



AGRICULTURAL SUPPORT AND PROTECTION (ASAP) EMERGENCY MATCHING GRANT PROGRAM APPLICATION

1. **FORMAT:** Applicants must submit their application in either print or electronically.
 - a. Print submission: Submit 1 hard copy application, preferably printed double-sided.
 - b. Electronic submission: Email application to jennifer.kuszmar@sonoma-county.org or mail a USB flashdrive to the address found below.
 - c. Mailing address:
ASAP Emergency Matching Grant Program
Jennifer Kuszmar, Matching Grant Coordinator
Sonoma County Ag + Open Space
747 Mendocino Ave, Suite 100
Santa Rosa, CA 95401
2. **DUE DATE:**
Applications must be submitted (or postmarked if mailing) by October 30, 2020.
3. **QUESTIONS**, contact:
Jennifer Kuszmar, Matching Grant Program Coordinator
707.565.7266 | jennifer.kuszmar@sonoma-county.org



APPLICATION FORM

1. Applicant information:

| | |
|---------|--|
| Name | |
| Address | |
| Phone | |
| Email | |

Project location/address (Must be in Sonoma County)

Assessor's Parcel Number(s)

Acreage

Supervisorial District

General Plan designation

Zoning designation

2. Describe the impacts of the COVID-19 pandemic on the agricultural operation(s) that will be supported by the project, and how the ASAP Emergency Matching Grant Funds will be utilized to support land-based agricultural operations that will sustain the agricultural operation through the expected timeframe of COVID impacts.

(NOTE: Funding will be paid on a reimbursement basis except where up-front payment is necessary. If approved, any up-front payments are limited to 25% of the total grant award. If up-front costs are requested, please describe the need.)

3. Amount of funding request

| Task/Item | Grant Request | Matching Funds |
|--------------|---------------|----------------|
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| TOTAL | \$ | \$ |

4. Summarize the proposed purpose, objectives, and timeline for the proposed project.

5. Describe the anticipated public benefits of the project.

6. To the best of your ability, describe how the agricultural operation will be able to continue to be productive while ASAP funding is used. Please include all anticipated costs (operational conditions) and income sources (other than this grant).

7. Describe the corporate structure of the applicant and the identity of the landowner, if the applicant does not own the land at issue. If the applicant is applying on behalf of landowner(s), please provide documentation affirming the landowner's willingness to participate in this grant program. If the applicant is applying on behalf of lessees, please also supply a copy of all lease documents and a signed affirmation from the landowner(s) that the agricultural tenant(s) is/are in good standing under the lease(s). In lieu of a written affirmation from the landlord(s), the tenant(s) may also give consent to allow Ag + Open Space staff to contact their landlord(s) directly.