WHEREAS**, the LGIF program will award up to \$100,000 in grant funds per feasibility study, up to \$100,000 in loan assistance per entity for demonstration projects, and up to \$500,000 in loan assistance for collaborative demonstration projects; and

**WHEREAS**, as a participant in the LGIF process, the Cleveland Municipal School District does not commit to enter into a contract or to participate in any resulting shared service; now, therefore be it

**RESOLVED**, that the Cleveland Municipal School District will participate in the Local Government Innovation Fund grant request participating as an eligible partner; and be it further

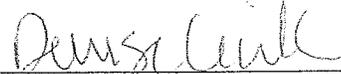
**RESOLVED**, that the Cleveland Municipal School District will participate in the evaluation process to determine the feasibility of shared implementation of systems and services; and, be it further

**RESOLVED**, that the Board of Education hereby authorizes and directs the Chief Executive Officer and/or his designee to take appropriate action to implement this resolution.

**CLEVELAND MUNICIPAL SCHOOL DISTRICT BOARD OF EDUCATION**

By:

  
Eric S. Gordon  
Chief Executive Officer

  
Denise W. Link  
Board of Education Chair

  
John W. Scanlan  
Chief Financial & Administrative Officer

Date: 4-17-12

### **Resolution #2012-02-07.2 - Approval of Grant Proposals**

**Be It Resolved** that the Governing Board of the ESC approves the ESC of Cuyahoga County to submit a \$100,000 grant proposal to the Ohio Department of Development for the Local Government Innovation Fund to conduct a feasibility study on pupil transportation in Cuyahoga County. This study will build on the work already done with five school districts and EduLog in reviewing potential cost savings through the use of transportation software. Other components the LGIF study may review include shared services in maintenance, driver training and employment, transportation purchasing or other recommendations developed by the study group, and;

**Be It Resolved** that the Governing Board of the ESC approves the North Coast Council to submit a \$100,000 grant proposal to the Ohio Department of Development for the Local Government Innovation Fund. The purpose of this proposal is to study the cost savings implementation of Kronos, a single time clock solution that interfaces with individual district or organization payroll systems. While organizations partnering in this proposal may already use Kronos in small proportions, the intent is to look at cost savings of district – wide implementation.

Motion by Anthony Miceli seconded by Carol Fortlage

Ayes: Anthony Miceli, Carol Fortlage, Anton Hocevar, Frank Mahnic, Christine Krol

This is an accurate account of resolution #2012-02-07.2 from the February 16, 2012, Regular Meeting of the Governing Board of the Educational Service Center of Cuyahoga County.



Bruce Basalla, Treasurer

2/27/2012

Date



Dear Mr. Mitchell,

Thank you for inviting OneCommunity to be part of the Cuyahoga County Education Service Center's Time and Reporting Feasibility Study application for the State of Ohio Local Government Innovation Fund.

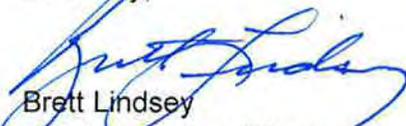
We support the efforts of the North Coast Council to complete a regional feasibility study to determine the benefits of a centrally supported timekeeping and reporting solution. This single shared solution would provide an automated timekeeping solution that would support existing payroll systems.

OneCommunity is a non-profit broadband provider in Northeast Ohio with a long and trusted relationship with several of the other key partners in this feasibility study, most specifically the Cleveland Metropolitan School District and the Cuyahoga County Information Service Center. We strongly support this study knowing that solutions will be quickly instituted due to the high functioning broadband connectivity that these institutions already employ.

Also, as a Northeast Ohio broadband provider, OneCommunity continuously advocates for broadband-powered regional shared services strategies and will support this feasibility study by providing network engineering and technical expertise as well as advocacy for the resulting solution with our other public partners.

We look forward to participating in the feasibility study.

Sincerely,



Brett Lindsey  
Chief Operating Officer

**Cuyahoga County  
Shared Automated Timekeeping Feasibility Study  
Partnership Agreement**

The North Coast Council (NCC) is submitting a grant proposal to the Ohio Department of Development for the Local Government Innovation Fund (LGIF) to conduct a feasibility study on a shared automated timekeeping solution in Cuyahoga County. It is the purpose of this feasibility study to determine the agency needs, the potential cost savings, the increased efficiencies, and the capacity and feasibility of a shared service model for an automated timekeeping solution. This study will build on the work already done with the members of North Coast Council, the Cleveland Municipal School District and Cuyahoga County.

The initial partners in this study will review previous studies, data and effective models in place today as well as industry specific recommendations regarding automated timekeeping solutions. This information will be used to determine potential costs savings or increased efficiencies in a shared solution for school districts and other agencies in Cuyahoga County. From this analysis, the Cuyahoga County feasibility study workgroup will propose one or more shared model(s), with anticipated returns on investment for Cuyahoga County.

The purpose and primary roles of the project partners are listed below:

North Coast Council

- Serve as project coordinator and fiscal manager
- Identify capacity of project partners to deliver a shared services solution
- Identify and approach additional partners as indicated by study group
- Formalize delivery model(s) for proposed shared services models
- Scale model for additional Cuyahoga County school districts and other agencies
- Prepare proposal for LGIF loan application in future funding cycles

Cuyahoga County

- Provide efficiency and cost data on county timekeeping components
- Identify needs/gaps for county timekeeping
- Identify potential barriers to the proposed shared service models

Educational Service Center of Cuyahoga County

- Provide efficiency and cost data on district timekeeping components
- Identify needs/gaps for district timekeeping
- Identify potential barriers to the proposed shared service models

Cleveland Municipal School District

- Provide efficiency and cost data on district timekeeping components
- Identify needs/gaps for district timekeeping
- Identify potential barriers to the proposed shared service models

OneCommunity

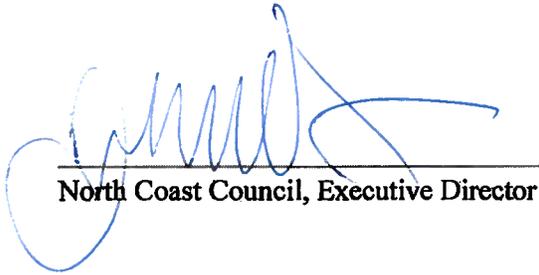
- Provide network engineering and design analysis
- Provide business analysis and supports as needed
- Provide opportunities to scale project to other public sector partners

Other Participating School Districts

- Provide efficiency and cost data on district timekeeping components
- Identify needs/gaps for district timekeeping
- Identify potential barriers to the proposed shared service models

**SIGNATORIES**

We, the collaborative partners on the Shared Automated Timekeeping Feasibility Study, agree to work together in accordance with this Partnership Agreement:



North Coast Council, Executive Director

2-29-12

Date

Cuyahoga County, Executive

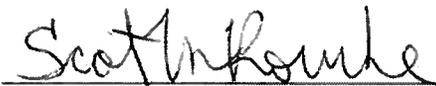
Date

Cleveland Municipal School District, Chief Executive Officer

Date

ESC of Cuyahoga County, Superintendent

Date



2/29/12

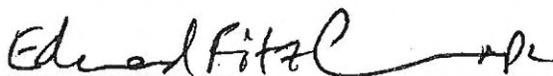
OneCommunity, President

Date

**SIGNATORIES**

We, the collaborative partners on the Shared Automated Timekeeping Feasibility Study, agree to work together in accordance with this Partnership Agreement:

\_\_\_\_\_  
North Coast Council, Executive Director Date



2-28-12

Cuyahoga County, Executive Date

\_\_\_\_\_  
Cleveland Municipal School District, Chief Executive Officer Date



2/29/12

ESC of Cuyahoga County, Superintendent Date

**SIGNATORIES**

We, the collaborative partners on the Shared Automated Timekeeping Feasibility Study, agree to work together in accordance with this Partnership Agreement:

---

North Coast Council, Executive Director Date

---

Cuyahoga County, Executive Date

 4/27/12  
Cleveland Municipal School District, Chief Executive Officer Date

---

ESC of Cuyahoga County, Superintendent Date

## Bent, Nicole

---

**From:** John Mitchell <John.Mitchell@nccohio.org>  
**Sent:** Tuesday, October 23, 2012 3:00 PM  
**To:** lgif  
**Subject:** Cure-Shared Timekeeping and Reporting Proposal  
**Attachments:** LGIFApplicationRound3-Cure.pdf; 492-Resolutions of Support.pdf; 493-Partnership Agreement.pdf

Thank you for the opportunity to provide clarification on our proposal. The following is provided in response to the issues identified in the completeness review letter dated October 9, 2012.

### **491. Return on Investment**

Attached to this message is an updated Round 3 application that provides a clarification in the Program Budget Justification. The following statement was added to the Program Budget Justification.

*If we assume an average combined salary and benefits amount of \$35,000 per payroll processing FTE. The estimated annual salary and benefits costs for 34 payroll processing FTEs is \$1,190,000. Assuming each member realizes a 0.5 FTE savings; the annual savings in payroll processing costs would be \$595,000.*

The Return on Investment Justification Narrative was also updated to provide additional clarification to the return on investment calculation. As noted, the projected ROI of 50% is conservative and likely to be much greater given the potential savings realized by our other partners.

*As noted previously, the estimated annual salary costs for 34 payroll processing FTEs is \$1,190,000. Assuming each NCC member realizes a 0.5 FTE savings; the annual savings in payroll processing costs would be \$595,000.*

*Therefore, for the purposes of determining ROI for this project we assume a total program savings of 595,000 and total program costs \$1,190,000 in payroll processing costs. Based upon some of the preliminary work completed by Cleveland Municipal School District, we believe that a greater ROI is possible. The ROI also does not take into account potential cost savings realized by the Cleveland Municipal School District or the Cuyahoga County Government. The feasibility study will assist us in determining the projects full potential of savings.*

Please reference the attached LGIFApplicationRoun3-Cure.pdf document which is attached.

### **492. Resolutions of Support**

The resolutions of support have been attached to this message in the file 492-Resolutions of Support.pdf.

### **493. Partnership Agreements**

The Partnership Agreements have been attached to this message in the file 493-Partnership Agreement.pdf.

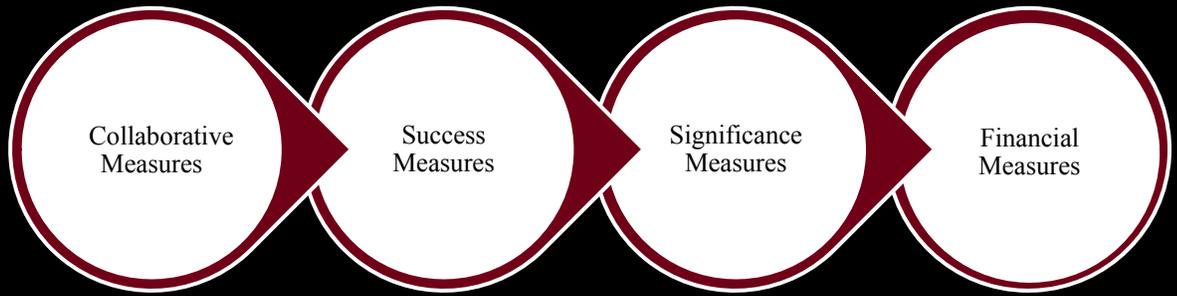
### **494. Total Number of Validated Partners**

The total number of partners participating in this proposal is 5 including, North Coast Council, as supported by the attached resolutions and agreements.

Please contact me if you have any questions or require additional information or justification.

Sincerely,

John W. Mitchell  
Executive Director  
North Coast Council



# Round 3: Application Form

## Local Government Innovation Fund

Step One: Fill out this Application Form in its entirety.

Step Two: Fill out the online submission form and submit your application materials. All supplemental application materials should be combined into one file for submission.

### LGIF: Applicant Profile

<b>Lead Applicant</b>	
<b>Project Name</b>	
<b>Type of Request</b>	
<b>Funding Request</b>	
<b>JobsOhio Region</b>	
<b>Number of Collaborative Partners</b>	

#### Office of Redevelopment

Website: <http://development.ohio.gov/Urban/LGIF.htm>

Email: [LGIF@development.ohio.gov](mailto:LGIF@development.ohio.gov)

Phone: 614 | 995 2292

Lead Applicant		<b>Round 3</b>	
Project Name		Type of Request	

Lead Applicant				
<b>Mailing Address:</b>	Address Line 1			
	Address Line 2			
	City	State	Zip Code	
City, Township or Village			Population (2010)	
County			Population (2010)	
Did the lead applicant provide a resolution of support?		Yes (Attached)	No (In Process)	

Project Contact				
Complete the section below with information for the individual to be contacted on matters involving this application.				
	Project Contact		Title	
<b>Mailing Address:</b>	Address Line 1			
	Address Line 2			
	City	State	Zip Code	
Email Address			Phone Number	

Fiscal Officer				
Complete the section below with information for the entity and individual serving as the fiscal agent for the project.				
	Fiscal Officer		Title	
<b>Mailing Address:</b>	Address Line 1			
	Address Line 2			
	City	State	Zip Code	
Email Address			Phone Number	
Is your organization registered in OAKS as a vendor?		Yes	No	

Section 1  
Contacts

Lead Applicant		<b>Round 3</b>	
Project Name		Type of	

<b>Single Applicant</b>		
Is your organization applying as a single entity?	Yes	No
Participating Entity: (1 point) for single applicants		

<b>Collaborative Partners</b>		
Does the proposal involve other entities acting as collaborative partners?	Yes	No
<p>Applicants applying with a collaborative partner are required to show proof of the partnership with a partnership agreement signed by each partner and resolutions of support from the governing entities. If the collaborative partner does not have a governing entity, a letter of support from the partnering organization is sufficient. Include these documents in the supporting documents section of the application.</p> <p>In the section below, applicants are required to identify population information and the nature of the partnership.</p> <p>Each collaborative partner should also be clearly and separately identified on pages 4-5.</p>		
Number of Collaborative Partners who signed the partnership agreement, and provided resolutions of support.		
Participating Entity: (5 points) allocated to projects with collaborative partners.		

<b>Population</b>		
The applicant is required to provide information from the 2010 U.S. Census information, available at: <a href="http://factfinder2.census.gov/">http://factfinder2.census.gov/</a>		
Does the applicant (or collaborative partner) represent a city, township or village with a population of less than 20,000 residents?	Yes	No
	List Entity	
	Municipality/Township	Population
Does the applicant (or collaborative partner) represent a county with a population of less than 235,000 residents?	Yes	No
	List Entity	
	County	Population
Population: (3-5 points) determined by the smallest population listed in the application. Applications from (or collaborating with) small communities are preferred.		

Section 2 Collaborative Partners

Lead Applicant		<b>Round 3</b>	
Project Name		Type of Request	

**Nature of Partnership (2000 character limit)**

As agreed upon in the partnership agreement, please identify the nature of the partnership, and explain how the main applicant and the partners will work together on the proposed project.

Section 2 Collaborative Partners

**List of Partners**

The applicant applying with collaborative partners (defined in §1.03 of the LGIF Policies) must include the following information for each applicant:

- Name of collaborative partners
- Contact Information
- Population data (derived from the 2010 U.S. Census)

If the project involves more than 12 collaborative partners, additional forms are available on the LGIF website.

Lead Applicant		<b>Round 3</b>	
Project Name		Type of Request	

<b>Collaborative Partners</b>					
Number 1					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Collaborative Partners</b>					
Number 2					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Collaborative Partners</b>					
Number 3					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Collaborative Partners</b>					
Number 4					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Section 2 Collaborative Partners

Lead Applicant		<b>Round 3</b>		
Project Name		Type of Request		

<b>Collaborative Partners</b>					
Number 5					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Collaborative Partners</b>					
Number 6					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Collaborative Partners</b>					
Number 7					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Collaborative Partners</b>					
Number 8					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Section 2 Collaborative Partners

Lead Applicant		<b>Round 3</b>		
Project Name		Type of Request		

<b>Collaborative Partners</b>					
Number 9					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Collaborative Partners</b>					
Number 10					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Collaborative Partners</b>					
Number 11					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Collaborative Partners</b>					
Number 12					
Address Line 1		<b>Population</b>			
Address Line 2		Municipality /Township		Population	
City	State	Zip Code	County	Population	
Email Address		Phone Number			
Resolution of Support		Signed Agreement		<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Section 2 Collaborative Partners

Lead Applicant		<b>Round 3</b>	
Project Name		Type of Request	

<b>Identification of the Type of Award</b>	
<b>Targeted Approach</b>	

**Project Description (4000 character limit)**

Please provide a general description of the project. The information provided will be used for council briefings, program, and marketing materials.

Section 3  
Project Information

Lead Applicant		<b>Round 3</b>	
Project Name		Type of Request	

<b>Past Success</b>	Yes	No
<b>Past Success (5 points)</b>		
Provide a summary of past efforts to implement a project to improve efficiency, implement shared services, coproduction, or a merger. (1000 character limit)		

<b>Scalable/Replicable Proposal</b>	Scalable	Replicable	Both
<b>Scalable/Replicable (10 points)</b>			
Provide a summary of how the applicant's proposal can be replicated by other local governments or scaled for the inclusion of other local governments. (1000 character limit)			

Section 3  
Project Information

<b>Probability of Success</b>	Yes	No
<b>Probability of Success (5 points)</b>		
Provide a summary of the likelihood of the grant study recommendations being implemented. Applicants requesting a loan should provide a summary of the probability of savings from the loan request. (1000 character limit)		

Lead Applicant		<b>Round 3</b>	
Project Name		Type of Request	

<b>Performance Audit Implementation/Cost Benchmarking</b>	Yes	No
<b>Performance Audit/Benchmarking (5 points)</b>		
If the project is the result of recommendations from a performance audit provided by the Auditor of State under Chapter 117 of the Ohio Revised Code or a cost benchmarking study, please attach a copy with the supporting documents. In the section below, provide a summary of the performance audit or cost benchmarking study. (1000 character limit)		

<b>Economic Impact</b>	Yes	No
<b>Economic Impact (5 points)</b>		
Provide a summary of how the proposal will promote a business environment (through a private business relationship) and/or provide for community attraction. (1000 character limit)		

Section 3  
Project Information

<b>Response to Economic Demand</b>	Yes	No
<b>Response to Economic Demand (5 points)</b>		
Provide a summary of how the project responds to substantial changes in economic demand for local or regional government services. The narrative should include a description of the current service level. (1000 character limit)		

# Budget Information

## General Instructions

- Both the Project Budget and Program Budgets are required to be filled out in this form.
- Consolidate budget information to fit in the form. Additional budget detail may be provided in the budget narrative or in an attachment in Section 5: Supplemental Information.

### Project Budget:

- The Project Budget justification must be explained in the Project Budget Narrative section of the application. This section is also used to explain the reasoning behind any items on the budget that are not self explanatory, and provide additional detail about project expenses.
- The Project Budget should be for the period that covers the entire project. The look-back period for in-kind contributions is two (2) years. These contributions are considered a part of the total project costs.
- For the Project Budget, indicate which entity and revenue source will be used to fund each expense. This information will be used to help determine eligible project expenses.
- Please provide documentation of all in-kind match contributions in the supporting documents section. For future in-kind match contributions, supporting documentation will be provided at a later date.

### Program Budget:

- Six (6) years of Program Budgets should be provided. The standard submission should include three years previous budgets (actual), and three years of projections including implementation of the proposed project. A second set of three years of projections (one set including implementation of this program, and one set where no shared services occurred) may be provided in lieu of three years previous if this does not apply to the proposed project.
- Please use the Program Budget Narrative section to explain any unusual activities or expenses, and to defend the budget projections. If the budget requires the combining of costs on the budget template, please explain this in the narrative.

### Return on Investment:

- A Return on Investment calculation is required, and should reference cost savings, cost avoidance and/or increased revenues indicated in the budget projection sections of the application. Use the space designated for narrative to justify this calculation, using references when appropriate.

### For Loan Applications only:

- Using the space provided, outline a loan repayment structure.
- Attach three years prior financial documents related to the financial health of the lead applicant (balance sheet, income statement, and a statement of cash flows).

<b>Lead Applicant</b>		<b>Round 3</b>	
<b>Project Name</b>		<b>Type of Request</b>	

## Project Budget

### Sources of Funds

LGIF Request:

Cash Match (List Sources Below):

Source:	<input style="width: 100%;" type="text"/>

In-Kind Match (List Sources Below):

Source:	<input style="width: 100%;" type="text"/>
Source:	<input style="width: 100%;" type="text"/>
Source:	<input style="width: 100%;" type="text"/>

Total Match:   
Total Sources:

### Uses of Funds

	<u>Amount</u>	<u>Revenue Source</u>
Consultant Fees:	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Legal Fees:	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Other: _____	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Other: _____	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Other: _____	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Other: _____	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Other: _____	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Other: _____	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Other: _____	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Total Uses:   
Local Match Percentage:

\* Please note that this match percentage will be included in your grant/loan agreement and cannot be changed after awards are made.

Local Match Percentage = (Match Amount/Project Cost) \* 100 (10% match required)  
10-39.99% (1 point)      40-69.99% (3 points)      70% or greater (5 points)

**Project Budget Narrative: Use this space to justify expenses (1200 character max).**

Section 4 Financial Information

<b>Lead Applicant</b>		<b>Round 3</b>	
<b>Project Name</b>		Type of Request	

## Program Budget

Actual ___ Projected ___	FY _____	FY _____	FY _____
Expenses	Amount	Amount	Amount
Salary and Benefits			
Contract Services			
Occupancy (rent, utilities, maintenance)			
Training and Professional Development			
Insurance			
Travel			
Capital and Equipment Expenses			
Supplies, Printing, Copying, and Postage			
Evaluation			
Marketing			
Conferences, meetings, etc.			
Administration			
*Other - _____			
*Other - _____			
*Other - _____			
<b>TOTAL EXPENSES</b>			
Revenues	Revenues	Revenues	Revenues
Contributions, Gifts, Grants, and Earned Revenue			
Local Government: _____			
Local Government: _____			
Local Government: _____			
State Government			
Federal Government			
*Other - _____			
*Other - _____			
*Other - _____			
Membership Income			
Program Service Fees			
Investment Income			
<b>TOTAL REVENUES</b>			

Lead Applicant		Round 3
Project Name		Type of Request

## Program Budget

Actual ___ Projected ___	FY _____	FY _____	FY _____
Expenses	Amount	Amount	Amount
Salary and Benefits			
Contract Services			
Occupancy (rent, utilities, maintenance)			
Training and Professional Development			
Insurance			
Travel			
Capital and Equipment Expenses			
Supplies, Printing, Copying, and Postage			
Evaluation			
Marketing			
Conferences, meetings, etc.			
Administration			
*Other - _____			
*Other - _____			
*Other - _____			
<b>TOTAL EXPENSES</b>			
Revenues	Revenues	Revenues	Revenues
Contributions, Gifts, Grants, and Earned Revenue			
Local Government: _____			
Local Government: _____			
Local Government: _____			
State Government			
Federal Government			
*Other - _____			
*Other - _____			
*Other - _____			
Membership Income			
Program Service Fees			
Investment Income			
<b>TOTAL REVENUES</b>			

<b>Lead Applicant</b>		<b>Round 3</b>
<b>Project Name</b>		Type of Request

**Program Budget**

Use this space to justify the program budget and/or explain any unusual revenues or expenses (6000 characters max).

**Section 4: Financial Information Scoring**

- (5 points) Applicant provided complete and accurate budget information and narrative justification for a total of six fiscal years.
- (3 points) Applicant provided complete and accurate budget information and for at least three fiscal years.
- (1 point) Applicant provided complete and accurate budget information for less than three fiscal years.

<b>Lead Applicant</b>		<b>Round 3</b>	
<b>Project Name</b>		Type of Request	

## Return On Investment

Return on Investment is a performance measure used to evaluate the efficiency of an investment. To derive the expected return on investment, divide the net gains of the project by the net costs. For these calculations, please use the implementation gains and costs, NOT the project costs (the cost of the feasibility, planning, or management study)--unless the results of this study will lead to direct savings without additional implementation costs. The gains from this project should be derived from the prior and future program budgets provided, and should be justified in the return on investment narrative.

### Return on Investment Formulas:

Consider the following questions when determining the appropriate ROI formula for the project. Check the box of the formula used to determine the ROI for the project. These numbers should refer to savings/revenues illustrated in projected budgets.

Do you expect cost savings from efficiency from the project?

Use this formula: 
$$\frac{\text{Total \$ Saved}}{\text{Total Program Costs}} * 100 = \text{ROI}$$

Do you expect cost avoidance from the implementation of the project/program?

Use this formula: 
$$\frac{\text{Total Cost Avoided}}{\text{Total Program Costs}} * 100 = \text{ROI}$$

Do you expect increased revenues as a result of the project/program?

Use this formula: 
$$\frac{\text{Total New Revenue}}{\text{Total Program Costs}} * 100 = \text{ROI}$$

Expected Return on Investment = \_\_\_\_\_ \* 100 = \_\_\_\_\_

**Return on Investment Justification Narrative:** In the space below, briefly describe the nature of the expected return on investment, using references when appropriate. (1300 character limit)

Expected Return on Investment is:

Less than 25% (10 points)
25%-74.99% (20 points)
Greater than 75% (30 points)

Questions about how to calculate ROI? Please contact the Office of Redevelopment at 614-995-2292 or [lgif@development.ohio.gov](mailto:lgif@development.ohio.gov)

Section 4  
Financial Information

<b>Lead Applicant</b>		<b>Round 3</b>	
<b>Project Name</b>		Type of Request	

## Loan Repayment Structure

Please outline the preferred loan repayment structure. At a minimum, please include the following: the entities responsible for repayment of the loan, all parties responsible for providing match amounts, and an alternative funding source (in lieu of collateral). Applicants will have two years to complete the project upon execution of the loan agreement, and the repayment period will begin upon the final disbursement of the loan funds. A description of expected savings over the term of the loan may be used as a repayment source.

Section 4  
Financial Information

Applicant demonstrates a viable repayment source to support loan award. Secondary source can be in the form of a debt reserve, bank participation, a guarantee from a local entity, or other collateral (i.e. emergency, rainy day, or contingency fund, etc).

Applicant clearly demonstrates a secondary repayment source (5 points)	Applicant does not have a secondary repayment source (0 points)
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<b>Lead Applicant</b>		<b>Round 3</b>	
<b>Project Name</b>		Type of Request	

## Scoring Overview

### Section 1: Collaborative Measures

Collaborative Measures	Description	Max Points		Applicant Self Score
<b>Population</b>	Applicant's population (or the population of the area(s) served) falls within one of the listed categories as determined by the U.S. Census Bureau. Population scoring will be determined by the <b>smallest</b> population listed in the application. Applications from (or collaborating with) small communities are preferred.	5		
<b>Participating Entities</b>	Applicant has executed partnership agreements outlining all collaborative partners and participation agreements and has resolutions of support. (Note: Sole applicants only need to provide a resolution of support from its governing entity.	5		

### Section 2: Success Measures

<b>Past Success</b>	Applicant has successfully implemented, or is following project guidance from a shared services model, for an efficiency, shared service, coproduction or merger project in the past.	5		
<b>Scalable/Replicable Proposal</b>	Applicant's proposal can be replicated by other local governments or scaled for the inclusion of other local governments.	10		
<b>Probability of Success</b>	Applicant provides a documented need for the project and clearly outlines the likelihood of the need being met.	5		

### Section 3: Significance Measures

<b>Performance Audit Implementation/Cost Benchmarking</b>	The project implements a single recommendation from a performance audit provided by the Auditor of State under Chapter 117 of the Ohio Revised Code or is informed by cost benchmarking.	5		
<b>Economic Impact</b>	Applicant demonstrates the project will a promote business environment (i.e., demonstrates a business relationship resulting from the project) and will provide for community attraction (i.e., cost avoidance with respect to taxes)	5		
<b>Response to Economic Demand</b>	The project responds to current substantial changes in economic demand for local or regional government services.	5		

### Section 4: Financial Measures

<b>Financial Information</b>	Applicant includes financial information (i.e., service related operating budgets) for the most recent three years and the three year period following the project. The financial information must be directly related to the scope of the project and will be used as the cost basis for determining any savings resulting from the project.	5		
<b>Local Match</b>	Percentage of local matching funds being contributed to the project. This may include in-kind contributions.	5		
<b>Expected Return</b>	Applicant demonstrates as a percentage of savings (i.e., actual savings, increased revenue, or cost avoidance ) an expected return. The return must be derived from the applicant's cost basis.	30		
<b>Repayment Structure (Loan Only)</b>	Applicant demonstrates a viable repayment source to support loan award. Secondary source can be in the form of a debt reserve, bank participation, a guarantee from a local entity, or other collateral (i.e., emergency fund, rainy day fund, contingency fund, etc.).	5		

**Total Points**