



EFSP / FEMA Phase 32 Funding Request for Proposal

The Lake County Department of Community Services is requesting proposals for the EFSP / FEMA grant funding for Phase 32 for the following:

- Assisting individuals / families by providing one or more of the following services:
 - rental or mortgage
 - utilities
 - food
 - mass shelter and/or feeding

Funding is made available through the Department of Homeland Security (DHS)/Federal Emergency Management Agency under the Emergency Food and Shelter National Board Program.

SUBMISSION DEADLINE

Monday, April 13, 2015 - 5:00 PM

Contact:

Allison Thall
P.O. Box 7800
Tavares, FL 32778-7800
Phone: 352.742.6502
Email: athall@lakecountyfl.gov

Hand Deliver to:

Health & Human Services
315 West Main Street
Room 233
Tavares, FL 32778

Mailing Address:

Allison Thall
Health & Human Services
P.O Box 7800
Tavares, FL 32778-7800

EFSP / FEMA Phase 32 Application for Funding

Please prepare on computer or typewriter only.

1. Agency's Legal name: *(who will operate the program?)* _____
 - a. Contact: Director's name and title: _____
 - b. Agency contact: for application questions: _____
 - c. Agency contact: for EFSP, (if different from above) _____
 - d. Physical address: _____
 - e. Agency Mailing Address (if different): _____
 - f. Phone Number: _____ Fax Number: _____
 - g. E-mail address: _____

2. Agency address of where funded services are provided: _____

-
- a. Congressional District:

Where agency is physically located: _____

Where agency's EFSP funded services are provided: _____

3. Agency's Federal ID number: _____

4. Agency's DUNS number: _____

5. Please check one of the following:

Nonprofit *

Unit of Government

**Attach Roster of volunteer board to application*

6. Description of Proposed Service (**page 4** - please use separate sheet to outline services)

7. EFSP dollar amount being requested: \$ _____

8. EFSP funding request by program area:

Food/Meals: \$ _____

Rent/Mortgage: \$ _____

Utilities: \$ _____

9. Is agency debarred or suspended from receiving funds or doing business with the Federal government? Yes_____ No_____
10. Budget (*page 5 - use budget form provided*)
11. Copy of agency's most recent annual audit (*please attach copy to application*)

12. _____
Authorized Signature

Typed/Printed Name and Title

Date

EFSP / FEMA Phase 32 Description of Proposed Services
(Please use second sheet if necessary)

EFSP / FEMA Phase 32 Budget Form

REVENUE: (How Program is financed):

EFSP/FEMA Grant Amount
Requested: \$ _____

Other Funds Supporting Program (Cash and In-Kind- List by Source and Amount):

| | Other Cash | In-Kind |
|----------------------|------------|---------|
| _____ | | |
| _____ | | |
| _____ | | |
| _____ | | |
| _____ | | |
| _____ | | |
| _____ | | |
| _____ | | |
| _____ | | |
| TOTAL REVENUE | \$ | \$ |

Grand Total of Program Revenue: \$ _____ (Includes grant, cash and in-kind)

EXPENSES: Cost of the Program

Define expense: Cost of the Program

| | ESFP Grant | Other Cash | In-Kind |
|-----------------------|------------|------------|---------|
| _____ | | | |
| _____ | | | |
| _____ | | | |
| _____ | | | |
| _____ | | | |
| _____ | | | |
| _____ | | | |
| _____ | | | |
| _____ | | | |
| TOTAL EXPENSES | \$ | \$ | \$ |

Grand Total of Program Expenses: \$ _____ (Includes grant, cash and in-kind)