

# Lamar County COVID-19 Community Recovery Grant Program for Not-for-Profit Organizations

# PROGRAM TYPE AND AWARDS

Lamar County Board of Commissioners approved the distribution up to \$50,000 of American Rescue Plan Act (ARPA) funds to eligible nonprofit organizations in Lamar County. The nonprofits will be selected through a competitive grant application process. Under the County's program guidelines, nonprofit organizations must submit requests describing intended use of the funds, the beneficiaries of the program, how the program will be implemented, and why their organization is positioned to support the goals of the ARPA. The County will exercise its sole and best judgement to determine which organizations shall be selected for grant awards. Grant awards will be determined based on need, priorities of the County, assessment of the organization's response, and availability of funds. The County makes no guarantee that it will fund any organization under this Program or the amount of grant funds that will be awarded.

#### NATURE AND PURPOSE

The County received funds from the United States Department of Treasury in connection with the Coronavirus State and Local Fiscal Recovery Funds ("SLFRF") program under the American Rescue Plan Act ("ARPA"). The County dedicated a portion of its SLFRF funds consistent with Federal requirements to establish this Program. This Program will award grant funds on a discretionary basis to organizations who meet all program criteria and requirements. They must have a local presence in Lamar County and a proven track record for making positive impacts in the community. In addition, applicants must provide an active DUNS number or a Federal Tax Id number to verify grant eligibility.

The primary objectives of grant funds under this Program are to:

- serve veterans and their families through supportive housing, education, healthcare, and community reintegration.
- combat food insecurity.
- provide temporary care, housing, and adoption services for animals.
- support special needs persons in their transition into the community from institutional care; and
- provide for the presence and preservation of the arts, historic and cultural resources.

Organizations are required to demonstrate how their existing programs meet one of the objectives.

## **ELIGIBLE USES OF FUNDS**

The following expenditures are eligible under this Program:

COVID-19 related expenditures:

- Personal Protective Equipment (PPE)
- COVID-19 related testing supplies, materials and equipment
- Social distancing signage and communication
- Personal sanitization supplies & equipment
- Disinfection and specialized cleaning supplies and services
- Electronic payment processing equipment, supplies and service fees
- Equipment to enhance remote capabilities

- Improvements to HVAC systems and air quality
- Lead hazard abatement and home accessibility modifications
- home repair/ home weatherization
- Summer enrichment/afterschool programs expenses & supplies
- COVID-19 related training for employees
- Food Assistance
- Emergency housing/utilities assistance
- Job training programs
- Burials

For a full list of eligible uses please refer to <u>https://home.treasury.gov/policy-</u> <u>issues/coronavirus/assistance-for-state-local-and-tribal-governments/state-and-local-fiscal-</u> <u>recovery-funds</u> to review the final rule issued by the US Treasury Department.

## ADDITIONAL REQUIREMENTS

- All organizations must provide evidence of their not-for-profit status.
- All organizations must complete an Agreement & Attestation Statement. (Appendix I)
- All organizations must submit a detailed budget for the project.

#### **RESPONSE FORMAT**

All responses shall adhere to the following format:

#### A. Cover Page

- Name of Organization.
- Service Address of Organization (must be within the County).
- Name, Title, and Telephone Number of Contact Person.
- Name and Address of Parent Organization, if applicable.

## **B.** Executive Summary

• Identify organization type and non-profit status.

Describe your organization's core activities and identify how your organization meets at least one of the following objectives of this Program:

- serve veterans and their families through supportive housing, education, healthcare and community reintegration;
- combat food insecurity;
- provide temporary care, housing and adoption services for animals;

• support special needs persons in their transition into the community from institutional care; and provide for the presence and preservation of the arts, historic and cultural resources.

# C. Identify the number of years your organization has served the Lamar County community.

D. Identify if your organization is focused on serving low- and moderate-income persons or if your organization is located within a Qualified Census Tract (QCT) or Federally recognized Opportunity Zone. (This information can be found at https://www.huduser.gov/portal/datasets/qct.html)

## E. Description of current sources of funding and identify primary/largest funding source.

## F. Budget Narrative

- Provide a brief summary and identify the total amount of grant funds requested by your organization
- Provide a listing of all other local, State and/or Federal COVID-19 relief funds received to date.

All completed responses must be submitted by July 31, 2022. The County will evaluate and score each response. The County will make selections by August 16, and notify all grant recipients for an award no later than September 30, 2022 The grant award will be issued in the form of a grant voucher. The grant recipient will have thirty (30) days to accept or decline the award. If the grant applicant accepts the award, a request for purchase must be completed, prior to funds being released to supplier. The County funds will then be obligated by December 31, 2024, and dispersed by December 31, 2026. The grant recipient is required to provide the bill of lading, receipt of delivery, or any pertinent documents pertaining to the grant award no later than 30 thirty days after purchase. Failure to do so will result in ineligibility to apply for future grants, and possibly legal action to protect the County's grant eligibility.

#### Appendix I

# **AGREEMENT & ATTESTATION STATEMENT**

As the primary recipient of the SLFRF funds, Lamar County is required by the Uniform Guidance to evaluate each subrecipient's risk of noncompliance with Federal statutes, regulations, and the terms and conditions of the subaward. This Attestation & Agreement is intended to document understanding and compliance by Lamar County and the undersigned with the requirements set forth in the Final Interim Rule. The Final Interim Rule can be found at <a href="https://home.treasury.gov/system/files/136/FRF-Interim-Final-Rule.pdf">https://home.treasury.gov/system/files/136/FRF-Interim-Final-Rule.pdf</a>

I hereby attest that the information provided in my application is true and that I meet the requirements to apply for this grant.

I agree that as a subrecipient receiving an award of SLFRF funds from Lamar County that I may not in turn, identify a subrecipient to pass along funding for performance of the grant.

I hereby attest that I will indicate if there is any overlap between the County's award and any other federal or state application, or funded project, regarding activities, costs, or time commitment of key personnel. If any such overlap exists, I must provide a complete description of overlaps or duplications between this proposal and any other federal or state funded project or application. If at any time my organization receives funding from another source that is duplicative of the funding being requested from Lamar County, my organization must notify Lamar County immediately.

I understand that failure to provide the bill of lading, receipt of delivery, or any pertinent documents pertaining to the grant award later than 30 thirty days after purchase will result in ineligibility to apply for future grants offered by the County, and possibly legal action to protect the County's grant eligibility.

I certify that my project's impact and/or eligibility determinations for beneficiaries of the SLFRF funding will include residency confirmation procedures. If the project's impact will benefit residents residing outside of Lamar County, my organization must indicate the percentage of Lamar County residents expected to benefit from the project and how that percentage was determined.

**IN WITNESS WHEREOF,** the undersigned has executed this Attestation and Agreement as of the date of signature set forth below.

Signature:	
Name (please print):	
Business Name (please print):	
Date of Signature:	