

Sample Application

RURAL ECONOMIC ACTION PLAN (REAP)
APPLICATION NUMBER: REAP 25-

I. APPLICANT INFORMATION

- A. Name: _____ FBO: _____
(City, Town, or County) (Fire Dept, Emergency Mgnt, Water Authority, etc.)
- B. Contact Person: _____ County: _____
- C. Address: _____ District: _____
_____ Phone: _____
- D. E-Mail: _____
- E. Applicant's Federal Identification Number (FEIN): _____
- F. Unique Identifier Number: _____
- G. What type of entity is this application for: _____
- H. Alternate Contact person: _____ Phone: _____
- I. Population (for City/ Town/ Unincorporated area): _____
- J. Total funds available for current year operational budget: _____
- K. Senate District: _____ House District: _____
- L. Is the entity applying incorporated: Yes _____ No _____
- If yes, is it required by the State Auditor's Office to submit to an annual audit or an agreed-upon-procedure report? Yes _____ No _____
- M. Did you get awarded a REAP grant for 2024? Yes _____ No _____
- N. Did you attend a 2024 REAP Training? Yes _____ No _____

II. PROJECT INFORMATION

- A. Project Description: _____

- B. Project location: _____

C. Project Type (per SODA and HB 3291 Listing): _____

D. Total number of people benefiting from project: _____

E. Amount of grant request (See #3 on website application page for Max Amt) \$ _____

| | Grant / Other | Amount |
|--|----------------------|---------------|
| F. Total other grants (type and amount): | _____ | \$ _____ |
| | _____ | \$ _____ |
| | _____ | \$ _____ |

| | In-Kind / Other | Amount |
|------------------------------------|------------------------|---------------|
| G. Local effort (type and amount): | _____ | \$ _____ |
| | _____ | \$ _____ |
| | _____ | \$ _____ |
| | _____ | \$ _____ |

H. Total Project Costs :(E +F +G = H (**Program will total**) \$ _____

III. PROJECT IMPACT

A. Does the project create and/or save jobs (affidavits/documentation must be mailed in)?

Yes _____ No _____ NA _____

B. Are you a current member of SODA in good standing?

Yes _____ No _____

C. Does your entity have a multi-jurisdictional/cooperative agreement?

A COPY OF THE AGREEMENT MUST BE ATTACHED

Yes _____ No _____ NA _____

D. Is the project under a Consent Order?

A COPY OF THE CONSENT ORDER MUST BE ATTACHED

Yes _____ No _____

