



Iowa Department of Natural Resources
Kayla Lyon, Director

SOLID WASTE ALTERNATIVES PROGRAM

Food Storage Capacity Grant Offer

Guidelines and Application

The Iowa Department of Natural Resources is offering grants to non-profit food banks, food pantries and other non-profit entities that accept and distribute food to food insecure Iowans. Up to \$135,000 is available to award to selected applicants. Preference will be given to entities not receiving funding assistance through a previous Food Storage Capacity grant offer and projects that will accept additional perishable and non-perishable food donations that otherwise would be declined for lack of storage capacity.

Individual awards of up to \$8,000 in grant funding is available, on a competitive basis, for projects seeking:

- additional storage (i.e. shelving) to facilitate managing and displaying food items for distribution; and
- additional cold storage to increase the availability of perishable food items **and** to minimize the loss of perishable food items prior to distribution. Freezers and refrigerators must be **Energy Star** rated. Walk-in coolers, and freezers and other commercial or industrial equipment not **Energy Star** rated, must be energy efficient as identified by the Dept. of Energy.

Applicants must use the DNR provided grant application. Applications will be reviewed on an on-going basis until available funds have been awarded.

Projects funded under this grant offering are required to enter into an agreement with the DNR and provide a final report summarizing the project and project results. The final report may include, but is not limited to, the number of people/families served, the amount of food distributed, the increase in acceptance of donated food items made possible by increased storage capacity and a decrease in spoiled perishable food items landfilled.

Applicants receiving funding **must** follow applicable food safety guidelines.

Applicant Eligibility

Eligible applicants include non-profit food banks and food pantries and other non-profit organizations responsible for accepting and donating edible food to food insecure Iowans.

The Department reserves the right to verify any information presented in the application. If an applicant is selected to receive financial assistance, an offer of financial assistance may be rescinded if the applicant is determined to be out of compliance with local, state or federal regulations or does not meet the conditions of eligibility.

Proposal

Proposals for financial assistance must be submitted electronically through the Land Quality Bureau and must use the application forms and format provided herein. Electronic proposals must be submitted with the subject line “**Food Storage Capacity Grant Offer**” to tom.anderson@dnr.iowa.gov.

Proposals submitted for financial assistance consideration are not guaranteed funding.

Financial assistance offers may be less than the full amount requested by the applicant.

Proposals are considered public information and are available for review upon request.

Proposals **must be** signed by an authorized representative of the applicant

A current W9 form will be required of applicants awarded grant funding.

Iowa Waste Exchange (IWE) representatives are available to discuss your project and assist with proposal writing upon request. To find the IWE representative serving your area of the state, go to www.iowadnr.gov/faba and click on Iowa Waste Exchange (IWE).

Direct questions regarding the Food Storage Capacity Grant Offer to:

Tom Anderson

Email: tom.anderson@dnr.iowa.gov

PROPOSAL SUBMISSION GUIDELINES

Proposals should contain sufficient detail for reviewers to visualize and understand the project in its entirety.

Applicants must:

- Submit a **signed**, original completed electronic proposal;
- Utilize forms contained herein;

Proposal Review

- Proposals will be reviewed and funding decisions made within approximately 30 days.
- If a proposal is determined to be incomplete, the proposal may be rejected.
- Based upon review of proposals, additional information may be requested for projects meriting further consideration. A request for additional information does not guarantee funding.
- Award recipients shall enter into an agreement with the Department of Natural Resources. A fully executed agreement must be completed prior to incurring costs for which grant funds will be claimed for reimbursement.

ELIGIBLE EXPENSES

Eligible Expenses

Applicants may request financial assistance for the purchase, delivery and installation of:

- Shelving to properly store or display donated food items for distribution;
- Cold storage **Energy Star** rated freezers and refrigerators; and
- Cold storage, energy efficient walk-in coolers, and freezers and other commercial or industrial equipment designed to extend the shelf life of donated perishable food items for distribution to food insecure Iowans.

AWARD DISBURSEMENT AND AGREEMENT REQUIREMENTS

Funds will be released on a reimbursement basis after a correctly completed Grant Expense Sheet (Department provided) and supporting documentation (i.e. invoice, cancelled check) has been submitted to the Department for payment.

Project costs incurred prior to an executed agreement or costs not identified in the agreement budget are ineligible for reimbursement.

Projects selected to receive financial assistance must:

- enter into an agreement with DNR within 1 month of grant award notification;
- provide a current W9 form; and
- submit a correctly completed Grant Expense Sheet claiming grant reimbursement within three (3) months from the start date of the executed agreement between the applicant and the DNR.

Failure to meet the above conditions may result in the DNR rescinding any grant assistance offer in the absence of prior written approval between the grant recipient and the Department.

Food Storage Capacity Expansion Grant Application

Application Date:	April 10, 2022
Applicant:	Family Worship Center of Sioux City IA (FWC)
Contact Name:	Tammi Gagnon
Contact Telephone:	712-898-0806
Contact Email:	5tlg4ees@gmail.com
Applicant Address	1315 Indian Hills Dr, Sioux City, IA 51104
Mailing Address (if different):	3412 Maplewood Street, Sioux City, IA 51104
Project Purpose:	Allow us to serve meals to more food insecure individuals in our area
Project Service Area:	Tri State Area (predominantly IA but also available to NE and SD)
Address Location of Cold Storage Unit(s) and/or Shelving	1315 Indian Hills Dr, Sioux City, IA 51104
Number of Years Distributing Donated Food	3 years
Funding Amount Requested:	\$8,000
Cost Share Amount: (not required but encouraged)	\$8,000
Total Project Cost:	\$16,000

Evaluation Criteria

Proposal review and project merits will be based on the proposal's narrative addressing the following criteria. There is a limit of 3,000 characters per evaluation criteria response.

Project Need Description: Describe why additional storage/cold storage is needed by your organization.

Currently unable to accept large frozen meat donations that are available

Project Goals: Identify up to three main goal(s) for the proposed project and steps to achieve these goals.

Goals

1. Build a 11' x 33' expansion to current building
2. Increase freezer, refrigerator and dry storage space
3. Increase our capacity to serve meals and snacks to the food insecure in the area

Steps

1. We started a capital campaign in September 2021
2. Pursue Grant Opportunities
3. Do Funding Raising Events

Measuring Goals: Describe how meeting project goals will be measured.

We track the number of meals and snacks provided to adults and children on a monthly basis

Impact on Number of People Served, Pounds of Food Distributed and Operations Efficiencies: Describe how and extent to which the project will impact the number of people served, food accepted and distributed and organization operations.

Number of People Served:(1,742 in 2021) as of now we have no additional storage space for our pantry Staples, utilizing 4 large wheeled carts to move product around when we need access. Not being able to bring in additional product limits the number of people we can serve

Pounds of Food Distributed: (27,076 in 2021) the addition of freezer storage would increase amount and variety of frozen meats we could provide. Additional refrigeration would allow us to provide more eggs/dairy products and fresh fruits and vegetables that require refrigeration

Goal of Additional Pounds of Food Accepted
In 2021 we had to turn away 1,000 lbs of frozen meat and we're often unable to accept any perishables that need refrigeration

Operational Efficiency Impact:. A walk in freezer, additional refrigeration and dry storage will expedite the whole process of preparing food boxes with complete meals and snacks. Not having to move 100's of pounds of food to prepare a food box will expedite the process especially when it comes to emergency food deliveries.

Milestones

List Project Tasks or Activities planned:

Task or Activity	Planned Begin Date	Planned End Date	Responsible Party
capital campaign	September 2021	November 2022	FWC Leadership
11' x 33' building addition	June 2022	November 2022	Eric Schroll
walk in feeezer	October 2022	October 2022	Eric Schroll
refrigeration unit	November 2022	November 2022	Eric Schroll
shelving	November 2022	November 2022	Eric Schroll

Estimated date project to be fully operational:

Budget

Budget Item & Quantity	Request Amount	Cost Share (not required)	Total Cost
600-800 CF Walk in freezer	8,000	8,000	16,000

Budget Narrative

Detail each budget item for which funding assistance is requested, why this item(s) was chosen and its role in the proposed project.

We have turned down donations of frozen meat because we do not have adequate storage. The walk in
freezer in our new building will allow us to accept proposed donations upwards of 1,000 pounds at a time.
In addition we would be able to store and distribute a wider variety of meats.

Signature

I affirm the information provided on this Application is true, and that I will provide all other information requested for further substantiation. I agree that if awarded financial assistance for a project(s), I will execute the contract the DNR provides for conveying those funds, which will include but not be limited to conditions for expending those funds, and for making reasonable accounting of those expenditures.

In order to determine funding eligibility, the Department reserves the right to verify any information presented in the application and to determine the applicant's compliance status with applicable Local, State and Federal statutes and regulations. If an applicant is selected to receive financial assistance, an offer of financial assistance may be rescinded if the applicant is determined to be out of compliance with applicable Local, State and Federal regulations.

Tammi Gagnon, Outreach Food Pantry Leader

Signature, Title

Date

Note: Applications must be signed by a person authorized to commit applicant to proposed project.

Minority Impact Statement

Pursuant to 2008 Iowa Acts, HF 2393, Iowa Code Section 8.11, all grant applications submitted to the State of Iowa which are due beginning January 1, 2009 shall include a Minority Impact Statement. This is the state's mechanism to require grant applicants to consider the potential impact of the grant project's proposed programs or policies on minority groups.

Please choose the statement(s) that pertains to this grant application. Complete all the information requested for the chosen statement(s).

☒ The proposed grant project programs or policies could have a disproportionate or unique **positive** impact on minority persons.

Describe the positive impact expected from this project.

The majority of our food deliveries are to women and persons with disabilities who do not have a means of transportation. In addition we have worked with Safe place, F/K/A Council on sexual assault and domestic violence, The Hopes Program helping women bridging out of these programs. The counselor for the Ponca Tribe of Nebraska calls when she has clients who are in temporary housing, usually motels. Organized and spur of the moment distribution of homeless/help bags at the Warming Shelter, the Gospel Mission and Cook Park. The walk in freezer will allow us to provide nutritious meals to these individuals by increasing the amount and variety of meat we will have available. In addition we do Saturday BBQ' from May to September at Cook Park for the homeless and last year we encountered a large and growing number of Sudanese (mostly men) who were utilizing the Warming Shelter and the Gospel Mission.

Indicate which group is impacted:

	Women
<u>x.</u>	Persons with a
<u>x</u>	Disability
	Blacks
	Latinos
	Asians
	Pacific Islanders
	American Indians
<u>x</u>	Alaskan Native
	Americans
	Other
<u>x</u>	

☐ The proposed grant project programs or policies could have a disproportionate or unique **negative** impact on minority persons.

Describe the negative impact expected from this project.

Present the rationale for the existence of the proposed program or policy.

Provide evidence of consultation of representatives of the minority groups impacted.

Indicate which group is impacted:

____ Women
____ Persons with a
____ Disability
____ Blacks
____ Latinos
____ Asians
____ Pacific Islanders
____ American Indians
____ Alaskan Native
____ Americans
____ Other

- ☐ The proposed grant project programs or policies are **not expected to have** a disproportionate or unique impact on minority persons. Present the rationale for determining no impact.

I hereby certify that the information on this form is complete and accurate, to the best of my knowledge:

Name: Tammi Gagnon

Title Outreach Food Pantry Leader

Definitions

"Minority Persons", as defined in Iowa Code Section 8.11, mean individuals who are women, persons with a disability, Blacks, Latinos, Asians or Pacific Islanders, American Indians, and Alaskan Native Americans.

"Disability", as defined in Iowa Code Section 15.102, subsection 5, paragraph "b", subparagraph (1):

b. As used in this subsection:

(1) *"Disability"* means, with respect to an individual, a physical or mental impairment that substantially limits one or more of the major life activities of the individual, a record of physical or mental impairment that substantially limits one or more of the major life activities of the individual, or being regarded as an individual with a physical or mental impairment that substantially limits one or more of the major life activities of the individual.

"Disability" does not include any of the following:

- (a) Homosexuality or bisexuality.
- (b) Transvestism, transsexualism, pedophilia, exhibitionism, voyeurism, gender identity disorders not resulting from physical impairments or other sexual behavior disorders.
- (c) Compulsive gambling, kleptomania, or pyromania.
- (d) Psychoactive substance abuse disorders resulting from current illegal use of drugs.

"State Agency", as defined in Iowa Code Section 8.11, means a department, board, bureau, commission, or other agency or authority of the State of Iowa.

Applicant Disclosure

The Applicant must provide the following information. This is a continuing disclosure requirement from application submittal through agreement end date (if funding is awarded).

1. During the last three (3) years, has the Applicant received written notification from a state agency that a debt is owed to a state agency or a debt is being enforced through the Income Offset Program (including the state child support recovery unit if the Applicant is an individual) that will in any way impact receipt of monies awarded through this program?

☐ Yes ☒ No

If yes, provide the date by which the Applicant will or has satisfied debts owed to or being collected by the state.

2. During the last three (3) years, has the Applicant had a contract for goods and/or services terminated for any reason, or has the Applicant received a notice of breach, notice of default, or similar notice?

☐ Yes ☒ No

If yes, provide full details related to the termination or notice.

3. During the last three (3) years, describe any damages or penalties or settlements pertaining to contract disputes under any of the Applicant's existing or past contracts as it relates to goods and/or services performed that are similar to the goods and/or services contemplated by this application. If so, indicate the reason for the penalty, damages or exchange of property, goods, or services and the estimated amount of the cost of that incident to the Applicant.

n/a

4. During the last three (3) years, list and summarize all litigation, threatened litigation, administrative or regulatory proceedings, or similar matters to which the Applicant or its officers have been a party. Any such matter commencing after submission of an application, and with respect to the successful Applicant after the execution of a contract, must be disclosed in a timely manner in a written statement to the Department's contract officer.

n/a

I hereby certify that the information on this form is complete and accurate, to the best of my knowledge:

Name: Tammi Gagnon

Title Outreach Food Pantry Leader