



Eastern Oklahoma Development District (EODD)
FY 2022 REAP Application

DEADLINE FOR APPLICATION IS 3:00 PM, THURSDAY, SEPTEMBER 30th., 2021

1. Governmental Entity Sponsoring Application:

Name: Muskogee Board of County Commissioners

2. Contact Person(s): Kenny Payne

Address: P.O. Box 2307

City, State, Zip: Muskogee, OK 74402

Telephone Number: 918-682-9601 or 918-682-1910 (District)

boccc@ready.muskogee.org

E-mail: kpayne@ready.muskogee.org Fax Number: 918-684-1697

3. Federal Employer Identification (FEI) Number (Sponsor): 73-6006395

4. DUNS Number: 021661178 5. County: Muskogee (51)

6. Population of Area to be Served: (Must be 7,000 or less)

7. Current Year's Budget:

8. Total Project Cost:

9. Other Grant Funding:

10. Local Effort:

10(a). What account is Local Effort coming from?

10(b). Are Local Effort Funds available?

If NO, when will funds be available?

11. REAP Grant Request (Line 8 minus lines 9 & 10):

12. Low Moderate to Income (LMI) Level: (If not known EODD will provide number)

13. Number of Jobs Created and/or Saved if applicable:

14. A. Will this project be on public property? Yes No

B. Who owns the property?

C. If the project is on private property, is there a long term lease? Yes No

D. How long is the lease?

15. Is this project included in your CIP Total Capital Needs Summary and 5 Year Plan?

Yes No If yes, what priority number?

16. Project Category: **(Circle One)**

Eligible Projects as provided by State Statute:

- 1. Rural water quality projects, including acquisition, treatment, distribution and recovery of water for consumption by humans or animals or both;**
- 2. Rural solid waste disposal, treatment or similar projects;**
- 3. Rural sanitary sewer construction or improvement projects;**
- 4. Rural-road or street construction or improvement projects;**
- 5. Provision of rural fire protection services and public safety services;**
- 6. Expenditures designed to increase the employment level within the jurisdiction of the entity;**
- 7. Provision of health care services, including emergency medical care, in rural areas;**
- 8. Construction or improvement of telecommunication facilities or systems;**
- 9. Improvement of municipal energy distribution systems;**
- 10. Community buildings, town halls, senior nutrition centers, meeting rooms or similar public facilities.**

Excluded Projects by Board and/or State Statute.

- Ineligible projects include activities not encompassed by the 10 eligible project categories and not meeting the statutory population thresholds enumerated previously including:
 - Consumable goods, office supplies, and personnel costs
 - Park projects including park maintenance equipment (except community centers and similar public facilities located in parks which are eligible – see #10 above)
 - Fairgrounds projects (except community centers and similar public facilities located in fairgrounds which are eligible – see #10 above)
 - Veterans memorials
 - Codification of ordinances, Capital Improvement Plans (CIP's), Comprehensive (Land use) Plans
 - Housing projects/programs (demolition, emergency repair, rehabilitation, construction)
 - County maintenance barns or any other district-wide projects for county commission districts with a greater than 7000 population

17. Detailed Project Description (attach preliminary engineering if available, size, type, dimensions, and location, and/or other pertinent information). Highlight area or location on a map and include with application.

Example Project Descriptions:

Not Acceptable: 1 mile of water line

Acceptable: 5,280 feet of 6 inch PVC waterline to add 12 homes to the Longview

Addition

Overlay 2 miles on S. 53rd St. W, District 3

_____ (attach additional page(s) if necessary)

18. Project Justification:

_____ (attach additional page(s) if necessary)

I, _____ do hereby certify that the information in this application
(Name)
is true and correct to the best of my knowledge and that it has been reviewed and approved by
the governing body of _____.
(Applicant)

Retha Weyer
Chief Elected Official

9/13/21
Date

ATTEST
Shirley Ann Polly Irving
Clerk/Notary

13 day of September 2021
Chairman Ruth Weyer
Member [Signature]
Member [Signature]



Attest Shirley Ann Polly Irving
County Clerk

19. RESOLUTION AUTHORIZING APPLICATION FOR FINANCIAL ASSISTANCE FROM THE RURAL ECONOMIC ACTION PLAN FUND

WHEREAS: The _____ desires to seek funding from
(Sponsor: County, City or Town)
the Rural Economic Action Plan Fund for _____ in the
(Type of Project)
_____; and
(Sponsor: Town, City or County)

WHEREAS: It is in the best interest of _____ to
(Sponsor: Town, City or County)
expedite the preparation and submission of an application for financial assistance from the Rural Economic Action Plan Fund, in the form of a grant.

NOW THEREFORE: BE IT RESOLVED that, the _____ of the
(Mayor/Chairman of Board of Co. Comm.)
_____ is hereby authorized and directed to sign any and all application(s)
(Sponsor: Town, City or County)

and related document(s) necessary to file and process any and all grant application(s) through the Rural Economic Action Plan Fund on behalf of _____.
(Beneficiary: Town, City, County or Unincorporated Area.)

Additional Authorized Signors: Name: _____ Title: _____
Name: _____ Title: _____

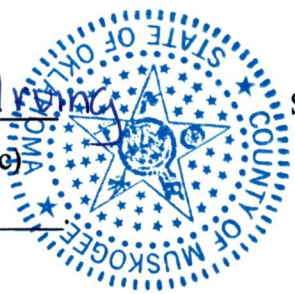
PASSED AND APPROVED by the _____ of _____
(Governing Body) (Sponsor: Town, City or County)

this _____ day of _____, 20_____.

BY: _____
(Mayor/Chairman of Board of Co. Comm.)

ATTEST: _____ SEAL
(Town/City/County Clerk or Notary Public)

My Commission expires: _____



20. STATEMENT OF UNDERSTANDING AND ASSURANCES

As the Chairman of the Board of County Commissioners of
(Mayor/Chairman of Board of Co. Comm.)

Muskogee County, I understand the following criteria for
(Town, City or County)

eligibility for and participation in the Rural Economic Action Plan Fund(s).

I. Any of the items not addressed on the application will not be assigned any points and a zero will be recorded for that item. Failure of incorporated entity to provide current audit summary sheet will constitute an ineligible application.

II. For unincorporated areas outside of cities and/or towns: A map indicating the geographical area benefitting from the application shall be provided. Documentation of the population that will benefit and evidence of an existing community organization (fire department, senior citizens group or community organization) that will be responsible for grant implementation and on-going maintenance and/or operation must be included. The population estimate must be signed by the county commissioner of the area or the Chairman of the Board. The county agrees to be a sponsoring unit of government only, and all areas of responsibility for maintenance and operation of the project will lie with the unincorporated entity.

[Signature]
(Mayor/Chairman of Board of Co. Com.)

9/13/21
Date

(REAP Grant Beneficiary-if unincorporated area)

Date

21. CERTIFICATION OF POPULATION
(Unincorporated Areas Only)

The population of _____
(REAP Grant Beneficiary Area)

is hereby estimated to be _____.

9/13/21
Date

Kenny Payne
County Commissioner-Print Name

3
District #

Kenny Payne
County Commissioner-Signature

ATTEST: Shula Hunter for Polly Irving
(Town/City/County Clerk or Notary Public)

SEAL

My Commission expires: _____.



DEFINITIONS

- A. Threshold Requirement – Application requirement that must be met before application will be scored. Applications not meeting any threshold requirement are ineligible for funding.
- B. Population - For incorporated areas the 2010 Federal Census or latest official Census Update is utilized. For unincorporated areas, county commissioners must certify.
- C. Fiscal Capacity - Total revenue as per most recent audit requirements fulfilled to satisfaction of Office of the State Auditor and Inspector. Unincorporated areas and incorporated towns not required to procure an audit will be treated the same as small communities for fiscal capacity, but must document their non-requirement status if incorporated.
- D. LMI- Low to Moderate Income – Is determined using Oklahoma Department of Commerce CDBG Guidelines.
- E. Local Effort - Up to 20 points for documented efforts of cash infusion and/or value of force account. Percentage of points for keeping application under pre-determined cap as set by EODD Trustees.
- F. Impacts - Self explanatory. In the case of ties, the total of scores from Items C, D, and E will be utilized to break ties. The EODD Board of Trustees will then look at these items individually (E then D then C). The EODD Board of Trustees will then have the discretion to select projects based upon feasibility, need **and/or state statute requirements.**

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