

Neosho County Outside Entity American Rescue Plan Application Form

Must be COVID-19 related – Response, Mitigation, and Prevention

Department/Company Name:
Department Head/Owner Contact Info:
Name:
Address:
Phone:
Email:
Brief Description of Project:

Project Cost:

Attach the following Supporting documents:

1. State the Purpose for which funds are requested
2. Describe how the funds are eligible under the guidance given and how it relates to one of the seven listed overall categories.
3. Provide trackable outcomes of project. Be prepared to provide follow-up reporting.
4. State any public health purpose served by the use of the funds.
5. If construction is included in the project, **you will need to follow federal procurement and bidding practices.** Are you agreeable to these terms?
6. Attach a detailed list of work and/or expenditures, as information allows.

All this information must be enclosed with the application and will be retained with the ARPA records. All recipients must be prepared to report outcomes of the approved project throughout the grant period. (To be retained for 5 years) **A point of contact for your company must be appointed to provide information on compliance as required for reporting's.**

Please provide your company's DUNS number and proof of SAM.gov registration to be eligible for funding.

When approved, completed invoices must be provided to Heather Elsworth before payments will be made.

Name:	
Signature:	Date Submitted: / /

**Completed application forms to be sent via email to:
Heather Elsworth – nococlerk@neoshocountyks.org**