Elowsky, Denise (Treasury)

From:	Maxine Murray <mmurray@cityofflint.com>
Sent:	Friday, October 31, 2014 4:27 PM
To:	TreasRevenueSharing
Subject:	Financially Distressed Cities, Villages, and Townships Application- Water Main Leak Detection Survey and Condition Assessment
Attachments:	Water Main Leak Detection Application 103114.pdf

Good afternoon:

Please find attached the Water Main Leak Detection Survey and Condition Assessment Project application from the City of Flint.

Thank you.

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Maxine Murray
Executive Assistant to
Mayor Dayne Walling
Darnell Earley, Emergency Manager
1101 S. Saginaw Street
Flint, MI 48502
810.237.2035 Telephone
810.766.7218 Fax

Application Due Date: October 31, 2014

Financially Distressed Cities, Villages, and Townships Application (FY 2015)

Issued under authority of 2014 Public Act 252.

PART 1: APPLICANT INFORMATION

1. Applicant Name	2. Applicant Local Unit Code
City of Flint	252040
3. Applicant FEIN	**4. Applicant County**
38-6004611	Genesee

5. Mailing Address	6. City	7. State	8. ZIP Code
1101 S. Saginaw St.	Flint	MI	48502

PART 2: PROPOSAL OVERVIEW

9. Proposal Title
Water Main Leak Detection Survey and Condition Assessment

10. Estimated Start Date	11. Estimated Completion Date
04/15/2015	06/30/0215
12. Estimated Total Proposal Cost	**13. Grant Amount Requested**
$ 900,000.00	$ 900,000.00

14. Additional Local Units. If Participating in a Shared Service Project (include county and local unit code). Attach letters of support from each of the participating local units.
See attached.

15. Is the applicant(s) willing to devote appropriate resources and time to this proposal?

☒ Yes ☐ No If no, explain why the applicant(s) is unable to devote appropriate resources and time to the proposal.

PART 3: PROPOSAL CONTACT INFORMATION

Note: The proposal contact individual should be a vital part of the grant proposal and will be the Michigan Department of Treasury's contact.

16. Contact Name	17. Contact Title
Howard Croft	Director, Department of Public Works
18. Contact Telephone Number	**19. Contact Fax Number**
(810) 237-2043	(810) 766-7218

20. Contact E-mail Address
hcroft@cityofflint.com

21. Contact Entity Name
City of Flint

PART 4: CONDITIONS OF PROBABLE FINANCIAL DISTRESS

22. Indicate the conditions affecting the applicant that indicate probable financial distress (check all that apply and attach proof of existence for each condition checked).

☐ 1. The governing body or the chief administrative officer of the city, village or township has requested a preliminary review. The request shall be in writing and shall identify the existing or anticipated financial conditions or events that make the request necessary.

☐ 2. The state financial authority has received a written request from a creditor with an undisputed claim that remains unpaid 6 months after its due date against the city, village, or township that exceeds the greater of $10,000.00 or 1% of the annual general fund budget of the city, village, or township, provided that the creditor has notified the city, village or township in writing at least 30 days before the creditor's request to the state financial authority of the creditor's intention to submit a written request.

☐ 3. The state financial authority has received a petition containing specific allegations of financial distress signed by a number of registered electors residing within the city's, village's, or township's jurisdiction equal to not less than 5% of the total vote cast for all candidates for governor within the city's, village's, or township's jurisdiction at the last preceding election at which a governor was elected. The petition shall not have been filed within 60 days before any election of the city, village, or township.

☐ 4. The state financial authority has received a written notification that the city, village, or township has not timely deposited its minimum obligation payment to the city's, village's, or township's pension fund, as required by law.