



# Illinois Department of Commerce & Economic Opportunity

## Uniform Application for State Grant Assistance

### Agency Completed Section

1. Type of Submission ☐ Pre-Application  
☒ Application  
☐ Changed / Corrected Application
2. Type of Application ☒ New  
☐ Continuation (i.e. multiple year grant)  
☐ Revision (modification to initial application)

3. Date/Time Received By State (Completed by State Agency upon Receipt of Application)

4. Name of Awarding State Agency

Department of Commerce and Economic Opportunity

5. Catalog of State Financial Assistance (CSFA) Number

6. CSFA Title

Catalog of Federal Domestic Assistance (CFDA)

☒ Not Applicable (No federal funding)

7. CFDA Number

8. CFDA Title

9. CFDA Number

10. CFDA Title

Additional CFDA  
Number, if required

Additional CFDA  
Title, if required

### Funding Opportunity Information

11. Funding Opportunity Number

12. Funding Opportunity Title

Competition Identification ☒ Not Applicable

13. Competition Identification Number N/A

14. Competition Identification Title N/A

### Applicant Completed Section

### Applicant Information

15. Legal Name (Name used for DUNS registration and grantee pre-qualification) County of Lake

16. Common Name (DBA) Lake County

17. Employer/Taxpayer identification number (EIN, TIN) 36-6006600

18. Organizational DUNS Number 175689330

19. SAM Cage Code 62D33

20. Business Address  
(Address 1)  
(Address 2)  
(City), (State), (zip - 4)  
600 W. Winchester Rd,  
Libertyville, IL, 60048

### Applicant's Organizational Unit

21. Department Name Lake County Division of Transportation

22. Division Name N/A

Applicant's Name and Contact Information for Person to be Contacted for **Program** Matters involving this Application.

23. First Name Mike

24. Last Name Klemens

25. Suffix

26. Title Manager of Transportation Planning

27. Organizational Affiliation Employee

28. Telephone Number (847) 377-7400

29. Fax Number

30. E-mail Address mklemens@lakecountyil.gov

Applicant's Name and Contact Information for Person to be Contacted for **Business/Administrative Office** Matters involving the Application.

31. First Name Mike

32. Last Name	Klemens
33. Suffix	
34. Title	Manager of Transportation Planning
35. Organizational Affiliation	Employee
36. Telephone Number	(847) 377-7400
37. Fax Number	
38. E-mail Address	mklemens@lakecountyil.gov

**Areas Affected**

39. Areas Affected by the Project (cities, counties, state-wide, add attachments e.g. maps)	Round lake Beach, Round Lake Park, Avon township
40. Legislative and Congressional District of Applicant	IL House Districts: 51, 52, 57, 58, 59, 60, 61, 62, and 64 Senate Districts: 26, 29, 30, 31, and 32
41. Legislative and Congressional Districts or Program Project	IL House Districts: 31 Senate Districts: 10

**Applicant's Project**

42. Description Title of Applicant's Project	Hainesville Road Improvement Project ( Washington Street to Rollins Road)
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43. Proposed Project Term	Start Date	09/08/2026
	End Date	12/22/2027

44. Estimated Funding (Include all that apply)	<input type="checkbox"/> Amount Requested from the State	\$518,000.00
	<input type="checkbox"/> Applicant Contribution (e.g., in kind, matching)	\$18,638,002.00
	<input type="checkbox"/> Local Contribution	
	<input type="checkbox"/> Other Source of Contribution	
	<input type="checkbox"/> Program Income	
	Total Amount	\$19,156,002.00

Applicant Certification:

By signing this application, I certify (1) to the statements contained in the list of certifications\* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances\* and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil or administrative penalties. (U.S. Code, Title 18, Section 1001)

(\*) The list of certification and assurances, or an internet site where you may obtain this list is contained in the Notice of Funding Opportunity. If a NOFO was not required for the award, the state agency will specify required assurances and certifications as an addendum to the application.

☒ I Agree

Authorized Representative

45. First Name

46. Last Name

47. Suffix

48. Title

49. Telephone Number

50. Fax Number

51. E-mail Address

52. Signature of Authorized Representative

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53. Date Signed

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**Illinois**  
**Department of Commerce**  
& Economic Opportunity

DCEO Use Only:

Application #: \_\_\_\_\_

Grant #: \_\_\_\_\_

# GRANT APPLICATION PROJECT NARRATIVE

*Office of Grants Management*

**Applicant Legal Name:** County of Lake

(Name used for DUNS registration and grantee pre-qualification)

**Applicant GATA ID#:** 675514

**Applicant UEI # from SAM.gov:** HCF3DJMKBLV9

## SECTION 1: SCOPE OF WORK

1. **PROJECT TITLE:** Hainesville Road Improvement Project ( Washington Street to Rollins Road)

- A. **Description of Scope of Work** (Please use the space below to describe what you intend to do with these specific Grant funds. *For clarity, "specific Grant funds" is defined as the amount of money that has been appropriated to your entity for this project.* This must include a detailed narrative description of all activities which will be funded by the grant (e.g., land, property, easement, right-of-way acquisition; construction/renovation activities [including all ADA compliance covered by the project]; equipment; development/delivery of programs and services [including administrative activities]; or other activities.) This information will be included in the Grant Agreement as the Scope of Work.
- B. **Description of Overall Project** (Please use the space below to describe the overall project which would include any additional funding. For clarity, "overall project" is defined as any work outside of the "specific Grant funds" in Question 1A necessary to complete the project (e.g., in Question 1A above, you listed electrical wiring under "specific Grant funds" and below you would list a description of the the overall project which is a complete renovation to a building to include flooring, HVAC, complete roof tear off and replacement, cabinetry, plumbing, design and engineering, landscaping, environmental remediation, and construction management oversight, etc.) This information will be included in the Grant Agreement as the Scope of Work.

The path contrsucted with DCEO Grant funds will be included within a larger project. The overall Hainesville Road Improvement from Washingtons Street to Rollins Road will widen the roadway from two lanes to three lanes with a continuous bi-directional turn lane to improve traffic flow and safety. In addition to roadway improvements the project includes closed drainage on the west side, a new sidewalk, new off road shared -useuse path, and ADA facility improvements throughout the entire corridor. The bike path will connect to existing regional trail systems and serve as part of the planned Millennium Trail, improving access and continuity for non-motorized users across Lake County. It also includes drainage, paving, and safety enhancements to modernize the corridor and improve access for all users. The combined

improvements will enhance mobility, reduce congestion, and provide safer multimodal connections for Round Lake Beach and Round Lake Park residents.

2. Project Location - (**Must** provide an electronic/digital photo of project location). If work is taking place at more than one address, please list **ALL** addresses.

Address Hainesville Road from Rollind Road to Washington Street City Round Lake beach, Round Lake Park County Lake County Zip Code + 4 60073+

If the property is being improved, is the property owned by the grantee? ☒ Yes ☐ No, or leased by the grantee? ☐ Yes ☒ No

**NOTE: Purchase of Real Property.** If permitted by the Award Budget and scope of activities provided in this Agreement, a Grantee may use the Grant Funds during the Award Term for the costs associated with the purchase of real property (as defined by 2 CFR 200.1) either through the use of reimbursement or advanced funds as permitted in Exhibit C of this Agreement for the following purposes and consistent with the Grantor's bondability guidelines and 2 CFR 200:

- (a) Cash payment of the entirety or a portion of the real property acquisition;
- (b) Cash Payment of a down payment for the acquisition;
- (c) Standard and commercially reasonable costs required to be paid at the acquisition closing (*i.e.*, closing costs); or
- (d) Payments to reduce the debt incurred by Grantee to purchase the real property.

**Non-governmental entities must complete questions 3, 4 and 5. All other entities, skip to question 6.**

3. Your Organization Location Information

- a) Address of your organization's headquarters?
- b) How many total branches/service locations does your organization have (including your headquarters)?
- c) What geographic area(s) does your organization serve? (could be county, city, neighborhood, etc.)

4. Your Organization

- a) What is your organization's mission statement?
- b) What are the primary goals of your organization?

5. Your Participants

- a) Describe any eligibility criteria for participation in your program(s) (*i.e.*, income level, age, employment status, etc.).
- b) Describe how participants are identified or recruited, or describe who refers participants to your organization for services.
- c) If services cannot be provided to all that apply, describe the manner in which participants are selected (*i.e.*, standardized testing; first-come, first-served).

- d) State the costs to participants for these programs and services, and specify whether a sliding scale (i.e. cost for services is reduced or waived, based on income or ability to pay) is enacted.

## 6. Public Purpose

- a) What is the public purpose of the proposed project?

The Hainesville Rd improvement project aims to enhance safety, mobility, and accessibility for all roadway users along the corridor between Washinton Street and Rollins Road. By widening the roadway from two lanes to three lanes and including a continuous bi - directional turn lane, the project will reduce congestion and improve traffic flow. The addition of a closed drainage system, a new sidewalk, and a shared-use bike path supports Lake County's goals for Complete Streets, ensuring safe equitable transportation options for motorists, bicyclists, and pedestrians. These improvements will improve connectivity between residential areas, schools, and commercial destinations with Round Lake Beach and Round Lake Park.

- b) Why is this proposed project necessary?

The existing two-lane cross-section along Hainesville Road experiences traffic delays, turning conflicts, and limited accommodations for non-motorized users. Drainage issues and the absence of continuous pedestrian and bicycle facilities create safety and accessibility concerns. The proposed project addresses these gaps by adding a center turn lane to minimize crash potential, upgrading the drainage infrastructure to reduce flooding. Constructing ADA compliant sidewalks and bike paths to improve the multimodal connectivity and enhance the user experience. The improvements are essential to support the projected growth and safety in the corridor, align with the regional transportation and safety goals, and provide a safer and more reliable corridor for all users.

- c) What is the expected benefit of this proposed project (*i.e., city will no longer be on IEPA restricted status list; unemployed persons will receive job training, etc.*)?

The Hainesville Road Improvement Project will enhance safety, mobility and multimodal connectivity along this corridor. Expanding from two to three lanes with a continuous bi-directional turn lane will reduce congestion and improve traffic flow and reduce crashes by removing turning traffic out of travel lanes. The addition of closed drainage will address existing flooding and maintenance issues. The funds are exclusively used for new sidewalk and bike path facilities that will provide safe, accessible routes for pedestrians and bicyclists in compliance with ADA standards. Overall, the project will improve roadway operations, reduce crash potential, pedestrian and bicyclist vulnerability, support regional mobility, and encourage active transportation options within the Round Lake Beach and Round Lake Park communities.

## 7. Public Benefit

- a) Estimate the number of persons to benefit or be served by the proposed project.

Based on bicycle count data, Hainesville Road currently averages approximately 2,330 total bike trips per year, with adjacent regional connections at Rollins Road (north end) averaging 3,500 annual trips and Washington Street (south end) averaging 6,700 annual trips. Despite the absence of dedicated bicycle facilities along Hainesville Road, there is already notable usage on both ends of the corridor. With the construction of the proposed path, it is anticipated that bicycle and pedestrian activity will at least double or triple over time, providing a safer, continuous connection between the existing regional trail segments.

- i. State the percentage of current or projected participants who are disadvantaged or low-income.

The Hainesville Road Improvement Project is located within one mile of two census tracts in Lake County identified as disadvantaged. These tracts have a combined population of approximately 4,868 residents out of an estimated 37,794 people living within a one-mile radius of the project area. Therefore, about 13% of the population expected to benefit from this project are residents of disadvantaged or low-income communities.

- ii. State the percentage of participants who receive (or *will receive*) services at no cost or a reduced fee.

N/A

8. Has your organization secured all necessary federal, state and local permits and approvals to proceed with this project? ☐ Yes ☒ No

If *no*, please identify permits/approvals to be obtained and provide a reasonable, estimated timetable to secure such permits/approvals.

1. Army Corps NWP13 - Linear Transportation Projects
2. Lake County Stormwater Management Commission Watershed Development Permit
3. NPDES Permit for Construction Activities

All the permits are estimated to be obtained by April 2026

9. If grant funds are to be utilized to make capital improvements to real property structures/land) **that your organization does not own**, please provide a copy of the lease or other agreement (i.e., easements, rights-of-way, etc.) between your organization and the property owner that will allow your organization to continue to use the improved premises, for an appropriate length of time, consistent with applicable state law and rules.

\* Lease must be for a *minimum* of ten (and preferably at least fifteen) years into the future, not counting available term extensions identified within the lease.

Grant funds will not be utilized for the acquisition of property. The Hainesville Road shared use path requires the acquisition of 35 parcels. All property acquisitions are being funded with local funds and will be conducted in accordance with applicable state and federal right-of-way requirements.

10. If the project involves the purchase of land or building(s), you must respond to items a) through e) below and attach supplementary explanatory materials as needed.

- a) Does your organization have an executed contract for the purchase/acquisition of the land/building in question? ☐ Yes ☐ No

If *no*, when do you expect to have an executed contract?

- b) Provide at least one appraisal conducted by a neutral third-party prior to closing – and as close to the closing date as possible – as an estimate of the property's fair market value. The appraisal documentation must be submitted to the Department as soon as available, and preferably prior the actual closing date.

- c) If your organization is a governmental entity, is it acquiring the land/building through an outright purchase, or through eminent domain/condemnation proceedings? ☐ Yes ☐ No



If acquiring through eminent domain/condemnation, when do you **realistically** expect to finalize the acquisition?

- d) Is your organization aware of any existing (or reasonably anticipated) legal proceedings such as zoning issues, objections of nearby property owners, etc., relating to the proposed use of the land/building being purchased with grant funds? ☐ Yes ☒ No

If yes, please attach a detailed explanation.

- e) Provide the name, address, phone number and email address (if applicable) of the individual or entity from which the land/building(s) is/are being purchased. If multiple owners, please provide this information for each.

#### 11. Local Opposition

- a) Do you anticipate any opposition to this project? ☐ Yes ☒ No

If yes, please describe:

#### 12. Other Funding Sources *(In addition to these Grant Funds) This section must match the Additional Funding sections in the Budget template (Excel file), the Uniform Application, and must align with the Overall Project Working Cost Estimate.*

- a) Are other funds necessary to complete the **overall project** (of which this grant is just one component)? ☒ Yes ☐ No

If yes, please indicate the source, status and amount of those funds below in c) Sources of Funding. **This information MUST correlate with your answers to question 1 on page 1.**

- b) Sources of Funding *(Do NOT include the specific Grant funds which this application is for when calculating additional funding.) This must include any other State Grant funding that is for the same project, including any past, present, or anticipated Grant funds.*

FUNDING SOURCES	Approved/Secured	Pending	Not Yet Applied For	If Funds Not Yet Approved/Secured, Provide Estimated Date.	Overall Project – see page 1 of project narrative, question 1.
<b>Federal Funds</b> (list)					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$
<b>Other State Funds</b> (list funds from <b>any</b> state source /program)					
DCEO	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$ 518000.00
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$
<b>Other Funds</b>					

(list your organization's funds, bank and other loans, fundraising, donations, etc.)					
Motor Fuel Tax- County Option	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$ 8377931.00
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$
RTA 1/4% Sales Tax	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$ 10260171.00
<b>TOTALS</b>					\$ 19156002.00

13. Description of Tasks (Please itemize major steps required for project completion as they relate to how these specific Grant funds will be utilized.)

BRIEF TASK DESCRIPTION	ESTIMATED COMPLETION DATE (MM/DD/YYYY)
<b>Task 1.</b> Construct Storm Sewer and Storm Structures that are underneath or crossing proposed path	4/12/2027
<b>Task 2.</b> Earth Excavation and Grading	5/12/2027
<b>Task 3.</b> Laying Aggregate Base Course, 6"	6/12/2027
<b>Task 4.</b> Paving Hot-Mix Asphalt Surface Course, 3"	7/12/2027
<b>Task 5.</b>	
<b>Task 6.</b>	
<b>Task 7.</b>	
<b>Task 8.</b>	

## SECTION 2: PROJECTED EMPLOYMENT IMPACT (FTE VALUE TABLE) — SEE INSTRUCTIONS SECTION 2

		Created Positions in FTE Categories				Retained Positions in FTE Categories			
		Column A	Column B	Column C	Column D	Column E	Column F	Column G	Column H
		Permanent Full Time	Permanent Part Time	Temporary Full Time	Temporary Part Time	Permanent Full Time	Permanent Part Time	Temporary Full Time	Temporary Part Time
Row 1 (To be completed by applicant)	# of positions in each FTE category (A - H)								
Row 2	Auto calculation of FTE subtotals	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Row 3		Auto Calculation: Created FTEs:	0.00						
Row 4		Auto Calculation: Retained FTEs:	0.00						
Row 5		Auto Calculation: Permanent Full Time Jobs Created:	0.00						
Row 6		Auto Calculation: Permanent Full Time Jobs Retained:	0.00						
Row 7 (cell to be completed by applicant)		Other anticipated employment impacts of DCEO grant:				NOTE: The numbers in this table should not include workers directly related to or performing the construction of your project.			

### SECTION 3: PROGRAMMATIC RISK ASSESSMENT QUESTIONS

#### ➤ **Financial Stability**

- a) How significant are these specific Grant funds in relation to your organization's overall budget?  
The specific grant funds represent approximately \$518,000 of the total \$19 million project cost. These funds are a contribution toward construction of bike path. The project is also supported by additional local funding sources to ensure financial stability and project delivery.
- b) Is the entirety of funding necessary to complete this overall project diversified across multiple sources including your entity's own funds, fundraising, endowments, etc., or is this grant funding the only source of funds for the project?  
Yes. The overall project funding is diversified across multiple local sources, including County Option Motor Fuel Tax, RTA 14% Sales Tax, in addition to the specific grant funds.

#### ➤ **Ability to effectively implement requirements**

##### a) History of Performance

- Has your organization successfully performed the same or substantially the same type of grant activities in the last 3 years, or is this the first time performing such activities?  
Lake County Division of Transportation has a strong record of successfully managing state and federal grant projects. In the past several years, the County has completed projects funded through programs such as CMAQ, TAP-L, HSIP, and ITEP. The department follows all IDOT and FHWA requirements and ensures that projects are completed on time and within budget. LCDOT also maintains clear procedures for financial tracking, reporting, and coordination with partner agencies. This experience demonstrates our ability to effectively manage and deliver grant-funded projects.

##### b) Key Staff

- Does your organization's key existing staff have experience with the same or substantially the same type of activities as those to be covered by this grant? If so, how many years of that experience do they have?  
Lake County DOT's key staff have extensive experience managing transportation projects funded through state and federal programs. Staff members regularly coordinate with IDOT, FHWA, and regional agencies for grant-funded work, including CMAP, TAP-L, HSIP, and ITEP programs. The core project management, planning, and engineering staff each have between 8 to 20 years of experience delivering similar projects and ensuring compliance with grant requirements.

##### c) Capacity

- If this grant is for a programmatic (non-capital) purpose, is adequate staffing planned to allow these specific grant activities to be completed?  
N/A - This grant is for capital project activities, not programmatic work.
- If this grant is for a programmatic (non-capital) purpose, will the grant funds be less than 25% of your organization's budget?  
N/A - The request is for capital project work.
- If this grant is for a programmatic (non-capital) purpose, will the grant activities require scaling up (50% of staffing) or is a major (50% or more) part of your organization's overall budget?  
N/A - The grant does not require additional staffing or scaling up.

- If this grant is for a programmatic (non-capital) purpose, does your organization have to scale up significantly (more than 100% increase in staffing/resources) in order to perform the grant activities to be completed?  
N/A – The grant activities will be carried out by existing staff as part of regular capital project delivery.
- If this grant is for a programmatic (non-capital) purpose, does your organization have the ability to track personnel time applied to the grant activities to be completed?  
N/A - LCDOT has established procedures to track staff time, project costs, and funding sources for all grant-related activities in compliance with county and IDOT requirements.

➤ **External Partnerships**

- a) If this grant is for a programmatic (non-capital) purpose, how dependent is your organization on external partners (through contracts, procurements, or subgranting) to meet program goals and performance for the activities to be covered by this grant?  
N/A – This is a capital project, not a programmatic grant. For capital projects, LCDOT manages the work internally with support from qualified consultants or contractors selected through County procurement processes.
- b) If the answer to that question was 'Yes', does your organization have experience working with the external partner(s)?  
N/A
- c) If this grant is for a programmatic (non-capital) purpose, does your organization acknowledge that it is responsible for the performance of any sub-recipient(s) or other external partner(s) and must ensure adequate monitoring accordingly?  
N/A

➤ **Reporting**

a) Reporting History

- Has your organization submitted financial and programmatic reporting in a timely manner and as required, for prior grant awards it has received (always, sometimes, or never)?  
\* *If this would be your organization's first grant award this question would not be applicable (N/A)*

Lake County Division of Transportation has a strong history of accurate and timely reporting for all state and federal grant programs. Staff regularly prepare and submit progress reports, reimbursement requests, and required documentation in accordance with IDOT and FHWA standards. LCDOT maintains organized recordkeeping and financial tracking systems to ensure all reporting requirements are met.

b) Reporting Capacity

- Has someone been designated to oversee performance reporting for the activities which are intended or coverage via this grant? Is there segregation of duties to ensure accurate and validated reporting?  
Performance reporting will be overseen by the LCDOT Planning and Programming Division, under the supervision of the Manager of Transportation Planning (Mike Klemens). Financial tracking and reporting are reviewed separately by the LCDOT Finance team to ensure accuracy and proper documentation.
- Are staff who will be preparing the reports familiar with program/project requirements, deliverables, and outcomes for the activities to be covered by this grant?

Yes

- Are there mechanisms in place to ensure data accuracy and integrity for reporting related to the activities to be covered by this grant?

Yes

## SECTION 4: ADDITIONAL INFORMATION

### A. PROJECT START DATE

1. Has work on this project started? Y Yes ☐ No ☐
2. If work on the project has started, is that work being paid for via the use of these specific Grant funds? (This would include the first date that any Design and Engineering work on this project started if being paid for via the use of these specific Grant funds.)  
Yes ☐ No ☐
3. If work on this project has started, what was the first date work began? (This would include the first date that any Design and Engineering work on this project started if being paid for via the use of these specific Grant funds.) Month  Date  Year
4. If work for this project has not yet started, do you have an anticipated date that work on the project will begin? Month 09 Date 08 Year 2026
5. If work on the project has not yet started, and you do NOT have an anticipated start date, will you be waiting to begin work until after the Grant Agreement is fully executed?  
☐ Yes ☐ No ☐
6. Has this project been completed? ☐ Yes ☐ No ☐ Start Date  Completion Date 12/22/2027

### B. REIMBURSEMENT PROCESS

The Department must establish whether an advance payment (also known as a Working Capital Advance) is needed.

Your Grant will be administered on a reimbursement basis unless your entity feels there is a need for an advance payment. If such an advance payment is required, we must receive a stipulation to that effect – on entity letterhead for our files – explaining why the project requires upfront funding (i.e., why the project can't be started without upfront Working Capital). If you request a Working Capital Advance, your Grant Manager will email you the Estimated Expenditure Schedule (EES) template in Excel format, to be filled out by your entity. You must submit the completed EES along with a letter requesting the Working Capital Advance. A Working Capital Advance will be based on the first 2 (two) consecutive months of estimated expenses reflected on the EES. After that advance, the balance of the grant funds would be via reimbursement, based on review & approval of submitted financial reports reflecting expenditures charged to the approved Grant Budget. *\* Please note that Section 4.7 of the DCEO Grant Agreement template would state that advanced Grant Funds must be placed in an insured account, whenever possible, that bears interest, unless exempted under 2 CFR 200.305(b)(8). Section 26.1 of the DCEO Grant Agreement template would state that such Interest must be accounted for, therefore you may find it beneficial to open a separate account specifically for the Grant funds .rather than co-mingling with other funds. The interest earned must be listed on*

*each of the subsequent reports to be submitted. Any and all interest may need to eventually be returned to the Department at the time of Final Report submission.*

If there is no need for such an advance, please check reimbursement below.

**Your entity will be requesting: Y Reimbursement \_\_\_\_\_ Working Capital Advance**

**C. AUTHORIZED DESIGNEES (SIGNATORIES)**

If you would like someone other than the Authorized Official to sign documents on your behalf, please list them here:

Name \_\_\_\_\_

Title \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Name \_\_\_\_\_

Title \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**SECTION 5: APPLICANT CERTIFICATION**

Under penalty of perjury, I certify that I have examined this application and the document(s), schedule(s), and statement(s) submitted in conjunction herewith, and that, to the best of my knowledge and belief, the information submitted herewith is true, correct, and complete. I represent that I am the person authorized to submit this application on behalf of the applicant and that I am authorized to execute a legally binding grant agreement on behalf of the applicant if this application is approved for funding.

I hereby release to DCEO the rights to and use of photographs and/or any written statements or information, regardless of format (whether they are direct quotes or paraphrased by DCEO), contained in or provided after the grant application for the purpose of publication on DCEO's website. I hereby also release any and all claims against DCEO, its officers, agents, employees and/or affiliates arising out of, or in connection with, the usage of photographs and/or written statements or information, regardless of format (whether they are direct quotes or paraphrased by DCEO), for the purpose of publication on DCEO's website.

\_\_\_\_\_

Sandra Hart Chair, Lake County Board

Signature

Printed Name & Title

Date

The applicant should read and understand the certification statement provided in this section:

**The individual who signs this section should be the individual that is authorized to sign the Grant Agreement if Grant funds are awarded.** The authorized individual should sign their name, print their name and title and date of certification.

Please note the certification authorizes DCEO to publish a copy of the completed application on DCEO's website, as specified above.

## NOTICE OF GRANT REQUIREMENTS

**Prevailing Wage Act (820 ILCS 130/0.01 et seq.):** “All projects for the construction of fixed works which are financed in whole or in part with funds provided by this Agreement shall be subject to the Prevailing Wage Act (820 ILCS 130/0.01 et seq.) unless the provisions of that Act exempt its application. In the construction of the project, the Grantee shall comply with the requirements of the Prevailing Wage Act, including, but not limited to, inserting into all contracts for such construction a stipulation to the effect that not less than the prevailing rate of wages as applicable to the project shall be paid to all laborers, workers and mechanics performing work under the contract and requiring all bonds of contractors to include a provision as will guarantee the faithful performance of such prevailing wage clause as provided by contract.” The Department and the Illinois Department of Labor will work with the grantee to ensure compliance prior to the establishment of the grant agreement as well as through the life of the grant. The Act may be found in its entirety at <https://labor.illinois.gov/laws-rules/conmed/prevailing-wage-act.html>.

The Comptroller’s Office requirement derives from Attorney General Opinion No. 00-018 that states, where a non-governmental entity receives a grant of public funds for the construction of a fixed work, the provisions of the Prevailing Wage Act (820 ILCS 130/0.01 et seq.) (56 Ill Admin Code 270) apply to the project. NOTE: Public bodies continue to be subject to Prevailing Wage requirements.

Please be advised that DCEO will not render a legal opinion as to applicability of the Prevailing Wage Act to any project. You should consult your own legal counsel for such an opinion. Questions regarding the applicability of Prevailing Wage requirements may also be referred to the Illinois Department of Labor at 312/793-1585 or 217/782-1710. Attorney General Opinion No. 00-018 may be accessed on the Attorney General’s web site at <https://illinoisattorneygeneral.gov/opinions/opinions-archive>.

**Employment of Illinois Workers on Public Works Act (30 ILCS 570/0.01 et seq.):** If an entity receives state funds for construction related activities, the entity must employ at least 90% Illinois laborers on such projects during periods of excessive unemployment in Illinois. The Act may be found in its entirety at <https://labor.illinois.gov/laws-rules/conmed/illinois-preference-act.html>. Any questions regarding the Act should be directed to the Illinois Department of Labor’s Conciliation and Mediation Division at (217) 782-1710. For further information, please visit the IDOL website at: <https://labor.illinois.gov>.

**Public Act 96-1064 - Business Enterprise Program:** Public Act 96-1064 mandates that each award by grant or loan of State funds of \$250,000 or more for capital construction costs or professional services is conditioned upon the recipient's written certification that the recipient shall comply with the business enterprise program practices for minority-owned businesses, female-owned business, and businesses owned by persons with disabilities of the Business Enterprise for Minorities, Females and Persons with Disabilities Act (30 ILCS 575/0.01 et seq.) and the equal employment practices of Section 2-105 of the Illinois Human Rights Act (775 ILCS 5/2-105).

**Illinois Works Jobs Program Act (30 ILCS 559/Art. 20):** For Awards with an estimated total project cost of \$500,000 or more, the Grantee will be required to comply with the Illinois Works Apprenticeship Initiative (30 ILCS 559/20-20 to 20-25) and all applicable administrative rules (see 14 Ill. Admin. Code Part 680). The “estimated total project cost” is a good faith approximation of the costs of an entire project being paid for in whole or in part by appropriated capital funds to construct a public work. Grantee must submit a Budget Supplement Form (available on the DCEO website) to the Grantor within ninety (90) days of the execution of a Grant Award (Agreement).

The goal of the Illinois Works Apprenticeship Initiative is that apprentices will perform either 10% of the total labor hours worked in each prevailing wage classification or 10% of the estimated labor hours in each prevailing wage classification, whichever is less. Of this goal, at least half of those apprenticeship hours shall be performed by graduates of the Illinois Works Preapprenticeship Program, The Illinois Climate Works Preapprenticeship Program, or the Highway Construction Careers Training Program. Grantee is permitted to seek from the Grantor a waiver or reduction of this goal in certain circumstances pursuant to 30 ILCS 559/20-20(b). The Grantee must ensure compliance for the life of the entire project, including during the term of the Award and after the Term ends, if applicable, and will be required to report on and certify its compliance.

More on the Act may be found at: [Illinois Works Jobs Program Act - Illinois Works](#)



## NOTICE OF GRANT REQUIREMENTS (cont.)

### § 200.326 Bonding requirements:

For construction or facility improvement contracts or subcontracts exceeding the Simplified Acquisition Threshold, the Federal awarding agency or pass-through entity may accept the bonding policy and requirements of the non-Federal entity provided that the Federal awarding agency or pass-through entity has made a determination that the Federal interest is adequately protected. If such a determination has not been made, the minimum requirements must be as follows:

- (a) A bid guarantee from each bidder equivalent to five percent of the bid price. The “bid guarantee” must consist of a firm commitment such as a bid bond, certified check, or other negotiable instrument accompanying a bid as assurance that the bidder will, upon acceptance of the bid, execute such contractual documents as may be required within the time specified.
- (b) A performance bond on the part of the contractor for 100 percent of the contract price. A “performance bond” is one executed in connection with a contract to secure fulfillment of all the contractor's requirements under such contract.
- (c) A payment bond on the part of the contractor for 100 percent of the contract price. A “payment bond” is one executed in connection with a contract to assure payment as required by law of all persons supplying labor and material in the execution of the work provided for in the contract.

\*\*\*\*\*

**Environmental Review Requirements:** Capital grants will be reviewed to determine environmental review requirements. Based on the scope of the project, the grantee may be required to complete additional environmental approvals before disbursement of grant funds can be initiated.

\*\*\*\*\*

- In addition to the above, any contractual agreement between the Grantee and another party (being paid with grant funds) must include special language to allow DCEO access to the other party's records, relative to the grant. This includes construction subcontractors, consultants who provide services, and any other entity with which the grantee has a legal agreement to expend grant funds. Please see the separately attached pdf document entitled “Third Party Contractual Requirements” for this language (to incorporate into your legal subcontracts).

\*\*\*\*\*

Purchases of real property (land and/or buildings) will require submission of at least one appraisal conducted by a neutral third-party prior to closing – and as close to the closing date as possible – as an estimate of the property's fair market value. The appraisal documentation must be submitted to the Department as soon as available, and preferably prior the actual closing date.

## IMPORTANT GRANT INFORMATION

- The grant award may not be finalized, and grant funds may not be disbursed, until all necessary approvals have been obtained and a Grant Agreement has been executed between DCEO and the Grantee. The time required to finalize this process depends largely upon the completeness and accuracy of the information submitted.
- The grant term should begin no earlier than July 1, 2025. The initial grant term cannot exceed two years. All project activities must be completed within this time.
- All project activities and all expenditures of grant funds must be consistent with the Scope of Work and Budget included in the Grant Agreement. The Scope of Work and the Budget will be developed based upon the information provided in the Grantee's completed application.
- All environmental approvals must be submitted and cleared by the appropriate state agency prior to payment of costs related to renovation of a building/structure or "dirt-moving" costs.
- Payment provisions will be specified in the Grant Agreement. Payment for bond fund projects will be disbursed on a reimbursement basis, unless otherwise approved by DCEO.
- Any contractual agreement between the Grantee and another party (being paid with grant funds) must include special language to allow DCEO access to the other party's records, relative to the grant. This includes construction subcontractors, consultants who provide services, and any other entity with which the grantee has a legal agreement to expend grant funds. Please contact your grant manager if you need a copy of this language (to incorporate into your legal subcontracts) prior to receiving your grant agreement.
- Grantee shall be subject to the audit requirements contained in the Single Audit Act Amendments of 1996 (31 USC 7501-7507) and Subpart F of 2 CFR Part 200, and the audit rules and policies set forth by the Governor's Office of Management and Budget. *See* 30 ILCS 708/65(c); 44 Ill. Admin. Code 7000.90.
- The Grantee shall ensure that grant funds are expended in accordance with generally accepted sound, business practices, arms-length bargaining, applicable federal and state laws and regulations. Grant expenditures should conform to the terms and conditions of the grant agreement and should not exceed the amount that would be incurred by a prudent person under the circumstances prevailing at the time the decision is made to incur the costs. Grant accounting should be consistent with generally accepted accounting principles.
- **NOTE:** Please be aware that until a Grant Agreement has been executed by the Grantee and DCEO, the Grantee is at risk for any costs incurred that it intends to be paid for from grant funds. Thus, recipients of grant appropriations are advised not to begin project activities and not to incur costs until they have received a fully executed Grant Agreement reflecting the agreed upon Scope of Work and Budget.

## SUBMIT APPLICATION WITH THE FOLLOWING SUPPORTING DOCUMENTATION:

- ☐ List of Principal Individuals and Board Members – for *Non-governmental entities only*. This list must include each individual's name, home address, home phone number and daytime phone number.
- ☐ Job Descriptions of Staff Positions to be Funded by Grant Funds
- ☒ W-9 form (revised October 2018) – **REQUIRED FOR ALL GRANTEES**
- ☒ IRS Letter or Verification of Entity Name on File with the Internal Revenue Service – **REQUIRED**

### INSTRUCTIONS

All questions in the following sections must be completed by the applicant. Additional documentation should be attached as necessary to adequately respond to the question or to provide the detail requested.

#### SECTION 1: SCOPE OF WORK - INSTRUCTIONS

Provide the Project Title, it needs to be the same as or consistent with the title provided in the Proposal Information above.

Provide a detailed description of the proposed project and the intended use of grant funds. The information provided in this description will assist DCEO in developing the Scope of Work for the grant agreement if the grant is awarded. It will also facilitate the periodic reporting that will be required to update DCEO on the status of the project's major milestones if the grant is awarded.

Briefly describe each task in the Description of Tasks column. These tasks will be used to develop the grant agreement. The applicant should assign an estimated completion date for each task. If a grant is awarded, the applicant will have the opportunity to modify these dates prior to the execution of the grant.

#### SECTION 2: PROJECTED EMPLOYMENT IMPACT – INSTRUCTIONS - FTE Value Table

DCEO uses Section 2. Projected Employment Impact of the standard grant application form to document the estimated economic benefits of a proposed grant project based on the projected employment impact. The FTE (Full Time Equivalent) Value Table in Section 2 standardizes the DCEO process for collecting and reporting job count data for projected (estimated) jobs at the grant level.

For DCEO purposes, an FTE is a measurement unit for assigning a numerical value to an individual employment position (both projected and/or certified jobs; both created and/or retained jobs). For example, while DCEO assigns an FTE value of 1.0 to a permanent full time position, other categories of positions that are estimated to involve a fewer number of hours to be worked over the course of a year will be assigned a lower FTE value of either .5 or .25. DCEO uses this approach so that a job count that includes various categories of jobs is more accurate and is not inflated or overstated. Applicants should be realistic when estimating the number of projected FTEs that may result directly from a grant. For example, when projecting FTEs, the applicant must consider that if approved for funding the grantee will be required at a later date to certify FTE data for all created and retained positions, using the DCEO Job Count FTE Certification Form. Please remember that the FTE count includes only positions that are a direct result of a DCEO grant, meaning the positions would not be created or retained **but for** the DCEO grant provided.

# State of Illinois -- Uniform Capital Grant Budget Template -- General Instructions

County of Lake

This form is used to apply to individual State of Illinois discretionary grant programs. Applicants should submit budgets based upon the total estimated costs for the project including all funding sources. Pay attention to applicable program specific instructions, if attached. The applicant organization should refer to 2 CFR 200, "Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards" cited within these instructions.

**You must consult with your Business Office prior to submitting this form for any award restrictions, limitations or requirements when filling out the narrative and Uniform Budget Template.**

## **Section A – Budget Summary**

### STATE OF ILLINOIS FUNDS

All applicants must complete Section A and provide a break-down by the applicable budget categories shown in lines 1-11. **Please read all instructions before completing form.**

#### STATE OF ILLINOIS GRANT FUNDS

The total requested State of Illinois Grant amount for the Revenue portion of Section A, as shown in Line (a), will auto-fill to equal the total amount budgeted as auto-calculated on Line 12 of Section A.

#### BUDGET SUMMARY – STATE OF ILLINOIS FUNDS

All applicants must complete Section A and provide a break-down by the applicable budget categories shown in lines 1-11.

Line 12: The total budget amount will auto-calculate from the amounts shown in the individual category lines.

*Please use detail worksheet and narrative section for further descriptions and explanations of budgetary line items*

**Section A (continued) Indirect Cost Information:** *Indirect Costs are not allowed for Capital Bond-funded grants. Therefore, Option (5) is automatically pre-filled in the ICI tab.*

Option (5): If you are not seeking or not allowed any Indirect.

## **Section B - Budget Summary**

### NON-STATE OF ILLINOIS FUNDS

NON-STATE OF ILLINOIS FUNDS: If the applicant is required to provide, *or* volunteers to provide, cost-sharing or matching funds and/or other "non-State" of Illinois resources to the project, the applicant must provide a revenue breakdown of all Non-State of Illinois funds in lines (b)-(d). **NOTE:** The total of "Non-State Funds" must equal the amount reflected on Line 12 of Section B. If a match percentage is required, that amount should be entered in this section.

#### BUDGET SUMMARY – NON STATE OF ILLINOIS FUNDS

If the applicant is required to provide or volunteers to provide cost-sharing or matching funds or other non-State of Illinois resources to the project, these costs should be shown for each applicable budget category on lines 1-11 of Section B.

Lines 1-11: For which matching funds or other contributions are provided, show the total contribution for each applicable budget category.

Line 12: The total Non-State budget amount will auto-calculate from the amounts shown in the individual category lines.

*Please see detail worksheet and narrative section for further descriptions and explanations of budgetary line items*

## **Section C - Budget Worksheet & Narrative**

[Attach separate sheet(s) if necessary]

Pay attention to applicable program specific instructions, if attached.

All applicants are required to submit a budget narrative along with Section A and Section B. The budget narrative is sometimes referred to as the budget justification. The narrative serves two purposes: it explains how the costs were estimated and it justifies the need for the cost. The narrative may include tables for clarification purposes. The State of Illinois recommends using the State of Illinois Uniform Budget Template worksheet and narrative guide provided.

1. Provide an itemized budget breakdown, and justification by project year, for each budget category listed in Sections A and B.
2. For non-State of Illinois funds or resources listed in Section B that are used to meet a cost-sharing or matching requirement, or are to be provided as a voluntary cost-sharing or matching commitment, you must include:
  - a. The specific costs or contributions by budget category;
  - b. The source of the costs or contributions; and
  - c. In the case of third-party in-kind contributions, a description of how the value was determined for the donated or contributed goods or services.

**[Please review cost sharing and matching regulations found in 2 CFR 200.306]**

3. Provide other explanations or comments you deem necessary.

### **Keep in mind the following —**

Although the degree of specificity of any budget will vary depending on the nature of the project and State of Illinois agency requirements, a complete, well-thought-out budget serves to reinforce your credibility and increase the likelihood of your proposal being funded.

- A well-prepared budget should be reasonable and demonstrate that the funds being asked for will be used wisely.
- The budget should be as concrete and specific as possible in its estimates. Make every effort to be realistic, to estimate costs accurately.
- The budget format should be as clear as possible. It should begin with a budget narrative, which you should write after the entire budget has been prepared.
- Each section of the budget should be in outline form, listing line items under major headings and subheadings.
- Each of the major components should be subtotaled with a grand total at the end.

**Your budget should justify all expenses and be consistent with the program narrative.**

**§200.308 Revision of budget and program plans**

**(i) Transfer of funds.** The Federal agency must not permit a transfer of funds that would cause any Federal appropriation to be used for purposes other than those consistent with the appropriation. The Federal agency may also, at its option, restrict the transfer of funds among direct cost categories (for example, personnel, travel, and supplies) or programs, functions, and activities when: **(1)** The Federal share of the Federal award exceeds the simplified acquisition threshold; and **(2)** The cumulative amount of a transfer exceeds or is expected to exceed 10 percent of the total budget, including cost share, as last approved by the Federal agency.

STATE OF ILLINOIS	UNIFORM CAPITAL GRANT BUDGET TEMPLATE			Commerce & Economic Opportunity	
Organization Name:	County of Lake	UEI #	HCF3DJMKBLV9	NOFO #	
CSFA Number:		CSFA Description:		Fiscal Year:	2026
SECTION A -- STATE OF ILLINOIS FUNDS				Grant #	
Revenues				TOTAL REVENUE	
(a). State of Illinois Grant Amount Requested				\$	518,000.00
BUDGET SUMMARY STATE OF ILLINOIS FUNDS					
Budget Expenditure Categories				TOTAL EXPENDITURES	
1. Design/Engineering <i>(usually limited to 10% - 15% of total State Grant funds in this budget)</i>				\$ -	
2. Building/Land Purchase				\$ -	
3. Wiring/Electrical				\$ -	
4. Equipment/Materials/Labor				\$ -	
5. Paving/Concrete/Masonry				\$ 518,000.00	
6. Construction Management/Oversight <i>(limited to 10% - 15% of total State Grant funds in this budget)</i>				\$ -	
7. Mechanical System				\$ -	
8. Excavation/Site Prep/Demo				\$ -	
9. Plumbing				\$ -	
10. Other Construction Expenses				\$ -	
11. Contingency <i>(limited to maximum 10% of total State Grant funds in this budget)</i>				\$ -	
12. Total Costs State Grant Funds				\$ 518,000.00	

STATE OF ILLINOIS	UNIFORM CAPITAL GRANT BUDGET TEMPLATE	Commerce & Economic Opportunity
Organization Name: County of Lake	NOFO #	Fiscal Year 2026
SECTION B -- NON STATE OF ILLINOIS FUNDS		Grant Number:
Revenues		TOTAL REVENUE
Grantee Match Requirement = 0 %		
(a). Cash		\$ 518,000.00
(b). Non-cash		\$ -
(c). Other Funding & Contributions		\$ -
NON-STATE Funds Total		\$ 518,000.00
BUDGET SUMMARY NON-STATE OF ILLINOIS FUNDS		
Budget Expenditure Categories	TOTAL EXPENDITURES	
1. Design/Engineering	\$ -	
2. Building/Land Purchase	\$ -	
3. Wiring/Electrical	\$ -	
4. Equipment/Materials/Labor	\$ -	
5. Paving/Concrete/Masonry	\$ 2,422,607.00	
6. Construction Management/Oversight	\$ -	
7. Mechanical System	\$ -	
8. Excavation/Site Prep/Demo	\$ 2,294,389.00	
9. Plumbing	\$ -	
10. Other Construction Expenses	\$ 13,921,006.00	
11. Contingency	\$ -	
12. Total Costs NON-State Grant Funds	\$ 18,638,002.00	



## SECTION - A (continued) Indirect Cost Rate Information

If your organization is requesting reimbursement for indirect costs on line 17 of the Budget Summary, please select one of the following options.

1) <input type="checkbox"/>	Our Organization receives direct Federal funding and currently has a Negotiated Indirect Cost Rate Agreement (NICRA) with our Federal Cognizant Agency. A copy of this agreement will be provided to the State of Illinois' Indirect Cost Unit for review and documentation before reimbursement is allowed. This NICRA will be accepted by all State of Illinois Agencies up to any statutory, rule-based or programmatic restrictions or limitations.  <i>NOTE: (If this option is selected, please provide basic Negotiated Indirect Cost Rate Agreement information in area designated below)</i>
-----------------------------	---

Your Organization may not have a Federally Negotiated Indirect Cost Rate Agreement. Therefore, in order for your Organization to be reimbursed for Indirect Costs from the State of Illinois, your Organization must either:

- A. Negotiate an Indirect Cost Rate with the State of Illinois' Indirect Cost Unit with guidance from your State Cognizant Agency on an annual basis.
- B. Elect to use the de minimis rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois Awards.
- C. Use a Restricted Rate designated by programmatic or statutory policy. (See Notice of Funding Opportunity for Restricted Rate Programs)

2a) <input type="checkbox"/>	Our Organization currently has a Negotiated Indirect Cost Rate Agreement with the State of Illinois that will be accepted by all State of Illinois Agencies up to any statutory, rule-based or programmatic restrictions or limitations. Our Organization is required to submit a new Indirect Cost Rate Proposal to the Indirect Cost Unit within six (6) months after the close of each fiscal year (2 CFR 200 Appendix IV (C)(2)(c)).  <i>NOTE: (If this option is selected, please provide basic Indirect Cost Rate information in area designated below)</i>
2b) <input type="checkbox"/>	Our Organization currently does not have a Negotiated Indirect Cost Rate Agreement with the State of Illinois. Our Organization will submit our initial Indirect Cost Rate Proposal (ICRP) immediately after our Organization is advised that the State award will be made and, in no event, later than three (3) months after the effective date of the State award (2 CFR 200 Appendix IV (C)(2)(b)). The initial ICRP will be sent to the State of Illinois' Indirect Cost Unit.  <i>NOTE: (Check with your State of Illinois Agency for information regarding reimbursement of indirect costs while your proposal is being negotiated)</i>

3) <input type="checkbox"/>	Our Organization has never received a Negotiated Indirect Cost Rate Agreement from either the Federal government or the State of Illinois and elects to charge the de minimis rate of 15% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois awards (2 CFR 200.414 (c)(4)(f)).  <i>NOTE: (Your Organization must be eligible, see 2 CFR 200.414 (f), and submit documentation on the calculation of MTDC within your Budget Narrative under Indirect Costs)</i>
-----------------------------	--

For Restricted Rate Programs (check one) -- Our Organization is using a restricted indirect cost rate that:	
4) <input type="checkbox"/>	<div>_____ Is included as a "Special Indirect Cost Rate" in our NICRA (2 CFR 200Appendix IV (5) Or;</div> <div>_____ Complies with other statutory policies (please specify):</div> <div>The Restricted Indirect Cost Rate is _____ %</div>

5) <input checked="" type="checkbox"/>	No reimbursement of Indirect Cost is being requested. (Please consult your program office regarding possible match requirements)
--	--

Basic Negotiated Indirect Cost Rate Agreement information  
if Option (1) or (2a) is selected

Period Covered by the NICRA: From: _____ To: _____ (mm/dd/yyyy)	
Approving Federal/State agency (please specify): _____	
The Indirect Cost Rate is: _____ 0 %	The Distribution Base is: _____

<b>CERTIFICATION</b>	<b>STATE OF ILLINOIS UNIFORM CAPITAL GRANT BUDGET TEMPLATE</b>	<b>AGENCY: Commerce &amp; Economic Opportunity</b>
<b>Organization Name: County of Lake</b>	<b>CSFA Description:</b>	<b>NOFO #</b>
<b>CSFA #:</b>	<b>UEI # HCF3DJMKBLV9</b>	<b>Fiscal Year(s): 2026</b>

(2 CFR 200.415)

“By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate and that any false, fictitious, or fraudulent information or the omission of any material fact, could result in the immediate termination of my grant award(s).

County of Lake

Institution/Organization

Signature

Mary Crain

Name of Official

Director of Finance and Adminstration

Title

Chief Financial Officer (or equivalent)

Date of Execution

County of Lake

Institution/Organization

Signature

Sandra Hart

Name of Official

Chair, Lake County Board

Title

Executive Director (or equivalent)

Date of Execution

**Note: The State awarding agency may change required signers based on the grantee’s organizational structure. The required signers must have the authority to enter into contractual agreements on behalf of the organization.**

## Section C - Budget Worksheet & Narrative

County of Lake

**1). Design/Engineering** -- Costs associated with planning, design, and construction observation or related services for the proposed project including environmental services, testing, surveys, etc. Costs associated with creation of the project's architectural drawings, engineering studies and/or fees, etc., including costs of plans & specs and/or printing costs if specifically identified as such within the project description. Copies of contracts will be required. \* *The State portion of this category is usually limited to 10% - 15% of the total State-funded portion in this overall budget.*

Purpose	Description of Work	Item Cost
		\$ -
		\$ -
		\$ -
		\$ -
	<i>State Total</i>	\$ -
		\$ -
		\$ -
	<i>NON-State Total</i>	\$ -
	<i>Design/Engineering Total</i>	\$ -

**Narrative (State):**

**Narrative (Non-State)** i.e. "Match" or "Other Funding"

Section C - Budget Worksheet & Narrative

County of Lake

2). **Building/Land Purchase** -- Costs to purchase, either in whole or in part a building, structural shell, condominium, land, and/or easement including, but not limited to: the net purchase price itself, closing costs charged to the buyer on the closing document, legal fees, etc. Additionally, costs associated with Right-of-Way, appraisals, property/boundary surveys, legal fees, etc. \* *Copies of appraisal documentation must be submitted to the Department as soon as available, and preferably prior the actual closing date.*

Purpose	Description of Work	Item Cost
		\$ -
		\$ -
		\$ -
		\$ -
	State Total	\$ -
		\$ -
		\$ -
	NON-State Total	\$ -
	Total	\$ -

**Narrative (State):**

**Narrative (Non-State)** i.e. "Match" or "Other Funding"

Section C - Budget Worksheet & Narrative

County of Lake

3). Wiring/Electrical (2 CFR 200.94) -- Purchase of materials necessary for completion of the project scope such as electrical wiring, conduit, outlets, switches, etc. including associated labor/installation costs, as identified within the project description.

Item	Quantity/ Duration	Cost per Item	Item Cost
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
		State Total	\$ -
			\$ -
			\$ -
		NON-State Total	\$ -
		Total	\$ -

Narrative (State):

Narrative (Non-State) i.e. "Match" or "Other Funding"

Section C - Budget Worksheet & Narrative

County of Lake

4). **Equipment/Materials/Labor** (2 CFR 200.474 )-- Purchase of materials and/or purchase/lease of equipment, to use or install for the project, such as: steel, drywall, lumber, wiring, doors, windows, roofing, rock, etc. including labor/installation costs, as identified - within the project description

Item	Quantity	Cost Rate	Item Cost
			\$ -
			\$ -
			\$ -
			\$ -
		State Total	\$ -
			\$ -
			\$ -
		NON-State Total	\$ -
		Total	\$ -

Narrative (State):

Narrative (Non-State) i.e. "Match" or "Other Funding"

## Section C - Budget Worksheet & Narrative

County of Lake

**5). Paving/Concrete/Masonry (2 CFR 200.459)** -- Purchase of materials necessary for completion of the project scope such as bituminous pavement, concrete, rock, bricks, blocks, mortar, tuckpointing, etc. including associated labor/installation costs, as identified within the project description.

Item	Quantity	Cost per Item	Item Cost
<i>Bituminious paving</i>	<i>1</i>	<i>\$ 518,000.00</i>	<i>\$ 518,000.00</i>
			<i>\$ -</i>
		<i>State Total</i>	<i>\$ 518,000.00</i>
<i>Bituminous paving</i>	<i>1</i>	<i>\$ 1,616,697.00</i>	<i>\$ 1,616,697.00</i>
<i>Aggregate base course</i>	<i>1</i>	<i>\$ 805,910.00</i>	<i>\$ 805,910.00</i>
		<i>NON-State Total</i>	<i>\$ 2,422,607.00</i>
		<i>Total</i>	<i>\$ 2,940,607.00</i>

### **Narrative (State):**

Asphalt paving for bike path between Washington St and Shorewood Rd

### **Narrative (Non-State) i.e. "Match" or "Other Funding"**

Asphalt paving for the overall road improvement between Washington St and Rollins Rd

Section C - Budget Worksheet & Narrative

County of Lake

6). **Construction Management/Oversight** -- PLEASE NOTE: *This Category is limited to costs associated with managing the construction activities and/or overseeing all aspects of the construction project, either by contractor personnel or grantee personnel, but limited to verifiable time working on this project. \* The State portion of this category is usually limited to 10% - 15% of the total State-funded portion in this overall budget.*

Purpose	Description of Work	Item Cost
		\$ -
		\$ -
		\$ -
	State Total	\$ -
		\$ -
		\$ -
	NON-State Total	\$ -
	Total	\$ -

Narrative (State):

Narrative (Non-State) i.e. "Match" or "Other Funding"



## Section C - Budget Worksheet & Narrative

County of Lake

7). **Mechanical System** -- Purchase of materials necessary for completion of the project scope such as HVAC, elevators, fire alarm, sprinkler, or ventilation system, etc. including associated labor/installation costs, as identified within the project description.

Item	Quantity/ Duration	Cost per Item	Item Cost
			\$ -
			\$ -
			\$ -
			\$ -
		<i>State Total</i>	\$ -
			\$ -
			\$ -
		<i>NON-State Total</i>	\$ -
		<i>Total</i>	\$ -

**Narrative (State):**

**Narrative (Non-State)** *i.e. "Match" or "Other Funding"*

## Section C - Budget Worksheet & Narrative

County of Lake

**8). Excavation/Site Prep/Demo** -- Costs associated with demolition of existing structures on the project site and/or preparation of the project site including excavation, etc. ahead of actual new construction/renovation activities.

Purpose	Description of Work	Item Cost
		\$ -
		\$ -
		\$ -
	<i>State Total</i>	\$ -
<i>Earth excavation</i>	<i>Site preparation and restoration</i>	\$ 2,294,389.00
		\$ -
	<i>NON-State Total</i>	\$ 2,294,389.00
	<i>Total</i>	\$ 2,294,389.00

**Narrative (State):**

**Narrative (Non-State) i.e. "Match" or "Other Funding"**

**Earth excuvation for the overall road improvement between Washington St and Rollins Rd**

Section C - Budget Worksheet & Narrative

County of Lake

9). **Plumbing**-- Purchase of materials necessary for completion of the project scope such as internal or external pipes for water, gas, and/or sewage; fixtures; etc. including associated labor/installation costs, as identified within the project description.

Item	Quantity	Cost per Item	Item Cost
			\$ -
			\$ -
		State Total	\$ -
			\$ -
			\$ -
		NON-State Total	\$ -
		Total	\$ -

Narrative (State):

Narrative (Non-State) i.e. "Match" or "Other Funding"

Section C - Budget Worksheet & Narrative

County of Lake

10). **Other Construction Expenses** -- Costs that cannot be easily broken out to or covered by individual/specific budgetary line items such landscaping, hauling, equipment rental, insurance, environmental fees, etc. as identified within the project description.

Purpose	Description of Work	Item Cost
		\$ -
		\$ -
		\$ -
	State Total	\$ -
All other construction cost	Drainage, strom sewer, electrical work, traffic signals, pavement markings and landscaping	\$ 13,921,006.00
		\$ -
	NON-State Total	\$ 13,921,006.00
	Total	\$ 13,921,006.00

Narrative (State):

Narrative (Non-State) i.e. "Match" or "Other Funding"

Drainage, strom sewer, electrical work, traffic signals, pavement markings and landscaping for the overall road improvement between Washington St and Rollins Rd

**Section C - Budget Worksheet & Narrative**

County of Lake

**11). Contingency** - PLEASE NOTE: *This category is limited to coverage of potential cost overruns in any of the other utilized grant budget line items.* \* *The State portion of this category is limited to a maximum 10% of the total State-funded portion in this overall budget .*

Purpose	Description of Work	Item Cost
		\$ -
		\$ -
	State Total	\$ -
		\$ -
		\$ -
	NON-State Total	\$ -
	Total	\$ -

**Narrative (State):**

**Narrative (Non-State)** *i.e. "Match" or "Other Funding"*

## Section C - Budget Worksheet & Narrative

County of Lake

**Budget Narrative Summary** -- When you have completed the individual budget worksheet tabs of Section C, the totals for each category will auto-fill to the respective Summary cells below, as well as to the Section A & B tabs accordingly. Verify the total amount of State requested funds that will support the project.

<u>Budget Category</u>	<i>State</i>	<i>NON-State</i>	<i>Total</i>
1. Design/Engineering	\$ -	\$ -	\$ -
2. Building/Land Purchase	\$ -	\$ -	\$ -
3. Wiring/Electrical	\$ -	\$ -	\$ -
4. Equipment/Materials/Labor	\$ -	\$ -	\$ -
5. Paving/Concrete/Masonry	\$ 518,000.00	\$ 2,422,607.00	\$ 2,940,607.00
6. Construction Management/Oversight	\$ -	\$ -	\$ -
7. Mechanical System	\$ -	\$ -	\$ -
8. Excavation/Site Prep/Demo	\$ -	\$ 2,294,389.00	\$ 2,294,389.00
9. Plumbing	\$ -	\$ -	\$ -
10. Other Construction Expenses	\$ -	\$ 13,921,006.00	\$ 13,921,006.00
11. Contingency	\$ -	\$ -	\$ -

State Request

\$ 518,000.00

Non-State Amount

\$ 18,638,002.00

**TOTAL PROJECT COSTS**

**\$ 19,156,002.00**

Agency Approval	STATE OF ILLINOIS UNIFORM CAPITAL GRANT BUDGET TEMPLATE	AGENCY: Commerce & Economic Opportunity
Organization Name: County of Lake	CSFA Description:	NOFO #
CSFA #	UEI # HCF3DJMKBLV9	Fiscal Year: 2026

Grant Number 0

<u>Final Budget Amount Approved</u>	<u>Program Approval Signature</u>	<u>Date</u>	<u>Fiscal &amp; Administrative Approval</u>	<u>Date</u>
\$ 518,000.00			<u>Signature</u>	

<u>Budget Revision Approved</u>	<u>Program Approval Signature</u>	<u>Date</u>	<u>Fiscal &amp; Administrative Approval</u>	<u>Date</u>
			<u>Signature</u>	

**\$200.308 Revision of budget and program plans**

**(i) Transfer of funds.** The Federal agency must not permit a transfer of funds that would cause any Federal appropriation to be used for purposes other than those consistent with the appropriation. The Federal agency may also, at its option, restrict the transfer of funds among direct cost categories (for example, personnel, travel, and supplies) or programs, functions, and activities when: **(1)** The Federal share of the Federal award exceeds the simplified acquisition threshold; and **(2)** The cumulative amount of a transfer exceeds or is expected to exceed 10 percent of the total budget, including cost share, as last approved by the Federal agency.

## Conflict of Interest Disclosure

Award applicants and recipients of awards from the State of Illinois (collectively referred to herein as "Grantee") must disclose in writing to the awarding State agency any actual or potential conflict of interest that could affect the State award for which the Grantee has applied or has received. See 30 ILCS 708/35; 44 Ill. Admin Code § 7000.40(b)(3); 2 CFR § 200.112. A conflict of interest exists if an organization's officers, directors, agents, employees and/or their spouses or immediate family members use their position(s) for a purpose that is, or gives the appearance of, being motivated by a desire for a personal gain, financial or nonfinancial, whether direct or indirect, for themselves or others, particularly those with whom they have a family business or other close associations. In addition, the following conflict of interest standards apply to governmental and non-governmental entities.

### Definitions:

**Governmental Entity.** If the Grantee is a governmental entity, no officer or employee of the Grantee, member of its governing body or any other public official of the locality in which the award objectives will be carried out shall participate in any decision relating to a State award which affects his/her personal interest or the interest of any corporation, partnership or association in which he/she is directly or indirectly interested, or which affects the personal interest of a spouse or immediate family member, or has any financial interest, direct or indirect, in the work to be performed under the State award.

**Non-governmental Entity.** If the Grantee is a non-governmental entity, no officer or employee of the Grantee shall participate in any decision relating to a State award which affects his/her personal interest or the interest of any corporation, partnership or association in which he/she is directly or indirectly interested, or which affects the personal interest of a spouse or immediate family member, or has any financial interest, direct or indirect, in the work to be performed under the State award.

The Grantee shall also establish safeguards, evidenced by policies, rules and/or bylaws, to prohibit employees or officers of Grantee from engaging in actions, which create or which appear to create a conflict of interest as described herein.

**The Grantee has a continuing duty to immediately notify the Department of Commerce and Economic Opportunity (the "Department") in writing of any actual or potential conflict of interest, as well as any actions that create or which appear to create a conflict of interest.**

***Are there any current potential conflict(s) of interest, or any actions that create or which appear to create a conflict of interest, related to the State award for which your organization has applied?***

☒ No

☐ Yes

***If there are any current potential conflict(s) of interest, or any actions that create or which appear to create a conflict of interest, related to the State award for which your organization has applied, please describe them all here:***



If the Grantee provided information above regarding a current potential conflict of interest or any actions that create or appear to create a conflict of interest, the Grantee must immediately provide documentation to the applicable Department grant manager to support that the potential conflict of interest was appropriately handled by the Grantee's organization. If at any later time, the Grantee becomes aware of any actual or potential conflict of interest, the Grantee must notify the Department's grant manager immediately, and provide the same type of supporting documentation that describes how the conflict situation was or is being resolved.

Supporting documentation should include, but is not limited to, the following: the organization's bylaws; a list of board members; board meeting minutes; procedures to safeguard against the appearance of personal gain by the organization's officers, directors, agents, and family members; procedures detailing the proper internal controls in place; timesheets documenting time spent on the award; and bid documents supporting the selection of the contractor involved in the conflict, if applicable.

By signing this document, below, as the duly authorized representative of Grantee, I hereby certify that:

- All of the statements in this Conflict of Interest Disclosure form are true, complete and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil or administrative penalties. (U.S. Code, Title 18, Section 1001).
- If I become aware of any situation that conflicts with any of the representations herein, or that might indicate a potential conflict of interest or create the appearance of a conflict of interest, I or another representative from my organization will immediately notify the Department's grant manager for this award.
- I have read and I understand the requirements for the Conflict of Interest Disclosure set forth herein, and I acknowledge that my organization is bound by these requirements.

County of Lake

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Grantee Organization (Company Name):

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Signature of Authorized Representative

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Date

Chair, Lake County Board

---

Printed Title (Authorized Signator Title):

Sandra Hart

---

Printed Name (Authorized Signator Name):

---

CSFA Number

## Mandatory Disclosure

Award applicants and recipients of awards from the State of Illinois (collectively referred to herein as "Grantee") must disclose, in a timely manner and in writing to the State awarding agency, all violations of State or federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the award. See 30 ILCS 708/40; 44 Ill. Admin. Code § 7000.40(b)(4); 2 CFR § 200.113. Failure to make the required disclosures may result in remedial action.

Are there any violations of State or federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the awarding of a grant to your organization? ☒ No ☐ Yes

If there any violations of State or federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the awarding of a grant to your organization, please describe them all here:

Grantee has a continuing duty to disclose to the Department of Commerce and Economic Opportunity (the "Department") all violations of criminal law involving fraud, bribery or gratuity violations potentially affecting this grant award.

By signing this document, below, as the duly authorized representative of the Grantee, I hereby certify that:

- All of the statements in this Mandatory Disclosure form are true, complete and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil or administrative penalties. (U.S. Code, Title 18, Section 1001).
- There is no action, suit or proceeding at law or in equity pending, nor to the best of Grantee's knowledge, threatened, against or affecting the Grantee, before any court or before any governmental or administrative agency, which will have a material adverse effect on the performance required by the grant award.
- Grantee is not currently operating under or subject to any cease and desist order, or subject to any informal or formal regulatory action, and, to the best of the Grantee's knowledge, it is not currently the subject of any investigation by any state or federal regulatory, law enforcement or legal authority.
- If Grantee becomes the subject of an action, suit or proceeding at law or in equity that would have a material adverse effect on the performance required by an award, or an investigation by any state or federal regulatory, law enforcement or legal authority, Grantee shall promptly notify the Department in writing.

Grantee Organization (Company Name)    County of Lake

\_\_\_\_\_  
Signature of Authorized Representative  
Sandra Hart

\_\_\_\_\_  
Printed Name (Authorized Signator Name)  
Chair, Lake County Board  
\_\_\_\_\_  
Printed Title (Authorized Signator Title)

\_\_\_\_\_  
Date  
  
  
  
  
  
  
  
  
  
\_\_\_\_\_  
CSFA Number