



STATE OF VERMONT: REGIONAL ECONOMIC DEVELOPMENT GRANT PROGRAM

APPLICATION COVER SHEET AND 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 Address:
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):

ATTACHMENTS CHECKLIST table with columns for item description and status (checkbox). Items include: Board of Directors list, 501(c) IRS determination letter, project description (3 pages or less), project history, supported services, timetable, budget breakdown, funding requirements, and shovel-ready status.

E.	1:1 Financial Match; must be able to submit documented proof you have raised \$1.00 from non-state/federal funds and have those funds in hand (not pledged) for the amount you are requesting for this project; any evidence of a successful bond vote or a specific line item approved within a budget would be useful in gauging support. You cannot use any state or federal funds as your 1:1 financial match. In-kind contributions of labor and/or materials or other types of in-kind matches are not allowed.	
F.	Complete the project budget sheet – page 3 of the application	
G.	Project Breakdown – breakdown each segment of the proposed project	
H.	Provide all funding sources for the proposed project, including loans, other grants etc.	
I.	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.VtSBDC.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.	
J.	Please include first 2 pages of the organizations form 990 (required for non-profit organizations)	
K.	Attach a maximum of 3 letters of support that represent the community’s support from Select boards, 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 you feel would be helpful in assisting the Committee Members in making an award determination. (Colored pictures and sketches are appreciated).	

Grant submissions must be postmarked by the deadline of September 15, 2020. Please mail one (1) hard copy of your completed application and all corresponding documentation to the following address:

Vermont Department of Buildings and General Services
 Attn: Judy Bruneau, Grants Administrator
 2 Governor Aiken Avenue, Montpelier, VT 05633-5801

State of Vermont
Regional Economic Development Grant
Project Budget Sheet

DO NOT INCLUDE IN-KIND FUNDS

Name of the sponsoring Organization or Municipality: _____

		<u>Dollars</u>
A. Total capital expenditure of the project for which you are seeking funds: (This project only)		\$ _____
B. Regional Economic Development Grant request:		\$ _____
C. Existing funding sources for this project to date:	Committed Funds please a check box	
	Yes/No	
a. Donations (in hand) ***	<input type="checkbox"/> <input type="checkbox"/>	\$ _____
b. Fundraising (in hand) ***	<input type="checkbox"/> <input type="checkbox"/>	\$ _____
c. Fees (in hand) ***	<input type="checkbox"/> <input type="checkbox"/>	\$ _____
d. Grants (do not include this potential grant) ***	<input type="checkbox"/> <input type="checkbox"/>	\$ _____
e. Other _____ (in hand) ***	<input type="checkbox"/> <input type="checkbox"/>	\$ _____
Totals		\$ _____

*** Please provide copies of all documents to support your committed funds ***

** This program is authorized to award matching grants up to \$25,000.00 per project. Grant funds shall be awarded only when evidence is presented by a successful applicant that at least \$1.00 has been raised from non-State sources for every dollar awarded under this program. **

CERTIFICATION

We have have not applied for any other Building Communities Grants this calendar year for this project.

If yes, please specify _____

We have have not received any other Building Communities Grants in a previous year.

If you have, what year: _____ Which grant: _____

Amount Received: _____

I certify that the above statements are true and accurate to the best of my knowledge.

Printed Name:

Signature:

Date: