

Grant Program #1: Community Arts PPE and Facility COVID-19 Public Health Grant

United Arts of Central Florida

Organization Eligibility

Organization Eligibility Requirements*

- Be Florida registered 501(c)(3) non-profit organizations;
- Have a mission that is specific to the promotion of arts or culture in the Central Florida community;
- Be located and provide programming in Orange County, Florida; **and**
- Be able to demonstrate a direct COVID-19 impact.

Choices

Yes, the applicant organization complies with these requirements

No, the applicant organization is not eligible

Project Name*

Do not include the organization name.

Character Limit: 60

Organization Info & Grant Program Selection

Mission Statement*

Character Limit: 500

Office Location (County / City)*

Choices

- Orange / Apopka
- Orange / Eatonville
- Orange / Lake Buena Vista
- Orange / Maitland
- Orange / Ocoee
- Orange / Orlando
- Orange / Windermere
- Orange / Winter Garden
- Orange / Winter Park
- Orange / Other

Orange County Commission District*

Choices

- District 1 - Betsy VanderLey
- District 2 - Christine Moore
- District 3 - Mayra Uribe
- District 4 - Maribel Gomez Cordero
- District 5 - Emily Bonilla
- District 6 - Victoria P. Siplin

Fiscal Year End Date*

Enter the month in which your fiscal year ends. For example, an organization whose fiscal year is the calendar year would select December; an organization whose fiscal year is Oct - Sept would select September.

Choices

- January
- February
- March
- April
- May
- June
- July
- August
- September
- October
- November
- December

Eligible PPE Expenses:

- Gloves
- Gowns
- Masks
- UV Lighting
- Shoe Covers
- Face Shields
- Hand Sanitizer
- Touchless Hand Sanitizer Dispensers
- Thermometers
- Other COVID-19 screening or safety equipment

Eligible Public Health Facility Improvement Expenses:

- Sneeze guards and plexiglass partitions

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- Social distancing and COVID-19 safety signage
- Touchless payment technology
- Upgrades to existing restroom toilets and sinks from manual to touchless technology
- Improvements to the HVAC air ventilation and filtration systems to meet COVID-19 requirements
- The difference between enhanced cleaning and sanitation expenses related to COVID-19 and the facility's standard cleaning expenses
- Hourly personnel expenses for additional personnel required to meet COVID-19 social distancing requirements (cannot include already budgeted personnel expenses)

Indicate which type of funding you intend to apply for:*

See guidelines for additional requirements/exclusions.

Choices

Personal Protective Equipment (PPE)

Public Health Facility Improvements

Both

PPE

Eligible PPE Expenses:

- Gloves
- Gowns
- Masks
- UV Lighting
- Shoe Covers
- Face Shields
- Hand Sanitizer
- Touchless Hand Sanitizer Dispensers
- Thermometers
- Labor costs for installation (does not include staff, contracted labor only) for any of the above eligible expenses
- Other COVID-19 screening or safety equipment

PPE Type*

Choices

Reimbursement (March 1 - October 26, 2020)

New Purchase(s) (after October 26 - December 15, 2020)

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Both

PPE - Reimbursement

UPLOAD: PPE Receipts/Proof of Payment*

Upload itemized receipts or proof of payment with clear descriptions for PPE purchased between March 1, 2020 - October 26, 2020.

If a receipt does not clearly identify any items, you must provide documentation from the store or vendor to identify those items.

Upload as a PDF.

If multiple items are included, provide a listing of the items in the text box using this format:
DATE - VENDOR - ITEM DESCRIPTION - QUANTITY - TOTAL COST

Character Limit: 5000 | File Size Limit: 3 MB

Total PPE Reimbursement Expenses*

Character Limit: 20

PPE - New Purchase(s)

- Have all PPE purchases completed and documentation provided by December 26, 2020. **Due to restrictions on the federal funding, any purchases that are not completed prior to December 26, 2020 shall not be eligible for funding even if such purchases had been initially approved for funding by the County or United Arts of Central Florida. Applicants applying for such improvements do so at their own risk.**
- As part of the County's push to reimburse agencies and businesses for PPE costs as part of its general COVID-19 public health initiative, all Arts Organizations are eligible for reasonable reimbursement for PPE expenses.
- To ensure competitive pricing, applicants for PPE expenses must provide three bids for each unique item that is: (1) purchased after October 26, 2020; and (2) in excess of \$10,000.
 - Note: a purchase of multiple items can exceed \$10K without requiring three bids

UPLOAD: Quote/Price Estimate (New purchases under \$10K)

Upload as PDF. If multiple items are included, provide a listing of the items in the text box using this format:

DATE - VENDOR - ITEM DESCRIPTION - QUANTITY - TOTAL COST

Character Limit: 3000 | File Size Limit: 2 MB

UPLOAD: Bid 1 (Preferred)

Upload preferred bid(s) here and provide an explanation for why this bid(s) was chosen.

For multiple items over \$10K that require bids, upload all preferred bids in a single PDF.

Character Limit: 1000 | File Size Limit: 2 MB

UPLOAD: Bid 2

Upload second bid(s).

Character Limit: 1000 | File Size Limit: 1 MB

UPLOAD: Bid 3

Upload third bid(s).

Character Limit: 1000 | File Size Limit: 1 MB

Total PPE New Purchase Expenses*

Character Limit: 20

Public Health Facility Improvements**Eligible Public Health Facility Improvement Expenses:**

- Sneeze guards and plexiglass partitions
- Social distancing and COVID-19 safety signage
- Touchless payment technology
- Upgrades to existing restroom toilets and sinks from manual to touchless technology
- Improvements to the HVAC air ventilation and filtration systems to meet COVID-19 requirements
- Labor costs for installation (does not include staff, contracted labor only) for any of the above eligible expenses
- The difference between enhanced cleaning and sanitation expenses related to COVID-19 and the facility's standard cleaning expenses
- Hourly personnel expenses for additional personnel required to meet COVID-19 social distancing requirements (cannot include already budgeted personnel expenses)

Upgrades to existing restroom toilets and sinks - Additional Detail Required:

- Provide confirmation from vendor if retrofitting existing toilets or sinks is not possible, in order for replacement to be eligible.

Enhanced Cleaning - Additional Detail Required:

- Copy of cleaning expenses from a comparable period in the prior year

Additional Personnel - Additional Detail Required:

- Number of additional personnel, hourly rate, number of hours/days worked, and total expense (must be COVID-related, new personnel)

For Cleaning and Personnel expenses, explain your calculation for the difference between the additional COVID-related expenses and your regular staffing and/or cleaning expenses (from a pre-COVID period).

Public Health Facility Improvements - Additional Qualifications:

- Have a facility that was open to the public at the time the expenses were or will be made; or demonstrate that it has made, or will make, such expenses in order to open its facility to the public prior to December 30, 2020.
- Either own or have a long-term exclusive lease for the facility in question. If a long-term lease is held, such lease must have been entered into prior to March 1, 2020 and the landlord must approve of any permanent improvements to the facility.
- Have made, or will make, activities and performances available to the public prior to December 30, 2020 by use of such facility.
- Have all facility improvements completed prior to December 30, 2020. **Due to restrictions on the federal funding, any improvements that are not completed prior to December 30, 2020 shall not be eligible for funding even if such improvements had been initially approved for funding by the County or United Arts of Central Florida. Applicants applying for such improvements do so at their own risk.**

UPLOAD: Long-Term Facility Lease or Proof of Ownership*

File Size Limit: 3 MB

UPLOAD: Owner/Lessor Approval*

Upload documentation of landlord approval of any permanent improvements to the facility.

If the lease states that the CEO/President is allowed to approve permanent facility improvements, indicate below where this is stated in the lease.

Character Limit: 1000 | File Size Limit: 1 MB

Public Health Facility Improvements - Type*

Choices

Reimbursement (March 1 - October 26, 2020)

New Purchase(s) (after October 26 - November 30, 2020)

Both

Public Health Facility Improvements - Reimbursement

UPLOAD: Public Health Facility Improvements Receipts/Proof of Payment*

Upload receipts/proof of payment for facility improvements purchased and installed between March 1, 2020 - October 26, 2020.

Upload as PDF. For multiple items, list them below using the following format (label the upload to correspond with this listing):

1. DATE - VENDOR - DESCRIPTION - QUANTITY - TOTAL COST

Character Limit: 3000 | File Size Limit: 3 MB

UPLOAD: Permit and Safety Plan for Facility Improvement

Upload permit and safety plan for any significant facility improvements that required permitting.

Review Orange County Special Event Permit Requirements during COVID-19 prior to uploading.

Character Limit: 1000 | File Size Limit: 1 MB

Total Public Health Facility Improvement Reimbursement Expenses*

Character Limit: 20

Public Health Facility Improvements - New Purchase(s)

- To ensure competitive pricing, applicants for Public Health Facility Improvement expenses must provide three bids for each unique item that is: (1) purchased after October 26, 2020; and (2) in excess of \$10,000.
 - o Note: a purchase of multiple items can exceed \$10K without requiring three bids

UPLOAD: Quote/Price Estimate (New purchases under \$10K)

Upload as PDF. If multiple items are included, provide a listing of the items in the text box using this format:

DATE - VENDOR - ITEM DESCRIPTION - QUANTITY - TOTAL COST

Character Limit: 3000 | File Size Limit: 2 MB

UPLOAD: Bid 1 (Preferred)

Upload preferred bid(s) here and provide an explanation for why this bid(s) was chosen.

For multiple items over \$10K that require bids, upload all preferred bids in a single PDF.

Character Limit: 2500 | File Size Limit: 1 MB

UPLOAD: Bid 2

Upload second bid(s).

Character Limit: 1000 | File Size Limit: 1 MB

UPLOAD: Bid 3

Upload third bid(s).

Character Limit: 1000 | File Size Limit: 1 MB

UPLOAD: Permit and Safety Plan for Facility Improvement

Upload permit and safety plan for any significant facility improvements that required permitting.

Review Orange County Special Event Permit Requirements during COVID-19 prior to uploading.

Any art groups residing in City of Orlando, and who need permits as part of this program, are encouraged to email their permit applications directly to Ms. Lillian Scott-Payne, so that her department can be aware of and track the permits.

Lillian Scott-Payne, Division Manager,
Permitting Services Division
Economic Development Department
City of Orlando
400 South Orange Avenue
Orlando, FL 32801
p. 407.246.3648 | c. 321.200.9648
e. lillian.scottpayne@cityoforlando.net

Character Limit: 1000 | File Size Limit: 1 MB

Total Public Health Facility Improvement New Purchase Expenses*

Character Limit: 20

Program Info & Request Amount

Facility/Programming Status*

1. Is your facility or in-person programming currently open for public attendance?
2. If these expenses allowed you to reopen, list when your facility opened or in-person programming was held.
3. If these expenses will allow you to reopen, list when your facility will be open or in-person programming will be held.

Character Limit: 3000

Project Description*

1. Describe the impact that COVID has had on your organization.
2. Summarize how you will implement the PPE and/or facility improvements to safely reopen to the public.
3. Provide a brief summary of your activities and performances available to the public (prior to December 30, 2020) and include the following information:
 - Location(s)
 - Date(s)
 - Projected (or actual) attendance
 - Number of paid staff or artists
 - Admission cost

Character Limit: 5000

Project Location (Venue)*

Include the exact venue (building name/address)

Character Limit: 250

Total Request Amount*

Requests may be partially funded.

Character Limit: 20

Contacts & Signature

UPLOAD FORMS: IRS Determination Letter, Form W-9, and ACH Form*

ALL APPLICANTS: must upload IRS Determination Letter.

NEW APPLICANTS TO UNITED ARTS' GRANT PROGRAMS: must complete and upload both IRS Form W-9 and ACH form, along with a copy of a voided check, in order to receive payments.

File Size Limit: 1 MB

UPLOAD: Certificate of Insurance (COI)*

Insurance requirements:

- Commercial General Liability
 - Limit of liability - not less than \$500,000 per occurrence
 - Both United Arts of Central Florida and Orange County Board of County Commissioners must be listed as additional insured
- Workers' Compensation / Employer's Liability
 - Limit of liability - no less than \$100,000 each incident of bodily injury or disease
 - Only required for organizations with four or more employees

For all COI's, United Arts of Central Florida must be listed as certificate holder:

United Arts of Central Florida
 Attention: Grants Department
 216 Pasadena Place
 Orlando, FL 32803
Email: CARES@UnitedArts.cc
 Fax: 407.628.9110

In addition to the required insurance policies above, United Arts also *recommends* that grantees secure Commercial Auto Liability (recommended \$500,000), Employee Dishonesty/Crime (\$10,000), and Directors & Officers.

Character Limit: 1000 | File Size Limit: 1 MB

Indemnity*

The grantee shall defend, indemnify, and hold harmless United Arts of Central Florida from and against any and all liability, claims, demands, damages, losses, expenses, fees, fines, penalties, suits, proceedings, actions and cost of actions, including reasonable attorneys' fees and costs, of any kind and nature arising or growing out of or in any way connected with the performance of this agreement.

Choices

I understand and agree.

Primary Contact*

Name - Title - Email - Phone

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Character Limit: 250

Alternate Contact(s)

Name - Title - Email - Phone

Character Limit: 1000

Signature of Primary Contact (Type Name)*

Must be Executive Director or Equivalent of the producing organization. By typing your name here, you certify that the producing organization is committed to completing the activities proposed in this application in compliance with any applicable laws, and that all materials in this application are true and complete to the best of your knowledge. You also certify that you have read the guidelines and that your project fits the requirements. Note: digital signatures cannot be uploaded in this field; you must type your name.

Character Limit: 250