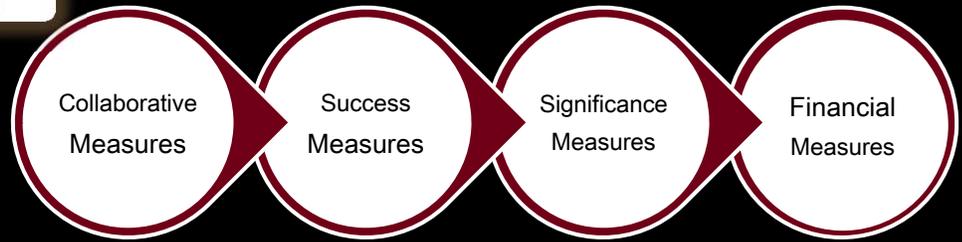




**Ohio**  
**Local Government**  
 Innovation Fund



## Round 5: 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	
Request Amount	
<a href="#">JobsOhio Region</a>	
Number of Collaborative Partners (including lead agency)	
Project Approach	
Project Type	



**Development  
 Services Agency**

Website: [http://development.ohio.gov/cs/cs\\_localgovfund.htm](http://development.ohio.gov/cs/cs_localgovfund.htm)

E-mail: [LGIF@development.ohio.gov](mailto:LGIF@development.ohio.gov)

Phone: 614 | 995 2292

<b>Lead Applicant</b>		<b>Round 5</b>	
<b>Project Name</b>		<b>Type of Request</b>	

Instructions	
<ul style="list-style-type: none"> <li>• Make sure to answer each question appropriately in the space provided, not exceeding the space allowed by the answer box.</li> <li>• Examples of completed applications are available on the LGIF website, found here:  <a href="http://development.ohio.gov/cs/cs_localgovfund.htm">http://development.ohio.gov/cs/cs_localgovfund.htm</a> </li> </ul>	

Lead Agency			
Mailing Address:	Name:		
	Street Address:		
	City:		
	Zip:		
In what county is the lead agency located?			
<table border="1"> <tr> <td><a href="#">Ohio House District:</a></td> <td><a href="#">Ohio Senate District:</a></td> </tr> </table>		<a href="#">Ohio House District:</a>	<a href="#">Ohio Senate District:</a>
<a href="#">Ohio House District:</a>	<a href="#">Ohio Senate District:</a>		

Section 1  
Contacts

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:	

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 less than 235,000 residents?	Yes	No
	List Entity	

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

<b>Lead Applicant</b>		<b>Round 5</b>	
<b>Project Name</b>		<b>Type of Request</b>	

**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.

Section 2  
Collaborative Partners

<b>Lead Applicant</b>		<b>Round 5</b>	
<b>Project Name</b>		<b>Type of Request</b>	

**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:

Section 2 Collaborative Partners

<b>Lead Applicant</b>		<b>Round 5</b>	
<b>Project Name</b>		<b>Type of Request</b>	

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:

Section 2 Collaborative Partners

<b>Lead Applicant</b>		<b>Round 5</b>	
<b>Project Name</b>		<b>Type of Request</b>	

**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.

Section 3

Project Information

<b>Lead Applicant</b>		<b>Round 5</b>	
<b>Project Name</b>		<b>Type of Request</b>	

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

Section 3

Project Information

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

<b>Lead Applicant</b>		<b>Round 5</b>	
<b>Project Name</b>		<b>Type of Request</b>	

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

Section 3  
Project Information

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

<b>Lead Applicant</b>		<b>Round 5</b>	
<b>Project Name</b>		<b>Type of Request</b>	

<b>Performance Audit/Cost Benchmarking</b>		
<p>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).</p>		
Prior Performance Audit or Cost Benchmarking	Yes	No

Section 3  
Project Information

<b>Economic Impact</b>		
<p>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).</p>		
Applicant demonstrates Economic Impact	Yes	No

<b>Lead Applicant</b>		<b>Round 5</b>	
<b>Project Name</b>		<b>Type of Request</b>	

<b>Response to Economic Demand</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 and future expected service level needs (5 points).</p>		
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 detail may be provided in the budget narrative or in an attachment

#### 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 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 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 (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 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 calculation is required, and should reference cost savings, cost avoidance and/or increased revenues indicated in Program Budget 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).

Lead Applicant		Round 5	
Project Name		Type of Request	

**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, and indicate the line items for which the grant will be used.

Sources of Funds

LGIF Request:

Cash Match (List Sources Below):

Source:	<input type="text"/>

In-Kind Match (List Sources Below):

Source:	<input type="text"/>
Source:	<input type="text"/>
Source:	<input type="text"/>

Total Match:

Total Sources:

Uses of Funds

	Amount	Revenue Source
Consultant Fees:	<input type="text"/>	<input type="text"/>
Legal Fees:	<input type="text"/>	<input type="text"/>
Other: _____	<input type="text"/>	<input type="text"/>
Other: _____	<input type="text"/>	<input type="text"/>
Other: _____	<input type="text"/>	<input type="text"/>
Other: _____	<input type="text"/>	<input type="text"/>
Other: _____	<input type="text"/>	<input type="text"/>
Other: _____	<input type="text"/>	<input type="text"/>
Other: _____	<input type="text"/>	<input type="text"/>
Other: _____	<input type="text"/>	<input 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)

Section 4  
Financial Information

<b>Lead Applicant</b>		<b>Round 5</b>	
<b>Project Name</b>		<b>Type of Request</b>	

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

Section 4  
Financial Information

Lead Applicant		Round 5	
Project Name		Type of Request	

**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 - _____			
<b>TOTAL EXPENSES</b>			
Revenues	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			
<b>TOTAL REVENUES</b>			

Lead Applicant		Round 5	
Project Name		Type of Request	

**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 - _____			
<b>TOTAL EXPENSES</b>			
Revenues	Revenues	Revenues	Revenues
Contributions, Gifts, Grants, & Earned Revenue			
<i>Local Government:</i> _____			
<i>Local Government:</i> _____			
<i>Local Government:</i> _____			
<i>State Government</i>			
<i>Federal Government</i>			
*Other - _____			
*Other - _____			
*Other - _____			
<i>Membership Income</i>			
<i>Program Service Fees</i>			
<i>Investment Income</i>			
<b>TOTAL REVENUES</b>			

Lead Applicant		Round 5
Project Name		Type of Request

**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 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 5</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 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 budgets.

Do you expect cost savings from efficiency from your project?

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

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

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

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

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

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: 
$$\frac{\text{Total Gains}}{\text{Total Program Costs}} * 100 = \text{ROI}$$

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

Expected Return on Investment is:

Less than 25% (10 points)
25%-75% (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 5</b>	
<b>Project Name</b>		<b>Type of Request</b>	

Return on Investment Justification Narrative: In the space below, describe the nature of the expected return on investment, 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 preceding pages. Use references when appropriate to justify assumptions used for cost projections.

Section 4  
Financial Information

Lead Applicant		Round 5	
Project Name		Type of Request	

**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.

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)
--	---

Lead Applicant		Round 5	
Project Name		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</b>	Applicant's proposal can be scaled for the inclusion of other entities.	5		
<b>Replicable</b>	Applicant's proposal can be replicated by other local governments.	5		
<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 promote a 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		

<b>Total Points</b>				
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AGREEMENT FOR FEASIBILITY STUDY OF  
A MERGER/CONSOLIDATION OF THE CITY  
OF CANAL FULTON AND LAWRENCE  
TOWNSHIP POLICE DEPARTMENTS

WHEREAS, The Council of the City of Canal Fulton, Ohio and the Trustees of Lawrence Township, Stark County, Ohio wish to study the feasibility of a merger or consolidation of the City of Canal Fulton Police Department and the Lawrence Township Police Department, and

WHEREAS, CDJ Consulting has provided a proposal and cost analysis for a feasibility study, and

WHEREAS, Funds for such feasibility studies are available from the Local Government Innovation Fund, and

WHEREAS, the City of Canal Fulton and Lawrence Township, desire to apply for a grant from the Local Government Innovation Fund,

THEREFORE, The Council of the City of Canal Fulton and the Lawrence Township Trustees agree to examine the issues of merger and/or consolidation and agree to apply for a grant from the Local Government Innovation Fund for a feasibility study of a merger or consolidation of the City of Canal Fulton and Lawrence Township Police Departments.

CITY OF CANAL FULTON, OHIO

BY: *Richard M. Hurlburt - Mayor*

*Paul J. ...*

LAWRENCE TOWNSHIP, STARK COUNTY, OHIO

BY: *Jeffrey ...*

\_\_\_\_\_

APPROVED BY: *Steve ...*  
*Lawrence Township*

APPROVED BY: *[Signature]*  
*4/30/2012*

**JANUARY 23, 2012 MINUTES**

MOTION BY MR. STEVENS TO PASS RESOLUTION 2012-032 TO APPROVE CHIEF BRINK TO DO A FEASIBILITY STUDY WITH POLICE CHIEF DOUG SWARTZ FROM CANAL FULTON TO FORM A POLICE DISTRICT, 2<sup>ND</sup> MR. KAMPH, ROLL CALL, MR. KAMPH - YES, MR. STEVENS - YES, MR. HARDGROVE - YES.

**MARCH 5, 2012 MINUTES**

MOTION BY MR. HARDGROVE TO PASS RESOLUTION 2012-74 THAT THE FEASIBILITY STUDY WITH THE CITY OF CANAL FULTON AT A COST NOT TO EXCEED \$5,000 SHALL BE PAID FOR OUT OF THE POLICE DISTRICT FUND, 2<sup>ND</sup> MR. STEVENS, ROLL CALL, MR. STEVENS - YES, MR. HARDGROVE - YES, MR. KAMPH - YES.

Tammy Charlson, Clerk-of-Council

ATTEST: *Tammy Charlson*

RICHARD HARBAUGH, Mayor

*Richard Harbaugh*

SECTION 2: This Resolution is hereby determined to be an emergency measure, the immediate passage of which is necessary for the preservation of the public peace, health, safety, and welfare of the City of Canal Fulton, such emergency arising from the imminent filing deadline for applications wherefore this Resolution shall take effect and be in full force immediately upon its passage.

SECTION 1: The City of Canal Fulton agrees to apply for a grant from the Local Government Innovation Fund for a feasibility study of a merger or consolidation of the City of Canal Fulton and Lawrence Township Police Departments.

NOW THEREFORE, BE IT RESOLVED BY THE COUNCIL OF THE CITY OF CANAL FULTON, OHIO, THAT:

WHEREAS, The City of Canal Fulton, Ohio wishes to study the feasibility of a merger or consolidation of the City of Canal Fulton Police Department and the Lawrence Township Police Department, and cost analysis for a feasibility study, and WHEREAS, Funds for such feasibility studies are available from the Local Government Innovation Fund, and WHEREAS, the City of Canal Fulton desires to apply for a grant from the Local Government Innovation Fund, and WHEREAS, the Council of the City of Canal Fulton and the Lawrence Township Trustees have jointly agreed in principle to examine the issues of merger and/or consolidation,

UNDER SUSPENSION OF THE RULES A RESOLUTION BY THE COUNCIL OF THE CITY OF CANAL FULTON TO APPLY FOR A GRANT FROM LOCAL GOVERNMENT INNOVATION FUND FOR A FEASIBILITY STUDY OF A MERGER/CONSOLIDATION OF THE CITY OF CANAL FULTON AND LAWRENCE TOWNSHIP POLICE DEPARTMENTS AND DECLARING AN EMERGENCY.

Resolution No. 3-12 Passed February 21, 2012

RECORD OF RESOLUTIONS

RECORD OF RESOLUTIONS

Dayton Legal Bank, Inc., Form No. 30055

Resolution No.	3-1a	Passed	<i>John Wright</i> 2012
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I, Tammy Charlson, Clerk-of-Council of the City of Canal Fulton, Ohio, do hereby certify that this is a true and correct copy of Resolution 3-12, duly adopted by the Council of the City of Canal Fulton, on the date of 2-2-12. 2012, and that publication of the foregoing Resolution was duly made by posting true and correct copies thereof at five of the most public places in said corporation as determined by Council as follows: Post Office, Public Library, Giant Eagle Supermarket, Heritage Square Pharmacy, and entrances to Council Chambers each for a period of fifteen days, commencing on the 22 day of February 2012.

*Tammy Charlson*  
 Tammy Charlson, Clerk-of-Council

SBF/bp

5-8