

# The Town of Chestertown ARPA Advisory Task Force Application Form

AMERICAN RESCUE  
PLAN ACT (ARPA)



Town of  
Chestertown

The American Rescue Plan Act (the “ARPA”) was signed into law on March 11, 2021. The Town of Chestertown (the “Town”) has been deemed eligible for the Federal ARPA aid and intends to utilize a portion of such funding to provide local stimulus to support area stakeholders.

## APPLICATION GUIDELINES

All applicants are required to fill out the Letter of Intent. Qualified applications will be supplied an application form in its entirety. Incomplete or deficient applications will be disqualified for consideration or returned with notes.

- Organizations only; no individual requests
- \$50,000 minimum and high community impact for first phase of applications; there may only be one round of applications.
- Priority shall be given to organizations that operate within Town limits. However, organizations providing services to Town residents are also encouraged to apply.

By completing the Letter of Intent, the applicant confirms that they understand that this is a competitive process, and their funding request may or may not be selected for further consideration.

Tax returns for the last three years (2019, 2020, & 2021) may be required upon request.

Approved applications or projects shall be categorized by the Town to fit within three (3) tiers, as detailed below:

- **Tier 1:** Projects that will have the most immediate impact, are “shovel-ready” capital projects or mature/proven programmatic initiatives deemed to be highly important to the long-term fiscal health of the Town. Tier 1 projects are also characterized by multiple sources of funding. Awards will be made to those projects with the largest impacts.
- **Tier 2:** Projects that are defined by unique deliverables, demonstrated timeline and performance measures. highly important but may not be as urgent or ready to be addressed immediately.
- **Tier 3:** Discretionary applications which may be considered by the Town if funding is available.

**SECTION I  
PROJECT INFORMATION**

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**1.1 NAME OF ORGANIZATION:**

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**1.2 TYPE OF ORGANIZATION:**

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**1.3 GENERAL DESCRIPTION OF SERVICES (BENEFITS, TYPES AND RECIPIENTS):**


**1.4 ORGANIZATION ADDRESS:**


**1.5 EIN NUMBER:**


**1.6 NUMBER OF EMPLOYEES:**


**1.7 SUPPLY STATE CERTIFICATE OF GOOD STANDING**

**SECTION II  
CONTACT INFORMATION**

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**2.1 PRIMARY CONTACT NAME:**

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**2.2 OTHER AUTHORIZED CONTACT(S):**

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**2.3 CONTACT PHONE (INCLUDE EXTENSION, IF APPLICABLE):**

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**2.4 CONTACT EMAIL:**

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**2.5 PREFERRED METHOD OF CONTACT:**

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**SECTION III  
ADDITIONAL INFORMATION**

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<b>3.1 IS YOUR ORGANIZATION LOCATED WITHIN THE CHESTERTOWN LIMITS:</b>	
Yes _____	No _____

<b>3.2 DOES THE ORGANIZATION PROVIDE SERVICES TO TOWN RESIDENTS?</b>	
Yes _____ Number of Residents _____	No _____

<b>3.3 DOES THE ORGANIZATION POSSESS A CURRENT TAX-EXEMPT STATUS AS A PUBLIC CHARITY UNDER SECTION 501(C)(3), 501(C)(4), 501(C)(6), OR (19) OF THE INTERNAL REVENUE CODE, LISTED ON THE IRS MASTER FILE?</b>	
Yes _____ Type _____	No _____

<b>3.4 IS YOUR ORGANIZATION A FOR-PROFIT BUSINESS?</b>	
Yes _____	No _____

**SECTION IV  
INTENDED PROJECT PURPOSE**

<b>4.1 WILL THE PROJECT ALLOW YOU TO EXPAND YOUR ORGANIZATION?</b>	
Yes _____	No _____
How?	

<b>4.2 WHAT IS THE REQUESTED AMOUNT / ESTIMATED PROJECT BUDGET?</b>
Funding Request:
Estimated Project Budget:

<b>4.3 SUPPLY BUDGET DETAILING USE OF FUNDS</b>
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<b>4.4 DESCRIBE THE INTENDED USE OF ARP FUNDS? Use additional space (500 word maximum).</b>

<b>4.5 DOES THE PROJECT BUDGET HAVE ANY ADDITIONAL SOURCES OF FUNDS? PLEASE EXPLAIN HOW FUNDS WILL BE USED AND INTEGRATED. Use additional space (500 word maximum).</b>

<b>4.6 IF AN AWARD IS MADE, DESCRIBE THE FORECASTED IMPACT/BENEFIT AND THE ANTICIPATED LENGTH OF IMPACT/BENEFIT (1, 5, 10, 15, 20+ YEARS) <sup>(1)</sup>? Use additional space (500 word maximum).</b>

<b>4.7 WHICH ACCEPTABLE USE OF FUNDS CATEGORY IS YOUR PROJECT?</b>	
	Response to the public health emergency or its negative economic consequences
	Provision of premium pay to eligible workers
	Revenue replacement
	Investments in water, sewer, and broadband infrastructure

<b>4.8 CAN THE ORGANIZATION REDUCE PROJECT SCOPE IF THE ORGANIZATION DOES NOT RECEIVE FULL FUNDING?</b>	
Yes _____	No _____

<b>4.9 CAN THE ORGANIZATION ACHIEVE THE SAME GOALS WITH A REDUCED SCOPE IF THE ORGANIZATION DOES NOT RECEIVE FULL FUNDING?</b>	
Yes _____	No _____
If No, how will the goals change?	

<b>4.10 HAS THE ORGANIZATION RECEIVED FUNDING FROM OTHER SOURCES FOR THIS PROJECT?</b>	
Yes _____	No _____
If Yes, from where and whom and how much?	

<b>4.11 WILL THE FUND BE USED AS SUBGRANTS TO OTHER ORGANIZATIONS?</b>	
Yes _____	No _____
If Yes, how?	

(1) *The fiscal and/or community impact(s) should be quantifiable and qualifiable. Details about the short and long-term impact(s) to the Town, the Organization and Town stakeholders should be included.*

## SECTION V COVID-19 QUESTIONS

<b>5.1 WAS YOUR ORGANIZATION IMPACTED BY COVID-19</b>	
Yes _____	No _____

<b>5.2 QUALIFY AND QUANTIFY HOW YOUR ORGANIZATION IS IMPACTED BY THE COVID-19 PANDEMIC?</b>	

<b>5.3 DID YOUR ORGANIZATION LAY OFF EMPLOYEES DUE TO COVID-19</b>	
Yes _____	No _____
If Yes, How Many?	

<b>5.4 DID COVID-19 IMPACT YOUR HIRING?</b>	
Yes _____	No _____
If Yes, How?	

<b>5.5 DID COVID-19 IMPACT YOUR REVENUES</b>	
Yes _____	No _____
If Yes, Quantify?	

<b>5.6 HAVE YOU EVER APPLIED FOR ANY FORM(S) OF COVID-19 RELIEF? (PPP Funds, State/Federal Grants/Loans)</b>	
Yes _____	No _____
If Yes, Please Provide Details?	
If Yes, are any Awards Pending?	

**SECTION VI  
OPTIONAL INFORMATION**

<b>6.1 PROVIDE ADDITIONAL INFORMATION YOU FEEL MAY SUPPORT YOUR APPLICATION. <sup>(1)</sup></b>

*(1) Optional, not required. Please use additional space if necessary (500 Word Maximum).*



## NOTE: HELPFUL TOOL

### SMART GOALS

What are SMART goals? When you set a SMART goal, you simultaneously build your plan for how to achieve it. How? SMART goals are designed in a way that provides a project structure with guidelines while also defining success and outlining exactly how to measure it.

SMART goals are a necessary part of project planning. Creating these goals organizes your project in such a way that you'll not only uncover how to measure your project's success but also what resources you'll need and which steps to take along the way—a great way to start out.



Specific	Measurable	Attainable	Relevant	Time-Bound
Make sure your goals are focused and identify a tangible outcome. Without the specifics, your goal runs the risk of being too vague to achieve. Being more specific helps you identify what you want to achieve. You should also identify what resources you are going to leverage to achieve success.	You should have some clear definition of success. This will help you to evaluate achievement and also progress. This component often answers how much or how many and highlights how you'll know you achieved your goal.	Your goal should be challenging, but still reasonable to achieve. Reflecting on this component can reveal any potential barriers that you may need to overcome to realize success. Outline the steps you're planning to take to achieve your goal.	This is about getting real with yourself and ensuring what you're trying to achieve is worthwhile to you. Determining if this is aligned to your values and if it is a priority focus for you. This helps you answer the why.	Every goal needs a target date, something that motivates you to really apply the focus and discipline necessary to achieve it. This answers when. It's important to set a realistic time frame to achieve your goal to ensure you don't get discouraged.

Use the following SMART goals template with your team to discuss each question and how it shapes what your SMART goal should be.

Problem to solve: [blank]

Specific

- What do we need to accomplish, and why?
- Who should be involved, and why?
- Are there milestones along the way?
- When is the deadline for achieving this goal?

Measurable

- What end measurements signify that we've successfully met our goal?
- How can we measure progress along the way?

Achievable

- Do we have the skills, resources, and time required to achieve our goal?

- If not, can we get them in place within the given timeframe, or do we need to reassess?
- Is the effort to achieve this goal in line with the value of the outcome?

Relevant

- Does the outcome of this goal align with business objectives?
- How can we be sure that it does?

Time-bound

- What is the deadline for achieving this SMART goal?
- Is the deadline realistic?
- Are there smaller deadlines we should set along the way?

SMART Goal: Review the details you've written down. Pull out high-level specific details that outline what you plan to achieve, the timeline of your goal, and how you'll measure its success. Write this down in a SMART goal statement.

SAMPLE

## SECTION VII

### APPLICANT ACKNOWLEDGMENT FORM

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This form is used to acknowledge receipt of the U.S. Treasury's Compliance and Reporting Guidance for State and Local Fiscal Recovery Funds - <https://home.treasury.gov/system/files/136/SLFRF-Compliance-and-Reporting-Guidance.pdf>. *Applicants who do not return the acknowledgment form will be disqualified for consideration by the Town.*

*Complete the following steps:*

1. Read U.S. Treasury's Compliance and Reporting Guidance for State and Local Fiscal Recovery Funds.
2. Sign and date in the spaces provided below.
3. Return *this page* to the Town along with the full application.

*Determine Expenditure Category:*

1. The U.S. Treasury's Compliance and Reporting Guidance for State and Local Fiscal Recovery Funds includes a list of expenditure categories. In the below space, the applicant must identify to the Town which expenditure category/categories are applicable for the intended use of funds.

*By signing below, I agree to the following terms:*

1. I have received, read and understand the U.S. Treasury's Compliance and Reporting Guidance for State and Local Fiscal Recovery Funds, which is attached as Appendix A to this application.
2. Should the Town allocate funds, I am able to and pledge to adhere to all compliance and reporting requirements of the U.S. Treasury as it relates to any State and Local Fiscal Recovery Funds. (The US Treasury guidance requires, at a minimum, quarterly reporting). Additional reporting requirements may be applicable.
3. I understand the Town will contact me if and when additional information is needed, and that information will be provided to the Town to support reporting requirements.
4. If for any reason I am unable to comply with the U.S. Treasury's compliance and reporting requirements I will immediately notify the Town Council by email.

List applicable expenditure categories for the intended use of funds.

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Applicant Signature

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Applicant Title