

STATE OF VERMONT: REGIONAL ECONOMIC DEVELOPMENT GRANTS PROGRAM

APPLICATION AND THE ATTACHMENTS CHECKLIST

FOR INTERNAL USE ONLY - YEAR AND	GRANT FISCAL YEAR	FY –
1. Name and Address of the Sponsoring Organization or Municipality, RDC/RPC:		
2. On Behalf of: Company Name and Addre	ess:	
3. Name of the contact person completing	the application:	
4. Phone Number:	Email:	
5. Federal ID Number: (required)		
6. Amount Requesting:		
7. Project (brief description):		

ATT	TACHMENTS CHECKLIST	✓
A.	Complete the three-page application – application must be signed and dated	
B.	Please describe your project in three pages or less: a) the history of the project	
	b) what are the supported services for the intended project, i.e., who supports this project and who will benefit from this project	
	c) proposed timetable for this project	
	d) specify how many new jobs will be created and/or how many jobs will be retained	
	e) specify how this money will be used to enhance the project	
	f) if the request is <i>not fully funded, what is the lowest amount acceptable</i> for this project; and what would be the affect if the project is not granted	
C.	Project Breakdown – breakdown each segment of the proposed project; equipment, materials, labor etc.	
D.	1:1 Financial Funding Match Requirement – You cannot use any State or Federal funds as your 1:1 financial funding match. You must be able to submit documented proof you have the committed funds in hand, and not pledged for the amount of the grant you are requesting, when the grant application is submitted. In-kind contributions of labor and/or materials or any other types of in-kind services are not allowed to be used as your 1:1 financial funding match requirement.	

E.	Provide all funding sources for the proposed project; including loans, other grants etc.	
F.	Project must be shovel-ready and must have all required permits in hand before submitting your application.	
G.	Business Plan – It is not required, but preference will be given to applicants who submit business plans along with their application. The Vermont Small Business Development Center (VtSBDC) is available to assist entrepreneurs and small business owners in the development of business plans at all stages. You can locate an advisor near you, as well as learn more about their no-cost, confidential, one-on-one advising services at www.VtSBCD.org . You can select "request advising" and a member of the VtSBDC team will respond to your request. In the meantime, you can find tools, templates and information on business plans and planning on the "resources" page.	
H.	Provide a list of your Board of Directors and their terms of office on a separate sheet of paper, if applicable	
I.	If a Non-Profit Organization, attach a copy of your 501(c) (?) IRS determination letter or that of your Fiscal Agent (does not apply to Municipalities)	
J.	Please include the first two pages of the organization's form 990 (required for Non-Profit Organizations)	
K.	Attach a maximum of three letters of support that represent the community's support from Selectboards, City Councils, Planning Commissions, Recreational Boards, Citizens at-large and Schoolboards supporting this project. Reminder – this grant process is designed to be simple and represent a community's desire; letters from local boards or citizens are preferred over letters from legislators or elected officials.	
L.	Attach any other information that you feel would be helpful in assisting the committee members in making an award determination.	

The deadline to submit applications is July 31st each year and grant submissions must be postmarked by the deadline date. If July 31st falls on a weekend, the deadline will be extended to the following Monday. Please mail one (1) hard copy of your completed application and all corresponding documentation, no staples please, to the following address:

Department of Buildings and General Services 133 State Street, 5th Floor, Montpelier, VT 05633-5801 Attn: Judy Bruneau, Grants Administrator 802-828-3519

State of Vermont Regional Economic Development Grants Project Budget Sheet

DO NOT INCLUDE IN-KIND FUNDS

Name of the Sponsoring Organization or Municipality/On Behalf of:				
Please Use Whole Numbers	<u>Dollars</u>			
A. Total capital expenditure of the project for which you are so (This project only)	eeking funds:			
B. Regional Economic Development Grant request: ***				
C. Existing funding sources for this project to date:	Check Applicable Boxes for Committed Funds Yes/No			
a. Bank Statement (in hand) ***				
b. Commitment Letter (in hand) ***				
c. Donations/Fundraising (in hand) ***				
d. Bond Vote/Town Budget Line Item (in hand) ***				
e. Grants - Non-State/Federal (do not include this grant) ***				
f. Other (in hand) ***				
	Totals			
*** Line B. plus the totals from Lines C. a. – f. must equal Line A. ***				
This program is authorized to award matching grants up to \$25,000.00 per project. Grant funds shall be				

This program is authorized to award matching grants up to \$25,000.00 per project. Grant funds shall be awarded only when documented evidence is presented that the requested funds are committed in hand for the amount of the grant request.

CERTIFICATION

We have we have not project. If yes, please specify:		ng Communities Grants this calendar year for this			
We were denied we were not denied last year for this project.					
We have we have not (the on behalf of organization) received any other Building Communities Grant					
in a previous year.					
If you have, what year:	If you have, what year: Which grant:				
Amount received:					
Description:					
I certify that the above statements are true and accurate to the best of my knowledge.					
Printed Name:	Signature:	Date:			