

CITY OF AZTEC
REQUEST FOR FUNDING APPLICATION
FISCAL YEAR 2019

TO:

CITY OF AZTEC
FINANCE DEPARTMENT
201 W CHACO
AZTEC NM 87410
or
klamb@aztecnm.gov

Agreement with City must be current (if applicable)

Documents to be included with Funding Application:

- Board of Directors and Key Staff
- Certificate of Insurance must be current (if applicable)
- Audited financial statement, most recently audited; must be no later than 2016
- Provide a copy of the most recent tax form filed with the IRS by your Organization (e.g., Form 990)
- Explanation of tax exempt revocation (if applicable)

Additional documents to be included with Funding Application if this is organization's first funding request since 2015 or documents have changed in the last year

- By Laws must be on file with City
- IRS Non-Profit Status Letter must be on file with City
- W-9 (information provided on this document will control to who and where funds are issued if granted by City Commission)

If your entity does not have any of the above documents, a funding request may still be submitted and may be considered for funding by the commission. If funded, disbursement of funds may be on a reimbursement basis upon submittal of satisfactory documentation of expenditures or the city may administer funds on behalf of the entity.

If your entity received funding during fiscal year 2018 (July 2017 to June 2018), has your entity provided report to the city commission? If not, a report must be provided prior to consideration of a new funding request. To schedule your presentation to the commission or provide written report, please contact Karla Saylor, City Clerk, 334-7603, ksaylor@aztecnm.gov

Upon receipt of the funding application, the request will be included with the next scheduled commission meeting. The entity will be advised of the date of the meeting to present the funding request and be available to address commission questions. If funding is approved, the entity must request the disbursement of funds in writing. The request for disbursement should be submitted to Kathy Lamb, Finance Director, City of Aztec, 201 W Chaco, Aztec NM 87410 or klamb@aztecnm.gov

Questions? Please contact Kathy Lamb, Finance Director, 505-334-7653, klamb@aztecnm.gov

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Today's Date:					
Organization Name:					
Name of Project/Program/Event:					
What City Commission Goal(s) would this funding address: (Check all that apply)		<input type="checkbox"/> Safe, Clean, Livable Community	<input type="checkbox"/> Cost Effective Public Services	<input type="checkbox"/> Economic Development	
<input type="checkbox"/> Financial Stability of Public Funds	<input type="checkbox"/> Local / Regional Partnerships	<input type="checkbox"/> Environmental Practices	<input type="checkbox"/> Enhance Quality of Life	<input type="checkbox"/> Citizen Involvement	

FUNDING REQUEST INFORMATION

Describe the need for the funding:		
Describe how funding would be utilized:		
Location of project site (maps may be attached):		
How will success of the project be measured?		
Total Amount Requested:	Minimum Amount :	Date Funding Required:
Can project be phased? If so, describe the phases including timelines.		

PROJECT TYPE	START	END	AMOUNT REQUESTED	MATCHING FUNDS	TOTAL PROJECT BUDGET
Construction/Renovation					
Design/Engineering					
Equipment					
Vehicle					
Special Program or Event – attach detailed description, budget and marketing materials/brochures for program or event					
Totals					

ORGANIZATION INFORMATION

Organization Legal Name:		Website:			
Organization Main Address:	City:	State:	ZIP Code:		
Organization <u>Mailing</u> Address:	City:	State:	ZIP Code:		

Principal Contact:		Phone Number:	Fax Number:
Title:		Email Address:	
Chief Executive Officer (or equivalent):		Phone Number:	Fax Number:
Title:		Email Address:	
What Type of Service does the Organization Provide (Check all that apply)			
<input type="checkbox"/> Housing / Homeless		<input type="checkbox"/> Senior Services	<input type="checkbox"/> Drug / Alcohol Related
<input type="checkbox"/> Recreation		<input type="checkbox"/> Educational	<input type="checkbox"/> Child Care
<input type="checkbox"/> Economic Development		<input type="checkbox"/> Community Event	<input type="checkbox"/> Youth Services
<input type="checkbox"/> [Other]			
EIN/Taxpayer ID Number:		Indicate Tax Status of Organization (include IRS letter of determination):	Has the Organization's tax-exempt status been revoked in the past five years? If yes, attach explanation
Briefly describe mission, history and principal programs and activities of the Organization:			
Has entity received funding from the City of Aztec previously? If so, when, amount received and how funds were used:			
How many paid full-time equivalents does the Organization have?		How many paid part-time equivalents does the Organization have?	
Are Organization services and/or programs available to all residents of the City of Aztec? If no or restricted, please explain.		Are fees charged for services?	
Is membership in the Organization required to participate in any of the Organization programs or to be a recipient of Organization services?		Have other organizations, firms, individuals provided or will provide funds or services for this project? If yes, please describe.	

REPRESENTATION	
<p>I, _____, as _____, have the authority to submit this funding request on behalf of _____, and certify that all information submitted is factual, accurate and complete to fullest extent of my knowledge. If funding is granted, a verbal report is required before the City Commission prior to July 1, 2019.</p>	
<p>_____ Signature</p>	<p>_____ Date</p>