

**ARC FORM 3: Application for Non-Construction Projects
 NON-CONSTRUCTION PROJECT APPLICATION**

ARC Project Control No.: _____ (assigned by ARC Washington Office)

Send three copies of project application to State ARC Office.

1. IDENTIFICATION

Project Title	Location	State
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2. ARC Goal Area (check appropriate letter)

- A. Education
- B. Infrastructure
- C. Leadership
- D. Economy
- E. Health
- F. Other Specify:

3. Type of Project (check appropriate letter)

- A. Operations Only
- B. Operations (including equipment)
- C. Equipment Only
- D. Training and/or Technical Assistance

4. Budget Period: From _____ To _____

5. Cost Request for this Budget Period:

Funding	Operations/TA		Equipment		Total	
	Dollars	%	Dollars	%	Dollars	%
ARC Funds						
Other Federal Funds						
State Funds						
Other Funds <small>(non-federal)</small>						
Total Cost		100 %		100 %		100 %

Specify source of all other Federal funds and approval date(s):

ARC Form 3: Application for Non-Construction Project (page 2)

Applicant Acknowledgement

I hereby request Appalachian Act grant funds in the amount identified above and agree to apply those funds in accordance with applicable Federal laws, including Section 224(b) and 402 of the Appalachian Act.

Responsible Officer _____
(Signature) (Date)

Name & Title of
Responsible Officer _____
(Please type or Print) **If project is Section 211A, State Officer should sign here.*

STATE APPROVAL

This Application has been evaluated and approved as meeting the requirements for assistance under the Appalachian Regional Development Act of 1965, as amended; and, where required by Executive Order No. 12372 and implementing regulations, the appropriate project review clearinghouses were given an opportunity to review the project and comment:

E.O. No. 12372 Comments Attached E.O. No. 12372 Comments Not Made E.O. No. 12372 Not Applicable.

State Member or Alternate _____ Title _____
(Please Type or Print Name)

Signature _____ Date _____

ARC FORM 3 - Instructions

The ARC Form 3 is a standard form which must be completed by applicants requesting assistance from the Appalachian Regional Commission for non-construction projects. Applicants must complete ARC Form 3 as follows:

Top Section

ARC Project Control Number: Leave blank. This number is assigned by ARC Washington office upon receipt of the full application.

Number 1: Identification

Project Name: Please use the same title for the project that you listed on the Federal 424 form.

Location: Identify only the largest political subdivisions affected.

State: Identify the state in which the project will take place.

Number 2: ARC Goal Area

Check the appropriate box, identifying the ARC Goal under which the project should receive funding consideration.

Number 3: Type of Project

Check the appropriate box identifying the project type.

Number 4: Budget Period

Identify the starting and ending dates of the Project. Be sure to include the applicable year(s).

Number 5: Cost Request

Operations/TA column: If part or all the project is for operations, training or technical assistance (see #3 above), identify the dollar amount and percentage of the total cost which will be provided by each source listed in the far left column (ARC funds, Other Federal Funds, State Funds, Other Funds) for the operations/TA part of the project.

Equipment column: If part or all of the project is for the purchase of equipment, identify the dollar amount and percentage of the total cost which will be provided by each source listed in the far left column for the purchase of this equipment.

Total column: In this column, identify the total dollar amount and percentage of the total cost which will be provided by each source listed in the far left column.

Total Cost row: Identify the totals and percentages for the operations/TA column, the equipment column, and the total column.

Specify source(s) of other federal funds and Approval Date: If other federal funds have been secured for this project, provide the source and approval date of these funds.

Signature, Date, Typed Name & Title

Applicants need to provide the following:

Signature of Responsible Officer and Date: The signature of an authorized representative of the applicant organization should be provided, and the date the document was signed by this person should be identified.

Name and Title of Responsible Officer: Provide the typed name and title of the authorized representative who is signing this section.

Number 8: State Approval

Leave blank. This will be completed by the appropriate state ARC office.