**Western North Carolina Agricultural Options**

**2024 Application for Individual Farm Businesses**

**Instructions for Applying**

Thank you for your interest in the WNC Agricultural Options Program. *WNC AgOptions builds sustainable farming communities in our mountain region by providing resources directly to farmers who are diversifying or expanding their operations.*

WNC AgOptions is funded by the North Carolina Tobacco Trust Fund Commission and works in partnership with WNC Communities and N.C. Cooperative Extension. For more information on the North Carolina Tobacco Trust Fund Commission, visit: [http://www.tobaccotrustfund.org/](about:blank)

Members of the WNC AgOptions steering committee include: representatives from the N.C. Cooperative Extension, N.C. Department of Agriculture & Consumer Services, Appalachian Sustainable Agriculture Project and other agricultural business leaders.

**Who should apply?** Applicants are residents of North Carolina\* who demonstrate the economic viability of farms in Western North Carolina. Support is provided to individual farmers/farms that are diversifying or expanding their operations to increase farm income and encourage the sustainability of the farm businesses. The farm must be one in which the family holds the financial responsibility, takes the risks, and provides the majority of the management decisions for the farm business. Nonprofits and corporately-owned farms are not eligible. WNC AgOptions awards grants to a variety of farm operations, including: fruits & vegetables, livestock, nurseries, agritourism, beekeeping and value-added processing. Farm businesses that add value and/or sell products that are made from items produced or grown on the applicant’s farm are eligible to apply. While agriculture is a varied and diverse industry that can be defined in many ways, WNC AgOptions funds applicants who operate a business and manage land for the purpose of producing crops for harvest and sale. Any funding requests should be for items directly related to the growing and harvesting of crops for sale, including livestock. WNC AgOptions also funds agritourism operations that are for the purpose of inviting the public on-farm to increase sales of farm products.

\*Eligible applicants must reside and project must be located in the West District of NC Cooperative Extension Service, which encompasses the following 22 counties/areas: Avery, Buncombe, Burke, Caldwell, Clay, Cherokee, Cleveland, Eastern Band of Cherokee Indians (projects on tribal land), Graham, Haywood, Henderson, Jackson, Macon, Madison, McDowell, Mitchell, Polk, Rutherford, Swain, Transylvania, Watauga and Yancey.

Current employees and their spouses of NC Cooperative Extension, NCSU, NC A&T, NCDA&CS, WNC Communities; members of the WNC AgOptions Steering Committee and their spouses; board members of WNC Communities and their spouses are not eligible to receive WNC AgOptions grants.

**Priority will be given to applicants who:**

* Are diversifying or expanding their operations so that they remain sustainable for this and future generations;
* Currently or previously grew tobacco in North Carolina;
* Show they follow typical procedures of a legitimate farm business, such as acquiring a NC Department of Revenue Tax Exemption number, having a Farm Service Agency farm number, obtaining appropriate insurance; and filing a Schedule F or equivalent Schedule C (or equivalent) with the Internal Revenue Service;
* Generate more than one-half of their household income from crops or products produced on farm;
* Have sufficient experience and expertise to accomplish the projects and/or have identified the proper cooperators to supplement gaps in their skills and abilities;
* Actively participate in grower associations or other commodity group meetings;
* Have sufficiently researched the production methods, markets, expenses and timeline for their projects;
* Are proposing projects that demonstrate successful farming practices, methods, and/or markets to the agriculture community;
* Exhibit working relationships with their local Cooperative Extension Agents;
* Have included two qualifying letters of support from purchasers, advisors, consultants, agricultural specialists, other granting agencies, loan officers, or others that are providing support to your project (see details in Section III of the application);
* Have NOT received funding from WNC AgOptions from 2004 to 2023 and have NOT received funding from the Tobacco Communities Reinvestment Fund offered through RAFI, USA from 2009-2011. Recipients who have previously received a total of three WNC AgOptions/RAFI grants are not eligible for a fourth.

*Farmers who do not meet all of these criteria are still encouraged to apply.*

**How to apply:**

1. *Attend an informational session* (optional). As soon as the 2024 application has been released, WNC Communities will conduct informational sessions in Western North Carolina. Information about the sessions will be posted on the WNC AgOptions website: [https://wncagoptions.org/](about:blank). Although not required, attendance does provide helpful information and gives applicants the ability to ask questions and potentially prepare a stronger application.
2. *Meet the Intent to Apply deadline*. By October 13, talk to your local NC Cooperative Extension agent about the project you intend to apply for to receive assistance on developing your project proposal. If your agent is familiar with your farm and operation, a phone call may suffice. If you have not worked closely with your agent before, they may need to make a visit to your farm so they can better assist you with your project. Those who do not meet the Intent to Apply deadline will not receive all points possible in the review process.
3. *Submit your application.* Prior to completing your application, review the Grant Writing Tips on the WNC AgOptions website: [https://wncagoptions.org/grant-writing-tips/](about:blank). Applications must be **received** by November 17, 2023. Only one application per farm will be accepted. If sending a hard copy, make sure your application reaches WNC Communities by November 17 by 5:00 p.m. Completed applications should be mailed or hand delivered to WNC Communities (a drop box is located next to the mailbox) to the address on the following page. A traceable/trackable mailing method is suggested. If emailing, see **Email Requirements** on the following page.

**Completed applications should be mailed or hand delivered (a drop box is located next to the mailbox) to:**

**WNC AgOptions Project Coordinator**

**WNC Communities**

**594 Brevard Rd.**

**Asheville, NC 28806**

**Email Requirements:**

* All application documents, including attachments, must be in PDF format.
* All sections of application must be submitted; including SECTIONS V and VI (scans are acceptable). If awarded, you will need to provide originals before any money is dispersed.
* Application should be in a single PDF file if possible. If file is too big, additional attachments can be sent as one document and the application as a separate document.
* Emailed applications must be received by NOON on Friday, November 17, 2023.
* Email application to [**agoptions@wnccommunities.org**](about:blank).Please include the words **2024 WNC AgOptions Application** in the subject line.

**ALL APPLICATIONS, WHETHER MAILED, HAND DELIVERED, OR EMAILED, WILL RECEIVE AN EMAIL CONFIRMATION. IF YOU DO NOT RECEIVE A CONFIRMATION, PLEASE CONTACT OUR OFFICE.**

**How are applications reviewed?** Projects are ranked via a numeric scoring system. Approximately 25 leaders in the agriculture field throughout Western North Carolina participate in the review process, and a team of reviewers score each application. The WNC AgOptions Steering Committee uses these scores as the primary guide in determining final grant recipients.

**How can the grant be spent?** Suitable expenses are those associated with the production and marketing of diversified farm enterprises and agritourism endeavors. Examples include, but are not limited to: seeds, fertilizer, plants, amendments, livestock, training, advertisements, packaging, fences, signage, facilities, supplies, tools and specialized equipment. Items that *cannot* be funded by the award include: farmer labor, pre-existing farm debt, and expenses that are dated outside of the grant period from January 8, 2024 through November 30, 2024.

Funds must be used as stated in the applicant’s proposal. Use of funds inconsistent with the proposal will result in forfeiture of award and repayment of funds.

**How much is awarded?** The award amount can be: $4000 or $8000. WNC AgOptions will provide cash

awards to projects with budgets that are at least 10% higher than the amount of the award request. An award request of $4000 would require a project budget of at least $4400 and a $8000 award request would require a budget of at least $8800.

**How is the grant money distributed?** All recipients are required to attend a grantee orientation, where they will receive their first allotment of funds. All recipients are also required to submit a business plan during the course of the 2024 cycle, at which point a second allotment will be released. Recipients receive a third and final payment upon completion of the grant requirements.

**Procedures and Timeline for WNC AgOptions Proposals**

* October 13, 2023: Intent to Apply Deadline. All applicants *must* contact their county Cooperative Extension Agent by this date to discuss their projects.
* November 17, 2023: Application deadline – mailed applications must be received by this date. Email must be received by NOON. **Applications that are received after the due date or have incomplete information will not be considered for review.**
* December 4 and 5, 2023: WNC AgOptions representatives may contact finalists for phone interviews if additional information is required.
* The week of January 8, 2024: Letters of acceptance or regrets will be mailed to all applicants.
* Thursday, February 1, 2024: Recipients are required to attend a one-day orientation/educational workshop. Details will be mailed with acceptance notification.

**Requirements of 2024 WNC AgOptions Grant Recipients:**

1. Recipients must attend the WNC AgOptions orientation and will receive their first allotment of the grant there.
2. Recipients must provide a financial contribution of 10% or more of their total grant award towards their total project budget.
3. Recipients must keep accurate production and financial records on the project and supply a copy of those records at the completion of the project. Copies of receipts for project expenditures will be required. Recipients’ project expenditures must be at least 10% higher than their award amount.
4. Recipients must submit a business plan to WNC AgOptions by June 30, 2024 to receive their second allotment of grant funds.
5. Recipients must be present for a farm visit, during which a WNC AgOptions representative will observe, document, and discuss progress on the project.
6. To receive the final $500 allotment, recipients must have their farm visit completed, and submit year-end reporting including final income, expenses and receipts, North Carolina Grants compliance reporting form, and a survey collecting feedback about the program and results of their project, by November 30, 2024.
7. Recipients must reside in and projects must be located within the 22-county/unit area, which encompasses the following: Avery, Buncombe, Burke, Caldwell, Clay, Cherokee, Cleveland, Eastern Band of Cherokee Indians (on tribal land), Graham, Haywood, Henderson, Jackson, Macon, Madison, McDowell, Mitchell, Polk, Rutherford, Swain, Transylvania, Watauga and Yancey.
8. Recipient must be a family farm—one in which the family holds the financial responsibility, takes the risks, and provides the majority of the management decisions for the farm business.
9. Recipients must be available via mail and/or phone calls throughout the year. Email access is very helpful.
10. Recipients will recognize WNC AgOptions and the North Carolina Tobacco Trust Fund Commission as the funders/supporters of the project in all materials/marketing/advertising used to promote the project (WNC AgOptions will provide appropriate logos, usage guide and yard sign).
11. WNC AgOptions will include the recipients’ projects in public relations, outreach, demonstration and education in 2024 and future years.

**Applicants should direct all questions regarding this application to:**

**WNC AgOptions**

**(828) 252-4783**

**agoptions@wnccommunities.org**





**Western North Carolina Agricultural Options**

**2024 Application for Individual Farm Businesses**

Please fill out all sections of this application. Typed applications are highly recommended and preferred.

**Project Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COUNTY of Project Location:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Who is your local Cooperative Extension Agent that will be working with you on this project?

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_County (if different from above)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Grant request amount (please check one): $4,000  $8,000 **

**Total project budget amount: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Section I. APPLICANT INFORMATION**

*Note: The grant funds are considered taxable income, and WNC Communities will file a 1099 with the IRS in the name of the recipient at the end of 2024. You will be required to fill out a W-9 form requesting an Employer Identification Number or a Social Security Number if you are awarded the grant.*

Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Farm Business Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone and/or Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Website/Facebook/other social media address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Physical Location of Proposed Project (if different than above):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you have a N.C. Department of Revenue Tax Exemption number? YES **** NO ****

2. If applicable, what is your Farm Service Agency number? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Do you file a Schedule F or equivalent Schedule C to the IRS? YES **** NO ****

If so, which years did you file? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. What percentage of your household net income is generated from farm products produced on

your farm? \_\_\_\_\_\_\_\_\_\_\_\_\_ %

5. Do you carry insurance for your farm business?

Examples: Farm Liability, Product Liability, Workers Comp. YES **** NO ****

6. Does your farm participate in a Present Use Value program? YES **** NO ****

7. Briefly describe your participation/ leadership in grower associations, commodity meetings or other agricultural events. If possible, name the last three activities (or affiliations) in which you actively participated, including dates. *Examples:* *ASAP Business of Farming Conference February 11, 2023, Member North Carolina Tomato Growers Association, NCSU Egg Grading School for Small Flock Producers, Organic Growers School workshops, Local Extension Programs, County Cattlemen’s Associations, Beekeepers Associations, etc.*

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Farming History

*(Feel free to add or delete rows in the table depending on the number of ventures at your farm.)*

|  |  |  |
| --- | --- | --- |
| **Farm Venture: Products and/or Services**  ***Include # of acres and/or livestock*** | **Description of Markets or**  **No. of Customers\*** | **Dates of Business** |
|  |  |  |
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*\*If you have not sold agriculture products thus far, please state the year you expect to do so. Feel free to elaborate in the space provided for question #9.*

9. Elaborate on the farming history listed above, along with any other relevant professional and educational experience. How significant of an impact does your farm make to you, your family and your community, including food supply, quality of life and income? Which years, if any, have you farmed full-time? (375 words maximum)

10. Please answer the following questions about the applicant’s tobacco growing history as an owner/operator in North Carolina. If the applicant owned an allotment but did not farm the crop, please do not include those years or acres.

Is the applicant growing tobacco for commercial sale? YES **** NO ****

Has the applicant ever grown tobacco for commercial sale? YES **** NO ****

If yes, which years (for example, 1968 to 1997)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approximately how many acres of tobacco did the applicant farm? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Did the applicant’s family grow tobacco on the same land that the applicant is farming now? YES **** NO ****

**Section II. THE PROJECT AND PROPOSAL**

1. Please provide a description of your proposed farm project. How will the project fit into your existing farming operation? How will you handle the additional workload? Include any research into production methods that you will be introducing to your operation. (750 words maximum)

1. What are the anticipated outcomes of your project? (500 words maximum)
2. How do you plan to market or sell your farm business, product and/or experience? (250 words maximum)

4. How will this project enhance or increase your capability to continue farming and increase the long-term economic viability of your farm? (250 words maximum)

1. Explain how your project could provide demonstration of exemplary practices to your county’s agriculture community, including transitioning tobacco farmers. Examples of demonstration include farm tours, Extension field days, workshops, etc. Provide context for your project, i.e., how unique is your operation in your county? (250 words maximum)

6. Please provide a timeline for your project. Indicate the project activities you will accomplish, including the preparation of your business plan and year-end reports.

| ***Month*** | ***2024 Project Activities*** |
| --- | --- |
| **January** |  |
| **February** | Attend WNC AgOptions orientation. |
| **March** |  |
| **April** |  |
| **May** |  |
| **June** |  |
| **July** |  |
| **August** |  |
| **September** |  |
| **October** |  |
| **November** |  |

7. **Proposed Financials**: Please use the following worksheet (or include a format of your choice) to outline the financial plan for your proposed project. A financial plan should include your estimated expenses, any in-kind contributions, and your expected income for years one and two of your proposed project. If there is a cost savings to your operation because of your project, please provide an explanation for the savings. Use these calculations to provide a detailed list on the charts provided on the following two pages.

|  |  |  |  |
| --- | --- | --- | --- |
| Project Name |  |  |  |
|  |  |  |  |
| **Income** | 2024 | 2025 | Explanation of income *i.e.*, number of head, quantity of product sold, events/services |
|  | $ | $ |  |
| Sale of products |  |  |  |
| Sale of services |  |  |  |
|  |  |  |  |
| **Savings** |  |  | Explanation for savings |
| Money saved because of project |  |  |  |
|  |  |  |  |
| **Expenses** |  |  | Explanation of expenses |
| *Examples:* |  |  |  |
| *Seeds/Plants* |  |  |  |
| *Fertilizer/amendments* |  |  |  |
| *Pest control* |  |  |  |
| *Energy* |  |  |  |
| *Equipment* |  |  |  |
| *Labor* |  |  |  |
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**Budget:**List proposed expenses and income for this project/proposal only. You do not need to submit a budget for your entire operation (unless it is applicable), but if you wish to do so, attach it as a separate spreadsheet. If labor is included, please specify “contractor” or “employee.” The applicant’s or his/her immediate family’s labor is considered in-kind and should not be included in the expense section. You may list all in-kind contributions, such as the value of your (or your immediate family’s) labor, supplies, equipment, land, etc. in the Estimated In-kind Contributions section below. In-kind contributions do not count towards the project budget.

**Estimated Expenses for 2024 Grant Project**

|  |  |
| --- | --- |
| ***Line Item*** | ***Estimated Expenses*** |
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| ***\*TOTAL GRANT PROJECT BUDGET*** | ***$*** |

*\*Budget total must be at least 10% higher than the requested award amount. A $4000 grant request requires a budget of at least $4400; an $8000 request requires a budget of at least $8800.*

**Estimated In-kind Contributions for Grant Project**

|  |  |
| --- | --- |
| ***In-Kind Item*** | ***Estimated Contribution*** |
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| ***TOTAL IN-KIND CONTRIBUTION*** | ***$*** |

**Income:** Please list expected income as a direct result of your proposed project. If your project is not expected to generate income in the next two years, please provide an explanation and estimated income for the first two when you expect to make a profit.

**Expected Income for Year One (2024)**

|  |  |
| --- | --- |
| ***Product/Market*** | ***Estimated Income*** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| ***TOTAL*** | ***$*** |

**Expected Income for Year Two (2025)**

|  |  |
| --- | --- |
| ***Product/Market*** | ***Estimated Income*** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| ***TOTAL*** | ***$*** |

If not referenced elsewhere in your application, please provide an explanation and/or supporting information to show how the above income numbers were estimated.

**Section III. ADDITIONAL SUPPORT FOR YOUR PROJECT**

You will receive points for two qualifying letters of support that **clearly state the letter writer’s participation in the project, *i.e.,* production assistance, marketing assistance, etc.** Provide the names of people who are providing a letter of support for you and state their role in your project. You may submit more than two letters, but can only receive a maximum of 2 points.

Please note:

* Letters may be written by purchasers, other farmers, marketing and production specialists, crop consultants, non-profit organizations, businesses and other agriculture advisors. Neighboring county or Area Extension Agents with whom you may be working in addition to your cooperating agent may write a letter of support. Cooperating agents should not submit letters of support.
* Letters should not be character references only.
* If mailing your application, letters should be attached to your application.
* If emailing, letters should be scanned and added to your application file.
* Do not have letter writers send the letters directly to WNC Communities/WNC AgOptions.

Name Role in Project Phone/Email

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

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**Section IV. FORMER WNC AGOPTIONS AND RAFI, USA (Tobacco Communities Reinvestment Fund) RECIPIENTS ONLY**

If you, your spouse, or farm business partner received a WNC AgOptions grant any year between 2004 to 2023 or a grant from RAFI, USA’s Tobacco Communities Reinvestment Fund in the years 2009-2011, please answer the following questions.

1. Which year(s) did you receive the WNC AgOptions Grant?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Which year(s) did you receive the RAFI, USA Grant? \_\_\_\_\_\_\_\_\_\_\_\_\_

2. Briefly describe your previous grant project(s). What did you learn from your successes and your challenges? Did you achieve your intended goals? Did your income increase as a result of the project? (400 words maximum)

3. For your previous AgOptions/RAFI grant project(s) describe your outreach activities to farmers in your community. Outreach includes field days, articles, one-on-one mentoring, Cooperative Extension workshops, etc. (250 words maximum)

**Section V. SUB-GRANTEE STATE CERTIFICATION**

Applicants must sign and **have notarized** ATTACHMENT A (page 15): State Certification of No Overdue Taxes/Conflict of Interest form. **Emailed applications can include a scan, but the original notarized page will be required should you be awarded a grant.**

**Section VI. VERIFICATION**

The applicant **MUST** sign the following statements:

* Applicant is a resident of North Carolina and resides within the 22 unit/county served by WNC AgOptions.
* Applicant possesses all legal rights/permissions to use resources (including land, equipment, etc.) as indicated in this application to complete the proposed project.
* Applicant will follow all applicable state and federal laws regarding the sale of farm products.
* Applicant currently possesses all required legal certifications, permits, registrations, etc. necessary for producing and selling farm products.
* Applicant holds the financial responsibility, takes the risks, and provides the majority of the management decisions for the farm business.
* The funds granted will be used exclusively for the project as described in this request. The requirements of WNC AgOptions award recipients have been read and agreed to.
* The information provided in this application is correct and complete to the best of my knowledge.
* Applicants being considered for funding may be contacted for more information about their projects. Site visits and/or telephone interviews may be requested.
* The applicant understands that should they be awarded a grant, it will be made public through announcements in print and web pages.
* The applicant is not a current employee nor the spouse of a current employee of the following: NC Cooperative Extension, NCSU, NC A&T, NCDA&CS, WNC Communities. The applicant is not a current member nor the spouse of a current member of the WNC AgOptions Steering Committee or WNC Communities’ board.

Applicant's Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed by (Please Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Emailed applications can include a scan, but original signature will be required should you be awarded a grant.

## CHECKLIST

**Please make sure the following items are included with your application. If emailing, your application should be in a single PDF file, if possible. If the file is too big, the attachments can be sent as one document and the application as a separate document. Applications with incomplete information will not be considered for review.**

**Please do not use notebooks or other binders.**

**Typed applications are preferred.**

* Section I. APPLICANT INFORMATION
* Section II. THE PROJECT AND PROPOSAL
* Section III. ADDITIONAL SUPPORT FOR YOUR PROJECT
* Section IV. FORMER WNC AGOPTIONS/RAFI GRANT RECIPIENTS ONLY
* Section V. SUBGRANTEE STATE CERTIFICATION FORM (signed and notarized)
* Section VI. VERIFICATION (signed and dated)
* ADDITIONAL INFORMATION: You may also include additional information such as photos, drawings, etc. Please keep additional information to no more than 5 pages.

**Instructions:** Grant applicants should complete this certification and conflict of interest statement.

The completed, signed and notarized form should be attached to your application.

# **ATTACHMENT A:**

# **State Grant Certification – For Sub Grantees**

# **No Overdue Taxes[[1]](#footnote-1) and Conflict of Interest**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [*Insert Date of Certification*]**

**To: NC TOBACCO TRUST FUND COMMISSION**

**WNC COMMUNITIES & WNC AGOPTIONS PROGRAM**

**Certification:**

I certify that I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **[*Insert Your Name]***, do not have any overdue tax debts, as defined by North Carolina G.S. 105-243.1, at the federal, state, or local level. I further certify that I will not use funds awarded by this grant to satisfy any subsequent tax obligations.

Additionally, I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **[*Insert Your Name]****,* certify that I do not have any personal and/or professional relationships with the NC Tobacco Trust Fund Commission, WNC Communities, WNC AgOptions program and/or any of its’ employees or governing Board, as defined by North Carolina G.S. 143C-6-23(b) (c), that have been used to in any way influence the potential of an award or an official award of funds to me. I further understand that a false statement made is in violation of North Carolina G.S. 143C-6-23 and such false statement would be a criminal offense punishable as provided by North Carolina G.S. 143C-10-1.

**Sworn Statement:**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **[*Insert Your Nam*e]** certify that I am a resident of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **[*Insert Name of Town or City*]** in the State of North Carolina. I also acknowledge and understand that any misuse of State funds will be reported to the appropriate authorities for further action.

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

[***Signature of Individual*]**

Sworn to and subscribed before me on the day of the date of said certification

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

**[*Signature of Notary*]**

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. G.S. 105-243.1 defines “Overdue tax debt. – Any part of a tax debt that remains unpaid 90 days or more after the notice of final assessment was mailed to the taxpayer. The term does not include a tax debt, however, if the taxpayer entered into an installment agreement for the tax debt under G.S. 105-237 within 90 days after the notice of final assessment was mailed and has not failed to make any payments due under the installment agreement.” [↑](#footnote-ref-1)