FY24 NODA REAP APPLICATION

		REAP Rec	luest Amoun	τ:	
Project Category: (See F. 1) Economic Deve 2) Infrastructure: 3) Emergency Ser	elopment:	4) America	an's with Disa	abilities Act (A	
Project Name: (example:	resurfacing streets,	water line improvements,	new fire station	n, etc.)	
Applicant Information					
Name of Applicant:					
Mailing Address:					
Physical Address:				,.	
City: Telephone:	State	ZIP Code	County	•	
Name of Chief Elected					
Name of Clerk:					
Population:					
	00 based on the ci	urrent US Census data)			
House District #:		Senate	District #:		
Name of Legal Council:					
Address:					
City:			p Code:		
Telephone:		Fax Num	ber:		
Second Party Applicant					
` <u>*</u>		nly if county is appl		0 0 0	• 1
Name of Second Party:					
Mailing Address:					
Physical Address:					
City:					
Telephone:					
Name of Contact Perso	n and Title:				

roiect Priority	and Justificatio	n·			
Explain the need o	of the project and lis			e project d	a high priority to fund? Examp
oject Impact:					
Number of	Number of	Number of	Number of Perm		Number of Permanent
Beneficiaries	Homes Built	Businesses Serviced	Jobs Retaine	ea	Jobs Created
onsent Order	Information				
		OCC consent order	/ violation?	YES_	NO
				NO	
• Is your city/town under ODEQ consent order / violation? YES NC				NO	
o If YES, is it involved or a part of this project? YESNO				NO	
• If your c	onsent orders/	violations are not inv	volved or a part o	of this p	project, why is it not a
higher p	riority than the	project you are req	uesting funds fo	r?	

Has your community completed / started a Capital Improvement Plan (CIP)? YES_____NO____ If YES, what year is your most current CIP? _____ If YES, how is this project prioritized (as listed in your CIP)? Mandatory(M)___ Essential (E)___ Desirable (D)___ Deferrable (Y)___ not Listed___ If YES, submit only the Capital Needs Summary form from the CIP. Do not attach the Full CIP. Are you willing to do the project in stages if full funding is not available? YES_____ NO___ Can you complete the project as described if full funding is not available? YES_____ NO___ Will you be applying for other funding to use for this project including, but not limited to CDBG grant, OWRB grant, USDA grant/loan, etc.? YES_____ NO____

NAN	TE OF APPLICANT:(Use		e of applicant fron	ı the applica	tion informatio	n section)
PRO	JECT CATEGORY: (Use the sam 1) Economic Development: 2) Infrastructure: 3) Emergency Services:		4) American	's with Disa	<i>cation)</i> abilities Act (A Buildings	
PRO	JECT NAME:(Use		ect name from the	start of the a	application)	
Fina	ncial (Leverage)	me same proje	eer name from me	sterr of the c	<i>ippiieurion</i>	
<u>т па</u> А.	REAP Request Amount			Ś		
В.	Local Contribution			\$		
C.	Other Funds (loans, grants, s	sales tax)		\$		
	Source of other funds:					
	Date other funds available:					
	Award date of other funds:					
	TO	OTAL PROJE	ECT COST (A+B	+C) <u>\$</u>		
→	TOTAL PROJECT	COST SI	HOULD EQ	UAL C	OST EST	IMATES <
Phot	tos and/or Map Provided:	YES	NO			
Lega	ll Description:					
Land	downer Information:					
(Pro	ect Description: vide DETAILED written descripti			-	•	U .

RESOLUTION

AUTHORIZING APPLICATION FOR FINANCIAL ASSISTANCE FROM THE RURAL ECONOMIC ACTION PLAN (REAP) FUND

Whereas, the	desires to	seek funding fr	om the Rural
Economic Action Plan Fund (REAP) for			
the; and			
			. 10
Whereas, it is in the best interest of the res			
the preparation and submission of an application f		istance from the	Rural Economic
Action Plan Fund (REAP), in the form of a grant; an	d		
Whereas, the will	consider accep	oting less than th	ne requested
amount or staging the project in phases if full fund	ing is not avail	able; and	
Whereas, the ha	s and nledges		
towards this project if full funding is not awarded.	s arra preages <u>.</u>		
		6.1	
now, therefore, be it resolved that, the			
hereby authorized and directed to sign an applicat			•
process a grant application through the Rural Econ	iomic Action Pl	an Fund (REAP)	on behalf of the
<u> </u>			
PASSED AND APPROVED by the	this	day of	, 20 .
Typed Name and Title of Chief Elected Official			<u> </u>
Typed Name and Trice of Chief Elected Official	Dute		
Signature of Chief Elected Official			(SEAL)
Attest:			
Subscribed and sworn to before me	, 20	Ο.	
My commission expires	·		
Signature of County, City or Town Clerk			

FY24 PROJECT CATEGORY LIST

Points will be awarded for projects in these 5 categories. Categories listed is priority level. Number one is highest priority down to number 5 being the lowest priority.

1. **ECONOMIC DEVELOPMENT:**

The project creates jobs, increases population, housing construction, or can exhibit an increased or positive financial impact on the local economy; such as tax revenue, utility sales etc.

2. **INFRASTRUCTURE IMPROVEMENT:**

Any water, wastewater, street, electrical, or gas project. Engineering and architect fees will be allowable only if tied to a CDBG application, or the REAP application is not for just engineering and/or architect expenses only. Inspection, maintenance and administrative fees are non-allowable costs. Those projects under Oklahoma Department of Environmental Quality (ODEQ) consent order will be given additional priority points in this category.

3. **EMERGENCY SERVICES:**

Fire, police and EMS, which includes vehicles, buildings, and equipment, storm shelters, storm sirens etc.

4. <u>AMERICAN'S WITH DISABILITIES ACT (ADA):</u>

Projects that will provide handicapped accessibility to any municipal facility.

5. **OTHER:**

Any other type of project will be prioritized in this order:

- A. <u>MUNICIPAL</u>: Construction or improvements to city building, purchase of equipment, tractor mowers, backhoes, paving of parking lots, utility vehicles, etc.
- B. <u>BUILDINGS</u>: Community buildings, courthouses, senior nutrition centers, meeting rooms or similar public facilities (libraries; museums).
- C. <u>PARKS</u>: Pavilions only.

REAP APPLICATION CHECK LIST Needed Documents for Application Compliance

Completed Application
Professional Cost Estimate
Resolution
Consent Order / Violation (if applicable)
CIP Capital Needs Summary Form or Resolution amending your CIP (if applicable)
Procurement Policy
Photos and/or Maps of Proposed Project
Most Recent Audit * If county sponsored, provide county's most recent audit. * If rural water district, provide RWD's most recent audit. * If rural fire district/depts., provide county's most recent audit and copies of two most recent month bank statements.
Inform NODA of other funds used to finance the project in the Strategic Planning Section of the application and on Attachment A.