

City of Bangor - ARPA Grant Applications

DEADLINE: April 26 2023 at 08:00 PM +00:00

ORGANIZATION INFO

APPLICANT INFORMATION

Primary Contact Name *

Primary Contact Direct Phone/Cell *

Primary Contact Email *

Primary Contact Address *

ORGANIZATION DETAILS

Organization or Entity Name *

CEO (Principal Officer) *

Mailing Address *

Physical/Project Address (if different)

Office Phone *

Organization Email Address *

Website Link(s)

Social Media Link(s)

Tax ID Number *

UEI Number (*formerly DUNS #*)

Organization Establishment Year *

of Full-Time Staff *

of Part-Time Staff *

of Volunteers

Organization Mission Statement/Entity Statement of Purpose *

ORGANIZATION FINANCES

Is your organization debarred from receiving federal funds? *

Yes

No

Is this organization registered as a charitable organization under Section 501(c)(3) of the Internal Revenue Code? *

Yes

No

Current FY Budgeted Revenue: *

\$

Current FY Budgeted Expense: *

\$

Which of the following did your organization experience as a result of the COVID-19 pandemic? **Select all that apply.** (Additional documentation may be required upon request)*

- Decrease in Revenue
- Staffing/Volunteer Shortages
- Inability to Conduct Essential Operations
- Unexpected Expenses
- Additional Infrastructure Costs
- Increased Demand for Services
- Other

If your organization has previously received pandemic related funding, such as PPP, ARPA, CDBG COVID, or CARES funds, or has a pending application for funding, from the City of Bangor or another government entity, please list the amount, nature of the project(s), and current status of the funding and project(s).

If your organization has completed any of the following, you must provide the most recently completed report as an attachment below.

Please provide the most recent Form 990

Select File

No file selected

Maximum File Size: 10MB

No file attached

Please provide the most recent audit (or financial statements if you have not conducted an audit.)

Select File

No file selected

Maximum File Size: 10MB

No file attached

If necessary, please provide password(s) for the above documents

If any clarification is needed on the organizational finances, including operational deficit, budgeted revenue/expense or financial document uploads, please explain here

PROJECT DETAILS

ARPA CATEGORIES

a summary of ARPA categories can be found in Overview of the Final Rule:
<https://home.treasury.gov/system/files/136/SLFRF-Final-Rule-Overview.pdf>

All projects MUST fall into at least one category

Which of the ARPA categories will the project fall under *

- Respond to the public health emergency, incl. COVID mitigation/prevention/medical exp./behavioral healthcare/preventing and responding to violence
- Respond to the negative economic impact of the pandemic, incl. assistance to impacted households/communities/small businesses/industries/nonprofits
- For the provision of public safety, health or educational services
- To make necessary investments in water, sewer, or broadband infrastructure

Explain how your project fits into the category selected *

Min words required: 20 |

Max Number of Words: 500

PROJECT DESCRIPTION

Project Name *

Short Project Description (1-2 sentences). We request one-time ARPA funds through the City of Bangor to support... *

Min words required: 10 |

Max Number of Words: 100

Which area of emphasis does this project primarily/most closely address? Select "other" to identify an alternative project focus. *

Select additional areas of emphasis this project will address? **(optional, select all that apply)**

- Childcare
- Homelessness
- Housing
- Job Training/Workforce Development
- Mental Health
- Substance Use Disorder

Project description and how it fulfills the organization's mission or goals *

Min words required: 250 |

Max Number of Words: 2500

Purpose and key anticipated outcomes *

Min words required: 100 |

Max Number of Words: 2500

How do you define and measure success for this project? *

Min words required: 25 |

Max Number of Words: 2500

Does your project address systemic issues? Does your project work on preventative strategies? Does your project lead to sustainable change?

Using this big picture lens, provide an overview of if/how your project is designed to generate long-lasting community change *

Min words required: 100 |

Max Number of Words: 2500

Individuals or communities served

*(Include details about the number of Bangor residents served and number of non-Bangor residents served. Additional demographic data can be included at a high-level.)**

Min words required: 10 |

Max Number of Words: 500

Project location/physical address

Estimated project start date

Estimated project completion date

Total # of organizations, businesses, or government entities partnering for this request *

List of organizations, businesses, or government entities partnering for this request *

Max Number of Words: 500

How will this project benefit the residents and taxpayers of the City of Bangor? *

Min words required: 20 |

Max Number of Words: 500

PROJECT BUDGET

Total Project Cost *

\$

Total City of Bangor ARPA Funding Requested *

\$

(Min Range: 10000)

ARPA Funding Requested as a Percentage of Total Project Budget

%

Please download the budget [TEMPLATE](#).

Complete and upload your proposed project budget

Select File No file selected

Maximum File Size: 10MB , Accepted file types: .pdf, .xls, .xlsx

No file attached

Other Sources of Funding: Please provide any other sources of funding the program has already received along with the status of the funding (e.g. application submitted, funding awarded, funding received).

Min words required: 0 |

Max Number of Words: 500

Which aspect(s) of your organization will this project support for OPERATIONS? **(Select all that apply)**

- Wages/Benefits
- Lease of Property/Equipment
- Contracted Services
- Utilities
- Other

Which aspect(s) of your organization will this project support for CAPITAL? **(Select all that apply)**

- Acquisition of Property
- Acquisition of Equipment
- New Construction
- Facility
Repair/Renovation
- Vehicles
- Other

Could this project move forward if the City of Bangor is unable to fully fund the request? If yes, how much would be required to implement the program and how would you plan to operate the program with partial funding? *

Min words required: 10 |

Max Number of Words: 500

With the understanding that these are one-time ARPA awards, describe how your project/initiative will sustain operations after the funds are depleted. *

Min words required: 20 |

Max Number of Words: 500

APPLICATION SUBMISSION

ADDITIONAL MATERIALS (OPTIONAL)

You may provide additional materials below. You can upload up to 3 files. These may include program materials, brochures, cost pamphlets, letters of support, or other relevant supporting items.

Additional Materials Upload 1

Select File

Choose File

No file selected

Maximum File Size: 10MB

No file attached

Additional Materials Upload 2

Select File

Choose File

No file selected

Maximum File Size: 10MB

No file attached

Additional Materials Upload 3

Select File

Choose File

No file selected

Maximum File Size: 10MB

No file attached

CERTIFICATION & E-SIGN

By applying for funds and signing this page, applicant agrees to follow all laws, regulations, and guidelines concerning the American Rescue Plan Act. This would include all federal, state, and municipal laws, which encompass bidding processes, purchasing processes, drug policies, reporting procedures and other guidelines as needed.

By applying for funds and signing this page applicant agrees to report all funds spent, how the funds were spent, and provide an accounting of all funds. This includes quarterly updates during the course of the project.

I certify that I have reviewed the US Treasury Guidelines regarding the eligible uses of American Rescue Plan State and Local Fiscal Recovery Funds and, to the best of my knowledge, believe the request to be eligible for assistance. I further certify that I am authorized to submit this application request on behalf of the organization requesting the funds, and I acknowledge that the City Council reserves the right to accept or deny any application, with or without a formal explanation to the applicant.

By submitting this application to the City of Bangor, I certify that all of the information provided is complete and accurate to the best of my knowledge and that I am an authorized signer for my organization. I further acknowledge that this application and its contents are subject to Maine's Freedom of Information Act.

TYPE YOUR FULL NAME TO E-SIGN THE APPLICATION:

*