**Healthy Food Financing Grant**

The purpose of the Oklahoma Healthy Food Financing Program is to provide financing for food retailers to provide healthy food in underserved communities that primarily serve low or moderate income communities. Applicants eligible for financing include, but are not limited to, sole proprietorships, partnerships, limited liability companies, corporations, cooperatives, nonprofit organizations, nonprofit community development entities, universities, and government entities.

The Oklahoma Healthy Food Financing Program is able to fund projects located in an underserved community that primarily serve low or moderate income communities (see Supplement A). These projects shall include, but not be limited to: Construction of new grocery stores; Construction of small food retailers; or Grocery store or small food retailer renovations, expansions, and infrastructure upgrades that improve the availability and quality of fresh produce and other healthy foods. Small food retailer means a small retail outlet less than two thousand five hundred (2,500) square feet, which sells a limited selection of foods and other products.

Projects must demonstrate the ability to be economically self-sustaining. Proposals may be submitted as either a loan or a grant. Loan proposals are not limited to a specific dollar amount. Grants shall be limited to Ten Thousand Dollars ($10,000.00). Loan applications must demonstrate the ability to repay the debt.

Approved applicants must agree: 1) to accept SNAP benefits or other federal or state nutrition assistance programs; 2) to accept WIC or other federal or state nutrition assistance programs; 3) allocate at least thirty percent (30%) of food retail space for the sale of perishable foods, which shall include fresh dairy, produce, meats, poultry, and fish; 4) hire local residents and 5)comply with data collection.

Financing made available for projects shall only be expended for the following purposes:

* Site acquisition and preparation;
* Construction costs;
* Equipment and furnishings;
* Workforce training or security;
* Pre-development costs, including market studies and appraisals;
* Energy efficiency measures;
* Working capital for first-time inventory and start-up costs; and
* For small food retailers, the acquisition or leasing of refrigeration equipment, display shelving, or other one-time capital expenditure, at a cost of less than Five Thousand Dollars ($5,000.00), for the promotion and display of perishable foods, which shall include a blend of dairy products, fresh produce, fresh meats and poultry, and fresh or frozen fish.

Applications, including all supplements, should be limited to twenty pages (20) including any attachments. Proposals may be submitted at any time. Deadline dates for submissions are January 1st, April 1st, July 1st, and October 1st or the next regular business day if the Department offices are closed on the deadline date. A copy of the proposal must be emailed to Jason.harvey@ag.ok.gov by 5:00 p.m. of the deadline date.

For additional information please contact Jason Harvey at (405) 606-1477.

**Healthy Food Financing Grant Application**

# APPLICANT INFORMATION

Name of Business

Primary Contact Person

Mailing Address County

City State Zip

Phone Cell

Email Website

# PROJECT INFORMATION

Project Name

Project Location (physical address of project site)

*In addition to providing the physical address, applicants must utilize the tools provided in* ***Supplement A*** *to print and attach verification that the project will be located in an underserved area that primarily serves a low or moderate income community.*

Project Type:

 New grocery store construction

 New Small food retailer construction

 Renovation/Expansion/ Infrastructure upgrades to grocery store or small food retailer

Do you currently accept the following?:

 SNAP WIC OTHER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If small food retailer, what is the square footage of the store?

What % of retail space is allocated to the sales of fresh dairy, produce, meats, poultry, and fish? %

Application Amount: $

Estimated Cost of Project: $

# GENERAL DESCRIPTION OF THE PROJECT

**Organization Overview and Background**

*Briefly describe the applicant organization, its ownership or management structure, relevant project partners including supplier or buyer relationships and/or community partnerships as applicable. Please describe the applicant organization’s and/or project partners’ experience relevant to the success of developing and operating the proposed project.*

**Project Objectives, Activities, and Outcomes**

*Describe the overall project for which you are seeking funding, the goals of the project; project activities to be undertaken; the timeline to accomplish these activities and critical risks or concerns that must be addressed in order to make this project a success*

**Population, Community, and/or Market Served**

*Describe the critical elements and needs of the local food environment and the community that would benefit from the proposed project. This could include brief demographics and geographic characteristics of the area or population involved with or to be served by the proposed project.*

**Local Food Promotion**

*Discuss the extent to which your project supports regional food systems and locally grown foods*.

**Need for and Use of Funds**

*Describe why grant funding is needed and how grant funding will be used if received. Please demonstrate how grant funding will enable a sustainable project that can thrive after the grant period is over. If requesting loan, demonstrate ability to repay.*

**Project Impacts**

Applicants must briefly describe potential impacts of this project, such as: *the specific changes (outcomes) that will occur as a result of the project, and who and what will benefit; Jobs to be created or preserved; Growth in annual revenue for the business; and increased percentage of sales from SNAP transactions*

**INSTRUCTIONS**

Applications, including all supplements, should be limited to twenty pages including any attachments. Proposals may be submitted at any time. Deadline dates for submissions are January 1st, April 1st, July 1st, and October 1st or the next regular business day if the Department offices are closed on the deadline date. A copy of the proposal must be emailed to Jason.harvey@ag.ok.gov by 5:00 p.m. of the deadline date.

Questions

Jason Harvey

405-606-1477

Jason.harvey@ag.ok.gov

**PROJECT BUDGET**

|  |
| --- |
| **Budget Summary** |
| **Expense Category** | **Funds Requested** | **Matching Funds** | **Total**  |
| **Equipment** |   |   |   |
| **Supplies** |   |   |   |
| **Contractual** |   |   |   |
| **Other** |   |   |   |
| **Direct Costs Subtotal** |   |   |   |

Equipment

|  |  |  |  |
| --- | --- | --- | --- |
| **Item Description** | **Rental or Purchase** | **Acquire When?** | **Funds Requested** |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |

|  |  |
| --- | --- |
| **Equipment Subtotal** |  |

* **Equipment Justification**

*For each Equipment item listed in the above table describe how this equipment will be used to achieve the objectives and outcomes of the project.*

Equipment 1:

Equipment 2:

Equipment 3:

Add other Equipment as necessary

Supplies

|  |  |  |  |
| --- | --- | --- | --- |
| **Item Description** | **Per-Unit Cost** | **# of Units/Pieces Purchased** | **Funds Requested** |
|   |   |   |   |
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| --- | --- |
| **Supplies Subtotal** |  |

* **Supplies Justification**

*Describe the purpose of each supply listed in the table above purchased and how it is necessary for the completion of the project.*

Contractual/Consultant

|  |  |  |
| --- | --- | --- |
| **Name/Organization** | **Hourly Rate/Flat Rate** | **Funds Requested** |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |

|  |  |
| --- | --- |
| **Contractual/Consultant Subtotal** |  |

* **Contractual Justification**

Describe the project activities each contractor or consultant will accomplish to meet the objectives and outcomes of the project. Include timelines for each activity.

**Contractor/Consultant 1:**

**Contractor/Consultant 2:**

**Contractor/Consultant 3:**

**Add other Contractors/Consultants as necessary**

Other

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Item Description** | **Per-Unit Cost** | **Number of Units** | **Acquire When?** | **Funds Requested** |
|   |   |   |   |   |
|   |  |   |   |   |
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|  |  |
| --- | --- |
| **Other Subtotal** |  |

* **Other Justification**

*Describe the purpose of each item listed in the table above purchased and how it is necessary for the completion of the project.*

**CONCLUSION**

By affixing their signature(s) to this application, the applicant(s) certify that they have read and understand the Guidelines governing award of these grants and agree to all conditions set forth therein and that all information contained in this application package is true to the best of the applicant’s knowledge, information and belief.

The Oklahoma Healthy Food Financing Program’s selection committee reserves the right to modify or terminate any subsequent agreements with applicant if, at a future date the Healthy Food Financing Program’s selection committee becomes aware of material misrepresentation(s) contained in this application.

Name (type or print):

Signature:

Title:

Date: