



COVID-19 FOOD SERVICE ASSISTANCE GRANT

Goal of program: Provide food security with free meals and/or food to families, seniors, kids, and individuals that need assistance due to financial hardship and food insecurity caused by COVID-19.

This program facilitates providing food assistance to community members that need it due to impacts from COVID-19. The program provides funding to existing local entities (businesses or non-profits) that are seeing an increase in community need in the food programs that they currently offer (i.e. food pantries, food boxes, free meals, and delivery of food). Restaurants may offer free meal assistance to those who need it. Up to \$3000 may be requested by eligible entities. Applicants that applied in the first round may apply again once proof that all previous funds received have been expended. Documentation and reporting of services provided is required. This program will be first come first serve based on receipt of application until funding runs out for this program. Deadline for applications is November 1, 2020. Funding assistance will be paid by check which must be cashed by December 30, 2020

Signed applications may be submitted to City Hall in person, by mail addressed to Wrangell CARES Act Funding Assistance, P.O. Box 531, Wrangell, AK 99929, or by email to wrangell@wrangell.com. All applications must be completed in full with an original signature to be eligible for consideration for funding. Review could take up to two weeks. Please email questions to wrangell@wrangell.com and include a phone number. Staff will respond within 24-48 hours.

All successfully funded applications could be audited as part of a Municipal audit for the appropriate use of CARES Act funding. Please retain all necessary records that will provide back up support for your application claims.

ELIGIBILITY CRITERIA

1. Restaurants defined includes restaurants, fast food services, and food trucks.
2. Non-profits must be currently providing a food service program in Wrangell.
3. Other organizations that provide food related services within Wrangell must apply under an established non-profit or business.
4. A current Alaska Business License of record.
5. If an LLC or Corporation, please provide the following documentation showing good standing: Articles of Organization and a Certificate of Organization for an LLC; or for corporations or non-profits, Articles of Incorporation and Certificate of Incorporation.
6. All applicants must submit a signed W-9.



Received by: _____
Time: _____
Date: _____
Application No.: _____

COVID-19 FOOD SERVICE ASSISTANCE GRANT

The following information is required for consideration for application review. All business information will be kept confidential to the extent permitted by law and will only be used for evaluation of the GRANT award. All questions must be answered.

1. BUSINESS or ORGANIZATION NAME:

2. FEDERAL E.I.N. : _____

3. BUSINESS/ORGANIZATION PHONE NUMBER (including area code):

4. BUSINESS/ORGANIZATION MAILING ADDRESS:

5. BUSINESS/ORGANIZATION PHYSICAL ADDRESS:

6. EMAIL ADDRESS (For application contact):

7. ORGANIZATION TYPE:

Business entity (identify type _____)

Non-profit entity (identify type _____)

Other (identify _____)

8. PRIMARY BUSINESS/ORGANIZATION FOCUS _____

9. HOW MANY PEOPLE DO YOU SERVE THROUGH YOUR FOOD PROGRAM? _____

10. FUNDING AMOUNT BEING REQUESTED:

\$ _____

11. PROGRAM REQUEST DESCRIPTION: Describe the need you are addressing; how the need is related to COVID-19; how the money will be used; and in what time frame. Attach an additional page if necessary.

12. ATTACHMENTS

Please check the boxes that you acknowledge the statement and/or are attaching the requested information.

Attach a copy of current Alaska Business License.

Attach a copy of Articles of Organization and Certificate of Organization for LLC, showing good standing;

OR

Attach a copy of Articles of Incorporation and Certificate of Incorporation for Corporations or Nonprofits, showing good standing.

If a grant is awarded, the applicant will be required to submit a status report once a month identifying **number of meals served** and **estimated number of persons served**, or description of how food was disbursed. Applicants will be expected to track and report this information and provide status of amount expended and amount remaining.

All applicants must submit a completed W-9.

NOTICES:

1. Applying for the City and Borough of Wrangell Food Service Grant DOES NOT GUARANTEE award of funding.
2. The Applicant agrees that the City and Borough of Wrangell will be held harmless from any claims arising from the application. The applicant waives and releases any claim arising out of or relating to the application that it may have against the City and Borough of Wrangell.
3. It is the sole responsibility of the Applicant to determine or to seek independent advice to determine the tax implications to the Applicant and its owners. Please confirm your understanding of these three (3) disclaimers by checking "Yes".

Yes

No

CERTIFICATION:

By signing my name, I certify that all the information provided in this application is true and accurate. I agree to assist the City and Borough of Wrangell in verifying any information provided in this application and to provide additional information, including tax returns, if requested.

I have read and understand this application. I am authorized to complete and submit this application on behalf of the Business or Organization. I verify that the statements contained herein are true, accurate and complete. I acknowledge that false and inaccurate statements made on the application are grounds for immediate rejection of the application.

Printed Name

For Business/Organization

Signature

Date

APPROVED: _____
REJECTED: _____
DENIED: _____
DATE: _____