

## **Economic Resilience and Recovery (ERR) Fast Access Project Materials**



## **Economic Resilience and Recovery (ERR) Fast Access Project How to Apply and Timeline**

Due to the economic effects of COVID-19 on the Virginia economy, beginning in April 2020, DHCD has reallocated funds to the regions to support COVID-19 relief efforts. In order to move resources quickly, DHCD will offer a Fast Access process and use its administrative approval authority for grant applications of \$100,000 or less. These Fast Access requests may include pre-implementation activities (needs assessments, etc.) and implementation or smaller-scale implementation projects. Applicants are encouraged to think holistically about the needs in their region and focus on efforts that produce near term impact in the region. These projects have updated match requirements; grants will require match equal to 50% of the GO Virginia request, to be from any non-state source, with no local match required. This policy is in effect until further notice.

### **How to Apply**

\*Staff highly encourages applicants meet with staff to discuss their project idea, prior to submission.

1. Complete the attached "Economic Resilience and Recovery (ERR) Fast Access Application" and submit it to Jennifer Morgan, [morgan@gwregion.org](mailto:morgan@gwregion.org).
2. Applications reviewed by staff and two Council members.
3. Applicants respond to any questions and submit a final application with tracked changes.
4. Staff will write final comments and submit to the Regional Council/Executive Committee for review.



## Economic Resilience and Recovery (ERR) Fast Access Application

**Project Name:**

**Date:**

**Project Applicant**

Legal Name:

EIN/TIN:

Address:

Website:

**Application Contact**

Name:

Title:

Phone:

Email:

**What Growth and Diversification plan priority industry cluster/s is your project in?**

- Aquaculture/Seafood/Commercial Fishing/Marine Industries
- Forestry/Wood Products/Paper
- Manufacturing
- Distribution/Logistics
- Information/Data Centers
- Professional, Scientific, and Technical Services

**What category does your project fall into?**

- Entrepreneurial Activities
- Site Development
- Workforce Development

**Participating Localities (Minimum 2 Required)**

Projects must have at least two participating localities. "Participation" can include financial participation, in-kind contribution, participation on a project advisory team, and/or administration of the project.

Caroline County		King William County		Spotsylvania County	
Essex County		Lancaster County		Stafford County	
City of Fredericksburg		Mathews County		Westmoreland County	
Gloucester County		Middlesex County		Other (specify):	
King and Queen County		Northumberland County		Other (specify):	
King George County		Richmond County		Other (specify):	

**Please define the level of participation by each of the localities.**



**Proposed Localities to be Served by Project**

Caroline County		King William County		Spotsylvania County	
Essex County		Lancaster County		Stafford County	
City of Fredericksburg		Mathews County		Westmoreland County	
Gloucester County		Middlesex County		Other (specify):	
King and Queen County		Northumberland County		Other (specify):	
King George County		Richmond County		Other (specify):	

**Other Proposed Partners and Collaborators:**

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**Project Description**

Provide a one-page summary of the proposed project. This should convey your project concept(s) assuming no prior knowledge of the project, including:

1. The expenses that GO Virginia funding and match will pay for,
2. Project activities,
3. The expected output/final product(s) of this project,
4. And how this project will create higher paying jobs (or line of sight for potential jobs for an enhanced capacity building grant)?

**Statement of Need**

Describe how the project aligns with the region’s Economic Growth and Diversification plan, why this project should be a priority for the Regional Council, how it will help mitigate the economic impacts of the COVID-19 crisis in the short and mid-term, and how it will support regional economic resilience and/or recovery efforts.

**Project Timeline and Milestones**

Describe the project timeline and the specific project milestones that will be utilized to track project progress and fund disbursement.

\*GO Virginia is a reimbursement-based grant and funds will only be disbursed after funds are expended. Match funds must be expended prior to or in proportion to GO Virginia funds.

\*\*Milestones are project activities and deliverables, in the order they are completed.



**Proposed Budget:**

GO Virginia Request:	\$
Total Match:	\$
Total Project Cost:	\$

Please explain in the chart below your proposed sources of revenue and how you plan to expend these funds. These totals must match.

**Project Revenues**

\*Any amount of funding coming from a state source (Community College, University, Other Grant, must show it is from a non-state source or not count as match but additional leverage towards the project

Source of Revenue	Amount	Type of Revenue (Cash or In-Kind)	Type of Match (Local, Regional, Federal, Private, Non-Profit, Other)	If other, specify	Source of Match	Status of the Match
GO VA Funds	\$0.00	Cash				
	\$0.00					
	\$0.00					

**Project Expenditures**

**Line Items include:** Acquisition, Administration, Architectural and Engineering Fees, Clearance and Demolition, Construction, Contract Services, Equipment, Fringe Benefits, Legal Expenses, Machinery/Tools, Planning/Assessment, Rent/Lease, Salaries, Site Work, Studies, Training, Travel, and Other

Line Item	If other, specify	Cost Estimate	Description	Funding Source(s) from Revenues Above	Type of Expenditure (Cash or In-Kind)
		\$0.00			
		\$0.00			
		\$0.00			

**Required Attachment Forms**

1. Letters of Financial (Cash) Commitment (cover sheet attached; Must clearly state amount committed)
2. In-Kind Contribution Forms (if applicable; cover sheet attached; template attached)
3. Letters of Support (if applicable; cover sheet attached)

**Optional Attachments**

- Other Supporting Documentation
- Memorandums of Understanding between all project partners detailing roles and responsibilities



### Letters of Financial (Cash) Commitment Cover Sheet

(Must clearly state amount committed). Please place letters in order behind this section of the application.

Partner Name	Amount of Cash Contribution	If Letter Pending, Date Expected
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	



### In-Kind Contribution Forms Cover Sheet

\*If applicable; template attached. Please place in-kind forms in order behind this section of the application.

Partner Name	Amount of In-Kind Contribution	If Form Pending, Date Expected
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	



**In-Kind Contribution Form**

**In-Kind Contribution Form**

Support Organization: George Washington Regional Commission  
Regional Council: Mary Ball Washington Regional Council (Region 6)

**Contributor Information**

Name of Business/Individual: \_\_\_\_\_  
Name of Primary Contact: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**Contributed Goods or Services**

Description of Contributed Goods or Services: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date(s) Contributed: \_\_\_\_\_  
Real or Estimated Value of Contribution: \$ \_\_\_\_\_  
How was the value determined?: 

Actual Value	Appraisal	Other
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Please explain: \_\_\_\_\_

Who Made this Value Determination?: \_\_\_\_\_

Is there a restriction on the use of this contribution?: 

No	Yes
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If yes, what are the restrictions?: \_\_\_\_\_

Contribution Obtained or Supported with State funds?: 

No	Yes
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If yes, please provide the name of the State agency and grant/contract number: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Contributor*

\_\_\_\_\_  
*Date Contributed*

(Excel version available at <https://govirginia6.org/apply/>)





### Letters of Support Cover Sheet

Letters from organizations not providing financial or in-kind contribution. Please place letters of support in order behind this section of the application.

Partner Name