



# APPLICATION AND PROJECT PROPOSAL

**Instructions:** Complete the following information. Please provide as much detail as you can.

Email your completed application to: [Teresa.Kjellberg@farmcreditnd.com](mailto:Teresa.Kjellberg@farmcreditnd.com)

Mail to: 1400 31<sup>st</sup> Ave SW Minot ND 58701

## APPLICANT INFORMATION

Legal Business Name

Headquarters Street Address

City

State

Zip

County

Business Phone

Mobile Phone

Contact Name

Title

Email Address

Confirm Email Address

Business Type (choose one)

Corporation

LLC

Partnership

Sole Proprietorship

Nonprofit IRS 501 (C)(3)

Fed ID #

Gross Income (\$)

Total Assets (\$)

Total Liabilities (\$)

## **PROJECT INFORMATION**

Name of Project

Project Location

Brief description and type of project

Number of people expected to be positively impacted

*Max 1000 characters. Please attach separate document if needed.*

Description of geographic area expected to be positively impacted

## **FINANCIAL NEEDS AND RESOURCES**

Grant request amount (\$)

Funding from other sources (describe sources)

Total expected income (describe sources)

Total expected expenses (describe sources)

*Provide any supporting documentation as an attachment to this application.*

## **APPLICANT REPRESENTATIONS**

- Applicant signing below warrants that the information provided to the PAT-NOW Community Fund and its administrators and agents or in connection with this application is true and correct, and authorizes the release of such information to the PAT-NOW Community Fund. Applicant consents to the PAT-NOW Community Fund obtaining a credit report or criminal history report or any other information relating to Applicant's financial information or background. Upon request, Applicant agrees to provide a social security number to the PAT-NOW Community Fund. Applicant releases all claims against the PAT-NOW Community Fund for all acts or omissions which occur in verifying the above information. Any person is hereby authorized to provide such information as requested by the PAT-NOW Community Fund.
- The PAT-NOW Community Fund gives priority to applications made by nonprofit organizations qualified under IRS section 501(c)(3). Each applicant awarded a grant must submit evidence of its tax-exempt status to the PAT-NOW Community Fund prior to the distribution of any grant including but not limited to, a tax determination from the Internal Revenue Service.
- Applicant affirms expressly that it will use the grant funds in compliance with all applicable anti-terrorist financing and asset control laws, regulations, rules and executive orders, including but not limited to, the USA Patriot Act of 2001 and Executive Order 13224. Any violation of this representation is grounds for immediate termination of the grant and return of all funds advanced to the applicant.
- If the award is granted, Applicant agrees to participate in public service announcements, media interviews, or video news releases.
- If the award is granted, Applicant agrees to provide periodic financial reports detailing use of the funds by the organization and project status. These reports will generally include a listing of all expenditures from grant funds as well as an overall organizational financial report covering revenue and expenses, assets, and liabilities.
- When favorable action is not taken on an application, the Applicant will be notified in writing by the PAT-NOW Community Fund of the denial, however Applicant understands the PAT-NOW Community Fund is under no obligation to explain why the grant was not made and that there are no appeal rights.

## **AUTHORIZATION**

### **Representations and Acknowledgments:**

**Transmission of this application as an "electronic record" containing my "electronic signature," as those terms are defined in applicable federal and/or state laws, or facsimile transmission of this application containing a facsimile of my signature, shall be as effective, enforceable and valid as if a paper version of this application were delivered containing my original written signature.**

**Authorized Signatures:** Corporation or LLC (Officer) Partnership (General Partner) Sole Proprietorship (Owner)

Name of Entity:

Individually:

By:

Title:

Date: