



American Rescue Plan Act (ARPA) State & Local Fiscal Recovery Fund Requests for Funds from Mobile County

OVERVIEW

Mobile County received a direct allocation of funding under the State and Local Fiscal Recovery Fund under the American Rescue Plan Act of 2021 (ARPA) §9901, Pub. L. No. 117-2, 42 U.S.C. §802 *et seq.* The availability of one-time State and Local Fiscal Recovery funds presents a significant opportunity for Mobile County to: (i) Continue its response to the COVID-19 pandemic and its secondary effects; (ii) Invest in initiatives that support a strong economic recovery; and (iii) Strengthen County fiscal stability by reducing demand for taxpayer dollars to fund existing initiatives or priorities.

To support the development of a comprehensive county plan for Mobile County's Local Fiscal Recovery Fund, Mobile County is inviting agencies, private entities, and local governments to submit proposals for Local Fiscal Recovery Fund initiatives. Proposals will be reviewed by the County for fiscal impact, eligibility, and alignment with County priorities.

Detailed instructions and a template for submitting request are included below. Please submit completed forms by email to arpa.proposals@mobilecountyal.gov or by mail or personal delivery to:

**American Rescue Plan Act Proposal
c/o Mobile County Dept. of Public Affairs Community Services
Mobile Government Plaza South Tower, 10th Floor
205 Government Street
Mobile, AL 36644-1801**

Priority consideration will be given to requests received by October 25, 2021.

ELIGIBLE USE RESTRICTIONS

The American Rescue Plan Act specifies certain eligible use restrictions for these funds, with misuse of funds subject to recoupment action by U.S. Treasury. These restricted uses are further defined by the U.S. Treasury "Interim Final Rule" issued on May 11, 2021. Accompanying this form is a short memorandum summarizing allowable uses of funds under the Interim Final Rule.

State & Local Fiscal Recovery Fund – Request

INSTRUCTIONS

Please review this document in its entirety before completing this form. Please complete one form for each initiative or request. If there are multiple requests, you may submit them together in a single email with multiple attachments.

For questions with a listing of answers, please select an option by clicking in the corresponding box. For questions requiring a written response, please provide your answer in the designated blank or response textbox. If additional space or information is needed for some responses, you may include or attach additional pages or documents with your submission.

PART I – INITIATIVE OVERVIEW

Name of Organization or Group Making Application:

Contact Information:

Point of Contact Name: _____

Address: _____

Daytime Phone Number: _____

E-mail Address: _____

Total # of Requests: _____

Short Description of Project:

Does this proposal require or request any other funding in addition to Mobile County’s Local Fiscal Recovery Funds? (Yes or No)_____

Total Estimated Funds Requested for this Initiative:

| | FY 22-23 | FY 23-24 | FY 24-25 |
|-----------------------------------|-----------------|-----------------|-----------------|
| ARPA Local Fiscal Recovery | | | |
| Other Funds** | | | |
| TOTAL | | | |

**** “Other funds” would be any funding not related to Mobile County Local Fiscal Recovery Funds allocation, but would include, State match funds, Capital Projects Funding from ARPA, charitable funds or any other source of funding not currently available to the applicant. If utilizing Other Funds, please describe the source(s) of those funds here:**

SECTION 1: FUNDING

The purpose of this section is to understand how, if funded, the dollars would be spent and on what services and resources they would be allocated.

1. What is the program, initiative, or resource that this request would fund? Describe any included key services/interventions. How does this request tie to the applicant’s mission, vision, and overall goals? *Please provide your answer in the textbox below.*

2. This request is: *(please select only one of the following options)*

- A change to or renewal of an existing program, initiative, or resource (e.g., serving more or a different group of customers, making changes to the service model, etc.)**

- A new program, initiative, or resource**

- To replace county funding or other funding for an existing program, initiative, or resource that would otherwise meet the eligibility criteria for Fiscal Recovery Fund spending.**

3. Detail what expenditure categories the requested funds would apply to and the corresponding approximate or estimated cost [e.g., personnel – premium pay for essential workers, equipment, contracted services, infrastructure (water, sewer, broadband, and some facilities*), etc.]. *NOTE: Any personnel expenditures should be temporary increases, consistent with the one-time nature of these funds. You may include reasonable administrative costs. Please check applicable boxes below and provide corresponding costs.*

* Note that the infrastructure expenditures are generally limited to those related to water, sewer and broadband. However, there may be other types of infrastructure projects that are permissible if they would provide aid to impacted industries such as tourism, travel, and hospitality.

Costs

- Personnel – Premium Pay** _____
- Equipment** _____
- Contract Services** _____
- Other (Infrastructure)** _____

If “Other”, please briefly describe:

4. Is this solution planned as a multi-year effort? (Yes or No)_____

If “Yes”, what fiscal requests can we expect beyond FY 24-25? *Please provide your answer in the textbox below.*

Additionally, how will it impact program’s ability to be complete by FY 26? *Please provide your answer in the textbox below.*

SECTION 2: ISSUE OR OPPORTUNITY

The purpose of this section is to provide context as to the challenge or opportunity the proposed expenditure intends to resolve.

5. What is the issue or opportunity that this request will address? *Please provide your answer in the textbox below.*

How does this proposal support the County's recovery from the economic, health, or other effects of the COVID-19 pandemic? *Please provide your answer in the textbox below.*

In responding to the above questions, please include the following information, if relevant:

- Describe the nature of the problem as it relates to the COVID-19 pandemic
- Describe the targeted population benefitting from the solution
- How many new or additional people will be served?
- How many people will remain unserved?

6. Have previous attempts been made to remediate the issue or opportunity discussed in Question #5 above through budgetary or non-budgetary means? Examples include, but are not limited to, the following: number of full-time equivalents (FTEs), estimated county/state/federal/other expenditures to date, reallocation of resources, etc. (Yes or No) _____

If "Yes", please explain the results of those measures in the textbox below:

SECTION 3: STATEMENT OF ELIGIBILITY

The purpose of this section is to understand how your agency or entity would articulate the legal reasoning for why this proposal is eligible for funding under the Interim Final Rule issued by the US Treasury for the State and Local Fiscal Recovery Fund. For your convenience, a link to the Interim Final Rule on the US Treasury’s website is provided here:

<https://home.treasury.gov/system/files/136/FRF-Interim-Final-Rule.pdf>

7. In which of the eligible uses of funding does this proposal primarily fall? Please select only one of the following options.

- Support for public health expenditures, by funding COVID-19 mitigation efforts, such as, medical expenses, medical supplies, telemedicine, behavioral healthcare, and certain public health and safety staff (refer to pp. 10-22 of Interim Final Rule)**

- Address negative economic impacts caused by the public health emergency, including economic harms to workers, households, small businesses, impacted industries, and the public sector (refer to pp. 10-11 and 22-41 of Interim Final Rule) EX; US Treasury acknowledges that the leisure and hospitality industry experienced a 24% revenue decline and 17% employment decline. Would your project address similar issues of economic and employment decline in your industry? Recipients should consider whether impacts were due to the COVID-19 pandemic as opposed to other longer-term economic trends.**

- Invest in water, sewer, and broadband infrastructure, making necessary investments to improve access to clean drinking water, support vital wastewater and stormwater infrastructure, and to expand access to broadband internet (refer to pp. 61-77 of Interim Final Rule)**

- Provide equity-based services to a population that has been shown to be disproportionately impacted by the COVID-19 public health emergency (refer to pp. 21-23 of Interim Final Rule) EX: Does the project support equity for all, including people of color and others who have been historically underserved, marginalized, and adversely affected by persistent poverty and inequality? This could be restoring and enhancing workforces in underserved areas, promoting business opportunities, educational advancement, etc.**

8. Please provide the following in the corresponding textboxes:

i) An explanation of how the issue/opportunity has worsened/emerged in light of the COVID-19 pandemic:

ii) A description of how the proposal solves this negative impact:

iii) Identify the key activities/inputs of the program as well as the short-term results/outcomes of the program:

SECTION 4: OTHER QUESTIONS

The purpose of this section is to understand where departments work together and how they serve similar individuals/groups.

9. Does this solution have an impact on any other department or agency?
(Yes or No)_____

If “Yes”, please indicate if this program is jointly funded by any other agencies, and if so, which ones and to what extent. Please provide your response in the textbox:

10. Does this solution impact any individuals/groups of individuals locally or countywide? Please select all that apply.

- Constituents**
- Groups**
- Stakeholders**
- Other**

If "Other" was selected in Question 10 above, please indicate who. Also, please detail who might be in favor of or opposed to this budget solution in the provided textbox below.

SECTION 5: MANAGEMENT AND ADMINISTRATION

The purpose of this section is to understand the feasibility of management and proposed staffing models for administration of these funds.

DUTIES AND ROLES

11. Please list the staff that would be responsible for administering this project with a one sentence description of their duties as it relates to this proposed project.

| Position | Description of Duties |
|----------|-----------------------|
| | |
| | |
| | |
| | |
| | |

12. Do you anticipate the need to have any additional services or external third parties (non-profit or otherwise) to successfully execute this project?
(Yes or No) _____

If "Yes", please indicate the expected additional services needed and who might be providing these services in the textbox below.

PART II

SECTION 6: EVIDENCE AND IMPACT

The purpose of this section is to understand the evidence and research that the program is based upon to provide context for the basis of the program design and how success of these funds will be measured upon closing of the State and Local Fiscal Recovery Fund grant after 2024.

13. Please list four (4) key outcomes of the program along with relevant data for those outcomes.

EX: New Water pipes will equate to safer and more sustainable drinking water for residents. Broadband lines will result in better internet services for remote learning and business practices. Reimbursing costs associated with purchasing PPE will free up non-grant funds for other pertinent expenditures. Premium pay for essential workers may incentivize these workers to stay or come to your community and provide services. Equity based expenditures in traditionally marginalized or underserved areas may improve community health and prosperity. Relevant Data would be any data that can be used to substantiate the expenditure of funds for those purposes.

| | Key Outcomes | Relevant Data |
|----------|---------------------|----------------------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |