

# DHCD CHSW - Community Placemaking

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**Maryland Department of Housing and Community Development**

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## **Community Health and Safety Works:**

### **COMMUNITY PLACEMAKING**

The system WILL NOT allow more than one application to be submitted by an applicant.

By completing this application, you certify that the statements and answers within are true and accurate to the best of your knowledge and that you are authorized to apply for these funds on behalf of the applicant.

Applicants will be responsible to comply with any state or federal reporting requirements related to Community Health and Safety Works.

Additionally, DHCD may be required to disclose information about Community Health and Safety Works applicants and awardees to the Board of Public Works and the Maryland General Assembly and may desire to disclose such information to other state officials or their staff, local government officials or their staff, and other lenders and funding sources. DHCD is also required to disclose information in response to a request for information made pursuant to §4-101 et seq. of the Public Information Act of the General Provisions Article, Annotated Code of Maryland.

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### **1) APPLICANT INFORMATION**

Organization Name:

**Mailing Address**

**READ CAREFULLY:** This mailing address MUST be the same as listed on the W-9 submitted with this application. Please carefully review and ensure that these items are correct before submitting.

**For community-based organizations applying with a fiscal sponsor**, enter your organization's mailing address here; you will be prompted later to enter the mailing address of your fiscal sponsor. The mailing address of the fiscal sponsor **MUST** be the same as listed on the fiscal sponsor's W-9 to be submitted with this application.

Street:

Street 2:

City:

State:

Zip:

Web Address:

**Please provide Social Media addresses for:**

Facebook:

Twitter:

Instagram:

**Primary Contact Information:**

Please provide the primary contact for this application.

Name:

Title:

Phone:

Cell Phone:

E-mail Address:

**Secondary Contact Information:**

Please provide a secondary contact for this application.

Name

Title

Phone:

Cell Phone:

E-mail Address:

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**2) Applicant Eligibility**

**To be eligible to apply, an applicant must meet at least one the following criteria:**

- A tax-exempt nonprofit organization based in the state of Maryland; nonprofit organizations will be required to provide an IRS Determination Letter of tax-exempt status
- A community-based organization with a tax-exempt nonprofit fiscal sponsor; community-based organizations with a tax-exempt nonprofit fiscal sponsor will be required to upload 1) the IRS determination letter of their fiscal sponsor; and 2) a letter of support from their fiscal sponsor on letterhead signed by the Executive Director.
- Local government

What category below best describes your organization?

Tax-exempt nonprofit organization

Community-based organization with a tax-exempt nonprofit fiscal sponsor

Local Government

Other

### **3) Eligible Activities & Grant Narrative**

Eligible projects are **community-led** collaborations that engage artists and designers to create and activate lovable and safer spaces for community use. Projects should demonstrate existing engagement with the local community so that community members' voices shape the project goals and design.

Projects should also demonstrate existing engagement, or a willingness to engage, with artists and/or designers to facilitate and inform project design and implementation. Artists and designers may provide creative ways to capture community input.

Community Placemaking projects should incorporate at least these three components:

1. A community engagement process that includes input from community stakeholders that are representative of the demographics of the community served by the project.
2. A design plan that incorporates the community's vision with the support of artists and designers as partners in creating the design plan.
3. A sustainable implementation plan with consideration of ongoing maintenance needs and programming for the activation of the community space.

Applicants can submit requests for projects that are in beginning stages where the engagement and visioning process is still taking shape and for projects that have completed their community engagement and design phases.

If your project is in the beginning stages, the budget should include estimates for a community engagement and design process, if not already underway.

Eligible projects include but are not limited to:

- Art installations, including murals and sculptures
- Performance spaces
- Programming for the activation of community space, such as live music, theater, festivals, markets, cultural exchanges, and dance performances that draw community members into the space
- Seating, trees, planters, shade structures, children's play areas, signage, bike racks, and other site amenities that improve residents/visitors experience in the space
- Lighting design that enhance the atmosphere of the space
- Fences and entry gates that define the boundaries of a community space and encourage its use for positive, community-building activities

Please provide answers for **EACH** of the following:

## **1. Organizational Summary**

### **a. What is your organization's official mission statement and purpose?**

0/250 max characters

### **b. Provide your organization's recent accomplishments (2021 thru 2023) in the areas targeted by this application.**

0/1000 max characters

### **c. Describe how your staff and Board demographically represent the community you serve. Consider demographics broadly including race, language, gender identity, age, socioeconomic status, ability/disability, etc. If your staff and Board do not demographically represent the community you serve, please describe strategies or initiatives that you plan to implement to ensure your staff and Board reflect the community.**

0/1000 max characters

**d. What is your organization's current financial situation? Please describe the organization's ability to continue operations while managing and maintaining projects and activities for which you are requesting funding. Include an explanation about how your organization has managed prior grant awards and tracked grant expenses. If you are working with a fiscal sponsor, please answer this section from their perspective.**

0/1000 max characters

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## **2. Community Conditions**

**a. Describe the location of this project and cite specific crime and safety issues and/or incidents that have impacted the area. Also provide crime statistics related to the violent crime and other illegal activity that you have described.**

0/2500 max characters

### **Maryland Data Sources for Crime Statistics**

Maryland Statistical Analysis Center

Governor's Office of Crime Control and Prevention

Violent Crime & Property Crime by Municipality

Maryland Open Data Portal

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## **3. Project Information**

**a. Provide a summary of your project.**

0/500 max characters

**b. Provide a primary project address. All project addresses must be located within Baltimore City or within the boundaries of a designated Sustainable Community Area**

**elsewhere in the state. Use the DHCD Neighborhood Revitalization Mapper website to identify if the project addresses are located in an eligible area.**

b.1 Does your project have additional addresses?

Yes

No

c. Upload photos of the project site.

d. Is this a new activity or a phase of an ongoing project?

New Activity

Phase

**e. Describe the need to deter crime and/or promote health and safety in the project location. What is the community challenge or need this project seeks to address? What evidence has your organization found that this project will be effective in overcoming the community challenges? Why is this project preferred for the community over other options?**

0/1000 max characters

**f. Describe why this project is important to your organization's strategy to create and activate lovable and safer spaces for community use. In this section, include how this project contributes to creating a more equitable community. Equitable communities are often defined as ones where everyone is included in the full benefits of society, treated with fairness and justice, and empowered to participate fully in social, cultural, and economic life.**

0/1000 max characters

**g. Describe the status of site control for the project and any permits or approvals needed to complete the project. If you have evidence of site control or permits and approvals for your project, please upload below.**

0/1000 max characters

If you have evidence of site control or permits and approvals for your project, please upload here.

***Please note if your project is located on land owned by Baltimore City Recreation and Parks, you must submit a required form and have approval by the submission date. [A link to the form is here.](#)***

***The Baltimore City Department of Transportation (DOT) allows community organizations to implement creative projects in Baltimore City's roadways, sidewalks, alleys, and other areas maintained by DOT. Please***

***visit <https://transportation.baltimorecity.gov/community-led-placemaking-program-information-application> for more information, including how to request traffic calming and how to submit project design and documents for placemaking projects in the right of way.***

Is your project located on land owned by Baltimore City Recreation and Parks?

Yes

No

**h. What is your plan for maintaining this project after the grant period ends.**

0/1000 max characters

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#### **4. Project Results**

**a. List specific, measurable and realistic goals for this project and list the activities you will implement related to those goals. List one goal and corresponding activities in the**



field below, then click "Add Another Goal" to list your goals separately.

0/250 max characters

**b. List the outcomes for this project. Each outcome statement should be specific and measurable and describe changes in knowledge, attitudes, skills, and behaviors that will occur as a result of your project.**

0/250 max characters

**c. How will you track progress and evaluate the anticipated outcomes? List specific metrics.**

0/1000 max characters

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#### **4. Project Engagement**

**a. Describe the level of community engagement and planning that has been completed to date. If this is a new project, explain how community members will be involved in shaping the project. Describe the collaborations and partnerships with artists, cultural organizations and community groups that are or will be involved in the project.**

0/2000 max characters

Will you have one or more partners that will help your organization implement the proposed project?

Yes

No

**List any partners that will help your organization implement the project and describe their role in project implementation.**

**c. If needed, DHCD will offer technical assistance to awardees as they conceive and implement their projects.**

c.1 Do you anticipate needing technical assistance for your project?

Yes

No

**COMMUNITY PLACEMAKING UPLOADS:**

Please upload any plans, studies, community presentations, support letters, mapping or data that you have to support your overall strategy and request for funds. This is not required but is encouraged if the applicant wishes to provide relevant additional information.

**4) USE OF FUNDS**

**a. List separately each item/activity, including the dollar amount, which will be supported by this grant request. Be specific DO NOT write “Misc Expenses” or “Other”.**

The minimum grant request amount is \$35,000 and the maximum grant request amount is \$100,000

|                      | Requested Amount                  |
|----------------------|-----------------------------------|
| Item                 | \$                                |
| <input type="text"/> | <input type="text" value="0.00"/> |
|                      | TOTAL REQUESTED AMOUNT:           |
|                      | \$                                |
|                      | <input type="text" value="0.00"/> |

**b. Budget Narrative: Describe the significant budget line items and how they contribute to addressing the project’s outcomes and the organization’s strategy.**

0/2000 max characters

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## 5) TIMELINE

**a. Complete the table below including dates for key milestones.**

Milestone:

Expected Date of Completion:

MM/DD/YYYY

**b. Describe the timeline milestones and how they contribute to addressing the project's outcomes.**

0/2000 max characters

DHCD Email Opt-in

Opt-in for email communication and updates from The Maryland Department of Housing and Community Development.