



Kane County Unit of Government Application for Coronavirus Relief Funds

In order to request reimbursement relief funding from the County of Kane pursuant to the Coronavirus Aid, Relief, and Economic Security Act (“CARES Act”), this application must be submitted in the form and manner as described herein and include all required attachments listed on page 2. Questions regarding Kane County’s COVID-19 funding process and/or the application process should be submitted via email to CRF@co.kane.il.us. Completed applications and required attachments must be submitted at the website located at <https://www.countyofkane.org/crf> by the following deadline: **September 4, 2020 at 5:00 p.m. CST**. Applications and documents will be secured and accessible only to County of Kane, the Kane County State’s Attorney’s Office, and Kerber, Eck & Braeckel LLP (KEB). Please note that incomplete applications may cause a delay in processing.

General Information		
Organization Name	Name of Requesting Official	Submission Date
Request Description and Background Information		
Explain the type of expenditure and <i>what</i> the expenditure has been or will be utilized for (personnel, commodities, materials, projects, contracted services, etc.):		

Indicate the total amount requested (project specific and date specific to the extent possible):

Are any requested funds expected to be expended after December 30, 2020?

Y / N

If expenditures are FEMA-eligible, has applicant already requested FEMA reimbursement for such expenditures? If so, please provide Applicant #, award letter and any other documentation verifying the FEMA award. If not, why not?
Please explain:

Y / N

For questions about eligible expenses, please see Department of the Treasury [Coronavirus Relief Fund Frequently Asked Questions](#), copy available upon request

Required Attachments to the Application

- Attachment A – Coronavirus Relief Fund Project Budget and Narrative for eligible costs already incurred between March 1, 2020 and August 31, 2020
- Attachment B – Coronavirus Relief Fund Project Budget and Narrative for eligible costs anticipated between September 1, 2020 and December 30, 2020
- Your organization’s most recently approved total budget as of March 27, 2020 and any subsequently approved total budget or modifications for expenses through December 30, 2020
- Copy of your most recent annual financial statement as audited by a registered CPA

Note: All forms are available for download at <https://www.countyofkane.org/crf>

Note: Once the Application and Budget are approved and an Intergovernmental Agreement reached, then your organization will be instructed on how to submit eligible expenses for reimbursement with required supporting documentation.

Certification and Signatures

1. The undersigned hereby certify that they have the authority and approval from the governing body on behalf of the applying municipality to submit this application and request reimbursement from Kane County from the allocation of the Coronavirus Relief Fund provided to Kane County for eligible expenditures.
2. I understand that should this application be approved, an Intergovernmental and Recipient Agreement will need to be executed between the parties.
3. I understand Kane County will rely on this certification as a material representation in reviewing and potentially approving this application.
4. I certify the use of funds submitted in this application for reimbursement from the Coronavirus Relief Funds were or will be used only to cover those costs that:
 - a. Are *necessary expenditures* incurred due to the public health emergency with respect to the Coronavirus Disease 2019 (COVID-19);
 - b. Were not accounted for in the budget most recently approved as of March 27, 2020; and
 - c. Were incurred during the period that begins on March 1, 2020, and ends on December 30, 2020.
5. I understand that eligible expenses which will be reimbursed by Kane County to Applicant are not considered grants but are “other financial assistance” under 2 CFR 200.40 and must comply with provisions of 2 CFR 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.
6. I certify that the Coronavirus Relief Funds received from Kane County will be utilized to supplement rather than supplant funds otherwise available to the Applicant for the same purpose.
7. I further certify that no other Federal funds have been received to cover the same costs that will be reimbursed with the Coronavirus Relief Funds provided by Kane County.
8. I acknowledge that any allocation to NAME OF MUNICIPALITY is based upon the 2019 population data published by the United States Department of the Census.
9. I understand any award of funds pursuant to this application must adhere to official federal guidance issued or to be issued on what constitutes a necessary expenditure. We have reviewed the guidance established by U.S. Department of the Treasury and certify costs meet the required guidance. Any funds expended by the Applicant or its subcontractor(s) in any manner that does not adhere to official federal guidance shall be returned to Kane County.

10. I understand any funds provided pursuant to this application and certification cannot be used as a revenue replacement for lower than expected tax or other revenue collections.

11. I understand funds received pursuant to this application and certification cannot be used for expenditures for which the Applicant has received any other emergency COVID-19 supplemental funding (whether state, federal or private in nature) for that same expense.

I certify that I have read the above certification and my statements contained herein as well as the application are true and correct to the best of my knowledge.

Authorized Representative (signature)

Authorized Representative (printed name)

Title

Date