



The **American Rescue Plan Act** provides the Boone County Commission with \$4,167,771 in direct federal aid to assist our community in its recovery from the COVID-19 pandemic. Boone County received the first round of funding, approximately \$2 million, in 2021. In general, the American Rescue Plan Funds can be used to respond to the ongoing COVID-19 pandemic, to replace lost public revenues, to support economic stabilization, and to make necessary investments in water, sewer, public health and broadband infrastructure. For additional information please see ARP State and Local Rules.¹

Please complete the application below in its entirety. You may attach additional pages if needed. Once submitted this application and any supporting document is considered a public record and will be made available to the public and media upon request.

☐ PLEASE CERTIFY THAT YOU HAVE REVIEWED THE US TREASURY GUIDELINES REGARDING THE ELIGIBLE USES OF AMERICAN RESCUE PLAN STATE AND LOCAL RECOVERY FUNDS

Section One: Contact information

Name:

Spruce River Vfd

Address:

Po Box 99
Jeffrey, WV 25114

Website, if applicable:

Phone number:

3043694761

¹ <https://home.treasury.gov/policy-issues/coronavirus/assistance-for-state-local-and-tribal-governments/state-and-local-fiscal-recovery-funds>

Email address:

sprucerivervfd500@outlook.com

Section Two: Project Summary

Please provide a narrative overview or summary of your proposal, including but not limited to the following:

1. Brief description of the proposal
2. Purpose and key anticipated outcomes
3. Individuals or communities served
4. How the COVID-19 pandemic has necessitated this request
5. Amount of funding requested
6. Amount of any bids or cost estimates received to date, if applicable
7. Amount and source of matching funds raised or committed by your organization
8. How ARP funds, if awarded, will be used
9. How long it will take you to complete the project if awarded funding

the items that we are requesting is old and needs replaced. This equipment is vital to firefighting operations and could mean the difference of life and death to the citizens of Boone county

Section Three: Proposal details

1. Please describe the problem or need which your project seeks to address.

Replace the old and outdated equipment

2. Please describe goals and expected outcomes of your proposal.

3. Please provide your project timeline, e.g., if funded when the project or proposal be fully implemented

directly after the funds become available

4. Please provide your total proposed budget.

see attached

5. Please list any partners in this proposal, and the partner's role and your relationship with them.

6. Please describe your plan for sustainability of the project or initiative after the grant award has been exhausted.

Section Four: Organization information

1. Please provide your organization's mission statement.

to provide fire and rescue protection

2. Describe the history of your organization, tell us about your current programs and activities.

3. Please describe three significant accomplishments of your organization.

4. Please list your Owner(s), Board of Directors, senior staff members, or other key members of your organization:

5. Please list the staff involved with this project and describe their roles and responsibilities:

6. Please upload/attach the following financial documents, if applicable: cash flow statement for applicant's most recent fiscal year, two years of audited financial statements, current operating budget. If the applicant has not been audited, please include an unaudited balance sheet and income statement as prepared by the applicant.

7. List any federal, state, local or private grant awards or funding received in the last three years and the current status of those funds. If your organization has previously received funds from Kanawha County, please list the amount, nature of the project(s) and current status of the funding and project(s).

8. If you have made application for funding for this project from other sources (city, state, private or non-profit organizations) please list the same here.

Section Five: Impact of the COVID-19 Pandemic

1. Please explain the impact of the COVID-19 pandemic and how it relates to your request, e.g., reduction in services, closures, increased costs, impacts to the community.

2. If you are requesting lost revenue due to COVID-19, provide that information here. Attach documentation sufficient to verify your request.

3. How will ARP funding, if awarded, aid in the recovery from the COVID-19 pandemic?

Section Six: Supplementary information

1. Please enter at least one third-party reference.

2. Please include any supplementary information or documentation (such as letters of support, newspaper articles, etc.) which you feel will be essential to the County's review.

Please see Attached Documents.

Signature: *[Signature]*
Name (Print): Ryan Cribbick
Title: Chief
Date: 1-28-22