United States Department of Agriculture
Rural Development

Community Facility Program Pre-Application

All Applicants

Please download, complete and submit the following forms:

- Form SF424, Application for Federal Assistance
  - Include DUNS number on application form
- Form SF424A (non-construction) ***or*** SF424C (construction) – Budget
- Form SF424B (non-construction) ***or*** SF424D (construction) – Assurances
- Register (or update/renew) on www.sam.gov and provide a valid CAGE number
- Form 442-7, Operating Budget
- WI 1942-A Guide 5A, Community Facilities Test for Credit Certification
- WI CF Guide 1942-40, Applicant Key Personnel Listing
- Attorney's Opinion Relative to Organization, Authority & Continuous Existence

Submit one of the following:

- RD Instruction 1942-A Guide 5, Financial Feasibility Report
- RD Instruction 1942-A Guide 6, Preliminary Architectural Feasibility Report

Other Items

- Financial Statements (copy of past 5 years, including audits, if available)
- Environmental Information for construction projects
- Current Balance Sheet

Non-Profit Organizations Only

In addition to the above, please download, complete, and submit the following:

- Form AD3030, Representation Regarding Felony Conviction and Tax Delinquent Status for Corporate Applicants
- Certifications of Articles of Incorporation *(see sample)*
- Certification of By-Laws *(see sample)*
- Copy of current Certification of Status from the Department of Financial Institutions for the applicant
- List of Officers *(provide title, term, address, and profession)*
- Letter of Support from the Local Government

Contact Us / Submit Application

Contact us with questions and/or to submit application materials.
View Wisconsin Community Programs Contacts to find the office in your area.

Version 7/03

APPLICATION FOR FEDERAL ASSISTANCE

		2. DATE SUBMITTED	Applicant Identifier
1. TYPE OF SUBMISSION: Application	Pre-application	**3. DATE RECEIVED BY STATE**	State Application Identifier
☐ **Construction**	☐ **Construction**	**4. DATE RECEIVED BY FEDERAL AGENCY**	Federal Identifier
☐ **Non-Construction**	☐ **Non-Construction**		

5. APPLICANT INFORMATION

Legal Name:		**Organizational Unit**:	
		Department:	
Organizational DUNS:		Division:	
Address:		**Name and telephone number of person to be contacted on matters involving this application (give area code)**	
Street:		Prefix:	First Name:
City:		Middle Name	
County:		Last Name	
State:	Zip Code	Suffix:	
Country:		Email:	
6. EMPLOYER IDENTIFICATION NUMBER *(EIN):*		Phone Number (give area code)	Fax Number (give area code)
☐☐-☐☐☐☐☐☐☐			

8. TYPE OF APPLICATION:	**7. TYPE OF APPLICANT: (**See back of form for Application Types)
☐ **New** ☐ **Continuation** ☐ **Revision**	
If Revision, enter appropriate letter(s) in box(es) (See back of form for description of letters.) ☐ ☐	Other (specify)
Other (specify)	**9. NAME OF FEDERAL AGENCY:**
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: ☐☐-☐☐☐	**11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:**
TITLE (Name of Program):	
12. AREAS AFFECTED BY PROJECT *(Cities, Counties, States, etc.):*	

13. PROPOSED PROJECT		**14. CONGRESSIONAL DISTRICTS OF:**	
Start Date:	Ending Date:	a. Applicant	b. Project

15. ESTIMATED FUNDING:		**16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?**
a. Federal	$ .00	a. Yes. ☐ THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON
b. Applicant	$ .00	DATE:
c. State	$ .00	
d. Local	$ .00	b. No. ☐ PROGRAM IS NOT COVERED BY E. O. 12372
e. Other	$ .00	☐ OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW
f. Program Income	$ .00	**17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?**
g. TOTAL	$ .00	☐ Yes If "Yes" attach an explanation. ☐ No

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.

a. Authorized Representative		
Prefix	First Name	Middle Name
Last Name		Suffix
b. Title		c. Telephone Number (give area code)
d. Signature of Authorized Representative		e. Date Signed

INSTRUCTIONS FOR THE SF-424

Public reporting burden for this collection of information is estimated to average 45 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

This is a standard form used by applicants as a required face sheet for pre-applications and applications submitted for Federal assistance. It will be used by Federal agencies to obtain applicant certification that States which have established a review and comment procedure in response to Executive Order 12372 and have selected the program to be included in their process, have been given an opportunity to review the applicant's submission.

Item:	Entry:	Item:	Entry:
1.	Select Type of Submission.	11.	Enter a brief descriptive title of the project. If more than one program is involved, you should append an explanation on a separate sheet. If appropriate (e.g., construction or real property projects), attach a map showing project location. For preapplications, use a separate sheet to provide a summary description of this project.
2.	Date application submitted to Federal agency (or State if applicable) and applicant's control number (if applicable).	12.	List only the largest political entities affected (e.g., State, counties, cities).
3.	State use only (if applicable).	13	Enter the proposed start date and end date of the project.
4.	Enter Date Received by Federal Agency Federal identifier number: If this application is a continuation or revision to an existing award, enter the present Federal Identifier number. If for a new project, leave blank.	14.	List the applicant's Congressional District and any District(s) affected by the program or project
5.	Enter legal name of applicant, name of primary organizational unit (including division, if applicable), which will undertake the assistance activity, enter the organization's DUNS number (received from Dun and Bradstreet), enter the complete address of the applicant (including country), and name, telephone number, e-mail and fax of the person to contact on matters related to this application.	15	Amount requested or to be contributed during the first funding/budget period by each contributor. Value of in kind contributions should be included on appropriate lines as applicable. If the action will result in a dollar change to an existing award, indicate only the amount of the change. For decreases, enclose the amounts in parentheses. If both basic and supplemental amounts are included, show breakdown on an attached sheet. For multiple program funding, use totals and show breakdown using same categories as item 15.
6.	Enter Employer Identification Number (EIN) as assigned by the Internal Revenue Service.	16.	Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process.
7.	Select the appropriate letter in the space provided. A. State B. County C. Municipal D. Township E. Interstate F. Intermunicipal G. Special District H. Independent School District I. State Controlled Institution of Higher Learning J. Private University K. Indian Tribe L. Individual M. Profit Organization N. Other (Specify) O. Not for Profit Organization	17.	This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans and taxes.
8.	Select the type from the following list: • "New" means a new assistance award. • "Continuation" means an extension for an additional funding/budget period for a project with a projected completion date. • "Revision" means any change in the Federal Government's financial obligation or contingent liability from an existing obligation. If a revision enter the appropriate letter: A. Increase Award B. Decrease Award C. Increase Duration D. Decrease Duration	18	To be signed by the authorized representative of the applicant. A copy of the governing body's authorization for you to sign this application as official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.)
9.	Name of Federal agency from which assistance is being requested with this application.		
10.	Use the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested.		

Budget Information — Non-Construction Programs

OMB Approval No. 0348-0044

Section A - Budget Summary

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1.		$	$	$	$	$
2.						
3.						
4.						
5. Totals		$	$	$	$	$

Section B - Budget Categories

6. Object Class Categories	Grant Program, Function or Activity				Total
	(1)	(2)	(3)	(4)	(5)
a. Personnel	$	$	$	$	$
b. Fringe Benefits					
c. Travel					
d. Equipment					
e. Supplies					
f. Contractual					
g. Construction					
h. Other					
i. Total Direct Charges (sum of 6a-6h)					
j. Indirect Charges					
k. **Totals** (sum of 6i and 6j)					
7. Program Income	$	$	$	$	$

Section C - Non-Federal Resources

(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) **Totals**
8.	$	$	$	$
9.				
10.				
11.				
12. **Total** (sum of lines 8 - 11)	$	$	$	$

Section D - Forcasted Cash Needs

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	$	$	$	$	$
14. Non-Federal					
15. **Total** (sum of lines 13 and 14)	$	$	$	$	$

Section E - Budget Estimates of Federal Funds Needed for Balance of the Project

	Future Funding Periods (Years)			
(a) Grant Program	(b) First	(c) Second	(d) Third	(e) Fourth
16.	$	$	$	$
17.				
18.				
19.				
20. **Total** (sum of lines 16-19)	$	$	$	$

Section F - Other Budget Information

21. Direct Charges	22. Indirect Charges

23. Remarks

INSTRUCTIONS FOR THE SF-424A

Public reporting burden for this collection of information is estimated to average 180 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0044), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

General Instructions

This form is designed so that application can be made for funds from one or more grant programs. In preparing the budget, adhere to any existing Federal grantor agency guidelines which prescribe how and whether budgeted amounts should be separately shown for different functions or activities within the program. For some programs, grantor agencies may require budgets to be separately shown by function or activity. For other programs, grantor agencies may require a breakdown by function or activity. Sections A, B, C, and D should include budget estimates for the whole project except when applying for assistance which requires Federal authorization in annual or other funding period increments. In the latter case, Sections A, B, C, and D should provide the budget for the first budget period (usually a year) and Section E should present the need for Federal assistance in the subsequent budget periods. All applications should contain a breakdown by the object class categories shown in Lines a-k of Section B.

Section A. Budget Summary Lines 1-4 Columns (a) and (b)

For applications pertaining to a single Federal grant program (Federal Domestic Assistance Catalog number) and not requiring a functional or activity breakdown, enter on Line 1 under Column (a) the Catalog program title and the Catalog number in Column (b).

For applications pertaining to a single program requiring budget amounts by multiple functions or activities, enter the name of each activity or function on each line in Column (a), and enter the Catalog number in Column (b). For applications pertaining to multiple programs where none of the programs require a breakdown by function or activity, enter the Catalog program title on each line in Column (a) and the respective Catalog number on each line in Column (b).

For applications pertaining to multiple programs where one or more programs require a breakdown by function or activity, prepare a separate sheet for each program requiring the breakdown. Additional sheets should be used when one form does not provide adequate space for all breakdown of data required. However, when more than one sheet is used, the first page should provide the summary totals by programs.

Lines 1-4, Columns (c) through (g)

For new applications, leave Column (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year).

For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the Federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of amounts in Columns (e) and (f).

For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of Federal funds and enter in Column (f) the amount of the increase or decrease of non-Federal funds. In Column (g) enter the new total budgeted amount (Federal and non-Federal) which includes the total previous authorized budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (g) should not equal the sum of amounts in Columns (e) and (f).

Line 5 - Show the totals for all columns used.

Section B Budget Categories

In the column headings (1) through (4), enter the titles of the same programs, functions, and activities shown on Lines 1-4, Column (a), Section A. When additional sheets are prepared for Section A, provide similar column headings on each sheet. For each program, function or activity, fill in the total requirements for funds (both Federal and non-Federal) by object class categories.

Line 6a-i - Show the totals of Lines 6a to 6h in each column.

Line 6j - Show the amount of indirect cost.

Line 6k - Enter the total of amounts on Lines 6i and 6j. For all applications for new grants and continuation grants the total amount in column (5), Line 6k, should be the same as the total amount shown in Section A, Column (g), Line 5. For supplemental grants and changes to grants, the total amount of the increase or decrease as shown in Columns (1)-(4), Line 6k should be the same as the sum of the amounts in Section A, Columns (e) and (f) on Line 5.

Line 7 - Enter the estimated amount of income, if any, expected to be generated from this project. Do not add or subtract this amount from the total project amount, Show under the program

narrative statement the nature and source of income. The estimated amount of program income may be considered by the Federal grantor agency in determining the total amount of the grant.

Section C. Non-Federal Resources

Lines 8-11 Enter amounts of non-Federal resources that will be used on the grant. If in-kind contributions are included, provide a brief explanation on a separate sheet.

Column (a) - Enter the program titles identical to Column (a), Section A. A breakdown by function or activity is not necessary.

Column (b) - Enter the contribution to be made by the applicant.

Column (c) - Enter the amount of the State's cash and in-kind contribution if the applicant is not a State or State agency. Applicants which are a State or State agencies should leave this column blank.

Column (d) - Enter the amount of cash and in-kind contributions to be made from all other sources.

Column (e) - Enter totals of Columns (b), (c), and (d).

Line 12 - Enter the total for each of Columns (b)-(e). The amount in Column (e) should be equal to the amount on Line 5, Column (f), Section A.

Section D. Forecasted Cash Needs

Line 13 - Enter the amount of cash needed by quarter from the grantor agency during the first year.

Line 14 - Enter the amount of cash from all other sources needed by quarter during the first year.

Line 15 - Enter the totals of amounts on Lines 13 and 14.

Section E. Budget Estimates of Federal Funds Needed for Balance of the Project

Lines 16-19 - Enter in Column (a) the same grant program titles shown in Column (a), Section A. A breakdown by function or activity is not necessary. For new applications and continuation grant applications, enter in the proper columns amounts of Federal funds which will be needed to complete the program or project over the succeeding funding periods (usually in years). This section need not be completed for revisions (amendments, changes, or supplements) to funds for the current year of existing grants.

If more than four lines are needed to list the program titles, submit additional schedules as necessary.

Line 20 - Enter the total for each of the Columns (b)-(e). When additional schedules are prepared for this Section, annotate accordingly and show the overall totals on this line.

Section F. Other Budget Information

Line 21 - Use this space to explain amounts for individual direct object class cost categories that may appear to be out of the ordinary or to explain the details as required by the Federal grantor agency.

Line 22 - Enter the type of indirect rate (provisional, predetermined, final or fixed) that will be in effect during the funding period, the estimated amount of the base to which the rate is applied, and the total indirect expense.

Line 23 - Provide any other explanations or comments deemed necessary.

OMB Approval No. 0348-0040

ASSURANCES - NON-CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.

2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.

3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.

4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.

5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).

6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.

8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.

10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is $10,000 or more.

11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).

12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).

14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.

15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.

16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.

17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."

18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
APPLICANT ORGANIZATION	DATE SUBMITTED

OMB Approval No. 0348-0041

BUDGET INFORMATION - Construction Programs

NOTE: Certain Federal assistance programs require additional computations to arrive at the Federal share of project costs eligible for participation. If such is the case, you will be notified.

COST CLASSIFICATION	a. Total Cost	b. Costs Not Allowable for Participation	c. Total Allowable Costs (Columns a-b)
1. Administrative and legal expenses	$ .00	$ .00	$ 0 .00
2. Land, structures, rights-of-way, appraisals, etc.	$ .00	$ .00	$ 0 .00
3. Relocation expenses and payments	$ .00	$ .00	$ 0 .00
4. Architectural and engineering fees	$ .00	$ .00	$ 0 .00
5. Other architectural and engineering fees	$ .00	$ .00	$ 0 .00
6. Project inspection fees	$ .00	$ .00	$ 0 .00
7. Site work	$ .00	$ .00	$ 0 .00
8. Demolition and removal	$ .00	$ .00	$ 0 .00
9. Construction	$ .00	$ .00	$ 0 .00
10. Equipment	$ .00	$ .00	$ 0 .00
11. Miscellaneous	$ .00	$ .00	$ 0 .00
12. SUBTOTAL *(sum of lines 1-11)*	$ 0 .00	$ 0.00	$ 0 .00
13. Contingencies	$ .00	$ .00	$ 0 .00
14. SUBTOTAL	$ 0 .00	$ 0.00	$ 0 .00
15. Project (program) income	$ .00	$ .00	$ 0 .00
16. TOTAL PROJECT COSTS *(subtract #15 from #14)*	$ 0 .00	$ 0.00	$ 0 .00

FEDERAL FUNDING

17. Federal assistance requested, calculate as follows: (Consult Federal agency for Federal percentage share.) Enter the resulting Federal share.	Enter eligible costs from line 16c Multiply X _____% To autocalculate, press TAB key after entering percent. These instructions will not print.	$ 0.00

INSTRUCTIONS FOR THE SF-424C

Public reporting burden for this collection of information is estimated to average 180 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0041), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

This sheet is to be used for the following types of applications: (1) "New" (means a new [previously unfunded] assistance award); (2) "Continuation" (means funding in a succeeding budget period which stemmed from a prior agreement to fund); and (3) "Revised" (means any changes in the Federal Government's financial obligations or contingent liability from an existing obligation). If there is no change in the award amount, there is no need to complete this form. Certain Federal agencies may require only an explanatory letter to effect minor (no cost) changes. If you have questions, please contact the Federal agency.

Column a. - If this is an application for a "New" project, enter the total estimated cost of each of the items listed on lines 1 through 16 (as applicable) under "COST CLASSIFICATION."

If this application entails a change to an existing award, enter the eligible amounts *approved under the previous award* for the items under "COST CLASSIFICATION."

Column b. - If this is an application for a "New" project, enter that portion of the cost of each item in Column a. which is *not* allowable for Federal assistance. Contact the Federal agency for assistance in determining the allowability of specific costs.

If this application entails a change to an existing award, enter the adjustment [+ or (-)] to the previously approved costs (from column a.) reflected in this application.

Column. - This is the net of lines 1 through 16 in columns "a." and "b."

Line 1 - Enter estimated amounts needed to cover administrative expenses. Do not include costs which are related to the normal functions of government. Allowable legal costs are generally only those associated with the purchases of land which is allowable for Federal participation and certain services in support of construction of the project.

Line 2 - Enter estimated site and right(s)-of-way acquisition costs (this includes purchase, lease, and/or easements).

Line 3 - Enter estimated costs related to relocation advisory assistance, replacement housing, relocation payments to displaced persons and businesses, etc.

Line 4 - Enter estimated basic engineering fees related to construction (this includes start-up services and preparation of project performance work plan).

Line 5 - Enter estimated engineering costs, such as surveys, tests, soil borings, etc.

Line 6 - Enter estimated engineering inspection costs.

Line 7 - Enter estimated costs of site preparation and restoration which are not included in the basic construction contract.

Line 9 - Enter estimated cost of the construction contract.

Line 10 - Enter estimated cost of office, shop, laboratory, safety equipment, etc. to be used at the facility, if such costs are not included in the construction contract.

Line 11 - Enter estimated miscellaneous costs.

Line 12 - Total of items 1 through 11.

Line 13 - Enter estimated contingency costs. (Consult the Federal agency for the percentage of the estimated construction cost to use.)

Line 14 - Enter the total of lines 12 and 13.

Line 15 - Enter estimated program income to be earned during the grant period, e.g., salvaged materials, etc.

Line 16 - Subtract line 15 from line 14.

Line 17 - This block is for the computation of the Federal share. Multiply the total allowable project costs from line 16, column "c." by the Federal percentage share (this may be up to 100 percent; consult Federal agency for Federal percentage share) and enter the product on line 17.

OMB Approval No. 0348-0042

ASSURANCES - CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0042), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the Awarding Agency. Further, certain Federal assistance awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.

2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the assistance; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.

3. Will not dispose of, modify the use of, or change the terms of the real property title, or other interest in the site and facilities without permission and instructions from the awarding agency. Will record the Federal interest in the title of real property in accordance with awarding agency directives and will include a covenant in the title of real property aquired in whole or in part with Federal assistance funds to assure non-discrimination during the useful life of the project.

4. Will comply with the requirements of the assistance awarding agency with regard to the drafting, review and approval of construction plans and specifications.

5. Will provide and maintain competent and adequate engineering supervision at the construction site to ensure that the complete work conforms with the approved plans and specifications and will furnish progress reports and such other information as may be required by the assistance awarding agency or State.

6. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.

7. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.

8. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).

9. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.

10. Will comply with all Federal statutes relating to non-discrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681 1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

11. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal and federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.

12. Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

13. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333) regarding labor standards for federally-assisted construction subagreements.

14. Will comply with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is $10,000 or more.

15. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).

16. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

17. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).

18. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."

19. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
APPLICANT ORGANIZATION	DATE SUBMITTED March 3, 2020

Obtaining a Data Universal Numbering System number (DUNS)

We request that your organization obtain a DUNS number as preparation for doing business electronically with the Federal Government.

The DUNS number is a unique nine-character identification number provided by the commercial company Dun & Bradstreet (D&B). You may call D&B at 1-866-705-5711 to register and obtain a DUNS number. The process to request a DUNS number takes about 10 minutes and is **FREE of charge**. Please use the following instructions to navigate through the voice prompts:

1. Enter "4 (grant recipient) or 5 (loan recipient)" to register as a government loan/grant applicant and obtain a DUNS number
2. Enter "1" to at this point be connected with a service representative will answer, and suggest that you buy the Credit Builder Service. **This is not necessary to do business with the Government.** If you want to do business with other vendors outside the government, this is an optional service that allows you to do business using a line of credit.
3. You will likely be requested for the CFDA number of the program you are applying for. This can be obtained from your Rural Development office. You will be asked a series of questions similar to the following:

   a) Name of business
   b) Business address
   c) Local phone number
   d) Name of the CEO/business owner
   e) Legal structure of the business (corporation, partnership, proprietorship)
   f) Year business started
   g) Primary line of business
   h) Total number of employees (full and part time)

You may also register for your DUNS number at Dun & Bradstreet's web site: http://fedgov.dnb.com/webform

Follow the instructions on line. Please note that registration via the web site may take up to 14 business days to complete.

SYSTEM FOR AWARD MANAGEMENT

Quick Start Guide For New Grantee Registration

Helpful Information

What is an Entity?

In SAM, your company / business / organization is referred to as an "Entity." You register your entity to do business with the U.S. Federal government by completing the registration process in SAM.

SAM is the official **free, government-operated website** – there is NO charge to register or maintain your entity registration record in SAM.

What do I need to get started?

DUNS Number

You need a Data Universal Numbering System (DUNS) number to register your entity in SAM. DUNS numbers are unique for each physical location you are registering.

If you do not have one, you can request a DUNS number for **free** to do business with the U.S. Federal government by visiting Dun & Bradstreet (D&B) at http://fedgov.dnb.com/webform

It takes no more than 1-2 business days to obtain a DUNS number.

Taxpayer Identification Number

You need your entity's Taxpayer ID Number (TIN) and taxpayer name (as it appears on your most recent tax return). Foreign entities that do not pay employees within the U.S. do not need to provide a TIN. Your TIN is usually your Employer Identification Number (EIN) assigned by the Internal Revenue Service (IRS).

Sole proprietors may use their Social Security Number (SSN) assigned by the Social Security Administration (SSA) as their TIN, but are strongly encouraged to obtain a free EIN from the IRS by visiting: http://www.irs.gov/Businesses/Small-Businesses-&-Self-Employed/How-to-Apply-for-an-EIN

Allow approximately two weeks before your new EIN is ready for use when registering in SAM.

Steps for Registering

1. Type www.sam.gov in your Internet browser address bar.
2. Create a SAM Individual User Account (be sure to validate your e-mail address), then Login.
3. Select "Register New Entity" under "Register/Update Entity" on your "My SAM" page.
4. Select your type of Entity. Definitions are in the Glossary to the right.
5. If you are registering in SAM.gov so you can apply for a Federal financial assistance opportunity on Grants.gov, and are not interested in pursuing Federal contracts, you will have a much shorter registration path. To chose this "grants only" path:
   - Select "No" to "Do you wish to bid on contracts?"
   - Select "Yes" to "Do you want to be eligible for grants and other federal assistance?"
6. Complete the "Core Data" pages:
   - Validate your DUNS information.
   - Enter Business Information (TIN, etc.) This page is also where you create your Marketing Partner Identification Number (MPIN). Write the MPIN down as it will serve as a password for you in other government systems. You will need it for your Grants.gov registration.
   - Enter your CAGE code if you have one, but remember, CAGE codes are tied to DUNS numbers and cannot be reused. Don't worry if you don't have a CAGE code for the DUNS number you are registering: one will be assigned to you after your registration is submitted. Foreign registrants must enter their NCAGE code before proceeding.
   - Enter General Information (business types, organization structure, etc.) about your entity.
   - Provide your entity's Financial Information, i.e. U.S. bank Electronic Funds Transfer (EFT) Information for Federal government payment purposes. Foreign entities do not need to provide EFT information.
   - Answer the Executive Compensation questions.
   - Answer the Proceedings Details questions.
7. Complete the "Points of Contact" pages:
   - Your Electronic Business POC is integral to your Grants.gov registration and application process. Your Government POC will be used by other government systems, such as CAGE, when they contact you. List someone with direct knowledge of this registration for both of those POCs.
8. Make sure to hit [Submit] after your final review. You will get a *Congratulations* message on the screen. If you do not see this message, you have not submitted your registration.
   - There are two external validation steps, one with the IRS and another with CAGE, after you submit. You will receive an email from SAM.gov when your registration is active.

Please give yourself plenty of time before your grant application submission deadline. Allow up to 7-10 business days after you submit before your registration is active in SAM, then an additional 24 hours for Grants.gov to recognize your information.

For help registering in SAM, contact the supporting Federal Service Desk (FSD) at https://www.fsd.gov/

IAE

USDA-RD
Form RD 442-7
(Rev. 3-02)

Position 3

OPERATING BUDGET

Form Approved
OMB No. 0575-0015

Schedule 1

Name	Address	
Applicant Fiscal Year From To	County	State *(Including ZIP Code)*

	20	20	20	20	First Full Year
	(1)	(2)	(3)	(4)	(5)
OPERATING INCOME					
1.					
2.					
3.					
4.					
5. Miscellaneous					
6. Less: Allowances and Deductions	( )	( )	( )	( )	( )
7. Total Operating Income *(Add Lines 1 through 6)*					
OPERATING EXPENSES					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15. Interest *(RD)*					
16. Depreciation					
17. Total Operating Expense *(Add lines 8 through 16)*					
18. NET OPERATING INCOME *(LOSS) (Line 7 less 17)*					
NONOPERATING INCOME					
19.					
20.					
21. Total Nonoperating Income *(Add Lines 19 and 20)*					
22. NET INCOME *(LOSS) (Add Lines 18 and 21) (Transfer to Line A Schedule 2)*					

Budget and Projected Cash Flow Approved by Governing Body

Attest: _____ _____
Secretary *Date*

_____ _____
Appropriate Official *Date*

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponser, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0015. The time required to complete this information collection is estimated to average 5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Schedule 2

PROJECTED CASH FLOW

	20	20	20	20	First Full Year
A. Line 22 from Schedule 1 Income *(Loss)*					
Add					
B. Items in Operations not Requiring Cash:					
1. Depreciation *(Line 16, Schedule 1)*					
2. Others: _____					
C. Cash Provided from:					
1. Proceeds from RD loan/grant					
2. Proceeds from others					
3. Increase *(Decrease)* in Accounts Payable, Accruals and other Current Liabilities					
4. Decrease *(Increase)* in Accounts Receivable, inventories and Other Current Assets *(Exclude Cash)*					
5. Other: _____					
6. _____					
D. Total all A, B and C Items					
E. ***Less:*** Cash Expended for:					
1. All Construction, Equipment and New Capital Items *(Loan and grant funds)*					
2. Replacement and Additions to Existing Property, Plant and Equipment					
3. Principal Payment RD Loan					
4. Principal Payment Other Loans					
5. Other: _____					
6. Total E 1 through 5					
Add					
F. Beginning Cash Balances					
G. Ending Cash Balances *(Total of D minus E 6 plus F)*					
Item G Cash Balances Composed of:					
Construction Account					
Revenue Account					
Debt Payment Account					
O&M Account					
Reserve Account					
Funded Depreciation Account					
Others: _____					
_____					
Total - Agrees with Item G					

COMMUNITY FACILITIES TEST FOR CREDIT CERTIFICATION

The undersigned certifies, to the best of his/her knowledge and belief that the _____ _____ is unable to finance the proposed project from its own resources or through commercial credit at reasonable rates and terms.

Additional Comments:

_____ _____

Signature of Authorized Official Date

_____

(Printed) Name & Title of Authorized Official

APPLICANT KEY PERSONNEL LISTING

NAME OF APPLICANT: _____

MAILING ADDRESS: _____ **PHONE:** _____

_____ **FAX NO:** _____

DESIGNATED APPLICANT REPRESENTATIVE: _____

PHONE: _____ **E-MAIL:** _____

PRESIDENT or MAYOR: _____
ADDRESS: _____
_____
PHONE: _____
FAX: _____
E-MAIL: _____

CLERK or SECRETARY: _____
ADDRESS: _____
_____
PHONE NO: _____
FAX NO: _____
E-MAIL: _____

C.P.A.: _____
ADDRESS: _____
_____
PHONE NO: _____
FAX NO: _____
E-MAIL: _____

SYSTEM OPERATOR: _____
PLACE OF CONTACT: _____
ADDRESS: _____
_____
PHONE NO: _____
FAX NO: _____
E-MAIL: _____

ATTORNEY: _____
ADDRESS: _____
_____
PHONE: _____
FAX: _____
E-MAIL: _____

ENGINEER or ARCHITECT:
_____
FIRM NAME: _____
ADDRESS: _____
_____
PHONE NO: _____
FAX NO: _____
E-MAIL: _____

BOND COUNSEL: _____
ADDRESS: _____
_____
PHONE NO: _____
FAX NO: _____
E-MAIL: _____

INSURANCE CONSULTANT (OPTIONAL)
NAME: _____
ADDRESS: _____
_____
PHONE NO: _____
FAX NO: _____
E-MAIL: _____

ATTORNEY'S OPINION RELATIVE TO APPLICANT'S ORGANIZATION, AUTHORITY AND CONTINUOUS EXISTENCE

TO: Community Programs Director
USDA Rural Development
5417 Clem's Way
Stevens Point, Wisconsin 54482

RE: _____
[Applicant's Full Legal Name]

1. This is to certify that I have examined the organizational proceedings of the _____ (the "Applicant").
[Applicant's Full Legal Name]

2. In accordance with _____,
[Recite Applicable Wisconsin Enabling / Authorizing Statute(s)]

said Applicant was organized as a legally constituted _____
[Form of Organization (*e.g.*, NFP LLC, NFP corporation, village, city, municipality, commission or other public body)]

_____ on _____.
[Date]

3. I find, further that said Applicant has been in continuous legal existence since it was formally organized.

4. *Only if Applicant is a not-for-profit entity*: Said Applicant is in good standing with the State of Wisconsin Department of Financial Institutions, as of the date of this Attorney's Opinion.

5. Based upon the laws under which it was organized, said Applicant has the necessary legal authority to install, construct, operate, and maintain the _____
[Describe nature

_____ or carry out the proposed activities of _____
of facility or project to be financed]

_____, to borrow sufficient money, give
[Describe nature of activities to take place at facility or project]

security therefore, to raise revenue for the repayment thereof or accept federal grant funds.

This OPINION is based on the following documentation, certified copies of which are attached:

1. ORGANIZATIONAL PROCEEDINGS

   Not-For-Profit Applicants:

   a. Certificate of incorporation or organization (from the Wisconsin Department of Financial Institutions or other appropriate state agency);
   b. Articles of incorporation or organization, including any and all amendments thereto;
   c. By-laws, including any and all amendments thereto; and
   d. A certification from the Applicant that the Applicant has submitted to Wisconsin Rural Development the most recent articles of incorporation or organization, as amended, and by-laws, as amended, and that such articles of incorporation or organization, and by-laws, have not been amended since the date of such certification.

   Public Body Applicants: Please submit to Wisconsin Rural Development a document on the Applicant's stationery, executed by the clerk or other public body official, certifying the date on which the public body was formally organized.

2. EVIDENCE SUPPORTING CONTINUOUS LEGAL EXISTENCE (List and attach any documentation applicable)

3. EVIDENCE SUPPORTING PRESENT GOOD STANDING (Attach copies of latest reports filed with Wisconsin Department of Financial Institutions)

Date: .

Respectfully submitted,

_____

Attorney-at-Law
Attorney for Applicant

(ORGANIZATION OPINION FORM Nov. 2015 [OGC-Milwaukee])

FINANCIAL FEASIBILITY REPORT

I General

The following may be used as a guide for the preparation of financial feasibility reports as required for FmHA financed facilities. The guide contains minimal requirements and the report writer is expected to fully disclose and analyze all significant factors which will likely have a favorable or adverse effect on the financial success of the proposed facility.

A Need for the facility

B Existing facilities

Explain current capacities, rates or usage, activities, suitability for continued use, alternate usage, deficiencies in services, staffing, physical conditions, and any other pertinent information.

C Proposed facility

1 Description of construction and renovation by component parts including capacity of each component part and physical limiting factors.

2 Explain and document the need for the facility. Include comments regarding the following:

a. Service area
b. Population trends
c. Similar facilities and services in the area
d. Usage trens
e. Community support
f. Regulatory agency approval
g. Economy in the service area
h. Analysis of staff and consultants

D Financial Information

1 Explain all assumptions underlying the expected demand, use, and projections of financial data, such as:

a. Changes in usage
b. All income and expense
c. Rate structure
d. Allowance for uncollectible accounts
e. Depreciation life and method
f. Description of long-term debts

2 Financial statements. The following financial statements must be prepared reflecting five years projections:

a. Balance sheet for all funds
b. Statement of income and expense
c. Statement of cash flow (cash receipts and disbursements)
d. Comparison data for facilities in service area (latest year only)

PRELIMINARY ARCHITECTURAL FEASIBILITY REPORT

GENERAL. The following may be used as a guide for preparation of the Preliminary Architectural Feasibility Report as required for FmHA financed facilities.

A. Need for the facility.

B. Existing facilities. Describe – include condition, adequacy, suitability for continued use and other pertinent information.

C. Proposed facility. General description of proposed facility including design criteria adopted for continued use and other pertinent information.

D. Building sites.

1. Amount of land required.
2. Location – Alternate locations.
3. Site plan.
4. Site suitability.

Cost estimate.

1. Development and construction.
2. Land and rights.
3. Legal.
4. Architect fees.
5. Interest.
6. Equipment.
7. Contingencies.
8. Refinancing.
9. Other (described).

Annual operating budget.

1. Income – include rate schedule. Project income realistically.

2. Operation and maintenance costs – Project costs realistically. In the absence of other data, base on actual costs of other existing facilities of similar size and complexity. Include facts in the report to substantiate operation and maintenance cost estimates.

Maps, drawings, sketches, and photographs.

1. Maps – Show locations, boundaries, elevations, population distribution, existing and proposed facility, right-of-way, and land ownership.

2. Drawings and sketches – Show preliminary design and layout elevations.

3. Photographs – as needed.

Construction problems. Discuss in detail – include information on items which may affect the cost of construction.

Conclusions and recommendations. Discuss possible alternative to proposed plans.

This form is available electronically.

OMB Control No. 0505-0025
Expiration Date: 6/30/2022

Representations Regarding Felony Conviction and Tax Delinquent Status for Corporate Applicants

AD-3030

Note: You only need to complete this form if you are a corporation. A corporation includes, but is not limited to, any entity that has filed articles of incorporation in one of the 50 States, the District of Columbia, or the various territories of the United States including American Samoa, Federated States of Micronesia, Guam, Midway Islands, Northern Mariana Islands, Puerto Rico, Republic of Palau, Republic of the Marshall Islands, or the U.S. Virgin Islands. Corporations include both for profit and non-profit entities.

The following statement is made in accordance with the Privacy Act of 1974 (5 U.S.C. § 552a, as amended). The authority for requesting the following information for U.S. Department of Agriculture (USDA) agencies and staff offices is in § 744 and 745 of the Consolidated Appropriations Act, 2019, Pub. L. 116-6 as amended and/or subsequently enacted. The information will be used to confirm applicant status concerning entity conviction of a felony criminal violation, and/or unpaid Federal tax liability status.

According to the Paperwork Reduction Act of 1995 an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0505-0025. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The provisions of appropriate criminal, civil, fraud, privacy, and other statutes may be applicable to the information provided.

PART A APPLICANT

1. APPLICANT'S NAME	2. APPLICANT'S ADDRESS *(Including Zip Code)*	3. TAX ID NO. *(Last 4 digits)*

4A. Has the Applicant been convicted of a felony criminal violation under any Federal law in the 24 months preceding the date of application? ☐ YES ☐ NO

4B. Does the Applicant have any unpaid Federal tax liability that has been assessed, for which all judicial and administrative remedies have been exhausted or have lapsed, and that is not being paid in a timely manner pursuant to an agreement with the authority responsible for collecting the tax liability? ☐ YES ☐ NO

Providing the requested information is voluntary. However, failure to furnish the requested information will make the applicant ineligible to enter into a contract, memorandum of understanding, grant, loan, loan guarantee, or cooperative agreement with USDA.

PART B SIGNATURE

5A. APPLICANT'S SIGNATURE (BY)	5B. TITLE/RELATIONSHIP OF THE INDIVIDUAL IF SIGNING IN A REPRESENTATIVE CAPACITY	5C. DATE SIGNED (*MM-DD-YYYY*)

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/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 by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should 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. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at How to File a Program Discrimination Complaint (https://www.ascr.usda.gov/filing-program-discrimination-complaint-usda-customer) and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) 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.

CERTIFICATION FOR ARTICLES OF INCORPORATION AND BY-LAWS

Articles of Incorporation:

(Include a recent Certificate of Good Standing from the Department of Financial Institutions)

We certify that the foregoing Articles of Incorporation are current including any adopted amendments that have been filed with the Department of Financial Institutions. The corporation was formed on _____.

Given under our hands this _____ day of _____, 20_____.

_____ _____

Secretary President

By-Laws:

We certify that the foregoing bylaws were duly adopted by the members on _____, 20_____. Any amendments or changes to the bylaws that have been adopted are also included. That same still in full force and effect and have note been amended.

Given under our hands this _____ day of _____, 20_____.

_____ _____

Secretary President