TOWN OF RICHLANDS
OUTSIDE AGENCY FUNDING REQUEST POLICY

The Town of Richlands receives many requests from outside agencies each year, so in order to have a policy that is fair and balanced, the Town sets forth the following policy for any and all requests for funding to be considered for the upcoming budget year.

In order to be considered for funding, the requestor must meet the following criteria:

1-Open submission period will be ONLY January 1 through January 31 of each year and a complete application is required. The Council will consider each request during the annual budget process for potential funding in the upcoming fiscal year. Submission of an application does not guarantee funding and is ultimately up the Council based upon need and availability of funds.

2-The application consists of requestor information, amount requested, how the funds will be used, if the project funded will address local community needs, if any in-kind services have ever been received from the Town of Richlands in the past, description of organization or program, certification that the funding would be used solely as described in the application.

3- Any grant receiving more than $500.00 in donations from the Town of Richlands during any single fiscal year must provide (1) a statement of how such funds were spent and (2) receipts demonstrating the expenditure of the funds. If you have received or plan to receive more than $500.00 or more from the Town of Richlands, you must submit this information. Such accounting shall be provided within ninety (90) days of the expenditure of said funds.

4-If upon review of the statements and receipts you provide and it is determined the funds were not spent or not spent on the expenses for which they were requested, your organization will be required to return any such funds as were inappropriately spent and may not be eligible for additional funding during the current fiscal year.

Please sign below to accept the above-listed terms and conditions.

Signature: _____

Organization: _____

Date: _____

OUTSIDE AGENCY FUNDING REQUEST APPLICATION

Complete all information and submit to Town of Richlands. Incomplete applications will not be considered.

Name of Organization: _____

Contact Person:_____

Mailing Address:_____

Phone: _____ Email:_____

Type of sponsorship requested: Monetary   ☐   In-Kind   ☐

Amount you are requesting: $_____

Have you received a monetary donation from the Town of Richlands in the Past?   Yes ____   No____
If yes, how much and when? _____
_____

Have you received In-Kind services from Town of Richlands in the Past?   Yes____   No ____
If yes, what type of service and when? _____

How exactly will the funds or services you are applying for be used? (List local projects or economic benefit. Be specific).
_____
_____

How will this project address local community needs? _____
_____

How will you measure the success of your project?_____
_____

Describe your organization or program?_____

_____

_____

Open Enrollment Period January 1-January 31 for consideration in the next fiscal year. Approval/denial subject to Town Council during annual budget process.

I certify that the information above is correct and that the sponsorship, if approved, would be used solely as described above.

Signature: _____   Date: _____

Note: Any grant receiving more than $500.00 in donations from the Town of Richlands during any single fiscal year must provide (1) a statement of how such funds were spent and (2) receipts demonstrating the expenditure of the funds. If you have received or plan to receive more than $500.00 or more from the Town of Richlands, you must submit this information.   Such accounting shall be provided within ninety (90) days of the expenditure of said funds.

If upon review of the statements and receipts you provide and it is determined the funds were not spent or not spent on the expenses for which they were requested, your organization will be required to return any such funds as were inappropriately spent and may not be eligible for additional funding during the current fiscal year.

Please sign you accept the terms and conditions **if** you are awarded a donation.

Signature: _____

Date: _____

OFFICE USE ONLY

RECEIVED:

RECOMMENDATION:

APPROVAL:

NOTIFY APPLICANT: