

Surveyor Agreement Form

Community: Village of Caldwell

County: Noble County

Benefit Area: Village-Wide

I, the undersigned, when conducting a survey of the above-listed benefit area, agree to:

- 1.) Use the following standard language --

My name is Samantha Ramage, Village Clerk-Treasurer. I am working with Village of Caldwell to collect data needed to complete an application for a community development grant. To do this, we must conduct a survey of the area. The information gathered by the survey will be confidential and only will be viewed by the local program administrator and the funding agency. The survey only requires you to indicate your approximate total household annual income (before taxes) for the current year and the number of persons residing in your household. Are you willing to participate in the survey?

- 2.) Use the applicant's prescribed survey methodology to randomly and evenly sample the entire benefit area;
- 3.) Use the **Confidential Income Survey** form and keep the information collected confidential; and
- 4.) Report information collected exactly as the respondents indicated.

Name

Signature

Date

Samantha Ramage

Samantha Ramage 7-23-18

Why this is needed? The Village is under a NPDES permit by EPA to fix their CSO's in their sewer. EPA gave the Village a time table and broke the project into sections of importance. In order to keep the project feasible and not have to increase sewer rates, grant funds are needed. The Village is applying to Community Development Block Grant – Residential Public Infrastructure Funds in the amount \$750,000. In order to be successful the Village needs to fill out income surveys. A certain % is needed to show that the Village meets the Low-Moderate Income. Please help us with the grant. Any questions please call me or Erin Begue, Funding Administrator at 330-339-6676. Sincerely, Samantha Ramage.

Confidential* Income Survey

Community: _____ County: _____

Benefit Area: _____

Address of Household _____

Total Number of Household Members (include yourself, spouse, children, etc.): _____

Income Range of Household
(Total gross annual income of all persons)
Check the box below that corresponds to your
household's income range:

Income Limit Ranges**			
\$0.00	-	\$34,400	<input type="checkbox"/>
\$34,401	-	\$39,300	<input type="checkbox"/>
\$39,301	-	\$44,200	<input type="checkbox"/>
\$44,201	-	\$49,100	<input type="checkbox"/>
\$49,101	-	\$53,050	<input type="checkbox"/>
\$53,051	-	\$57,000	<input type="checkbox"/>
\$57,001	-	\$60,900	<input type="checkbox"/>
\$60,901	-	\$64,850	<input type="checkbox"/>
\$64,851	-	Up	<input type="checkbox"/>

For Local Community Development Block Grant Administrators Use Only

Date of Survey: _____

Name of Surveyor: _____

LMI Qualified: Yes No No Response***

* Information is "confidential" in that it is intended for use only by the local government staff administering this program and state agency personnel responsible for program oversight and that information and records will be released as permitted by state and federal law, pursuant to written request made by authorized persons in conformance with the Ohio Revised Code.

** The Section 8 income limits are available on the Ohio Development Services Agency's Affordable Housing [web page](#), under 'Data' on the left sidebar menu.

*** A good faith effort must be made to collect information from the "no response" household.