

A. Applicant Information

Completed by mdavey@northportfl.gov on 4/2/2026 9:30 AM

Case Id: 31496

Name: City of North Port Greenwood Avenue Sidewalk

Address: 5075 Greenway Drive to , 5900 Greenwood

A. Applicant Information

Please provide the following information.

AGENCY/ORGANIZATION INFORMATION

A.1. Agency/Organization Name

City of North Port

A.2. Agency/Organization Type

City of North Port

A.3. Address

4970 City Hall Boulevard
North Port, FL 34286-4100

A.4. Telephone Number

(941) 429-7000

A.5. Organization Website

City of North Port

A.6. Federal Tax ID Number

59-6072227

A.7. SAM Registration/Unique Entity ID

Z9MLXPDL2AM3

AUTHORIZED OFFICIAL CONTACT INFORMATION

A.8. First Name

Michael

A.9. Last Name

Davey

A.10. Title

Grants Coordinator

A.11. Telephone Number

(941) 468-4644

A.12. Email Address

mdavey@northportfl.gov

B. Organizational Status

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B. Organizational Status

Please provide the following information.

B.1. How long has the Agency/Organization been in business?

67

B.2. How many employees does the Agency/Organization have?

800

B.3. Has there been a change in senior level management (e.g. Executive Director/CEO, Finance Director/CFO) within the past twelve (12) months?

No

B.4. Is the individual primarily responsible for fiscal and administrative oversight of grant awards to the agency/organization familiar with the applicable grants management rules, principles, and regulations include the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR § Part 200)?

Yes

B.4a. Please Explain:

The Grants team, including the grant coordinator for this project, is fully familiar with the stipulated requirements and have successfully applied for and managed CDBG grants in the past.

B.5. Has the agency/organization substantially changed or implemented a new management or software system in areas of personnel, financial, informational technology, etc., within the past twelve (12) months?

No

C. Financial Activity and Experience

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C. Financial Activity and Experience

Please provide the following information.

C.1. Does the agency/organization have personnel policies and procedures governing conflicts of interest and purchasing and procurement? If so, please provide a copy of these procedures.

Yes

C.1a. Website (if applicable)

<https://cityofnorthport.sharepoint.com/sites/Finance>

C.1b. Documentation (if applicable)



Conflict of Interest, Purchasing, and Procurement Policies

Purchasing Procedure Manual.pdf

C.2. Does the agency/organization have purchasing policies that conform with the procurement standards identified in 2 CFR 200.317 through 2 CFR 200.327?

Yes

C.2a. Website (if applicable)

<https://cityofnorthport.sharepoint.com/sites/Finance>

C.2b. Documentation (if applicable)



Conflict of Interest, Purchasing, and Procurement Policies

Purchasing Procedure Manual.pdf

C.3. Does the agency/organization have a financial management system that provides records that can identify the source and application of funds for award-supported activities?

Yes

C.4. Has the agency/organization entered into a financial agreement with Sarasota County where federal, state, and/or local county funds have been issued for services in the last three (3) fiscal years?

Yes

C.4a. Please provide a list of awards

Contract Number	Brief Summary of Services	Amount of Contract
B-23-UC-12-0014	Biscayne Erosion Control	\$325,000.00
B-24-UC-12-0014	Biscayne Erosion Control	\$166,120.00

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B-24-UC-12-0014	Biscayne Sidewalk	\$60,000.00
B-24-UC-12-0014	Hope Park Playground	\$300,000.00
		\$851,120.00

C.5. Has the agency/organization received a federal or state award or subaward to conduct programs similar to these covered under the proposed subaward agreement in the last three (3) fiscal years?

Yes

C.5a. Please provide a list of awards.

Contract Number	Brief Summary of Services	Amount of Contract
B-24-UC-12-0014	Biscayne Sidewalk	\$60,000.00
		\$60,000.00

C.6. Has the agency/organization had to comply with the Single Audit requirements in accordance with 2 CFR § Part 200, Subpart F – Audit Requirements or in accordance with the Florida Single Audit Act within the last two (2) fiscal years? If yes, please provide a copy of the statements for the last three (3) fiscal years.

Yes

C.6a. Please upload

Most Recent Financial Audit *Required

- 2024 Annual Financial Report.pdf
- 2023-annual-comprehensive-report.pdf
- 2022-annual-comprehensive-report.pdf

C.7. Has the agency/organization’s annual financial statements been audited by an independent audit firm within the last three (3) fiscal years? If yes, please provide a copy of the statements for the last three (3) fiscal years.

Yes

C.7a. Please upload

Most Recent Financial Audit *Required

- 2024 Annual Financial Report.pdf
- 2023-annual-comprehensive-report.pdf
- 2022-annual-comprehensive-report.pdf

C.8. If the answer to Question C.6 and C.7 is “Yes”, were there any findings or questioned costs in the last three (3) fiscal years?

No

D. Project Information

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D. Project Information

Please provide the following information.

D.1. Proposed Project Title

Greenwood Avenue Sidewalk Widening

D.2. Type of Project

Construction

D.3. Which of the following activities will the proposed project achieve? (Priority Needs as identified in the Consolidated Plan):

- Rehabilitation of Affordable Housing
- Production of Affordable Housing
- Housing Assistance and Supportive Services
- Mental and Behavioral Health Services
- Senior Facilities and Services
- Child Care Facilities and Services
- Health Care Facilities and Services
- Neighborhood Improvements
- Homeless Housing and Services
- Homeless Outreach and Case Management
- Water/Sewer Improvements
- Parks/Recreation or Community Facilities
- Special Needs Facilities and Services
- Public Services

D.4. Total Amount of CDBG Funds Requested

\$305,000.00

D.5. Total Estimated Project Cost:

\$908,709.00

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D.6. Will additional funding sources be used for this project?

Yes

D.6a. Source of Additional Funds and Amounts, if applicable:

Source of Funds	Amount
PW Budget	\$603,709.00
	\$603,709.00

D.7. Physical Location of Proposed Project:

5075 Greenway Drive to
5900 Greenwood Avenue
North Port, FL 34287

D.8. What National Objective does this project satisfy? (Check all that apply):

- Benefiting low- and moderate-income persons
- Preventing or eliminating blight
- meeting other community development needs having a particular urgency because existing conditions pose a serious and immediate threat to the health or welfare of the community, and other financial resources are not available to meet such needs.

D.9. Area Benefit

Census Tract	Block Group	Total Population	Low/Mod Population	% Low/Mod Population
27.37	3	1600	928	58.50%
Total		1,600	928	58.50%

D.10. Does this Project Conform to LMI Benefit Standards for Grant?

Yes

E. Project Summary

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E. Project Summary

Please provide the following information.

E.1. Summary of the Project.

For all applications: Describe how your project/program will meet a priority need in the County's 5-Year Consolidated Plan. Provide a program narrative for general public understanding about the proposed project/service.

For Public Service applications only: Is this project a new service being provided or an improvement of a service already being provided?:

The Greenwood Avenue Sidewalk Widening Project directly advances priorities identified in the Sarasota County Five-Year Consolidated Plan by improving public infrastructure in a predominantly low- to moderate-income (LMI) area. By widening the existing sidewalk, the City will enhance pedestrian safety, accessibility, and mobility for residents who rely on walking for daily activities, including access to schools, transit, employment, and essential services. The project supports the Consolidated Plan's emphasis on neighborhood revitalization, equitable infrastructure investment, and improved quality of life in underserved communities. Additionally, the improvements promote ADA accessibility and safer multimodal transportation options, addressing disparities in infrastructure conditions often present in LMI neighborhoods.

E.2. Community Impact.

For all applications: Describe the need or justification for this project. Include demand and location of similar services and also include an explanation of what input citizens have had in identifying the need/project:

The need for the Greenwood Avenue Sidewalk Widening Project is driven by documented safety, accessibility, and equity deficiencies within a predominantly low- to moderate-income (LMI) service area. The existing sidewalk is substandard in width and condition, limiting safe pedestrian passage and failing to adequately accommodate individuals with disabilities, families with strollers, and residents who rely on walking as a primary mode of transportation. Citizen input has consistently identified pedestrian safety and infrastructure improvements as a priority. Community feedback obtained through public meetings, neighborhood engagement, and input processes associated with local planning efforts has emphasized the need for safer walkability, improved accessibility, and investment in underserved neighborhoods.

E.3. Project Timeframe:

For Public Facilities and Improvement applications: List project-specific milestones and planned dates of accomplishment including but not limited to: bid, design, construction, completion, etc.

For Public Service applications: List project-specific outcomes and planned dates of accomplishment including but not limited to: proposed number of unduplicated beneficiaries, whereby each household is counted one time for the fiscal year, regardless of the number of times assisted (Person, Household, etc.)

Please note: Information listed below will become part of the Subrecipient Agreement if project is approved for

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funding.

Date	Description
06/01/2027	Design complete or or before this date
06/01/2027	Project bid published on or before this date
01/03/2028	Contractor selected on or before this date
04/03/2028	Work to begin on or before this date
09/29/2028	Work to begin on or before this date

E.4. What activities are involved in the project? (Select all that apply)

- Acquisition (including refinance) of real property
- Leasing
- Maintenance
- Repair/Improvement/Rehabilitation
- New construction/Reconstruction
- Demolition
- Disposition
- Removal of architectural barriers
- Soft costs or other non-physical activities (e.g. planning, services, administration, predevelopment costs)
- Public/Social Services
- Other

E.5. Description of Budget. Provide a budget narrative that identifies how the project/service/activity will be accomplished. The Project Budget must include all funding sources (including leveraged funds) that are being used for the proposed project/service; not just the funding being requested.

Include the resources that will be used for the project prior to reimbursement, any potential funding concerns, completeness of budget given, and estimates used. Backup documentation for the budget amounts and associated contracts and statements should be available upon request.

This project requires \$908,709 for the construction portion. Potential award from the grant is \$305,000. Remaining cost to the city of \$603,709 will be budgeted for FY28 out of Road and Drainage funds.

F. Required Documents

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F. Required Documents

Please provide the following information.

Articles of Incorporation *Required

2026 CDBG Application Placeholder.docx

Conflict of Interest, Purchasing, and Procurement Policies

Purchasing Procedure Manual.pdf

Copies of Executed Agreements for Committed or Secured Funds at Time of Application *Required

2026 CDBG Application Placeholder.docx

Florida Annual Report (Sunbiz.org) *Required

2026 CDBG Application Placeholder.docx

Most Recent Financial Audit

2024 Annual Financial Report.pdf

2023-annual-comprehensive-report.pdf

2022-annual-comprehensive-report.pdf

Official Correspondence

***No files uploaded*

Organization Chart *Required

City Org Chart 2026.pdf

Proof of Current 501(c)(3) Status

***No files uploaded*

Proof of General Liability Coverage

***No files uploaded*

W-9

W-9 (2026) signed.pdf

Submit

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Submit

Please provide the following information.

The signature below certifies that I am an Authorized Representative approved by the Agency's Board of Directors to enter into this agreement and that the applicant will conduct the proposed activity in the location, time, and manner within the budget presented. It certifies that the proposed activity addresses one of the priorities as contained in the Sarasota County 5-Year Consolidated Plan.

The applicant certifies that the CDBG funds will be used in the manner described and will be used only to reimburse those eligible costs described in the approved budget and any other type of funds presented in the budget, will be obtained and used for the proposed project.

Name

Michael J Davey

Title

Grants Coordinator

Signature

Michael J. Davey Grants Coordinator

Electronically signed by mdavey@northportfl.gov on 4/3/2026 12:16 PM