

MIFFLIN COUNTY  
FFY 2026

COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM  
PROJECT SUMMARY



**INSTRUCTIONS:**

Mifflin County Commissioners are accepting proposals for use of FFY 2026 Community Development Block Grant funds. Interested parties should complete and submit this Project Summary Form to Carol Kearney High, at [ckhigh@seda-cog.org](mailto:ckhigh@seda-cog.org). A CDBG Project Development Workshop and Public Hearing will be scheduled for spring 2026.

Questions should be addressed to Carol Kearney High, Project Coordinator, Community Development Program, SEDA-Council of Governments, 201 Furnace Road, Lewisburg, PA 17837, (570) 524-4491.

**APPLICANT NAME:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

**PROJECT TITLE:** \_\_\_\_\_

**ESTIMATED COST:** \$ \_\_\_\_\_ *Attach Engineer's Estimate of Probable Cost.*

**CDBG FUNDS REQUESTED:** \$ \_\_\_\_\_

**OTHER FUNDS:** Amount and Source of revenues other than CDBG.

Committed: \$ \_\_\_\_\_

Pending: \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

*All funding must be secured or in the process of being secured. Projects lacking sufficient funding or a plan to fully fund the project will be ranked lower when considered for funding.*

**TIME SCHEDULE:**

Estimate duration of project, critical start or finish dates, and any other relevant time frames.

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***Attach Schedule including timeframe for engineering/design, permitting, and construction.***

**PROJECT NATIONAL OBJECTIVE (Choose one):**

**LOW TO MODERATE INCOME BENEFIT (LMI)**

Project will benefit an area with 51% or greater low to moderate income persons.

Number of households served by project \_\_\_\_\_

***Attach a map showing the boundaries of the project location and service area.***

***Attach a list of all occupied residential addresses in the project service area. Commercial, industrial and vacant properties must be identified.***

***Applicant will be required to conduct, with guidance by SEDA-COG, an income survey of all households in the project service area to determine percentage of LMI persons benefiting from the project. This process will be reviewed during the workshop.***

***Projects may also qualify as benefit to LMI persons by Census data. If you feel your project benefits an entire municipality or Census Block Group, please contact SEDA-COG to discuss prior to submission of your Project Summary Form.***

**OR**

Project will benefit 100% LMI persons through income eligibility determination for participation.

**OR**

Project benefits a specific group deemed presumed benefit (check all that apply).

<input type="checkbox"/> Elderly	<input type="checkbox"/> Homeless Persons
<input type="checkbox"/> Severely Disabled	<input type="checkbox"/> Illiterate Adults
<input type="checkbox"/> Abused Children	<input type="checkbox"/> Persons w/Aids
<input type="checkbox"/> Battered Spouses	<input type="checkbox"/> Migrant Farm Workers

**OR**

**ELIMINATION OF SLUM/BLIGHT**

Project will eliminate blight on an area or spot basis.  
(example – demolition of a condemned property)

**OR**

**URGENT NEED**

Project will eliminate an urgent threat to health and safety.

***Urgent need projects must be in response to a declared disaster and meet several other criteria. Your project will not qualify under this National Objective unless it is in response to a disaster declaration from the Governor.***

SEDA-COG will assist you in determining if your project meets one of these National Objectives.

**WATER AND SEWER RATES:** (if a water and/or sewer system project, please provide)

Monthly Water Rate \$\_\_\_\_\_ Monthly Sewer Rate \$\_\_\_\_\_

#### **PROBLEM STATEMENT**

Explain the problem in terms of magnitude and duration. Identify the cause of the problem.  
Attach any citations or other documentation.

#### **SOLUTION**

Explain the problem solution, what you propose to do, and how this action addresses the problem cause.