Meat and Poultry Processing Expansion Program   
Phase 2

Application Template General Instructions

Carefully review the Meat and Poultry Processing Expansion Program (MPPEP) Request for Applications (RFA) before you complete this document.

The MPPEP RFA Funding Opportunity Number is **RD-RBS-23-02-MPPEP**. You will find additional information about the RFA on the MPPEP webpage at this link: [rd.usda.gov/MPPEP](https://www.rd.usda.gov/programs-services/business-programs/meat-and-poultry-processing-expansion-program). (Look for the “Grants.gov Posting” button located to the right of the “Fact Sheet” button near the top of the page.)

* This template is intended to help you, but you do not have to use it in order to submit an application.
* Regardless of whether or not you use the template, you must complete and submit all required federal forms and registrations and include documentation that supports applicant and project eligibility claims.
* Your project narrative must be typed, single-spaced, and in 11-point font. It must not exceed twenty (20) 8.5 x 11 pages (**excluding** the application template and supporting documents listed in Section 4.2.2 of the MPPEP RFA). For example, if the template is 15 pages **before** you begin entering your project narrative information, your application ultimately may be as much as 35 pages in length (15 template pages plus 20 pages of applicant content).
* Documents must be submitted as directed in Section 4.2.2 in the MPPEP RFA and attached to your application package in Grants.gov ([www.grants.gov](http://www.grants.gov)).
* You must ensure you provide complete responses to all eligibility and evaluation questions. Incomplete applications **will not** be considered for funding.
* Certifications, statements, and other standard terms used in this template (examples include “you,” “I,” “we,” “it,” “applicant,” “entity,” “grantee,” among others) refer to the **legal entity** applying for the MPPEP grant. By checking, signing, or otherwise acknowledging these elements, you acknowledge they are true and correct.
* If you have questions regarding this template, email [MPPEP@usda.gov](mailto:MPPEP@usda.gov).

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# Section 1: Applicant Information

## Identifying Information

|  |  |
| --- | --- |
| Applicant Organization Name: |  |
| Phone Number with area code: |  |
| Email: |  |
| Facility Address: |  |
| Mailing Address: |  |

1. **Date your existing business began operations**

|  |  |
| --- | --- |
| (Enter the four-digit year in the box at right. If new, indicate “start- up”) |  |

1. Ownership structure | Describe your business structure. Note if your business model is a cooperative, or otherwise shares profits or ownership with producers.

Cooperative

Profit sharing, employee stock ownership plan (ESOP), or other shared ownership model

Sole proprietor

Corporation

LLC

|  |  |  |
| --- | --- | --- |
|  | Other |  |

1. Species | What species are currently processed at your facility?

|  |  |  |
| --- | --- | --- |
|  | Cattle |  |
|  | Hogs |  |
|  | Chicken |  |
|  | Turkey |  |
|  | Other |  |

**3a. What species will be processed upon completion of your project?**

|  |  |  |
| --- | --- | --- |
|  | Cattle |  |
|  | Hogs |  |
|  | Chicken |  |
|  | Turkey |  |
|  | Other |  |

1. **Current Inspection Status**

Please select the inspection program under which your plant currently operates. Be sure to add your applicable license numbers or the anticipated date for obtaining any licenses during the period of performance of this project.

|  |  |  |
| --- | --- | --- |
| **Select** | **Inspection Program** | **Establishment or license number -or- anticipated date of grant of inspection or other licensing** |
|  | State Meat and Poultry Inspection (MPI) program |  |
|  | Federal-State Cooperative Inspection Program -or- Talmadge-Aiken Program |  |
|  | Cooperative Interstate Shipment (CIS) program |  |
|  | USDA Food Safety Inspection Service (FSIS) Grant of Inspection (GOI), including conditional and permanent |  |
|  | Voluntary USDA FSIS or state inspection of non-amenable species |  |

1. **Hazard Analysis and Critical Control Points**

Do you currently have – or plan to develop – a Hazard Analysis and Critical Control Points (HACCP) plan:

|  |  |  |
| --- | --- | --- |
|  | Yes. Date in effect: | MM/DD/YYYY |
|  | No, but it’s in development. Anticipated completion date: | MM/DD/YYYY |
|  | No. |  |

You can learn more about HACCP plan development at this link: <https://www.fsis.usda.gov>.

## Authorized Organization Representative (AOR)

Identify the person who will be the main contact for correspondence and who is responsible for signing documentation in the event an MPPEP Phase 2 grant is awarded. This information must match box 21 of the SF-424 family of forms (available at [tinyurl.com/28zbcbpx](https://tinyurl.com/28zbcbpx)).

|  |  |
| --- | --- |
| **Name:** |  |
| **Title:** |  |
| **Phone Number with area code:** |  |
| **Email Address:** |  |
| **Mailing Address:** |  |

## Market Share

Specify the species to be processed and confirm whether the applicant is within the top four processors in the industry for the species or provide to or sourcing from the top four processors.

|  |  |  |
| --- | --- | --- |
| **Species** | **Is the applicant within the top four processors nationally for the species?** | **Does the applicant provide to – or source from – an entity within the top four processors nationally for the species?** |
| Cattle | YES  NO | YES  NO |
| Hogs | YES  NO | YES  NO |
| Chicken | YES  NO | YES  NO |
| Turkey | YES  NO | YES  NO |

# Section 2: Project Information and Executive Summary

## Project Title

Provide a descriptive project title in 15 words or fewer in the space below. This information must match box 15 of the SF-424 family of forms (available at [tinyurl.com/28zbcbpx](https://tinyurl.com/28zbcbpx)).

Enter your project title in the space below:

|  |
| --- |
|  |

## Funding Request

In U.S. dollars, enter the total amount of federal funds you are requesting. This must match the total amount requested on Line 18a, “Estimated Federal Funding” of the SF-424 family of forms (available at [tinyurl.com/28zbcbpx](https://tinyurl.com/28zbcbpx)).

* The total cost share is the sum of Lines 18b – 18f on the SF 424.
* The total project cost is line 18g on the SF-424.

Enter the **Total MPPEP Funds** requested (up to $10 million or 30 percent of the total project cost, whichever is less) in the space below:

|  |
| --- |
|  |

**Example:** A processing project with a total project cost of $10 million can request grant funds of $3 million and would be required to provide $7 million in cost share.

**Total Cost Share** (must equal 70 percent or more of the total project cost)**:**

|  |
| --- |
|  |

**Total Project Cost** (must equal 100 percent of total project cost)**:**

|  |
| --- |
|  |

## Period of performance

(The maximum project performance period is 48 months.**)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Start Date:** | MM/DD/YYYY |  | **End Date:** | MM/DD/YYYY |

## Executive Summary

Your executive summary must detail your project goals and objectives in 500 or fewer words. Please also describe:

* Your business model and ownership structure
* The type of processing facility or service you will provide
* The species you will harvest and process
* The proposed size of your operation, including the number of employees and number of animals you anticipate harvesting
* The size of your consumer or community market
* Any other information you would like to convey about your proposed project

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# Section 3: Land ownership and access

## Land ownership

Describe how the applicant owns or controls the land where the proposed project is located. **NOTE:** For projects located on Tribal lands in which the applicant is not a Tribal member or entity owned or operated by the Tribe, a Resolution of Support is required from the governing body of the Tribe with jurisdiction over the land where the proposed project is located.

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# Section 4: Performance metrics

Quantify your progress toward satisfying the program metrics listed below. If a particular metric does not apply to your project, type “N/A” in the space provided.

**NOTE**: Your Responses in Section 5: Merit Evaluation, must demonstrate how you will achieve these performance metrics.

|  |  |  |  |
| --- | --- | --- | --- |
| **Performance Metric** | **Unit of Measurement** | **Amount at  Project Start** | **Target Amount at Project Completion** |
| Processing space added | Square feet |  |  |
| Processing volume of cattle added annually | Number | Head:  Pounds: | Head:  Pounds: |
| Processing volume of hogs added annually | Number | Head:  Pounds: | Head:  Pounds: |
| Processing volume of chicken added annually | Number | Head:  Pounds: | Head:  Pounds: |
| Processing volume of turkey added annually | Number | Head:  Pounds: | Head:  Pounds: |
| Processing volume of other species added annually Enter Other Species here: | Number | Head:  Pounds: | Head:  Pounds: |
| New value-added products developed | Number |  |  |
| Increase in meat or poultry producers served | Number |  |  |
| Increase in new sales channels | Number |  |  |
| Full-time equivalent (FTE) jobs created | Number |  |  |
| FTE jobs retained | Number |  |  |

# Section 5: Merit Evaluation

All eligible, complete applications will be evaluated using the scoring criteria in the MPPEP Phase 2 Request for Applications (RFA). In some instances, discretionary points will be added to the total score prior to generating a final score.

Competitive applications will accurately and fully describe project objectives that align with the MPPEP goals described in Section 1.2 of the RFA, and with the Performance Metrics in Section 4 of this document. Please be certain your responses are specific to your project, market, and community. A failure to address any of the following questions – or to otherwise sufficiently communicate relevant project information – will result in a lower score.

## Alignment and intent (up to 10 points possible)

Describe how your proposed project aligns with MPPEP program goals to:

* Provide new, better and more processing options to meat and poultry producers
* Promote competition
* Create resilience against disruptions in food supply chains

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## Market impact and opportunities (up to 20 points possible)

Describe the planned impact of your proposed project on the producer, consumer, and other relevant markets, as follows:

1. **Animal procurement**

Describe how you plan to procure animals and provide more opportunities for producers relative to the existing processing opportunities in the area. In your response, address how your proposed project will:

* Increase processing volume or shackle space resulting in the procurement of more animals from meat and poultry producers
* Increase the diversity of species procured by the processing facility
* Increase the geography or region from which animals are sourced (in particular, from geographies with a concentration of underserved producers)

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1. **Commitments to producers**

As applicable, provide a description of the prices and contracts you will provide to meat and poultry producers as listed below:

1. **Facilities that purchase livestock or poultry**: Include information about estimated purchase volumes, prices, and contract types (such as cash, formula, forward contract, negotiated grid, and so on).
2. **Facilities that own livestock or poultry**: Include a general description of any contract terms for the production of livestock or poultry.
3. **Facilities that provide fee-for-service processing:** Include a list of the services provided, along with anticipated processing volumes, and fees charged to producers.
4. **Facilities that provide further processing:** Include the plan for sourcing inputs from producers and note the percentage of inputs that will be sourced from them. Explain how further processing enables producers to access value‐added markets and improve incomes.

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1. **Producer impact**

As applicable, describe the meat and poultry producers who currently benefit – or will benefit – from your project.

|  |  |
| --- | --- |
| 1. Enter the number of producers from which your facility currently sources (prior to project completion): |  |
| 1. Enter the number of producers from which your facility will source at operational capacity (following project completion): |  |

Below, list current and future producers from whom you will purchase. Include their name, contract or agreement, and volume purchases.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Number | Producer Name | Current or Future | Agreement or Contract | Volume  of Head Purchased | Volume  of Pounds Purchased |
| 1 |  |  | YES  NO |  |  |
| 2 |  |  | YES  NO |  |  |
| 3 |  |  | YES  NO |  |  |
| 4 |  |  | YES  NO |  |  |
| 5 |  |  | YES  NO |  |  |
| 6 |  |  | YES  NO |  |  |
| 7 |  |  | YES  NO |  |  |
| 8 |  |  | YES  NO |  |  |
| 9 |  |  | YES  NO |  |  |
| 10 |  |  | YES  NO |  |  |

## Financial viability (up to 20 points)

Explain how – and when – you anticipate your proposed project will achieve financial viability.

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1. **Financial Sustainability**

Describe how your facility is currently profitable – or note your target date for achieving profitability or financial stability. Explain how the facility will sustain itself financially through revenue, cash reserves or other sources to ensure its success.

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1. **Operational Capacity**

What is the plan and timeline for achieving full operational capacity once your project is complete? Describe commitments from producers and buyers and include any other factors that will contribute to your facility's ongoing viability.

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1. **Buyer Commitments**

Discuss current or prospective buyer commitments. As applicable, include descriptions of both domestic and international markets, and note the impact on the volume of product sold from the facility as a result of your project. Also, discuss how you will secure sufficient quantities of livestock, poultry, and raw materials to ensure operational viability.

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## Technical Merit and achievability (up to 20 points)

Describe plans for addressing the technical feasibility of your project, including compliance and other related issues.

1. **Work plan and budget**

Provide a work plan and budgetthat shows how your project’s goals will be accomplished within the proposed timeframe. Task descriptions must be sufficiently detailed to give a clear understanding of the general workflow necessary to complete the project. You can describe up to five tasks below. A budget breakdown for each task is required.

| **Task** | **Key Personnel** | **Start Date** | **End Date** | **MPPEP Funds** | **Cost Share** | **Total Project Cost** |
| --- | --- | --- | --- | --- | --- | --- |
| 1. |  | MM/DD/YYYY | MM/DD/YYYY | $ | $ | $ |
| 2. |  | MM/DD/YYYY | MM/DD/YYYY | $ | $ | $ |
| 3. |  | MM/DD/YYYY | MM/DD/YYYY | $ | $ | $ |
| 4. |  | MM/DD/YYYY | MM/DD/YYYY | $ | $ | $ |
| 5. |  | MM/DD/YYYY | MM/DD/YYYY | $ | $ | $ |

**1b. Task Budget**

Provide the budget for each task listed in your work plan and budget. Include the amount of MPPEP funds you are requesting, the cost share, and the total project cost for each category. Add additional line items as needed.

|  |  |
| --- | --- |
| **Task 1:** |  |

| **Cost Category** | **MPPEP Funds** | **Cost Share** | **Total Project Cost** |
| --- | --- | --- | --- |
| Personnel |  |  |  |
| Fringe benefits |  |  |  |
| Equipment |  |  |  |
| Construction |  |  |  |
| Supplies |  |  |  |
| Contractual |  |  |  |
| Other |  |  |  |
| Total |  |  |  |

**Budget Narrative**: Provide detailed information (assumptions used) to determine the total project cost for each identified cost category.

|  |
| --- |
|  |

|  |  |
| --- | --- |
| **Task 2:** |  |

| **Cost Category** | **MPPEP Funds** | **Cost Share** | **Total Project Cost** |
| --- | --- | --- | --- |
| Personnel |  |  |  |
| Fringe Benefits |  |  |  |
| Equipment |  |  |  |
| Construction |  |  |  |
| Supplies |  |  |  |
| Contractual |  |  |  |
| Other |  |  |  |
| Total |  |  |  |

**Budget Narrative**: Provide detailed information (assumptions used) to determine total project cost for each identified cost category.

|  |
| --- |
|  |

|  |  |
| --- | --- |
| **Task 3:** |  |

| **Cost Category** | **MPPEP Funds** | **Cost Share** | **Total Project Cost** |
| --- | --- | --- | --- |
| Personnel |  |  |  |
| Fringe Benefits |  |  |  |
| Equipment |  |  |  |
| Construction |  |  |  |
| Supplies |  |  |  |
| Contractual |  |  |  |
| Other |  |  |  |
| Total |  |  |  |

**Budget Narrative**: Provide detailed information (assumptions used) to determine total project cost for each identified cost category.

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| --- | --- |
| **Task 4:** |  |

| **Cost Category** | **MPPEP Funds** | **Cost Share** | **Total Project Cost** |
| --- | --- | --- | --- |
| Personnel |  |  |  |
| Fringe Benefits |  |  |  |
| Equipment |  |  |  |
| Construction |  |  |  |
| Supplies |  |  |  |
| Contractual |  |  |  |
| Other |  |  |  |
| Total |  |  |  |

**Budget Narrative**: Provide detailed information (assumptions used) to determine total project cost for each identified cost category.

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|  |  |
| --- | --- |
| **Task 5:** |  |

| **Cost Category** | **MPPEP Funds** | **Cost Share** | **Total Project Cost** |
| --- | --- | --- | --- |
| Personnel |  |  |  |
| Fringe Benefits |  |  |  |
| Equipment |  |  |  |
| Construction |  |  |  |
| Supplies |  |  |  |
| Contractual |  |  |  |
| Other |  |  |  |
| Total |  |  |  |

**Budget Narrative**: Provide detailed information (assumptions used) to determine total project cost for each identified cost category.

|  |
| --- |
|  |

1. **Key Personnel, including contractors and consultants, and their relevant experience.**

List the key personnel you mentioned in your work plan and budget who will be coordinating, leading, and carrying out tasks under this project. Note any relevant experience. You can add extra rows if needed.

| **Name and Title** | **Role** | **Relevant Experience** |
| --- | --- | --- |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. **Identification of major risks**

Describe any major risks to the success of your project and note your strategies for mitigating them (for example, having contingency plans to offset the loss of inputs or markets). Examples of major risks include product recalls, labor availability, access to operating capital, sudden increased demand for processing services, among others.

|  |
| --- |
|  |

1. **Food safety plan**

Describe food safety measures (such as certifications and regulatory compliance) that reflect your facility’s commitment to providing safe products to consumers.

|  |
| --- |
|  |

## Labor and personnel (up to 10 points)

Describe your workforce policies. If your business is a start-up and not yet operational, please describe what your workforce policies will be.

1. **Jobs**

Describe your workforce policy and how it contributes to the overall viability of your facility. Include:

* A discussion of pay scales relative to the position type and cost of living in the area where the facility is located
* Whether your employees can engage in collective bargaining
* Opportunities for professional training and advancement

|  |
| --- |
|  |

1. **Benefits and protections**

Describe the basic benefits provided to facility staff, the conditions and requirements under which benefits are provided, and the provisions for workplace protections that contribute to a safe and healthy work environment.

|  |
| --- |
|  |

1. **Local economy**

Explain your workforce recruitment and retention strategies and how your facility supports jobs with livable wages and basic benefits in the community in which it is located.

|  |
| --- |
|  |

## Environmental impact (up to 10 points)

Describe your strategies for addressing and mitigating negative environmental impacts (for instance, by employing pollution control equipment and technologies, or employing energy-efficient climate solutions to managing water and waste streams).

1. **Waste management**

Describe strategies for managing offal, solid and other waste at your processing facility. Include description of any pollution control equipment or technology, or livestock waste management systems, permits required, and whether the facility uses Concentrated Animal Feeding Operation (CAFO) or pasture-based livestock management systems.

|  |
| --- |
|  |

1. **Water impacts**

Describe strategies – including the use of equipment, technology and zoning or other permits – that will reduce or mitigate the possibility for nonconventional (such as nitrogen and phosphorous) and conventional (such as oil and grease, pathogens, and total suspended solids) wastewater streams pollutants from entering surface water or local sewer systems.

|  |
| --- |
|  |

Community impact and support (up to 10 points)

1. **Letters of support**

You must provide letters of support from a qualifying state, local or Tribal leadership located where your proposed project activities will take place. **REMINDER**: If the applicant is not the Tribe, itself, or an entity owned or operated by that Tribe, a resolution of support is required from the governing body of the Tribe with jurisdiction over the land where your proposed project is located.

Examples of “qualifying leaders” include state, local, and Tribal government officials, associations of agricultural producers, and labor unions.

All letters must:

1. Identify the stakeholder providing the letter and explain their connection to proposed project activities.
2. Describe the sustained community impact that will be supported by the proposed startup or expansion activities to be carried out under the grant.
3. Provide additional information relative to the project’s impact on the community’s long-term needs and goals.

# Section 6: Affirmations and Certifications

By signing and submitting the SF-424 family of forms “Application for Federal Assistance” as a part of your grant application package, you certify and affirm the following statements:

* I do not have a known relationship or association with a USDA Rural Development employee. (If there is a relationship or relationships, you must identify each known USDA RD employee.)
* As an applicant, I am a legal entity in good standing, and operating in accordance with the laws of the state or states, or Tribe or Tribes, in which you have a place of business. This includes child labor laws.
* I have not been found – and will not be found –unfit to obtain a grant of federal or state equivalent inspection because of federal or state court convictions of a felony or multiple misdemeanors involving the acquisition, handling, or distribution of adulterated or misbranded meat or poultry products, fraud in connection with transactions in food, or other similar factors.
* If awarded a grant, I agree I will comply fully with all applicable USDA FSIS standards.
* I acknowledge I possess – or plan to obtain – a Federal Grant of Inspection, a grant of inspection under a Cooperative Interstate Shipment Program, or a state meat and poultry inspection program with standards at least equal to federal inspection processes.
* If my inspection services have been suspended at any time in the past five years, I agree to disclose the reasons for that suspension, and to explain how the suspension was resolved.
* I certify I have developed – or will develop – a Hazard Analysis and Critical Control Points (HACCP) plan covering the entire grant period of performance.
* I confirm that any equipment required for my project is available or can be procured and delivered within the proposed project development schedule (barring unforeseen supply chain disruptions to availability) and will be installed to the manufacturer’s specifications and design requirements. **NOTE:** This is not applicable in instances in which equipment is not part of the proposed project.
* I have identified the balance of funding necessary (70 percent of total project costs) to complete the project according to the timeline and budget proposed in my application.
* My project will be constructed following all applicable laws, regulations, agreements, permits, codes, and standards.
* I affirm that my existing business does not hold a market share equal to or greater than the fourth largest share of the national market for beef, pork, chicken, or turkey processing.
* I confirm my existing business does not source – in the aggregate – more than 20 percent of inputs from entities that hold market share equal to or greater than the fourth largest share of the national market for beef, pork, chicken, or turkey processing.
* I confirm I do not provide – in the aggregate – more than 20 percent of outputs to entities that hold market share equal to or greater than the fourth largest share of the national market for beef, pork, chicken, or turkey processing.

I further acknowledge and certify that:

* I understand USDA Rural Development will check the Do Not Pay System to verify that – as the applicant – I have an active entity registration in the System for Award Management (SAM)
* I have not been debarred or suspended from participation in federal programs
* I am not listed on the Credit Alert Verification Reporting System, the U.S. Treasury Offset Program, or on Social Security death records
* I understand I am responsible for resolving any issues reported in the Do Not Pay System. **NOTE**: If issues are not resolved by the time USDA Rural Development is prepared to award MPPEP grants, we may instead award funds to other eligible applicants.

We recommend you use the MPPEP Phase 2 Application Checklist (available at this link: <https://www.rd.usda.gov/media/file/download/mppep2applicationchecklist-508.pdf>) to ensure you are aware of all documents needed to ensure you file a complete application.

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family or parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary. Those with disabilities who need alternative means of communication (for example, Braille, large print, audiotape, and American Sign Language, among others) can contact the responsible agency or USDA’s TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Program information also can be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, available at this link: <https://go.usa.gov/xzzfW>, and at any USDA office. Or write a letter addressed to USDA and provide all of the information requested on the form. Call (866) 632-9992 to request a copy of the complaint form. Submit your completed form or letter to USDA by: (1) postal mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 (2) fax: (202) 690-7442, or (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov).

August 2023