**Background**

On March 11, 2021, the American Rescue Plan Act (ARPA) was signed into law, and established the

Coronavirus State Fiscal Recovery Fund and Coronavirus Local Fiscal Recovery Funds, which together

make up the Coronavirus State and Local Fiscal Recovery Funds ("CSLFRF") program. This program is

intended to provide funding support to state, territorial, local, and tribal governments in responding to the economic and public health impacts of COVID-19 and in their efforts to contain impacts on their communities, residents, and businesses. Lake County has been approved to receive **$2.3M in federal American Rescue Plan Act funding.**

**An ARPA Committee** has been appointed by the Board of Commissioners to determine the priority needs of the county that could best be addressed with the funds, and to create a fair and effective application and award process for county entities to access and receive the funds to address those priority needs. The committee will review all applications and make funding recommendations to the Lake County Board of Commissioners. Working together, the Committee and Board may support eligible proposals.

**Process**

**Proposals may be submitted beginning April 1, 2022 and no later than June 30, 2022 using a required**

**funding request form that can be downloaded from the county’s website at** [**http://www.lakecounty-michigan.com/**](http://www.lakecounty-michigan.com/)**.**

All proposals received will be reviewed by the Committee. Once reviewed, recommendations for funding will be submitted to the Board for its consideration and possible approval. The Committee will begin reviewing proposals shortly after the deadline passes. The Committee and the Board will communicate results to agencies/organizations as circumstances dictate. This request for proposals and the process described herein are intended to help the County effectively and efficiently determine the best uses of Funds; however the County (acting through the Committee, the Board or otherwise) may, in its discretion, seek and accept formal or informal proposals and make determinations as to the use of funds outside the process described in this request for proposals, with or without notice to the agencies/organizations that respond to this request for proposals.

**Applicant Eligibility**

* Must be a Lake County Municipality, library, Authority, Road Commission, Lake County, or 501(c)3 Non-Profit Organization
* Must provide services in Lake County
* Must provide a report of funding if approved
* Local Municipalities, libraries, and authorities requesting funds must supply at least 50% match on the project
* The Road Commission and each Local Municipality, must each supply an equal match on a road or bridge related project

**Project Eligibility**

* Must serve Lake County residents / businesses in one of the following Priorities:*Broadband Economic Development / Tourism Education Social Services Housing*

*Environment Infrastructure Health County Government Led Project*

* Must be completed by August 31, 2023 *County reserves the rights to extend deadline*
* Must provide approval of applicant leadership by resolution or letter of support
* Funds may not be used to supplant the use of entity’s operational funds

**Application Timeline**

|  |  |
| --- | --- |
| April 1, 2022 | ARPA Application opens online at [www.lakecouty-michigan.com](http://www.lakecouty-michigan.com) |
| April 13, 2022 | ARPA Application Info Session | 1pm Board of Commissioners Room, 800 Tenth St Baldwin |
| June 30, 2022 | ARPA Application closes |
| Week of July 13,2022 | Committee Review of Applications |
| Week of July 20, 2022 | Finalist Presentations to ARPA Committee |
| August 10, 2022 | Recommendations to Board of Commissioners for funding approvals |
| By August 24, 2022 | Begin Notification of Approval of Funding |
| By August 31, 2023 | Project must be completed and reporting submitted.  *County reserves the rights to extend deadline* |

**Request for Funds**

**APPLICATIONS ARE DUE BY 5PM EST ON June 30, 2022 BY EMAILING TO** [**nicholsj@rightplace.org**](mailto:nicholsj@rightplace.org)

**Applications received after the deadline will not receive consideration.**

**PROJECT NAME:**

**ORGANIZATIONAL INFORMATION**

Organization Name:

Contact Name: Phone:

Email:

Address:

Describe the agency/organization’s entity type (governmental agency/department, nonprofit corporation, for-profit corporation, partnership, LLC, etc.)

Organization’s Annual Budget:

Briefly describe your agency/organization’s fiscal oversight / internal controls to

minimize opportunities for fraud, waste and mismanagement

How does your agency/organization plan to segregate ARPA funds from other agency funds for purposes of identification, tracking, reporting and audit?

Please list any other ARPA or Federal Stimulus/Covid Relief funding your organization has received:

Amount: Source:

Amount: Source:

Amount: Source:

Please list staff or volunteer team who will be leading this project and their related credentials and experience that provide them with the capacity to see the project to successful completion *(Resumes/Bios may be attached):*

If third party contractors or consultants will be used for successful completion of the project, please list/describe here:

**PROJECT INFORMATION**

Title:   
Brief Project Description (*Supporting documents may be attached*)

a. Describe the need for your program/project.

b. Identify any other organizations in Lake County that address this need.

c. Describe your level of collaboration with other agencies on this project.

e. Specifically, what will you use ARPA funds for?

f. Who will benefit and how?

g. How will you prevent the duplication of Benefits to end users?

Proposed Start Date: Proposed End Date: (no later than 8/31/23)

Total Project Cost: County Funds Requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you were to receive a lesser amount, would the project still be possible?

Explanation of scalability:

Please list any long-term / maintenance costs associated with the project: $

If long-term costs are associated, how they will be funded:

Which County Priority Need does the project address (see page 1):

Explanation of how Lake County residents/businesses will be directly impacted by the project:

Estimate how many /which Lake County residents/businesses will be directly impacted by the project *(township residents, students, families, business owners, etc.):*

Estimated revenue to be created by the project:

Explanation of revenue:

Estimated value added to Lake County tax base to be created by the project:

Explanation of value:

Estimated Lake County jobs to be created/retained by the project:

Explanation of job creation/retention:

List any collaborative partners for the project and their role:

Why should the project receive a portion of the limited County ARPA funding? What specific outcomes will be achieved? \_\_\_\_\_\_

**PROJECT BUDGET**

**List category totals below and attach a more detailed project budget if applicable.**

*Revenue:*

Source Amount Committed? Inkind? Description

NAME $ Y/N Y/N detail

NAME $ Y/N Y/N detail

NAME $ Y/N Y/N detail

NAME $ Y/N Y/N detail

*Expenses:*

Line Item Amount Description

Salaries & Benefits

Professional Services

Equipment & Materials

Office Supplies & Meetings

Other

Other

Other

**BUDGET NARRATIVE**

Explain any budget items as necessary:

**ATTACHMENTS**

501 (c)3 Status

Resolution or Leadership Letter of Support

Project Team Resumes

Budget Detail

Most recent annual financials (990, audit)

Additional Supporting Documentation

**CERTIFICATIONS**

**The undersigned applicant certifies the following to be true and submits this application on behalf of the organization listed below:**

* + Information supplied in this application is true to the best of applicant’s knowledge
  + Applicant is eligible and authorized to apply for Lake County ARPA funds (see p.1)
  + If awarded funding, applicant will meet all project completion and reporting requirements and deadlines.

**THIS DOCUMENT CERTIFIES TO THE BEST OF ITS KNOWLEDGE:**

1. The information submitted to the County in this proposal, and substantially in connection with this

proposal, is true and correct.

2. The applicant is in compliance with applicable laws, regulations, ordinances and orders applicable to it that could have an adverse material impact on the project. Adverse material impact includes lawsuits, criminal or civil actions, bankruptcy proceedings, regulatory action by a governmental entity or inadequate capital to complete the project.

3. The applicant is not in default under the terms and conditions of any grant or loan agreements, leases or financing arrangements with its other creditors that could have an adverse material impact on the project.

4. The applicant has to disclose, and will continue to disclose, any occurrence or event that could have an adverse material impact on the project.

**THE AUTHORIZED REPRESENTATIVE UNDERSTANDS:**

1. This proposal and other materials submitted to Lake County may be subject to disclosure under Michigan’s Freedom of Information Act, and the County’s review of such materials will be subject to Michigan’s Open Meetings Act.

2. Submitting false or misleading information may result in this proposal being found ineligible for financial assistance under the funding program, and the authorized representative may be subject to civil and/or criminal prosecution.

3. Approved projects will be required to submit appropriate documentation to substantiate reimbursement requests and will be subject to audit accountability standards.

4. This form and criteria may be subject to change as determined by Lake County.

I certify that the requested funding is needed to ensure this project will happen in Lake County.

Applicant Organization:

Name: Title:

Signature: Date: