

# Emergency Food & Shelter Program Phase 39 and APRA-R Application Instructions & Guidelines

*The spending period for EFSP Phase 39 and ARPA-R is November 1, 2021 through April 23, 2023.*

**Please read these instructions before starting the application.**

The Emergency Food and Shelter Program (EFSP) was established in 1983 by Congress with the intent of supplementing local efforts to provide emergency shelter and food to people in need. The Local Boards for the Emergency Food and Shelter Program invite interested, qualified non-profit community organizations and local units of government to request grants to provide emergency food, shelter, one-time rental/mortgage and utility assistance to people in need.

These funds are made available through the Department of Homeland Security/ Federal Emergency Management Agency under the Emergency Food and Shelter National Board Program. Funds awarded to local jurisdictions are calculated by the National Board based on a formula that takes economic health, income levels, joblessness levels and other factors into account.

## APPLICANT ELIGIBILITY

Eligible applicants must:

- Not charge fees for EFSP-funded services.
- **BE SUPPLEMENTING EXISTING PROGRAMS**
- Be a non-profit or governmental agency.
- Have an accounting system or fiscal agent approved by the Local Board.
- Have a checking account (for electronic funds transfer).
- Have a Federal Tax Identification Number (Federal EIN).
- Conduct an independent annual audit if receiving \$100,000 or more in EFSP funds; conduct an annual review if receiving \$50,000 to \$99,999 in EFSP funds.
- Comply with the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards at 2 CFR 200 of the Office of Management and Budget, if expending \$750,000 or more in Federal Funds.
- Practice nondiscrimination.
- Already be providing services in the area in which the agency is seeking funding.
- If a private nonprofit, have a voluntary board.
- Comply with all EFSP program reporting and audit requirements.

Agencies that meet eligibility requirements may apply for funding, including those that received funding in previous phases. Eligibility to apply **does not guarantee funding**. Priority is given to agencies providing services for food and shelter.

**NOTE: Emergency Food & Shelter Program funds cannot be used as matching funds.**

## ELIGIBLE ACTIVITIES FOR FUNDING

The intent of EFSP is to supplement and expand current available resources and not to substitute or reimburse ongoing programs and services or to start new programs. The following are activities eligible for funding under the guidelines of Local Boards. Priority will be given to organizations providing food and shelter. **Note: Other activities may be eligible under National Board guidelines but are not funded under the Local Board's guidelines.**

- A. Served Meals** - *Any food used in served meals (cold or hot); cost of transporting food to site or client; per meal allowance of \$3.*
- B. Other Food** - *(nonperishable/perishable) – For food banks/pantries and other food providers. Eligible expenses include food purchased for distribution and transportation expenses related to the delivery and distribution of purchased and donated food.*
- C. Mass Shelter** – *(on site shelter with 5 or more beds in one location). Direct expenses associated with housing a client (supplies, linens, etc.); transportation costs; daily allowance of \$12.50.*
- D. Other Shelter** - *Off-site emergency lodging (room and tax only) in a hotel/motel or other off-site shelter. Limited to 90 days assistance for clients per phase if it is necessary to prevent homelessness. An agency may not operate as a vendor for itself or another LRO.*
- E. Rent/Mortgage**- *Past due rent or mortgage payment (P&I only); current rent or mortgage due within 5 calendar days; first month's rent; lot fee for mobile homes. Limited to 90 days (3 months') costs for an individual/family.*
- F. Utilities** - *Past due bills, or current bills due within 5 calendar days; for gas, electricity, oil, water, reconnect fees. May pay budget or actual amount. Limited to 90 days (3 months) for clients per phase if necessary to prevent disconnection of services. One time delivery of firewood, coal, or propane.*

Funds may only be used for residents and transients within the Richmond County jurisdiction. All payments for eligible activities under EFSP must be made directly to vendors by agency check, agency credit/debit card, or electronic payment to vendors. **No checks may be made payable to clients, volunteers or staff. Cash payments are ineligible - including but not limited to petty cash.**

## APPLICATION PROCESS

1. Submit **ONLY** the required attachments with the application.
2. Required Attachments:
  - a. Copy of your 501(c) (3) tax-exempt status letter for your organization. If your organization does not have one, you must utilize the FEIN of a fiscal agent. A fiscal agent is another non-profit organization that may receive Emergency Food and Shelter Program funds and maintains fiscal responsibility on behalf of another organization.
  - b. Copy of the most recent Board approved Operating Budget and Program Area Budget.



EMERGENCY FOOD AND SHELTER NATIONAL BOARD PROGRAM PHASE 39 and ARPA-R  
LOCAL RECIPIENT ORGANIZATION (LRO) APPLICATION

**The intent of this program is to supplement and expand ongoing efforts to provide shelter, food and supportive services and not to substitute or reimburse ongoing programs and services or to start new programs.**

To be considered for EFSP funds, the following must be completed:



FEMA



American Red Cross



Legal Name of Organization/Agency:			
Physical Address:			
Mailing Address:			
Place of Performance:			
Physical Address for Place of Performance:			
Agency Website:		Fax:	
Agency Director Name:			
EFSP Program Contact:			
Application Contact Person:			
Federal Employer Identification Number (FEIN):			
DUNS:			
<b>The Organization:</b>			
	<b>YES</b>	<b>NO</b>	
Is either a nonprofit or an agency of government			N/A
Has an accounting system & uses Generally Accepted Accounting Principles			
Conducts an independent annual audit <i>(if no, request a full budget form)</i>			
<b>Date of most recent audit:</b> <b>Prepared by:</b>			
Practices non-discrimination <i>(LRO's with a religious affiliation will not refuse service to an applicant based on religion, nor engage in religious proselytizing or religious counseling with Federal funds)</i>			
Is Agency debarred or suspended from receiving funds or doing business with the Federal Government?			
Has a voluntary Board of Directors. If no, please explain.			
If funded by EFSP in the past or present, abides by the reporting requirements set by EFSP, in this and any other jurisdiction.			
In the past, program has returned funds or not received full award amount. If yes, please provide a brief explanation in a separate document.			

Executive Director's Signature:		Date:	
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For Technical Assistance contact Angela Collins at 706-724-5544 or via email at: [acollins@uwcsra.org](mailto:acollins@uwcsra.org).

**Should an agency be found out of compliance for any previous phase, the compliance issue must be resolved within 45 days of notification. Should the non-compliance NOT be rectified within this time frame, any pending this award will be brought back to the Local Board immediately for reallocation.**

## FUNDING REQUEST

Write in the amount requested for EFSP dollars that coincides with the category/ies for which you are applying. **The Estimated Number must be the number you anticipate serving with the requested EFSP funding ONLY.** This should be an unduplicated number, with the exception of the food categories. **Submit with application the required completed documents for the category/ies you are requesting funding in.**

Category	Category Description	Amount Requested	Estimated Number
A	<b>Served Meals</b> - Any food used in served meals (cold or hot); cost of transporting food to site or client; per meal allowance of \$3.	\$	(meals)
B	<b>Other Food</b> (nonperishable/perishable) – For food banks/pantries and other food providers. Eligible expenses include food purchased for distribution and transportation expenses related to the delivery and distribution of purchased and donated food.	\$	(meals)
C	<b>Mass Shelter</b> – (on site shelter with 5 or more beds in one location). Direct expenses associated with housing a client (supplies, linens, etc); transportation costs; daily allowance of \$12.50.	\$	(bed nights)
D	<b>Other Shelter</b> - Off-site emergency lodging (room and tax only) in a hotel/motel or other off-site shelter. Limited to 90 days assistance. You may not operate as a vendor for yourself or another LRO.	\$	(nights)
E	<b>Rent/Mortgage</b> – Past due rent or mortgage payment (P&I only); current rent or mortgage due within 5 calendar days; first month's rent, lot fee for mobile homes. Limited to 3 month's costs for an individual/family.	\$	(bills paid)
F	<b>Utilities</b> - Past due bills, or current bills due within 5 calendar days; for gas, electricity, oil, water, reconnect fees. May pay budget or actual amount. Limited to 3 month's amount that is part of the arrearage at the time of payment or current one month amount. One time delivery of firewood, coal,	\$	(bills paid)
	<b>TOTAL FUNDING REQUEST</b> (A+B+C+D+E+F)	\$	

## **CONTACT INFORMATION**

Write in the names and contact information for all staff members of the agency who are responsible for the Emergency Food and Shelter Program. The EFSP Program Contact is the primary person who will be administering the program within the agency and serves as the primary contact between the Local Board and the agency. The Application Contact is the agency person to whom questions about the application should be addressed. Additional individuals who should be included in communications, e.g. a grants administrator, may also be included in the contact list under other.

<b>Agency Director Name:</b>	
Agency Director Telephone/Fax:	
Agency Director Email Address:	
<b>EFSP Program Contact Name:</b>	
EFSP Program Contact Title:	
EFSP Program Contact Telephone/Fax:	
EFSP Program Contact Email Address:	
<b>Application Contact Name:</b>	
Application Contact Title:	
Application Contact Telephone/Fax:	
Application Contact Email Address:	
<b>Additional Contact Name:</b>	
Additional Contact Title:	
Additional Contact Telephone/Fax:	
Additional Contact Email Address:	

### **Submit the following required attachments with your application:**

- Copy of your 501(c) (3) tax-exempt status letter for your organization. If your organization does not have one, you must utilize the FEIN of a fiscal agent. A fiscal agent is another non-profit organization that may receive Emergency Food and Shelter Program funds and maintains fiscal responsibility on behalf of another organization.
- Copy of the most recent Board approved Operating Budget and Program Area Budget. A copy of the agency's audit must be made available upon request.

Completion of application is **NOT** a guarantee of funding.

**Email a copy of the completed application and category section document(s) to:  
Angela Collins at [acollins@uwcsra.org](mailto:acollins@uwcsra.org) by March 9th at 5 p.m.**