

FAYETTE COUNTY, PENNSYLVANIA

LOCAL SHARE ACCOUNT

PROGRAM APPLICATION

DEADLINE FOR APPLICATIONS: FRIDAY, AUGUST 3, 2018 BY 4:00 P.M.

Project Name:

Project Location / Address (Specify):

Project Municipality:

Requesting Entity:

Project Sponsor (if applicable):

Entity/Sponsor Category (check one):	<input type="checkbox"/>	County	<input type="checkbox"/>	Redevelopment Authority
	<input type="checkbox"/>	Municipality	<input type="checkbox"/>	IDA
	<input type="checkbox"/>	Non-Profit	<input type="checkbox"/>	Fay Penn

Contact Name:

Address:

Phone Number: **E-Mail Address:**

Project Funding:	
Total Request of LSA Funds	\$ <input type="text"/>
Total Other Funds *	\$ <input type="text"/>
Total Project Budget	\$ <input type="text"/>

*** Are other funds secured? (please check one)** Yes No

Source of Other Funds:

Project priority number: _____

If an organization / municipality submits multiple projects for funding, projects must be ranked based on priority.

Project Category (please check one):

<input type="checkbox"/>	Economic Development Projects: Projects that promote local economic activity and create and/or retain jobs.
<input type="checkbox"/>	Community Improvement Projects: Projects that improve or create civic, cultural, or recreational activities or facilities.
<input type="checkbox"/>	Projects in the Public Interest: Projects that improve the quality of life in the affected communities.

1. Project Description

Provide a brief description of the project. Explain in detail how LSA funds will be utilized.

2. Project Need

Describe the project need, including the community impact.

3. Project Expected Outcomes

Describe the expected outcomes for the project, including anticipated job creation.

4. Detailed Project Budget

	Sources of Funds				Total
	Local Share Account (LSA)	Other	Other	Other	
Acquisition					
Land					
General Construction					
New Construction					
Renovations					
Infrastructure / Site Preparation					
Roads / Streets					
Water / Sewer					
Demolition					
Excavation / Grading					
Parking					
Utilities					
Machinery & Equipment					
New Equipment Purchase					
Operating Costs / Working Capital					
Salary / Fringe Benefits					
Training / Technical Assistance					
Promotion / Public Relations					
Space Costs					
Related Costs					
Professional Services					
Engineering					
Other					
Total:					

5. Project Schedule & Timeline

Describe the timeline for the project including project milestones. Please consider that the LSA funds will not be available for the project to commence before **February 1, 2019**. Projects cannot commence before the DCED contract is executed with the Redevelopment Authority. DCED has indicated their contracts will be three-year contracts; therefore, project funds must be fully expended within the three-year time frame.

6. Project Support

Project support must be secured by the requesting entity. Letters, resolutions, and minutes should be submitted with the application.

Has the requesting entity taken official action to authorize submission of the Application?

(please check one)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If yes, date approval was authorized:				

Has the project sponsor taken official action to support the project? (if applicable)

(please check one)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	NA
If yes, date support was provided:						

Has the affected community taken official action to support the project?

(please check one)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If yes, date support was provided:				

Does the project have local and community support?

(please check one)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
--------------------	--------------------------	-----	--------------------------	----

Have all the necessary permitting and approvals been obtained to undertake the project?

(please check one)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Please provide a listing of permitting required and list date permitting approval was obtained:				

Has an engineer been selected for the project? (if applicable)

(please check one)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	NA
If yes, please provide contact information:						