



**TOWN OF MILLS RIVER  
APPLICATION FOR  
TOWN FUNDING OF NONPROFITS**

**I. PURPOSE**

The purpose of this application is to ensure the Town fully understands the nature and amount of the request being made by the organization serving Mills River, and to equitably and efficiently allocate resources to strengthen community organizations, and to provide a process that is fair to each request. Non-profit organizations that have received money in a previous year must still submit an application for funding in the current year. Whether or not an organization received funding in a prior year will not be a determining factor in the recommendation process. Each year is evaluated independently of any prior year funding decisions. Therefore, an award one year is not a guarantee of funding in any future year(s).

Completed applications will be reviewed by Town Staff before being presented to Council with any recommendations. Staff may recommend and Town Council may require annual reporting, submission of additional documentation or other items that would support funding the request. As with all funding appropriations, Town Council action is required for approval of all nonprofit funding actually awarded. Non-profit organizations must be willing to enter a memorandum of understanding prior to the allocation of approved funds.

**II. FUNDING AVAILABILITY**

The total amount of funding available will be determined during the annual budget process. Requests received during the budget process will be given priority consideration for funding.

**III. APPLICATION REVIEW**

Completed applications will be reviewed by Town Staff before being presented to Council with any recommendations. Staff may recommend annual reporting, submission of additional documentation or other items that would support funding the request.

**IV. FUNDING DECISIONS**

Applications received become public records and are open to the public and may be viewed at Town Hall. Any adjustments that the Town Council makes to the recommended funding amounts included in the proposed budget can be made as part of the budget approval process. All agencies requesting funding will be notified of Town Council's final funding decisions following the regular meeting in which the application is considered. Town Council reserves the right to deny any request for any reason.

**V. FUNDING DISTRIBUTION**

Funds will be distributed as determined by Council when the application is considered.

**VI. FUNDING USAGE**

Funds distributed by the Town of Mills River may only be spent as indicated in the nonprofit application for which the funds were awarded. Proof of the respective expenditures including actual receipts must be maintained by all recipients and may be requested as verification by the Town. Funds received from the Town of Mills River are not to be used to fund political activities.

**VII. ELIGIBILITY: 501(c)(3) STATUS AND OTHER REQUIREMENTS**

Organizations are eligible for funding only if they serve Mills River, are defined as those with a 501(c)(3) designation; a group which regularly comes together for purposes of promoting, providing or supporting services, and is one described in one or more of the following (please check all that apply):

- Uses a location within Mills River’s corporate limits for its primary service place;
- Has an office in Mills River;
- Has a majority of Mills River residents in its service population;
- Conducts a majority of its activities and programs in Mills River;
- Is a regional organization which focuses a significant program in Mills River, but otherwise conduct business and operations outside of Mills River.

**VIII. FUNDING CATEGORIES**

- A. Organizations may apply to the Town of Mills River for one or more of the following (please check all that apply):

Operating / Operations Funding assistance in one of the following categories:

- Nonprofit rescue squad
- Nonprofit volunteer fire department
- Museum and art nonprofit
- Nonprofit animal shelter
- Nonprofit hospital
- Private entity providing physical, intellectual, or other developmental disability services
- Historical or preservation organization

Specific Program Costs associated with the needs of persons of low and moderate income in one of the following categories:

- Employment
- Economic development
- Crime prevention
- Child care
- Health
- Drug abuse
- Education
- Welfare needs

Capital Items (necessary for successful execution of the mission) in one of the following categories:

- Nonprofit rescue squad
- Nonprofit volunteer fire department
- Museum and art nonprofit
- Nonprofit animal shelter
- Nonprofit hospital
- Private entity providing physical, intellectual, or other developmental disability services
- Historical or preservation organization

B. In the blanks below, specifically describe what the requested funds will be used for and how the funds will be used to achieve the criteria outlined in the "Town Funding of Nonprofit Policy." Ensure the description relates to the checked items in Section VIII, A. You may attach an additional sheet(s) if needed.

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**IX. NAME, ADDRESS, CONTACT INFORMATION, AND AGENT/PERSON OF NONPROFIT:**

Name of Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Agent/Person Completing Form: \_\_\_\_\_

**X. CITIZENS: HOW ARE THEY TO BE SERVED AND HOW MANY ARE BEING SERVED?**

A. Please provide details on how the money is being used to directly impact Mills River citizens. Ensure the description relates to the checked items in Section VIII, A:

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B. Please give the number of Mills River citizens being directly served by your organization (generally, the larger the number of Mills River citizens served, the greater the value to the community, but only benefiting a few individuals does not necessarily eliminate it from the possibility of being considered for funding)

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**XI. MISSION & SERVICE ALIGNMENT**

Please describe how the mission and service provided align with the mission and services of the Town of Mills River:

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**XII. HISTORY**

Please describe how long the organization has been in existence and a snippet of its history serving Mills River:

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I attest all the information in this application is true to the best of my knowledge. I am an authorized agent of the nonprofit specified:

\_\_\_\_\_

Name

\_\_\_\_\_

Signature

\_\_\_\_\_

Date