

Sample Capital Projects Fund (CPF) Application for Tribal Governments

*****Please note that this PDF is for reference only*****

All applications must be submitted using the online portal found at <https://treasury.gov/CPF>

TAB 1: User Instructions for Tribal Governments

The Capital Projects Fund application consists of five sections:

1. User Instructions
2. Applicant Information
3. Banking Information
4. Award Information
5. Certification and Submission

Section 1 (User Instructions) provides instructions and background information.

Section 2 (Applicant Information) and Section 3 (Banking Information) collects administrative data regarding applicant name, contact information, and banking information.

Section 4 (Award Information) provides the opportunity to indicate the amount of funding the Applicant would like to receive, and the proposed use(s) for CPF funds.

Section 5 (Certification and Submission) provides the opportunity to upload documentation necessary for application completion, certification, and funding receipt. At the conclusion of the application, applicants will sign a grant agreement.

After completing a section, you must click the NEXT button at the bottom right corner of the screen to save your responses and advance to the next section.

At any time, you may click the SAVE INFORMATION button on the bottom left corner of the screen to save an application in progress. Once an in-progress application is saved, you may return to it later to complete or change it before the application deadline. Once you have saved the appropriate information and attachments in the application, you may submit it using the SUBMIT button in Section 5. All applications must be completed and submitted by June 1, 2022, and must be accompanied by a signed certification.

To submit this application, please provide the information requested in each section, upload the required documentation, and click the SUBMIT button ***on the CPF online portal***. You will receive an email confirming your submission. If you do not receive an email upon submission or if you have other application questions, please review resources at <https://treasury.gov/CPF> or contact the CPF team at CapitalProjectsFund@treasury.gov.

TAB 2: Applicant Information

Section 2.1 – Designation of Authorized Official

Please provide the following information about the applying entity and related personnel.

Authorized Tribal official: *This is the individual within the Tribal government with the authority to represent the Tribal government when entering into an agreement with the United States government for Treasury’s Capital Projects Fund.*

Authorized representative: *This is the individual who will certify the application and sign the Grant Agreement on behalf of the Tribal government. An authorized representative must either be authorized to act and enter into binding agreements on behalf of the Tribal government (Option 1) or be granted the authority to do so by the authorized Tribal official (Option 2).*

Please select one of the following options about who will serve as the authorized representative to certify this application and sign the Grant Agreement:

Option 1: Check this box if the authorized Tribal official of your Tribal government will act as the authorized representative to certify this application and sign any related documentation and attestations, including the Grant Agreement (this option is most likely when a Tribal government **is not applying jointly** with another Tribal government, such as through a Tribal consortium).

OR

Option 2: Check this box if an individual **other than the authorized Tribal official** of your Tribal government will certify this application and sign any related documentation and attestations, including the Grant Agreement (this option is most likely when a Tribal government **is applying jointly** with another Tribal government, such as through a Tribal consortium, to apply for and manage CPF funding on their behalf).

Section 2.3 of this application will ask for the name of and other information about the authorized representative.

Are you a Tribal consortium, Tribal organization, or similar entity applying on behalf of one or more Tribal governments? (If you select “Yes” to this question, you should check Option 2 in the section above.)

[Yes/No]

Are you a Tribal government applying on behalf of yourself AND one or more other Tribal governments?

[Yes/No]

If you selected Option 2 and/or answered “Yes” to either of the two questions above, you will need to submit a **letter, signed by the authorized Tribal official of your Tribal government, designating an authorized representative** who will be performing these tasks on behalf of the recipient. Please upload this letter under Section 5 of this application. All designation letters must be received by the application due date of June 1, 2022. If the designation letter is not received by June 1, 2022, the Applicant’s grant award may be forfeited.

Section 2.2 – Applicant Information

The Applicant is the entity that is eligible for CPF grant funds. In this section you should provide the business address and related information pertaining to the Tribal government currently applying and authorizing the application. You will enter contact information for the primary point of contact on the following tabs if it is different.

If Consortium applicant, provide the name of the Tribal Consortium applying on behalf of the eligible Tribal government(s).

- **Tribal Consortium Name**
- **Applicant’s ID Number (9 Digits)**
- **Applicant’s DUNS Number (9 Digits)**
- **Applicant Street Address**
- **Applicant City**
- **Applicant State/Territory**
- **Applicant Postal Code (5 Digits)**
- **Applicant Post Code (+4 Digits)**

If applicant is not a consortium, provide applicant name.

- **Applicant Name**
- **Applicant’s ID Number (9 Digits)**
- **Applicant’s DUNS Number (9 Digits)**
- **Applicant Street Address**
- **Applicant City**
- **Applicant State/Territory**
- **Applicant Postal Code (5 Digits)**
- **Applicant Post Code (+4 Digits)**

Section 2.3 – Authorized Individual Information

The authorized representative is the individual who will sign the necessary certifications, submit the Application, and sign the Grant Agreement on behalf of the Eligible Applicant. The authorized representative must be authorized to act and enter into binding agreements on behalf of the Applicant either by law, by virtue of the title and position held by the individual, or through a designation letter that will be provided in Section 5 of this Application.

- **First Name of Authorized Representative for the Government Entity**
- **Last Name of Authorized Representative for the Government Entity**
- **Authorized Representative Title**
- **Authorized Representative Organization**
- **Authorized Representative Phone**
- **Authorized Representative Email**
- **Authorized Individual Street Address**
- **Authorized Individual City**
- **Authorized Individual State/Territory**
- **Authorized Individual Postal Code (5 Digits)**

- **Authorized Individual Postal Code (+4 Digits)**

Section 2.4 – Primary Contact Information

Please provide primary contact information below. The primary contact person will be contacted with relevant application information; only this individual will receive program updates and application information. You will also have the option to add three additional email addresses to receive program notifications; additional email addresses are not required.

- **Primary Point of Contact First Name**
- **Primary Point of Contact Last Name**
- **Primary Point of Contact Title**
- **Primary Point of Contact Phone**
- **Primary Point of Contact Email**
- **Additional POC Email**
- **Additional POC 2 Email**
- **Additional POC Email**

Section 2.5 – Additional Eligible Entities

This section allows the applicant to list additional tribal entities that are linked to this application and eligible for CPF grant funds. This information should be added for each additional tribal entity that is linked to this application.

- **Applicant Name**
- **Applicant's ID Number (9 Digits)**
- **Applicant's DUNS Number (9 Digits)**
- **Applicant Street Address**
- **Applicant City**
- **Applicant State/Territory**
- **Applicant Postal Code (5 Digits)**
- **Applicant Post Code (+4 Digits)**

TAB 3: Banking Information

Please provide the following information necessary for Treasury to send your Capital Projects Fund payments. If an alternative method is required, please contact the CPF team at Treasury at CapitalProjectsFund@treasury.gov

- **Routing Transit Number (ACH)**
- **Confirm Routing Transit Number (ACH)**
- **Account Number**
- **Confirm Account Number**
- **Financial Institution Name**
- **Financial Institution Address**
- **Financial Institution Phone**

Is this a checking or savings account?

[Checking/Savings]

TAB 4: Award Information

You may select to receive up to the full amount allocated to you by the statutory formula, which is displayed below. Your claim is the awardable amount that you will receive if you meet the CPF requirements. You may reduce your claim at any time during the period of performance, but you may not increase your award above what you initially request on this form. Generally, your CPF claim should be equal to the CPF allocation; unclaimed funds may be forfeited. Please indicate the awardable amount you wish to receive.

CPF Allocation: *Auto-populates based on calculations.*

Do you wish to receive the full CPF allocation amount?

[Yes/No]

If no, CPF Funds – Enter Awardable Amount

[Insert claim amount]

Have you determined how you are going to use CPF grant funds?

[Yes/No]

If you need additional time, please save this application and return when you can provide the details of how the CPF grant funds will be used. You will not be able to complete the application until you can provide your plans on how you intend to use CPF grant funds.

Eligible Uses

CPF Funds may only be used for eligible uses set forth in Treasury's Guidance document (visit: <https://www.treasury.gov/CPF>). Please check the box next to each of the following uses for which CPF Funds will be used. Applications involving other than presumptively eligible uses will be subject to a case-by-case review, which may add time to the Application review process and may delay payment.

Presumptively Eligible Uses

- Purchasing devices to be owned by the Applicant and utilized by or distributed to households, businesses, or other organizations to facilitate internet access.**
- Purchasing digital connectivity technologies (e.g., public wi-fi) to be owned by the Applicant.**
- Installation or enhancement of broadband infrastructure meeting minimum service standards.**
- Projects to Construct or improve buildings that are designed to jointly directly enable work, education, and health monitoring.**

Non-Presumptively Eligible Use

- If this option is selected, Treasury will review the proposed eligible use on a case-by-case basis and may request additional information – case-by-case reviews may add time to the Application review process. Please refer to Treasury’s Guidance for information on eligible uses.**

For each presumptively eligible use that you select, we ask that you provide a short response explaining how the funds will be used in alignment with the Guidance (note: you can preview the questions that must be answered to provide further explanation for each eligible use below).

- Purchasing devices to be owned by the Applicant and utilized by or distributed to households, businesses, or other organizations to facilitate internet access.**

(If the applicant said yes to the above selection, then the following fields are required:)

- **Please describe the device purchase and distribution plans, if known. Limit responses to 1-3 sentences.**

[Short response, 1-3 sentences]

- **Will the device be used to connect to broadband internet?**

[Yes/No]

- **Has affordability been identified as a barrier to access to the internet?**

[Yes/No]

- **Will this address critical need(s) within the community?**

[Yes/No]

- **Will funds be used solely to purchase equipment deemed eligible in the Guidance (e.g., equipment and devices necessary for public Wi-Fi infrastructure development)?**

[Yes/No]

- **Will ownership of the equipment be maintained by the Applicant or a subrecipient?**

[Yes/No]

- **Will CPF grant funds be used to cover costs incurred after March 15, 2021, but prior to execution of the Grant Agreement?**

[Yes/No]

- **If you answered “No” to any of the above, please explain below in 1-2 sentences.**

[Short response, 1-2 sentences]

✓ **Purchasing digital connectivity technologies (e.g., public Wi-Fi) to be owned by the Applicant.**
(If the applicant said yes to the above selection, then the following fields are required:)

- **Please describe the equipment purchase and distribution plans, if known. Limit responses to 1-3 sentences.**

[Short response, 1-3 sentences]

- **Will the equipment be used to connect to broadband internet?**

[Yes/No]

- **Has affordability been identified as a barrier to access to the internet?**

[Yes/No]

- **Will this address critical need(s) within the community?**

[Yes/No]

- **Will funds be used solely to purchase equipment deemed eligible by the Guidance (e.g., equipment and devices necessary for public Wi-Fi infrastructure development)?**

[Yes/No]

- **Will CPF grant funds be used to cover costs incurred after March 15, 2021, but prior to execution of the Grant Agreement?**

[Yes/No]

- **If you answered “No” to any of the above, please explain below in 1-2 sentences.**

[Short response, 1-2 sentences]

✓ **Installation or enhancement of broadband infrastructure meeting minimum service standards.**
(If the applicant said yes to the above selection, then the following fields are required:)

- **Please describe the use of these funds. Limit responses to 1-3 sentences.**

[Short response, 1-3 sentences]

- **Will this project reliably deliver speeds of 100/100 or higher?**

[Yes/No]

- **If not, will this project reliably deliver speeds of 100/20 and be scalable to speeds of 100/100?**

[Yes/No]

- **If not, describe the conditions that make the above speed standards impracticable to implement. Limit responses to 1-3 sentences.**

[Short response, 1-3 sentences]

- **Will the broadband service offered as a result of this project accept federal broadband subsidies as required by Treasury?**

[Yes/No]

- **Supplementing another federal government broadband support program?**

[Yes/No]

- **If yes, CPF grant funds will be used to supplement another federal government broadband support program, please select which other federal government broadband program(s) that will also be funding this project:**

- Coronavirus State and Local Fiscal Recovery Funds**
- NTIA Tribal Broadband Connectivity Program**
- USDA ReConnect Program**
- Other Program(s)**

- **If Other, Please enter program name(s) below.**

[List other federal government broadband program names]

- **Provide grant identifier (i.e., award number, etc.)**

[List grant identifiers for selected federal government broadband programs]

- **Provide contact information for the aforementioned grant(s).**

[List contact information for selected federal government broadband programs]

- **Please describe what is being funded by the existing federal grant(s). Limit responses to 1-3 sentences.**

[Short response, 1-3 sentences]

- **Will CPF grant funds be used to cover costs incurred after March 15, 2021, but prior to execution of the Grant Agreement?**

[Yes/No]

- **If you answered “No” to any of the above, please explain below in 1-2 sentences.**

[Short response, 1-2 sentences]

- ✓ **Projects to construct or improve buildings that are designed to jointly directly enable work, education, and health monitoring.**

(If the applicant said yes to the above selection, then the following fields are required:)

- **Please describe the use of these funds. Limit responses to 1-3 sentences.**

[Short response, 1-3 sentences]

- **How will the program directly enable work? Limit responses to 1-3 sentences.**

[Short response, 1-3 sentences]

- **How will the program directly enable education? Limit responses to 1-3 sentences.**

[Short response, 1-3 sentences]

- **How will the program directly enable health monitoring? Limit responses to 1-3 sentences.**

[Short response, 1-3 sentences]

- **Will CPF grant funds be used to cover costs incurred after March 15, 2021, but prior to execution of the Grant Agreement?**

[Yes/No]

- ✓ **Non-Presumptively Eligible Uses**

If this option is selected, Treasury will review the proposed eligible use on a case-by-case basis and may request additional information – case-by-case reviews may add time to the Application review process. Please refer to Treasury’s Guidance for information on eligible uses.

(If the applicant said yes to the above selection, then the following fields are required:)

- **Please describe the proposed use of CPF Funds.**

[Short response]

- **Will CPF grant funds be used to cover costs incurred after March 15, 2021, but prior to execution of the Grant Agreement?**

[Yes/No]

TAB 5: Certification and Submission

Additional Files

Optional: If you have any additional files you would like to provide for Treasury's consideration, please upload them here.

Application Certification

Is the identified authorized representative planning to sign/certify a digital or physical document?

[Digital/Physical]

An authorized representative with authority to legally bind the applicant (entered in Tab 4) must certify your application using a DocuSign electronic signature.

After you click the CHECK FOR ERRORS AND SUBMIT APPLICATION button below, the system will check for validation errors and send an email with a DocuSign link to sign an application certification. The application is not complete or submitted unless the certification is signed. If the system identifies validation errors, you will be returned to this page and will not be able to move forward until the errors are addressed. For application assistance, you may contact the CPF Program via phone at 844-529-9527 and via email at CapitalProjectsFund@treasury.gov

At a later date, Treasury will send CPF Agreement documents for the authorized representative to sign. An agreement must be signed for each eligible applicant. You, the identified points of contact, and the authorized representative will be notified when the agreements have been sent for signature.