



# FY2022 LUBBOCK COUNTY ARPA FUNDING REQUEST PASS-THROUGH ENTITY GRANT

On March 11, 2021, President Biden signed the American Rescue Plan Act (ARPA) of 2021 into law. The ARPA Act is intended to combat the COVID-19 pandemic, including the public health and economic impacts. Lubbock County is accepting requests for funding for American Rescue Plan Act (ARPA) also known as the State and Local Fiscal Recovery Funding (SLFRF) December 6, 2021 through January 31, 2022. This funding is intended to lead in the recovery from the COVID-19 pandemic throughout the years of outlays until the end of calendar year 2024. The Lubbock County Commissioners' Court has identified the recovery of small businesses, non-profits, and industries hard-hit by the COVID-19 public health emergency as priority categories for funding.

Therefore, while programs are being developed and funding under ARPA is being allocated for use in the next fiscal year, small businesses, non-profits, and industries impacted by the public health emergency may submit preliminary funding requests to Lubbock County. These submissions will be overviewed by Lubbock County to effectively plan the distribution of ARPA funds to ensure optimum equity, efficiency and appropriate use of aid ***completion of funding request does not guarantee ARPA aid for any given entity.*** Approval guidelines and SLFRF reporting requirements will be directed at a later time. To be considered for funding, the organization's project must align with one of the priority categories identified below.

*(Check which category your project aligns with):*

## ***Negative Economic Impacts***

       **Aid to Impacted Industries** – Lubbock County will focus assistance to aid industries impacted by the public health emergency, such as tourism, travel, hospitality and other impacted industries.

       **Small Business Economic Assistance** – Lubbock County will focus assistance to businesses with no more than 100 employees located in Lubbock County. These businesses must have been adversely affected by the COVID-19 pandemic and must prove inability to obtain financial assistance or funding from alternative sources to meet business needs.

## ***Services to Disproportionately Impacted Communities***

       **Aid to Nonprofit Organizations** – Lubbock County will focus assistance to local nonprofit organizations impacted by the public health emergency which may include expanding the scope of services provided or to replace revenue lost due to COVID-19.



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**Checklist**

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This checklist is provided as a tool to assist you in the completion of your application.

**If you have questions regarding your application, please contact:**

**Robin Wilmot at [rwilmot@lubbockcounty.gov](mailto:rwilmot@lubbockcounty.gov)**

**Kristen Windham at [kwindham@lubbockcounty.gov](mailto:kwindham@lubbockcounty.gov)**

**Kathy Williams at [kwilliams@lubbockcounty.gov](mailto:kwilliams@lubbockcounty.gov)**

*(Initial each statement after reading)*

\_\_\_\_ Did you sign the certification page and initial all the certification statements?

\_\_\_\_ Does the proposed project meet one of the priority categories detailed above?

\_\_\_\_ Have you provided a DUNS number so that a debarment check may be completed?

\_\_\_\_ Have you provided a completed W-9, if required?

\_\_\_\_ Have you provided a copy of the organizations business license?



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**Certification**

By signing this request, I understand and affirm that: *(initial each statement after reading)*

\_\_\_\_\_ Lubbock County will distribute ARPA funds by means of issuing pass-through entity grants. As a subrecipient, I certify that I have read and agree to abide by the requirements noted in the [Treasury's Compliance and Reporting Guidance](#) and the [Interim Final Rule](#).

\_\_\_\_\_ My organization will use any funds received by Lubbock County for costs actually incurred due to the COVID-19 pandemic or due to loss of revenue as a result of the public health emergency. The organization will provide all documentation to verify those expenses or lost revenue and will adhere to all reporting requirements as noted in the Treasury's Compliance and Reporting Guidance. Documentation may include but is not limited to, reporting on organizational goals and accomplishments, copies of payroll documents, invoices, and payment documents.

\_\_\_\_\_ My organization or identified partner has a business license for Lubbock County or a documented 501(c)3 designation. Such status is required to be eligible for receipt of ARPA funds from Lubbock County.

\_\_\_\_\_ If awarded, my organization intends to enter into a Memorandum of Understanding with Lubbock County, and provide liability insurance as may be required for the duration of the contract naming Lubbock County as an additional insured in an amount determined by the County. In addition, my organization will provide proof of or obtain a city business license in Lubbock County, if required.

\_\_\_\_\_ If awarded, requested funds will be used only for eligible purposes described in this application and in compliance with ARPA, Section 35.6(b) of the Interim Final Rule (and final rule when effective), which appears in Title 31 of the Code of Federal Regulations, applicable federal contract provisions, and all other applicable federal laws and regulations.

➤ Federal Contract Provisions

Recipients of ARPA funds are subject to required federal contract provisions under Chapter 2 CFR Part 200 Appendix II. A sample of the required supplementary conditions may be found [here](#). These supplementary conditions are subject to change.



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**Certification (Continued)**

\_\_\_\_\_ I have reviewed the federal contract provisions for recipients of ARPA funds, under Chapter 2 Part 200 of the code of Federal Regulation (CFR) and Title 6 of the Civil Rights Act of 1964 and if awarded funds, will abide by all federal, state, and local procurement policies.

\_\_\_\_\_ I understand the use of funds are subject to: Monitoring and Oversight per 2 CFR § 200.337, the Federal awarding agency, Inspector General, the Comptroller General of the United States, the pass-through entity, or any of their authorized representatives has the right, at all reasonable times, to make site visits or conduct desk reviews in order to review Program accomplishments, management control systems, award progress of the funding recipient, and to provide any required technical assistance. During site visits or desk reviews, authorized representatives will review recipients' files related to the award. As part of any monitoring and program evaluation activities, recipients must permit authorized representatives, upon reasonable notice, to review grant-related records and to interview the organization's staff and contractors regarding the Program. Recipients must respond in a timely and accurate manner to requests for information relating to the award.

\_\_\_\_\_ I understand that grant awards will be determined by Lubbock County in its sole discretion. Applications may be awarded for the full or partial amount of the grant requested, or maybe declined.

\_\_\_\_\_ I certify that this request for funding is not duplicative of other public or private funding received.

\_\_\_\_\_ I certify that the organization represented in this application has never been debarred, suspended or otherwise excluded from receiving federal funding or assistance.

\_\_\_\_\_ I certify that the organization represented in this application has never defaulted on any private or governmental loans.

\_\_\_\_\_ I understand that this request for funding and any application materials voluntarily submitted as part of this request are public records unless otherwise exempt under applicable law. All information received from an applicant organization whether received in connection with a grant application or in connection with any grant-funded activities performed, is subject to disclosure pursuant to the Texas Public Information Act, unless otherwise accepted.



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**Certification (Continued)**

\_\_\_\_\_ I certify that I have the legal authority of the organization represented in this application to submit this request for funding on its behalf, and I further certify that the information submitted in this application is true and correct to the best of my knowledge. I understand that Lubbock County will rely on the accuracy of the submittals and certifications made in conjunction with this application. Any false statements, concealment of information, submission of altered documents, use of funds for ineligible purposes, or similar actions are considered fraudulent and many result in repayment of the grant award or other legal action.

\_\_\_\_\_ I understand a project wrap-up report is required upon completion of the project.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



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**SUBMISSION DEADLINE**  
**Monday January 31, 2022**

**Applying for ARPA Funds (State and Local Fiscal Recovery Funds)**

The application period for ARPA funding requests will be December 6, 2021 through January 31, 2022.

In addition to general applicant information, you will need:

- ❖ <https://www.dnb.com/duns-number/get-a-duns.html>
- ❖ EIN Number
- ❖ **SAM Registration** (<https://sam.gov/content/home>) (while this is not required to submit an application, it will be required to receive an award. This process could take some time, so OPB strongly encourages applicants to proactively apply for a SAM registration)

Completed applications must be actually received (not postmarked) by midnight on the submission deadline date specified above.

Funding request may be submitted by email to Lubbock County at: [LubbockARPA@lubbockcounty.gov](mailto:LubbockARPA@lubbockcounty.gov)

Please attach a completed W-9, copy of business license and the latest financial statement.

Funding request may also be submitted by mail but postmarks after the deadline date will not be accepted. If mailing, be sure to allow enough time for actual delivery.

**Applications may be mailed or delivered to:**

Lubbock County ARPA Funding  
Lubbock County Auditor's Office  
Attn: Robin Wilmot  
916 Main Street, Suite 700  
Lubbock, Texas 79408



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**Organization Information**

**\* Response required for application to be considered complete**

Date of Submission\* \_\_\_\_\_

Legal Name of the Organization: \* \_\_\_\_\_

Doing business as (DBA) name (if applicable): \_\_\_\_\_

EIN Number: \_\_\_\_\_ SAM Registration: \_\_\_\_\_

Organization's Street Address: \* \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Organization Mailing Address: \_\_\_\_\_  
(if different from street address)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Organization Website: \* \_\_\_\_\_  
(Please enter "N/A" if none)

Applicant Name: \* \_\_\_\_\_

Applicant Title: \* \_\_\_\_\_

Applicant Mailing Address: \_\_\_\_\_  
(if different from organization mailing address)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Applicant Phone: \* (\_\_\_\_\_) \_\_\_\_\_ Applicant E-mail: \* \_\_\_\_\_

Project Contact: \_\_\_\_\_  
(if different from applicant)

Project Contact Phone: (\_\_\_\_\_) \_\_\_\_\_ Project Contact E-mail: \_\_\_\_\_



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## Questions

Briefly describe your organization's mission and/or goals.\*

Maximum 500 characters:

List and briefly your organization's current or most recent projects(s) (last 1-5 years).\*

Maximum 500 characters:

What problem(s)/community need(s) would your organization target with the use of ARPA funds and how will the Lubbock County community be impacted?\*

Maximum 500 characters:

Describe in detail the programs/projects that will be created to target the given need established above.\*

Maximum 500 characters:



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Briefly describe how the award of ARPA funding would help your organization respond to or recover from the adverse economic effects of COVID-19.\*

Maximum 500 characters:

Provide the total amount of funding required for intended program(s)/project(s). Please include ancillary costs?\*

Maximum 500 characters:

Describe how the metrics of success for the program(s)/project(s) will be established and evaluated, if funding is awarded.\*

Maximum 500 characters:

How will your organization monitor/evaluate funding and execution for said program(s)/projects(s)?\*

Maximum 500 characters:



## FY2022 LUBBOCK COUNTY ARPA FUNDING REQUEST PASS-THROUGH ENTITY GRANT

Has your organization applied for other Federal, State or local funding? If so, describe the source(s) and amount(s) applied for, as well as any awards received.\*

Maximum 500 characters:

List any other funding sources (e.g. fees, donations, grants) your organization has received or is pursuing to support the project. \*

Maximum 500 characters:

Will the project be complete with requested funds? How will your organization support the project after ARPA funds are no longer available?\*

Maximum 500 characters:

Please provide any additional comments or information to be considered with your request.

Maximum 500 characters:





# FY2022 LUBBOCK COUNTY ARPA FUNDING REQUEST PASS-THROUGH ENTITY GRANT

## **Budget Narrative**

In the space below, please include any information which you feel may provide useful background on your proposed **FY/CY2022 budget**, such as source and rate at which matching labor costs are calculated, etc.

