



Discover the Right Subaward Track for you

Guidelines ^

Submit

Review the Business Builder Subaward [Application Packet](#) for all application details and requirements.

Interested applicants may reach out to your local Center Technical Assistance Provider (C-TAP) to learn more about the program, which subaward may be right for your entity, and assistance in writing the grant application. Explore C-TAPs [here](#).

Applications are due by noon EST NOVEMBER 1, 2024.

Reminders:

- You can [save a draft](#) of your work if you would like to finish filling out the form at a later date;
- If anything changes with the information you submitted, please request to [edit the submission](#) / If you need to make changes to your form, please [withdraw](#) your submission and resubmit;
- Appalachia Regional Food Business Center Staff will follow-up with you about your submission by email. Please be sure to [safelist](#) notification emails from Submittable and check the email you used to sign up for your Submittable Account regularly;
- Please contact us @ [info@applachiarfbc.org](mailto:info@applachiarfbc.org) if you require additional assistance.

Technical Questions regarding Submittable?

Check out the [Submitter Resource Center](#) or contact [Submittable Customer Support](#).

*Figure 1 - In this PDF you will find basic application questions. Branching logic (additional questions) will be included depending upon how you respond to questions in each section. The Planning and Development track has additional requirements including uploading a Letter of Support.*

*This quiz streamlines our grant process by ensuring basic requirements are met by potential applicants before entering the full application. If your organization/company is determined eligible to apply, you will gain access to the full application portal.*

*Please note: Eligibility and application access are not guarantees and/or insinuations of a future grant award. Additional eligibility requirements may apply for any organization/company to receive grant funding.*

**1. Is your organization/company's annual budget less than \$1 million? (required)**

Yes

No

**2. Is your organization/company able to provide financial information (audit, P&L statements, budgets, etc.) for your time in operation or up to 3 years if requested? (required)**

- Yes
- No
- I'm not sure

**3. Is your organization/company and/or any of its leadership under investigation, in civil litigation, and/or facing criminal charges involving financial misconduct by any government entity? (required)**

- Yes
- No

**4. Does your organization/company owe any back taxes, fines, or fees to the IRS? (required)**

- Yes
- No

**5. If awarded, your organization/company would pay for eligible project costs and be reimbursed by the grant after submitting documentation with payment typically ranging from 30 to 90 days after request. Does your organization/company have the cash flow to participate in this reimbursement model if awarded? (required)**

- Yes
- No
- I'm not sure

**Next**

Drafts may be visible to the administrators of this program.

*Figure 2 - This ends the Pre-Eligibility Quiz Section of the Application.*

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## Planning & Development Subaward

Award amount: \$5,000-\$29,999.99

The [Planning & Development Subaward](#) is intended for organizations and businesses (organized as either a non-profit or for-profit entity) that have previously worked with one or more of the Center's partners. A Letter of Support is required from a partner of the Appalachia Regional Food Business Center explaining in more detail the partner delivered technical assistance received and the impact the proposed project will have on the mid-tier of the food supply chain. Projects focused on developing shared use kitchens and processing spaces, alternative forms of retail (such as a co-operative and/or consignment model for retail), food aggregation and/or distribution, or bringing a new food product to market. Also, mid-tier food-related projects that will serve or are based in a distressed community at the county level as defined by the [Economic Innovation Group](#) are encouraged to apply.

The recipient must implement the approved proposal within two years of the date of the Business Builder Subaward, as stated on the grant Business Builder Subaward letter.

All projects must be fully COMPLETED by December 31st, 2027.

## Implementation & Expansion Subaward

Award amount: \$5,000-\$100,000

The [Implementation & Expansion Subaward](#) is intended for organizations and businesses (organized as either a non-profit or for-profit entity) proposing projects focused on regional needs and/or businesses that are working towards expansion and other investment. The focus is on assistance to small- and mid-sized food and farm businesses (producers, processors, aggregators, distributors, and other businesses within the food supply chain) and food value and supply chain coordination. These subawards may support staff time, business planning activities, software implementation, the purchase of specialized equipment (such as food safety, processing and/or packaging equipment), value chain and supply chain coordination and innovation, product development, and marketing. Also, projects that fund supply chain analysis and strategy development for identified gaps and specialization opportunities are encouraged to apply.

The recipient must implement the approved proposal within two years of the date of the Business Builder Subaward, as stated on the grant Business Builder Subaward letter.

All projects must be fully COMPLETED by December 31, 2027.

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Are you still unsure of what subaward track is right for you?

Yes


No

Send us a question and we'll be in touch with assistance! *(required)*

**B** *I* U    

Save Draft

Submit

 Last Saved a few seconds ago

Drafts may be visible to the administrators of this program.



**Success!**

In 5 seconds, you'll be redirected to <https://www.appalachiarfbc.org/bbs-application>

Figure 3 - When you have reviewed the track information and are ready to select a track, you will receive this notification and be redirected to select your application link. Select "No" to the previous question above to be redirected to the ARFBC.org website to choose your application.

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# Section 1 - Intake Information

## Business Information

Name of Organization or Business: (required)

Do you have a UEI Number? (required)

Yes

No

Please note that if awarded, a UEI number is required for fund disbursement

Phone: (required)



Email: (required)

email@example.com

## Physical Address

**Street Address:** (required)

**City:** (required)

**State:** (required)

**Zip Code:** (required)

## Mailing Address (If different from above):

**Street Address (mailing address):**

**City (mailing address):**

**State (mailing address):**

**Zip Code (mailing address):**

## Point of Contact:

**First Name:** (required)

**Last Name:** (required)

**Title:** (required)

**Phone (point of contact):** (required)



**Email (point of contact):** (required)

## Demographic Information

The following questions will not be scored.

**Which of the following best describes the race and/or ethnicity of the individual who leads or owns the organization/business (Select all that apply).** (required)

- Native American or Alaska Native
- Native Hawaiian or Pacific Islander
- Black or African American
- White
- Asian
- Hispanic Latino
- Middle Eastern or North African
- Prefer not to answer
- Option not listed

**Which of the following describes the gender identity of the individual who leads or owns the organization/business? (Select all that apply) (required)**

- Man
- Woman
- Transgender
- Non-binary
- Prefer not to answer
- Option not listed

**Which of the following age ranges describes the individual who leads or owns the organization/business? (required)**

- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65+
- Prefer not to answer

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# Section 2 - Business Description

## Business Description

Select the option(s) that best describes your business (check all that apply)

- Farmer, Rancher, Agricultural Production (Producer)
- Food hub
- Aggregator (Other than food hub)
- Distributor
- Processor
- Community-based non-profit
- Farmers Market
- Community Health Center
- Producer Cooperative
- Non-producer Cooperative
- Social Enterprise
- Certified B-Corporation
- Other

How many years have you been in operation?

- Less than 1 year
- 1-2 years
- 2-3 years
- 3-4 years
- 4-5 years
- 5+ years



**What agriculture sector and/or food products does your business produce, manufacture, distribute, or promote? (select all that apply) (required)**

- Produce/Crop
- Foraged and Wild Harvested Foods
- Livestock
- Poultry
- Eggs
- Dairy
- Seafood
- Aquaculture
- Value-Added Product
- Floriculture and Nursery
- Other Agriculture Sector or Food Product

## **Underinvested Community**

The USDA Agricultural Marketing Service (AMS) values diversity and equal access to its programs and services. As such, it is helpful for us to track the impact of our Federal grant programs on a variety of communities. This information is voluntary. The information contained herein will only be used to assist AMS with its outreach efforts.

**Is the organization/business led or owned by an individual from an underinvested community?**

**(required)**

- Yes
- No
- Prefer not to answer

"Underinvested Communities" are defined as populations sharing a particular characteristic, as well as geographic communities, that have been systematically denied a full opportunity to participate in aspects of economic, social, and civic life, such as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color; members of religious minorities; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise adversely affected by persistent poverty or inequality.

## Geographic Region

We use the [EIG Distressed Communities Index](#) to determine if a business is located in or serves communities that have markers of distress. Use zip code when the area is part of an urban community (high-density population over 5000); use county when the zip code information is not available due to small population size. When the area is rural but has enough population to use either zip code or county, choose the higher of the two scores.

### Is your business located within an at risk-county or zip code, or does it serve an at-risk zip code?

Check all that apply (required)

- Located within an at-risk county or zip code
- Serves an at-risk county or zip code
- Located within a distressed zip code or county
- Serves a distressed zip code or county
- Located within multiple at-risk or distressed counties or zip codes
- Serves multiple at-risk or distressed counties or zip codes
- Not located within and does not serve an at-risk or distressed county or zip code

### Is your business located in a county within the Appalachia Regional Food Business Center (ARFBC)'s defined region, or does it serve a county within the ARFBC's defined region?

- Located within the ARFBC's defined region
- Serves a county within the ARFBC's defined region
- Neither located within or serving the ARFBC's defined region

The Appalachia Regional Food Business Center serves the following states and counties.

**Full States:**

Ohio, West Virginia, Kentucky, Tennessee

**Partial States:**

Pennsylvania, (*Allegheny, Armstrong, Beaver, Bedford, Butler, Cambria, Clarion, Crawford, Erie, Fayette, Franklin, Fulton, Greene, Indiana, Jefferson, Lawrence, Mercer, Somerset, Venango, Washington, & Westmoreland Counties*)

Virginia (*Alleghany, Bath, Bland, Botetourt, Buchanan, Carroll, Craig, Dickenson, Floyd, Giles, Grayson, Henry, Highland, Lee, Montgomery, Patrick, Pulaski, Rockbridge, Russell, Scott, Smyth, Tazewell, Washington, Wise & Wythe Counties*),

Maryland (*Alleghany, Garrett & Washington Counties*)

## Business Operations

Tell us about your business! We want to hear about what you do in your day to day. Describe your business in no more than 1,000 words. There will be space later in the process for your project description.

*Consider the following:*

- What is your business's purpose or mission?
- Why are you uniquely qualified to run this business?
- What is your product or proposed product?
- What problem or need are you addressing for your customer?
- Who is your customer or target audience?
- How do customers learn about your business or product?

**Tell us about your business here:** (required)

**B** *I* U ☰ ☰ ” ☰

Limit: 1000 words

**Is your organization/company able to provide financial information (audit, P&L statements, budgets, etc.) for your time in operation or up to 3 years?** (required)

- Yes
- No
- I don't know

**What were the gross annual revenues of your food/farm business for the previous year?** (required)

## Technical Assistance

**Have you received Technical Assistance from a Center Technical Assistance Provider (C-TAP)?**  
(required)

- Yes
- No

Please work with your Center Technical Assistance Provider (C-TAP) to acquire a letter of support.  
Learn more about the types of TA that our C-TAPs provide [here](#)

*Figure 4 - If you are applying for the Planning and Development track, uploading a Letter of Support will be required here.*

# Section 3 - Project Information

## Project Title

Provide a descriptive project title in 15 words or less in the space below. (required)

Limit: 15 words

## Pathway

Will this project achieve any of the below strategic goals of the ARFBC? (required)

- Food and Farm Business Development – develop viable food and farm businesses to meet consumer demand, enhance financial stability for farm and food businesses, increase region's food supply.
- Market Access – strengthen existing markets, expand new markets, increase food access for underserved populations, connect value chains.
- Strengthen Processing, Aggregation, Distribution Infrastructure – connect or strengthen existing PAD infrastructure, make infrastructure more accessible to underserved populations, create new infrastructure, enhance food safety.
- My project does not align with any of these goals. (Choosing this response does not disqualify your application.)

## Project Summary

Project Description (required)

Limit: 1000 words

What do you want to do?

- Provide a clear and concise description of the project for which you are seeking funding. Outline the goals and objectives of the project (you'll be asked to do this in more detail below).

### Project Outcomes (required)

**B I U** [List] [List] [Quote] [Link]

Limit: 1000 words

Please list your project outcomes (the changes that you anticipate as a result of your project). Please list up to 5 outcomes.

### Project Impact (required)

**B I U** [List] [List] [Quote] [Link]

Limit: 1000 words

#### How will you know you have been successful?

- Clearly state the anticipated impacts of the project and how success will be measured.
- How will being a recipient of a Business Builder Subaward impact the financial position of your business? How will being a recipient of a Business Builder Subaward impact your projected revenue for the coming year or years? We understand that this is an estimate.
- Describe how your project will impact job opportunities in your community. Will you be creating or retaining year-round jobs or part time/seasonal jobs? How will this award help you retain jobs over time?

### Addressing Community Needs (required)

**B I U** [List] [List] [Quote] [Link]

Limit: 1000 words

#### What needs is this project addressing in your community?

- What barriers do you seek to address through success of the project?
- How are they addressed within the project? How will you continue to address them after the award?
- Specifically include how the project addresses your community's underinvested populations.

Note: "Underinvested Communities" are defined as populations sharing a particular characteristic, as well as geographic communities, that have been systematically denied a full opportunity to participate in aspects of economic, social, and civic life, such as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color; members of religious minorities; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise adversely affected by persistent poverty or inequality.

### Connections, Collaborations & Innovations: (required)

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Limit: 1000 words

**How does your project make connections, foster collaboration, and/or innovate across the food system?**

- How does your project connect value chain actors or infrastructure assets across the regional food system? How do you plan to stay connected beyond this subaward?
- What other businesses or organizations do you see yourself collaborating with on this project if any?
- Does your project create a shared community resource open to other food system actors? If so, please describe the resource and how it will foster community connections.
- Does your project introduce a new product to the market? If so, does this product use a new or innovative manufacturing process?

### Organizational Capacity (required)

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Limit: 1000 words

**What is your business/organization's ability to carry out this project?**

- Describe your business/organization's capabilities, resources, and experience relevant to the project.
- Describe any limitations your business/organization may experience in realizing this project. Are there areas where you may need help achieving the goals you have outlined?

**Which of the following activities or investments will the funds support (select all that apply). (required)**

- Staff Time
- Software Implementation
- Marketing
- Trainings
- Purchase of Equipment (such as food safety, processing and/or packaging equipment)
- Value Chain and Supply Chain Coordination and Innovation
- Other:

## Project Timeline

### Proposed Start and End Dates (required)



	A	B
1	Project Start Date:	
2	Project End Date:	
3		

Please use the following format to enter dates mm/dd/yyyy

Note that projects should end after a maximum of two years from the date of the award or by December 31st, 2027 (whichever comes first)

### Timeline & Work Plan Narrative (required)

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Limit: 1000 words

Please describe a timeline for each planned activity and major outcome. Describe how you'll complete this project, who will be doing the work, and when you anticipate your outcomes being met. Add any contingency plans you may have.

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## Section 4 - Budget Information

### Other Support from Federal or State Grant Programs

Has this applicant submitted for funding to any other Regional Food Business Center's Business Builder Subaward program? (required)

Yes

No

**Has this project been submitted for funding to a Federal or State grant program other than the Business Builder Subaward program?** (required)

- Yes
- No

**Is this project currently receiving funding from any Federal or State grant programs?** (required)

- Yes
- No

**Have you accessed other federal, state, and/or private funding?** [Optional]

- Yes
- No

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## Budget Narrative

The budget must show the total cost for the project and provide a description and justification for each of the relevant category costs listed. The budget justification must provide enough detail to easily understand how costs were determined and how they relate to the **Project Outcomes**. Leave blank any expense category not funded by this project.

Please download the budget narrative [here](#)

Upload the completed budget and answer the following supplemental questions below.

The budget parameters for the Planning & Development track are \$5,000 - \$29,999.99

**Budget Narrative Upload** (required)

Upload a file. No files have been attached yet.

Acceptable file types: .csv, .doc, .docx, .odt, .pdf, .rtf, .txt, .wpd, .wpf, .xls, .xlsx



**Does your budget include Personnel?** (required)

- Yes
- No

**Personnel Justification** (required)

Limit: 500 words

For each individual listed in the table, describe the activities to be completed by name/title including approximately when activities will occur.

*Figure 5- For each "Yes" answer in this section, you will be asked to provide justification for the activity.*

**Does your budget include Fringe Benefits?** (required)

- Yes
- No

**Does your budget include Travel?** (required)

- Yes
- No

**Does your budget include Equipment?** (required)

- Yes
- No

**Does your budget include Supplies?** (required)

- Yes
- No

**Does your budget include Contractual costs?** (required)

- Yes
- No

**Does your budget include Other costs? (required)**

- Yes
- No

**Negotiated Indirect Cost Rate Agreement (NICRA)**

**Choose File**

Upload a file. No files have been attached yet.

Acceptable file types: .csv, .doc, .docx, .odt, .pdf, .rtf, .txt, .wpd, .wpl, .gif, .jpg, .jpeg, .png, .svg, .tif, .tiff

If your organization has a current Negotiated Indirect Cost Rate Agreement (NICRA): you must use the negotiated rate and upload a copy of the agreement to the application portal.

Read more about [NICRA Rates](#).

**Budget Summary (required)**



	A	B
1	Expense Category	Funds Requested
2	Personnel	
3	Fringe benefits	
4	Travel	
5	Equipment	
6	Supplies	
7	Contractual	
8	Other	
9	Direct Costs Subtotal	0
10	Indirect Costs	

Please input the subtotals and totals from the budget narrative spreadsheet. This budget summary should reflect the budget narrative.

# Section 5 - Attestations

I agree to the following:

By checking below, applicant agrees to submission requirements.

- Submit a narrative and financial report at the midpoint of the project timeline.** (required)
- Submit a final progress report, close out report, and respond to any surveys.** (required)
- Equipment purchases over \$5,000.00 are subject to additional requirements at the end of the program period. Refer to the cost guidance and 2 CFR §200.313 for more information.** (required)
- View a pre-award recorded 1-minute video prior to fund disbursement. This video discusses federal cost principles.** [LINK] (required)
- Accept input from Appalachia Regional Food Business Center (ARFBC) Evaluators** (required)
- If requested, be interviewed by ARFBC evaluators within 60 days after the end of the award term.** (required)
- Any recipient will be expected to comply with reporting requirements as required by the USDA and 2 CFR 200. This includes submitting, in cooperation with the Center, a FSRs report if and when total funding in any form or combination, equals or exceeds \$30,000 dollars.** (required)

The [Federal Funding Accountability and Transparency Act \(FFATA\)](#) requires reporting for sub-awards of \$30,000.00 or greater and documentation of this process on a recurring basis. The requirement for FFATA reporting is cumulative. Any entity receiving \$30,000.00 or more from any of the 12 Regional Food Business centers will be required to report funds awarded.

- I have a UEI Number or I will secure one if application is selected for funding.** (required)

The following are assurances of which the applicant must be aware. Please check all that you can confirm.

- I confirm that I have not received a Business Builder subaward exceeding \$100,000 from any other USDA Regional Food Business Center. (required)
- There are no conflicts of interest between the Center and my project/program proposed in this application. (required)
- I have authorization on behalf of my project/program to execute a grant agreement. (required)
- I have not been convicted of fraud in any government run program. (required)
- Neither I nor any of the principals of the organization are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency. (required)

## Authorized Signature

Please type your name below to serve as your electronic signature. By doing so, you are confirming the above information is true and honestly presented. (required)

Limit: 10 words

Save Draft

Submit

✔ Last Saved 6 minutes ago

Drafts may be visible to the administrators of this program.