



Wake County Alcoholic Beverage Control Board 2019 Grant Application

1212 Wicker Drive | Raleigh, NC 27604 | 919.832.2726 | WakeABC.com

The Wake County Alcoholic Beverage Control (ABC) Board has set a goal of providing supplemental funding (per North Carolina General Statute 18B-805(H)) to qualifying Wake County organizations and government agencies for programs and services involved in the treatment, research, or education of alcoholism or substance abuse.

WHO QUALIFIES?

Grants will be made only to non-profit, tax exempt, charitable, or government organizations. Such organizations must be exempt under Section 501(c)(3) of the Federal Internal Revenue code or are government entities such as the State of North Carolina, Wake County, or municipalities within Wake County.

WHAT ARE THE CRITERIA?

- Funding is only available for the programs and services of treatment, research, or education of alcoholism or substance abuse per NCGS 18B-805(H)
- Funding is restricted to programs and services for only Wake County residents
- Grants applications can be for one-time or re-occurring programs and services
- Applicants are encouraged to seek a supplemental and/or matching funding at least equal to or more than the requested grant. Matching support must be received within the same fiscal year as approved funding by the Wake County ABC. Documentation verifying such funds may be requested.
- All grant funding must be spent or encumbered prior to June 30 of the Wake County ABC fiscal year. The Wake County ABC General Manager reserves the right to extend such deadlines upon justified requests.
- Applicants who do not meet reporting guidelines may be excluded from future funding

WHAT IS THE TIME LINE FOR THE GRANT PROCESS?

1. *Application submittal:* Grant applications must be submitted between July 1 and September 3 at the close of business.
2. *Site Visits:* Before the application is considered by the Wake County ABC Board, site visits will be periodically conducted to verify compliance with the grant criteria. Such visits may or may not be announced.
3. *Wake County ABC Board consideration:* Applicants will be notified by Wake County ABC General Manager of when the application will be heard by the Board. Attendance is recommended and presentations should be limited to 15 minutes.
4. *Notification of consideration:* Applicants will be notified in writing of funding approval or denial.
5. *Disbursement:* When awarded, grant funds will be distributed within thirty (30) business days.
6. *Progress Report:* If your project has been funded by Wake County ABC in the past, a Progress Report Form must be submitted before this grant application is considered. Failure to submit this form could potentially disqualify the organization from future funding. Announced and unannounced site visits may also take place after a grant is awarded.

How do I make an application?

Attached are the application data and checklist for all supplemental documentation required for submittal and consideration. Please submit eight (8) complete copies of all materials to the address listed below. Please direct any questions to Wake County ABC's General Manager Ike Wheeler at 919.832.2726.

**Wake County ABC Board
Attn: General Manager Ike Wheeler
1212 Wicker Drive / Raleigh, NC 27604**

**Wake County Alcoholic Beverage Control
2019 Grant Applications**

Please submit paperwork supplying the following information. List out each "Section" and "Question Number" when supplying the requested information and in the order listed below. Please follow any guidelines is maximum character limits are mentioned.

SECTION A: GENERAL INFORMATION

1. Project title
2. Is this a "new project" or an "on-going project" that has been funded by Wake County ABC in the past
3. Organization's name
4. Physical Address
5. Phone
6. Organization's website address
7. Grant application contact's name
8. Grant application contact's title
9. Grant application contact's email address
10. Brief summary about your organization, history, and mission (no more than 200 words)
11. Brief summary about his proposed project (no more than 200 words)
12. Total project budget
13. Amount requested from Wake County ABC

SECTION B: PROJECT JUSTIFICATION

Within 1,000 words, please justify your project by giving a summary explaining the following.

14. What specific need or problem does your project address with the treatment, research, and/or education of alcoholism or substance abuse?
15. How will your project address the need or problem?
16. What population or demographic is your project designed to serve?
17. Why and how is this target population or demographic at risk to alcohol or substance abuse?
18. How will the target population or demographic benefit from your project?
19. What is the strategy to reach this target population?
20. What other partnering organizations will be involved in this project?

SECTION C: PROJECT MANAGEMENT AND IMPLEMENTATION

21. Within a 1,000 words, please provide a timeline to demonstrate how this project will be implemented. The timeline should include specific steps, key staff, volunteer involvement, as well as collaborative partner involvement in each step. The names and qualifications of the key staff, volunteers, and partners would be beneficial.

SECTION D: PROJECT EVALUATION AND BENCHMARKING

22. Within a 1,000 words, please list what methods you will use to evaluate your project's impact on alcohol and substance abuse. Include how the impact will be measured including goals, strategies, and measurements.

SECTION E: PROJECT SUSTAINABILITY

23. Within a 1,000 words, please explain how your Organization will support this project into future years if it were to continue. List any additional resources that may be needed to support this project and the plans for acquiring and procuring them.

SECTION F: PROJECT BUDGET

Supply the following detailed information involving the budget for your organization.

- 24. List all sources of Revenue you are already receiving or plan to receive for this project. This should include any other grants sources from organizations. Please give the source and monetary total
- 25. Please list the staff members, their title, and salary involving this project. This is to include any at-will, contract, or consulting staff members
- 26. Please list all of the office and facility locations your organization has that are located in Wake County as well as the associated lease costs
- 27. Please list any educational materials and their associated costs which will be used with this project
- 28. Please list any supplies/printing/postage costs which will be used with this project
- 29. Please list any other project expenditures and their associated costs unrelated to categories above
- 30. Please give the grand total revenues estimated with the project
- 31. Please give the grand total expenditures estimated with the project

SECTION G: SUPPORTING DOCUMENTATION

Please include the following supplemental materials along with your application. Please label each as listed below.

- 32. Attachment A: Current fiscal budget
- 33. Attachment B: Previous fiscal budget
- 34. Attachment C: Most recent financial audit report
- 35. Attachment D: IRS documentation verifying tax exempt status if you are not a governmental agency
- 36. Attachment E: List of the current Board of Directors noting their general occupation and responsibilities
- 37. Attachment F: Letters of support (no more than three)

SECTION H: AUTHORIZATION

- 38. In your organization’s application. Please include the following text and signature lines listed below in *italics*.

By signing below, I attest that all information in this application is true to the best of my knowledge. I understand the parameters for any grant money awarded must adhere to North Carolina General Statute 18B-805(H). If it is found that such regulations are not followed, the Wake County ABC System reserves the right to require payback of any monies awarded as well disqualification of future funding.

Signature

Date

Printed name

Title