Directions\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicants should complete all shaded sections of this application. If a question or section does not apply to a project, please fill in with “n/a” for “not applicable.”

Applications are **due by 5:00 p.m., September 22 , 2023** and may be submitted electronically to [PortFund@stlouisco.com](mailto:PortFund@stlouisco.com)  or in hard copy at the offices of the Port Authority, c/o St. Louis Economic Development Partnership, 7733 Forsyth Blvd., Suite 2200, Clayton, MO 63105.

Application Date: Click or tap here to enter text.

Project Title: Click or tap here to enter text.

General Information\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I. APPLICANT INFORMATION**

Name of Applicant: Click or tap here to enter text.

Contact Person and Title: Click or tap here to enter text.

Mailing Address: Click or tap here to enter text.

City: Click or tap here to enter text. State: Click or tap here to enter text.

Zip:  Click or tap here to enter text.

Telephone: Click or tap here to enter text. Fax: Click or tap here to enter text.

Email Address: Click or tap here to enter text. Website: Click or tap here to enter text.

501(c)3 entity **(check one)**: YES NO

**If no**, **STOP** you are **not eligible** to apply for the Port’s Community Investment Fund:

Minority Controlled Non-Profit Enterprise or Women Controlled Non-Profit (51% or more of board members are minorities and/or women):

YES, which one: Click or tap here to enter text.

NO

**II. PROJECT REQUEST**

Project Timetable: Click or tap here to enter text.

Type of Funding Requested: Redevelopment\* Programmatic\*\*

*\* If applying for redevelopment funding, please provide additional information requested in Appendix I*

*\*\* If applying for programmatic funding, please provide additional information requested in Appendix II*

Total Project Budget: Click or tap here to enter text.

Amount of Funding Requested from St. Louis County Port Authority:

Click or tap here to enter text.

Identify the amount of funds from other sources: Click or tap here to enter text.

Project Location: Click or tap here to enter text.

In which County Council district(s) is the project located?

County Council District: Click or tap here to enter text.

No. of Jobs to be Created: Click or tap here to enter text.

No. of Jobs to be Retained: Click or tap here to enter text.

**III. EXECUTIVE SUMMARY**: *(please limit Executive Summary to one paragraph. The Executive Summary should be a brief description of the proposed project.)*

Click or tap here to enter text.

**IV. PROJECT DETAIL** *(please limit each answer to two paragraphs maximum)*

**Section A: Introduction and Background**

1. Organization’s Mission Statement:

Click or tap here to enter text.

1. Give a brief organizational history with an emphasis on recent activities, including any that have received Port Authority community investment fund support:

Click or tap here to enter text.

1. Provide names and qualifications of the applicant’s management or management team:

Click or tap here to enter text.

**Section B: Description of Project**

1. Describe the need the project will address, and the population served by the project:

Click or tap here to enter text.

1. Describe the proposed project in detail, including clearly defined goals and objectives. Is this a new project, or the continuation of an existing program or project?

Click or tap here to enter text.

1. Describe how the proposed project meets the applicant’s organizational goals:

Click or tap here to enter text.

1. Identify other organizations with whom the applicant will be working, and describe the roles of each organization:

Click or tap here to enter text.

1. Describe how the proposed project follows the guidelines/recommendations of an approved Comprehensive Plan or other development plan:

Click or tap here to enter text.

1. Describe any “green” or environmentally sustainable aspects of this project:

Click or tap here to enter text.

**Section C: Expected Outcomes**

1. Define the expected quantitative and qualitative outcomes of the project:

Click or tap here to enter text.

1. Describe projected community impacts, e.g., businesses served, number jobs to be created and/or retained, average wages:

Click or tap here to enter text.

1. Describe how this project will encourage additional investment and development:

Click or tap here to enter text.

1. Explain how applicant will monitor and evaluate progress and success of the project:

Click or tap here to enter text.

**Section D: Financial Pro Forma** *(please provide as much detail as available)*

1. Your project budget should be included as part of Appendix I or II. See Appendices for additional detail on budget information requirements.

1. Explain the organization’s funding plan for sustaining the proposed initiative.

Click or tap here to enter text.

1. Describe any “in-kind” services or goods that will be provided, including volunteer services and hours donated to the project.

Click or tap here to enter text.

**Section E: Utilization of Minority and Women Owned Businesses**

The Port Authority Board of Commissioners encourages the utilization of Minority (MBE), Women-owned (WBE), and Immigrant-owned businesses in all of its programs. Successful grantees will be required to submit documentation of utilization of MBE, WBE and/or Immigrant companies.

**Section F: Litigation**

Is the Applicant currently involved in any litigation which could have a material effect on its financial solvency? ***(Check one)***

YES NO

**If yes**, please provide details: Click or tap here to enter text.

**Section G: ILLEGAL ALIEN EMPLOYMENT CERTIFICATION**

1. As an authorized representative of the Applicant, I certify that the applicant does NOT employ illegal aliens and that the applicant has complied with federal law (8 U.S.C. § 1324a) requiring the examination of an appropriate document or documents to verify that an individual is not an unauthorized alien.
2. As an authorized representative of the Applicant, I understand that if the applicant is found to have employed an illegal alien in Missouri and did not for that employee examine the document(s) required by federal law, that the applicant shall be ineligible for funding provided by the St. Louis County Port Authority.

**INITIALS OF AUTHORIZED REPRESENTATIVE:** \_\_\_\_\_\_\_\_\_\_

**VI. APPLICATION CHECKLIST**

All applicants are required to submit items 1-6 below AND either document number 7 OR 8 depending on the project type.

1. Completed application

2. List of applicant organization’s governing board, including affiliations and contact information

3. Letter indicating 501(c)(3) not-for-profit status

4. Illegal Alien Employment Certification Initialed (Section G of the Application)

5. Two letters of support from organizations or individuals not participating in the project or who do not stand to gain financially from the project

6. Most recent financial statements (audited financials preferred)

AND

7. Appendix I (for redevelopment projects only)

OR

8. Appendix II (for programmatic projects only)

I CERTIFY THAT ALL INFORMATION IN THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Name of Applicant Organization

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Signature

Name: Click or tap here to enter text.

Date: Click or tap here to enter text.