Ohio Local Government Innovation Fund

Collaborative Measures → Success Measures → Significance Measures → Financial Measures

Round 7: Application Form

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	
Lead Agency	
Project Name	
Type of Request	Loan
Request Amount	
JobsOhio Region	Northeast
Political Subdivision Type Choose one that best descripes your organization	Township
Project Type	Administration
Project Approach	Merger

Ohio Development Services Agency

Website: http://development.ohio.gov/cs/cs_localgovfund.htm

E-mail: LGIF@development.ohio.gov

Phone: 614 | 995 2292

Lead Applicant		Round 7	
Project Name		Type of Request	Loan

Instructions
• Make sure to answer each question appropriately in the space provided, not exceeding the space allowed by the answer box.
• Examples of completed applications are available on the LGIF website, found here: http://development.ohio.gov/cs/cs_localgovfund.htm

Section 1

Contacts

Lead Agency		
Mailing Address:	Name:	
	Street Address:	
	City:	
	Zip:	
In what county is the lead agency located?		
Ohio House District:	Ohio Senate District:	

Project Contact		
Please provide information about the individual who should be contacted regarding this application.		
Mailing Address:	Name:	Title:
	Street Address:	
	City:	
	Zip:	
Email Address:		Phone Number:

Fiscal Agency:		
Please provide information for the entity and individual serving as the fiscal agent for the project.		
Mailing Address:	Fiscal Agency:	
	Fiscal Officer:	Title:
	Street Address:	
	City:	
	Zip:	
Email Address:		Phone Number:

Population		
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	
Does the applicant (or collaborative partner) represent a county with a population of fewer than 235,000 residents	☐ Yes	☐ No
	List Entity	

Single Applicant		
Is your organization applying as a single entity?	☑ Yes	☐ No

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Project Name		Type of Request	Loan

Collaborative Partners		
Does the proposal include collaborative partners?	☐ Yes	☑ No

Applicants applying with collaborative partners are required to show proof of the partnership with a signed partnership agreement and a resolution of support from each of the partner's governing entities. If the collaborative partner does not have a governing entity, a letter of support from the partnering organization is sufficient. These documents must be received by the end of the cure period in order for each entity to count as a collaborative partner for the purposes of this application.

Nature of the Partnership
As agreed upon in the signed partnership agreement, please identify the nature of the partnership with an explanation of how the lead agency and collaborative partners will work together on the proposed project.

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List of Partners
Please use the following space to list each collaborative partner who is participating in the project and is providing BOTH a resolution of support for the Local Government Innovation Fund application and has signed the partnership agreement.

Collaborative Partner # 1	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 2	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 3	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 4	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 5	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 6	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

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Collaborative Partner # 7	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 8	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 9	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 10	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 11	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 12	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 13	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

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Project Information
Provide a general description of the project, including a description of the final work product derived from the grant study or loan implementation project. This information may be used for council briefings, program and marketing materials.

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Project Name		Type of Request	Loan

Project Information				
Has this project been submitted for consideration in previous LGIF rounds?		Yes		No
If yes, in which round(s)?				
What was the project name?				
What entity was the lead applicant?				

Past Success				
Provide a summary of past efforts to implement a project to improve efficiency, implement shared services, coproduction or a merger (5 points).				
Applicant demonstrates Past Success		Yes		No

Scalable				
Provide a summary of how the applicant's proposal can be scaled for the inclusion of other entities (5 points).				
Applicant demonstrates a Scalable project		Yes		No

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Replicable			
Provide a summary of how the applicant's proposal can be replicated by other entities. A replicable project should include a component that another entity could use as a tool to implement a similar project (5 points).			
Applicant demonstrates a Replicable project		Yes	No

Probability of Success			
Provide a summary of the likelihood of the grant study recommendations being implemented. Applicants requesting an implementation loan should provide a summary of the probability of savings from the loan request (5 points).			
Applicant demonstrates Probability of Success		Yes	No

Lead Applicant		Round 7	
Project Name		Type of Request	

Performance Audit/Cost Benchmarking			
If the project is the result of recommendations from a prior performance audit provided by the Auditor of State under Chapter 117 of the Ohio Revised Code, or is informed by a previous cost benchmarking study, please attach a copy with the supporting documents. In the section below, provide a summary of the performance audit findings or cost benchmarking study results (5 points).			
Prior Performance Audit or Cost Benchmarking	Yes	No	

Economic Impact			
Provide a summary of how the proposal will promote a business environment through a private sector partner (5 points) and/or provide for community attraction (3 points).			
Applicant demonstrates Economic Impact	Yes	No	

Lead Applicant			
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Response to Economic Demand				
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 and future expected service level needs (5 points).				
Applicant demonstrates Response to Economic Demand		Yes		No

Section 3

Project Information

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 details may be provided in the budget narrative.

Project Budget:

- The Project Budget should detail expenses related to the grant or loan project.
- 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 additonal 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 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.
- Total Sources must equal Total Uses. Include staff time and other in-kind matches in the Total Uses section of the budget.

Program Budget

- Use the Program Budget to outline the costs associated with the implementation of the program in your community.
- Six 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 changes in expenses and revenues, 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 (ROI)calculation is required, and should reference cost savings, cost avoidance and/or increased revenues indicated in Program Budget sections of the application. The ROI should be calculated over a three-year period. 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 of prior financial documents related to the financial health of the lead applicant (balance sheet, income statement and a statement of cash flows).

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Project Name		Type of Request	Loan

Project Budget

Use this space to outline all sources of funds and the uses of those funds. Both sections should include all funds related to the project, including in-kind match contributions. Use the project budget narrative on the next page to justify the project budget. Indicate the line items for which the grant will be used.

Sources of Funds

LGIF Request:	$1
Cash Match (List Sources Below):	
Source:	
Source:	
Source:	
Source:	
In-Kind Match (List Sources Below):	
Source:	
Source:	
Source:	
Total Match:	$0
Total Sources:	$1

Uses of Funds

	Amount	Revenue Source
Consultant Fees:		
Legal Fees:		
Other:_____		
Other:_____		
Other:_____		
Other:_____		
Other:_____		
Other:_____		
Other:_____		
Other:_____		
Total Uses:	$0	
Local Match Percentage:	0.00%	

* 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)

Section 4

Financial Information

Lead Applicant		Round 7	
Project Name		Type of Request	Loan

Project Budget Narrative: Use this space to justify any expenses that are not self-explanatory.

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Project Name		Type of Request	Loan

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

Lead Applicant		Round 7	
Project Name		Type of Request	Loan

Program Budget

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

Lead Applicant		Round 7	
Project Name		Type of Request	Loan

Program Budget

Use this space to justify your program budget and/or explain any assumptions used for the budget projections. These projections should be based on research, case studies or industry standards and include a thoughtful justification.

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 for at least three fiscal years.
- [x] (1 point) Applicant provided complete and accurate budget information for less than three fiscal years.

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Return On Investment

Return on Investment (ROI)is a performance measure used to evaluate the efficiency of an investment. To derive the expected ROI, divide the net gains of the project by the net costs (for a three-year period). 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.

Return on Investment Formulas:

Consider the following questions when determining the appropriate ROI formula for your project. Check the box of the formula that you are using to determine your ROI. These numbers should refer to savings/revenues illustrated in projected program budgets, and should reflect a three-year period.

Do you expect cost savings from efficiency from your project?

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

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

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

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

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

Do you expect some combination of savings, cost avoidance or increased revenue as a result of your project/program? (Total Gains combines $ Saved, Costs Avoided and New Revenue)

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

Expected Return on Investment = $\frac{\$0}{\$1}$ * 100 = 0.00%

Expected Return on Investment is:

☐ Less than 25% (5 points) ☐ 25%-75% (10 points) ☐ Greater than 75% (15 points)

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

Section 4

Financial Information

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			Loan

Return on Investment Justification Narrative: In the space below, describe the nature of the expected ROI calculation providing justification for the numbers presented in the ROI calculation. This calculation should be based on the savings, cost avoidance or increased revenues shown in the program budgets on the preceeding pages. Use references when appropriate to justify assumptions used for cost projections.

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Magnitude of Project

If the project has an expected ROI of 74.99 percent or less, complete the following calculation. Projects with a Magnitude Factor of 50 or above score (5 points.)

$$\frac{\text{ROI\%} \times \text{Savings Amt}}{1000} = \text{Magnitude Factor}$$

Project has a Magnitude Factor of 50 or above ☐ Yes ☐ No

Cost Savings

This project will decrease specific line items in the exisiting budget. The specific line items should be evidenced by an expected decrease in specific line items for the next three years. In the space below please list the specific line item in the Program Budget section and the total dollar amount saved in the next three years (5 points).

Applicant demonstrates Cost Savings ☐ Yes ☐ No

Core Services

Does the project affect core services in your community? Explain how this project meets the basic needs of your community by providing services for which the lead applicant is primarily responsible (5 points).

Project affects Core Services of the Lead Applicant ☐ Yes ☐ No

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Loan Repayment Structure

Please outline your 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 their 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.

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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Scoring Overview

Collaborative Measures	Description	Max Points		Self Score
Section 1: Collaborative Measures				
Population	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 **smallest** population listed in the application. Applications from (or collaborating with) small communities are preferred.	5		0
Participating Entities	Applicant has executed partnership agreements outlining all collaborative partners and participation agreements and has resolutions of support.	5		1
Section 2: Success Measures				
Past Success	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		0
Scalable	Applicant's proposal can be scaled for the inclusion of other entities.	5		0
Replicable	Applicant's proposal can be replicated by other local governments.	5		0
Probability of Success	Applicant provides a documented need for the project and clearly outlines the likelihood of the need being met.	5		0
Section 3: Significance Measures				
Performance Audit Implementation/Cost Benchmarking	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		0
Economic Impact	Applicant demonstrates the project will promote a business environment and will provide for community attraction.	5		0
Response to Economic Demand	The project responds to current substantial changes in economic demand for local or regional government services.	5		0
Section 4: Financial Measures				
Financial Information	Applicant includes financial information (i.e., service related operating budgets) for the most recent three years and the three-year period following the project.	5		1
Local Match	Percentage of local matching funds being contributed to the project. This may include in-kind contributions.	5		0
Expected Return	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.	15		0
Magnitude Factor	Applicant demonstrates a magnitude factor of 50 or above, based on the ROI percentage and the dollar amount of project gains estimated in the ROI calculation.	5		0
Cost Savings	Applicant demonstrates specific line items in the current budget that will decrease as a result of this project.	5		0
Core Services	Applicant demonstrates that the project affects core services provided in their community.	5		0
Repayment Structure (Loan Only)	Applicant demonstrates a viable repayment source to support loan award.	5		0
			Total Points	2