



Grant Proposal Notification

GPN Number: 013-26
(Completed by Finance Department)

Date of Notification: 04/08/2026
(MM/DD/YYYY)

Parent Committee Agenda Date: 05/05/2026
(Completed by Finance Department) (MM/DD/YYYY)

Grant Application Due Date: 04/10/2026
(MM/DD/YYYY)

Name of Grant: Weatherization HHS Grant PY27

Name of Grantor: IL Dept. of Commerce and Economic Opportunity

Originating Entity: U.S. Dept. of Health and Human Services
(Name the entity from which the funding originates, if Grantor is a pass-thru entity)

County Department: Community Services

Department Contact: Gina Strafford-Ahmed, Intake Administrator x6444
(Name, Title, and Extension)

Parent Committee: Human Services

Grant Amount Requested: \$ 974,465.00

Type of Grant: Formula
(Competitive, Continuation, Formula, Project, Direct Payment, Other – Please Specify)

Is this a new non-recurring Grant: Yes No

Source of Grant: Federal State Private Corporate

If Federal, provide CFDA: 93.568

If State, provide CSFA: 420-70-0087



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1. Justify the department’s need for this grant.

The Weatherization HHS Grant is funded through the U.S. Department of Health and Human Services passed through the IL Department of Commerce and Economic Opportunity to DuPage County Community Services. The Weatherization Department utilizes 67% of this grant to provide client services by our contractors to low income households to install energy conservation measures to permanently reduce their energy bills. Conservation measures include, but are not limited to, air – sealing, insulation of attics and walls, caulking and weather-stripping, installation of high efficiency furnaces, and baseload measures such as Energy Star Refrigerators and LED light bulbs. In addition, the grant funding addresses Health& Safety concerns by providing smoke detectors, carbon monoxide detectors and proper ventilation to improve indoor air quality. Under the guidance of the Illinois Home Weatherization Assistance Program (IHWAP), these improvements are provided at no cost to income eligible households that would not otherwise be able to afford them. The remainder of the funding from this grant covers the cost of administering the Weatherization Program, including but not limited to staff salary and benefits, office and operating supplies, mileage and travel expense and training expense.

2. Based on the County’s [Strategic Plan](#), which strategic imperative(s) correlate with funding opportunity. Provide a brief explanation.

Community Well-Being for low income residents of DuPage County is significantly improved by reducing excessive energy burdens to those that struggle to cover their monthly utility bills. Health & Safety improvements create a safer and healthier home. Research has shown that the payback from these improvements are many- fold. Households that receive LIHEAP assistance are also weatherized which creates a synergistic effect and leverages funding.

Thriving Economy is stimulated in DuPage County by bringing in state and federal funding to be spent at the local level for the cost of labor and material to install these measures by our Weatherization contractors. In addition, several of the Weatherization staff are residents of DuPage County and spend their earnings locally.

3. What is the period covered by the grant?

06/01/2026 to: 09/30/2027
(MM/DD/YYYY) (MM/DD/YYYY)

3.1. If period is unknown, estimate the year the project or project phase will begin and anticipated duration:

3.1.1. _____ and _____
(MM/YY) (Duration)

4. Will the County provide “seed” or startup funding to initiate grant project? (Yes or No)

No

4.1. If yes, please identify the Company-Accounting Unit used for the funding _____

5. If grant is awarded, how is funding received? (select one):

5.1. Prior to expenditure of costs (lump-sum reimbursement upfront)

5.2. After expenditure of costs (reimbursement-based)

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6. Does the grant allow for Personnel Costs? (Yes or No) Yes

6.1. If yes, what are the total projected salary and fringe benefit costs of personnel charging time to the grant for the entire term of the grant? Compute County-provided benefits at 40%.

6.1.1. Total salary \$1,190,569.00 Percentage covered by grant 20.5%

6.1.2. Total fringe benefits \$349,364.00 Percentage covered by grant 20.1%

6.1.3. Are any of the County-provided fringe benefits disallowed? (Yes or No): No

6.1.3.1. If yes, which ones are disallowed?

6.1.3.2. If the grant does not cover 100% of the personnel costs, from what Company-Accounting Unit will the deficit be paid?

5000-1555; 5000-1440

6.2. Will receipt of this grant require the hiring of additional staff? (Yes or No): 1

6.2.1. If yes, how many new positions will be created?

6.2.1.1. Full-time 1 Part-time _____ Temporary _____

6.2.1.2. Will the headcount of the new position(s) be placed in the grant accounting unit? Yes
(Yes or No)

6.2.1.2.1. If no, in what Company-Accounting Unit will the headcount(s) be placed?

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- 9.1.3. What Company-Accounting Unit(s) will provide the matching requirement? _____
10. What amount of funding is already allocated for the project? \$0.00
- 10.1. If allocated, in what Company-Accounting Unit are the funds located? _____
- 10.2. Will the project proceed if the funding opportunity is not awarded? (Yes or No): No
11. What is the total project cost (Grant Award + Match + Other Allocated Funding)? \$974,465.00