



Completed online applications (including all required attachments) are due to Luzerne County by 5:00 pm Eastern on September 15, 2022. Luzerne County ARPA Grant Applications may only be submitted online, at this link. The County is unable to accept paper applications, including those by mail, fax or email submission.

Applicant Informational Sessions will be held during the open application period. Register to attend on one of the following dates:

- [REGISTER: Wednesday, August 17th at 10:00 AM \(EST\)](#)
- [REGISTER: Friday, August 19th at 1:00 PM \(EST\)](#)
- [REGISTER: Wednesday, August 31st at 2:00 PM \(EST\)](#)

Webinars will be recorded and links to the recordings will be posted to the Luzerne County ARPA Grant page.

For technical assistance while completing your online application, please send an email to LuzerneARPA@bmc-llc.net. Please note, technical assistance will be provided through 4:00 pm Eastern on September 15, 2022.

Luzerne County

American Rescue Plan Act Grant Program (ARPA Grant) Application

Section 1. Applicant Information

Please provide the following information for your agency/organization:

Applicant Agency/Organization Name *

Address *

Street Address

Street Address Line 2

Primary Point of Contact

Name *

First Name

Last Name

Title *

Email *

example@example.com

Phone Number *

Please enter a valid phone number.

Fax Number

Please enter a valid phone number.

Federal Identification Number

Organization Information

Agency/Organization Type: *

- 501(c)(3) Nonprofit
- Other Nonprofit
- Small Business
- County Department
- Local Municipality
-

If "Other Nonprofit", enter legal agency/organization type. Otherwise, enter N/A. *

Project/Program Name *

Brief description of proposed project/program (150 character limit) *

0/150

Section 2. Project/Program Objectives

Please respond to the questions below:

General and Programmatic

1. Select the Eligible Use Category that best matches your project/program objective. See Exhibit A for the eligible activity criteria. *

- Support the COVID-19 public health and economic response (if selected, you MUST also select at least one option in question 1a.)
- Provide premium pay for eligible workers performing essential work
- Invest in water, sewer, and broadband infrastructure

1a. If you selected "Support the COVID-19 public health and economic response" in question

1, select at least one of the following subcategories. Otherwise, select N/A. *

- Public Health
- Assistance to Households
- Assistance to Small Businesses
- Assistance to Nonprofits
- Aid to Impacted Industries
- Public Sector Capacity (for Government applicants ONLY)
- N/A

2. Please describe, in detail, the proposed project/program and how it will support Luzerne County in its efforts to respond to and recover from the COVID-19 public health emergency. Refer to Eligible Activities (Exhibit A) for more detailed information related to your selected eligible activity. (1000 character limit) *

0/1000

3. Review the Eligible Activities (Exhibit A) document. For the eligible use category you selected in Question 1, provide a detailed narrative describing how your proposed project/program meets the eligibility requirements of the selected category. (1000 character limit)

For example, a County Department proposing to make grants available to disproportionately impacted small business looking to cover costs related to expansion would have selected "Support the COVID-19 public health and economic response" in question 1 and "Assistance to Small Businesses" in question 1a. The following information should be included in their narrative:

a. Information that confirms that businesses supported through the proposed project will have no more than 500 employees, or if applicable, the size standard in number of employees established by the Administrator of the Small Business Administration for the industry in which the business concern or organization operates, and are a small business concern as defined in section 3 of the Small Business Act (which includes, among other requirements, that the business is independently owned and operated and is not dominant in its field of operation)

b. Criteria for determination that the Small Business is considered a Disproportionately Impacted Small Business (Small businesses operating in Qualified Census Tracts, Small businesses operated by Tribal governments or on Tribal lands, small businesses operating in the U.S. territories)

Enter your response below: *

0/1000

4. Will your proposed project/program use these grant funds to support an evidence-based intervention (evidence-based refers to interventions that have been tested, proven effective and are backed by reputable research and studies – See Appendix 2 of the State and Local Fiscal Recovery Funds Compliance and Reporting Guidance)? *

- Yes
- No

4a. Please briefly explain your response while being as specific as possible. (1000 character limit) *

0/1000

5. Please describe, in detail, how your agency/organization intends to measure the impact of its proposed project/program. (1000 character limit) *

6. What is the location (address and neighborhood) of your proposed project/program? Be as specific as possible. Preference may be given to those projects that are shown to benefit the Luzerne County residents and community partners. (150 character limit) *

0/150

7. Is this a new, existing, or modified/expanded project/program? *

- New
- Existing
- Modified/Expanded

8. Will this project/program benefit any minority populations that have been impacted or disproportionately impacted by COVID19? *

- Yes
- No

8a. Briefly explain your response while being as specific as possible. (500 character limit) *

0/500

9. Does this project/program reduce adverse climate impacts and/or promote environmental sustainability? *

- Yes
- No

9a. Please briefly explain your response while being as specific as possible. (500 character limit) *

0/500

Budget/Funding

1. How much funding is your agency/organization requesting? *

Enter dollar amount in the form of a number value - for example 100000 for one hundred thousand dollars. Please do not enter dollar

1b. The Luzerne County ARPA Grant may require evidence of matched funds equal to five percent (5%) of the amount awarded by the County. If your organization/agency's application is approved for funding, are you able to provide evidence of the availability of these matched funds? *

- Yes
- No

2. But for receiving this funding, would your agency/organization be able to implement this proposed project/program? *

- Yes
- No

2a. Please briefly explain your response while being as specific as possible. (500 character limit) *

0/500

3. Will your agency/organization require up front ARPA grant funding, or will your agency/organization seek reimbursement for eligible expenses? *

- Advance/Up Front Funding Requested
- Draw Down/Reimbursement Funding Requested

3a. For applicants requesting advanced/upfront funding, describe the basis for your request in the space provided. Otherwise enter N/A (500 character limit) *

0/500

Required Documentation/Application Checklist

Use this checklist as a guide to ensure that your application is complete. Note: You are not required to check off each document for successful application submission, but you must actually submit all required documents for your application to be considered "complete".

Luzerne County requires the following documents be uploaded to and submitted with the ARPA application.

- Complete and Signed ARPA Grant Application
- Pennsylvania Secretary of State Business Filing – Certificate of Good Standing (dated within 12 months) - Upload below.
- Previous Year Federal Business Tax Return (2021 if filed, or 2020 if last year’s filing has not been completed) - Upload below.
- Detailed budget for the proposed project/program using Luzerne County - ARPA Grant Budget Template (Exhibit C)
- Form W-9 (Exhibit D) - Upload below
- Completed Vendor Compliance Form (Exhibit E) - Upload below
- A proposed project/program timeline (funds must be expended by December 31, 2024)
- Request for Advance/Reimbursement Form (Exhibit G)- Upload below
- Evidence of “Active” standing in System for Award Management (SAM.gov) - recommended at time of application, but MUST be submitted prior to the execution of a subrecipient grant agreement - Upload below if available
- Any additional relevant documents regarding the project - Upload below


APPLICATION CERTIFICATION AND SIGNATURE PAGE

THE APPLICANT CERTIFIES TO THE BEST OF ITS KNOWLEDGE:

1. The information submitted to the Luzerne County in this application, including required supporting documentation, is true and correct.
2. The applicant is in compliance with all applicable federal, state, and local laws, regulations, ordinances, and orders and must report any and all noncompliance with said laws that could have an adverse material impact on the business. Adverse material impact includes lawsuits, criminal or civil actions, bankruptcy proceedings, or regulatory action by a governmental entity.
3. The applicant has not received other federal, state, or local assistance for the same expenses as submitted in this application.
4. The applicant is current on all federal, state, and local (i.e., property taxes) taxes.

Authorized Official Name, Title *

Date Signed

| | | | |
|-------|-----|------|---|
| 08 | 11 | 2022 |  |
| Month | Day | Year | |

Submit