

APPLICANT'S NARRATIVE & FEASIBILITY REPORT

Community Facility Program Loans, Grants and Loan-Grant Combinations

5. Need for Facility and/or Equipment. Indicate why the proposed facility is needed. Include comments regarding the following: similar facilities and services in the area, usage trends, community support and regulatory agency approval. If the facility will provide an expansion of service, please explain.

6. Cost Estimate.

Development and Construction	\$	_____
Land and Rights	\$	_____
# acres owned	\$	_____
to be purchased	\$	_____
Legal Fees	\$	_____
Architect/Engineer	\$	_____
Equipment/Furniture	\$	_____
Interim Financing Costs	\$	_____
Contingency	\$	_____
<u>Total</u>	\$	_____

7. Construction/Procurement. Describe the current status or plans for construction/procurement such as design, vendor/contractor solicitation, etc. for the project. Note that federal funding requires maximum open and free competition which typically includes public bidding for construction projects and solicitation of at least three quotes for equipment procurement.

8. Service to persons with disabilities. Please indicate whether your proposed project, when completed, will result in your services being fully accessible to persons and employees with disabilities. If not, to be eligible for funding you must work with a person knowledgeable regarding accessibility requirements to complete a self-evaluation and transition plan. This can be obtained at the RD website with other application materials.

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9. **Financial Feasibility.** If a Financial Feasibility Report has been prepared, please provide a copy. The Financial Feasibility must include the following items.

If you do not have a Financial Feasibility Report, or the Financial Feasibility Report does not contain the following items, please provide*:

- **Attachment A** to this Narrative - **Schedule of Existing Debt.**
- Discuss all sources of expected revenue and any additional operating expenses associated with the new facility.
- Explain all assumptions used in preparing the projections including changes in usage, rate structure and depreciation.
- **Accounting System** (*loan applicants only*). Provide a brief description of your accounting system.

For further details regarding financial information needed, please refer to #3 FINANCIAL INFORMATION in the APPLICATION GUIDE.

*** You may be asked to have a financial feasibility report prepared and an examination opinion provided. Please contact your Rural Development Loan Specialist for a determination.**

10. **Other Funds.** List the source and amount of funds that are available other than Rural Development, to fund the project. (Such as applicant contribution, commercial loan, loans/grants from other Government agencies or foundations, fundraising or gifts .)

Source	\$ Amount	Status of Commitment

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11. **Other Credit.** All applicants must certify that other funding from their own resources or through commercial credit is not available to finance this project. Provide a summary of **specific** attempts made to obtain financing. Describe your project to the commercial lender and ask what financing is available. Advise the lender that you intend to submit an application to Rural Development. Let the lender know Rural Development can partner with them to finance your project through the Communities Facilities Guaranteed Loan Program. If your organization has cash reserves, please explain if these are not available to support the project.

12. **Board Members.** Attach a list showing the name, address, telephone number, and term of office for each member of the governing body.

13. **Do any members of the governing body or employees of your organization** have any immediate family members, known relatives or close associates who are USDA/Rural Development employees? If so, please list below or attach a list.

14. **Professional Consultants.** If applicable, indicate name and contact information (address, telephone, e-mail) for

Local/Bond Counsel:

Engineer:

Architect:

Accountant:

Other:

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15. **What is your Duns number?** Obtaining a **DUNS number** costs nothing and requires a short telephone call to Dun and Bradstreet. Applicants can call 1-800-333-0505 and register for a number. Please see http://www.grants.gov/applicants/request_duns_number.jsp for more information on how to obtain a DUNS number or how to verify your organization's number.

DUNS Number: _____

16. **System for Award Management (SAM) Registration:**
For an application to be considered complete, SAM Registration is required.
It is important to begin this register immediately. It usually takes 3-5 days for registration to be completed.

How to register in SAM

1. Go to www.SAM.gov
2. Create a Personal Account and Login
3. Click "Register New Entity" under "Manage Entity" on your "My SAM" page
4. Select your type of Entity
5. Select "No" to "Do you wish to bid on contracts?"
6. Select "Yes" to "Do you want to be eligible for grants and other federal assistance?"
7. Complete "Core Data"
 - ✓ Validate your DUNS information
 - ✓ Enter Business Information (TIN, etc.)
 - ✓ Enter CAGE code if you have one. If not, one will be assigned to you after your registration is completed.
 - ✓ Enter General Information (business types, organization structure, etc)
 - ✓ Financial Information (Electronic Funds Transfer (EFT) Information)
 - ✓ Executive Compensation
 - ✓ Proceedings Details
8. Complete "Points of Contact"
9. Your entity registration will become active after 3-5 days when the IRS validates your TIN information.

Have you registered for SAM? YES ___ NO ___ Process Started on (date) _____

What is your Cage Number? _____

17. If you are a Non-Profit, please attach form **Evidence of Community Support.**

18. If you are a Public Body, please attach form **Public Body Certificate of Organization.**

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The above information was completed by:

Signature: _____

Date: _____

Name: _____

Title: _____

I certify that I have reviewed the above information and it is true and accurate to the best of my knowledge:

Signature: _____

Date: _____

Name: _____

Title: **Authorized Representative or Chair of Governing Board**

Thank you for completing this Applicant's Narrative. Understanding your needs and proposed project will help us provide you with the best service possible.

USDA is an equal opportunity provider and employer.

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.

Attachment A Applicant's Narrative

COMMUNITY FACILITY APPLICATION NARRATIVE
SCHEDULE OF EXISTING DEBT

OWED TO	ORIGINAL LOAN AMOUNT	PURPOSE	BALANCE OWED	ANNUAL PAYMENT	DATE FIRST PAYMENT	INTEREST RATE	TERM	SECURITY	ANNUAL RESERVE	INCOME SOURCE