
PANGUITCH CITY COUNCIL

AGENDA

PANGUITCH CITY OFFICE
25 S 200 E CONFERENCE ROOM
IN PERSON AND VIA ZOOM
PANGUITCH, UTAH 84759
SEPTEMBER 14, 2021 6:30 PM

- OPENING CEREMONY
- ADOPTION OF THE AGENDA
- APPROVAL OF MINUTES
- OFFICER REPORT
- AIRPORT HANGER POWER - GARY HACKBART
- CODE VIOLATION - GARY STEINECKERT
- GRANT OPPORTUNITY - ALBERTO VASQUEZ
- FRAUD ASSESSMENT
- CREDIT CARD PAYMENT AUTHORIZATION FORM
- VOLUNTEER AGREEMENT
- BOARD OF ADJUSTMENT MEMBERS
- MULTIPLE TRAVEL TRAILERS ON ONE LOT
- INDUSTRIAL PARK ROAD
- WATER TANK LID
- SEWER AND WATER PROJECT
- VACATION RENTAL INSPECTIONS AND SIGNAGE
- BUSINESS LICENSE – SNACK CENTRAL LLC
- VACATION RENTAL – LANCE SAWYER AT 202 W ASPEN VALLEY DR
- CITY RECORDER/CLERK SALARY
- EXECUTIVE SESSION
- DEPARTMENT REPORTS/CALENDAR
- ADJOURNMENT

REASONABLE ACCOMMODATION: The City of Panguitch will make efforts to provide reasonable accommodations to disabled members of the public in accessing City programs.

Please contact Lori Talbot at Panguitch City office at least 24 hours in advance if you have special needs.

Anyone who wishes to offer a prayer or thought in the opening ceremony at City Council is welcome to do so by calling City Manager Lori Talbot at 435-676-8585 to schedule an appointment. Participation may be telephonic or electronic.

Items may not be covered in order listed. Panguitch City is an equal opportunity employer.



Rural Development

U.S. DEPARTMENT OF AGRICULTURE



Emergency Rural Health Care Grants
Track Two: Impact Grants
Application Guide

Together, America Prospers

Program Overview

Track Two: Impact Grants

What does this grant program do?

This program provides up to \$500 million in grant funding to help broaden access to COVID-19 testing and vaccines, rural health care services, and food assistance through food banks and food distribution facilities. **Track Two: Impact Grants** provide funding to advance ideas and solutions to support the long-term sustainability of rural health.

Who may apply for this program?

Eligible applicants include:

- Public bodies
- Community-based nonprofits
- Federally-recognized Tribes

Track Two: Impact applicants also must establish a network or group of entities that consist of health care provider organizations, economic development entities, federally-recognized Tribes, or institutions of higher learning (which may include academic health and research institutes).

What is an eligible rural area?

Rural areas including cities, villages, towns, townships, and federally-recognized Tribal lands with no more than 20,000 residents as determined by the latest decennial Census (available at this link: <https://data.census.gov/cedsci/>) are eligible for this program. Facilities and projects must be located in — and primarily serve — rural areas.

Population statistics may be adjusted to exclude long-term prison populations, and the first 1,500 service members living in government quarters on a military installation.

How may grant funds be used?

Track Two: Impact Grants must be used in relation to the COVID-19 pandemic and to support the long-term sustainability of rural health care. Long-term sustainability is defined as “improved health outcomes, improved access to quality health care, and creating and maintaining sustainable economic development for small communities.” Applicants may request assistance for one or more purposes below for expenses incurred

during a three-year award period. Grant awards range from \$5 million — \$10 million, and can be used to:

- Establish or scale a regional partnership or consortium of community leaders and health care partners to plan, implement, and evaluate models to help solve regional health care problems, and promote the long-term sustainability of rural health care
- Establish or scale evidence-based models and broadly share lessons learned
- Identify a health-related problem within a region, develop and implement a method and solution, and conduct a program evaluation to examine health-related outcomes, long-term sustainability, and ability to successfully replicate

Grant funds are limited to an applicable percentage of eligible project costs based on population and the median household income of the population served.

Step 1: Eligibility Determination

Type of Entity

An eligible applicant under this program must be one of the types of entities outlined in 7 CFR 3570.61(a) (available at this link: <https://go.usa.gov/xFK3G>):

1. A public body, such as a municipality, county, district, authority, or other political subdivision of a state. (State public bodies themselves are not eligible for assistance under this program.)
2. A nonprofit corporation or association. Applicants, other than nonprofit utility applicants, must have significant ties with the local rural community. Such ties are necessary to ensure to the greatest extent possible that a facility under private control will carry out a public purpose and continue to primarily serve rural areas.
3. Federally-recognized Tribes, including a political subdivision of a Tribe, in a rural area

Consortium Requirements

Track Two: Impact applicants must establish a network or consortium of entities for the purposes of this grant. The consortium may be newly formed, or already in existence. The network or consortium must:

- d. Up to 15 percent when the proposed project is located in a rural community with a population of 20,000 or fewer, and the MHI of the population to be served by the proposed facility is below the poverty line, or 90 percent of the state nonmetropolitan MHI, whichever is greater

Please work with the USDA Rural Development state office in the state in which your project is located to determine requirements specific to your project.

If your facility serves more than one community, then it is necessary to use a weighted MHI to determine the percentage of grant for which your project qualifies. For example, a hospital may cover a multicounty service area with different MHIs in each county. To determine the MHI for the project service area, calculate a weighted MHI according to the percentage of population within each community (see Example 2, Appendix).

In-kind contributions are not an acceptable source of cost-sharing funds. Applicants must use cash contributions to fund the remaining project costs, and these funds must be expended for an eligible purpose as described in the NOFA and this guide.

In certain circumstances, applicants may use Community Facility Direct Loan financing (available at this link: <https://www.rd.usda.gov/programs-services/community-facilities-direct-loan-grant-program>) to satisfy cost-sharing requirements. Work with the USDA Rural Development state office in the state in which your organization is headquartered to learn more.

Applicants may not use grant funds received under other Rural Development (RD) programs to satisfy cost-sharing requirements. Other federal and state resources may be acceptable sources to the extent they are permitted under those federal or state program(s). If awarded grant funds under this program, grant funds cannot be used as matching funds for other federal programs.

Number of Awards

Applicants can request and receive assistance under both **Track One** and **Track Two** awards. Additionally, applicants can request assistance for more than one project location. An applicant with wholly-owned, affiliated entities or subsidiaries can apply on behalf of one or more affiliated entities. An "affiliate" is defined as "an entity controlling or having the power to control another entity, or a third party or parties that control or have the power to control both entities."

Applicants, including any affiliates, for **Track Two: Impact Grants** may submit no more than one **Track Two** application.

Step 2: Use of Grant Funds

Grant funds must be used to support health care and nutritional assistance needs in relation to the COVID-19 pandemic and as defined below.

Grant Period

For planning purposes, the proposed grant period is anticipated to begin no earlier than January 1, 2022, and is expected to end no later than 36 months following that date.

If you receive an award, your grant period will be revised to begin on the actual date of award – the date the grant agreement is mailed by USDA Rural Development – and your grant period end date will be adjusted accordingly.

Use of Funds

Track Two: Impact funds must be used in relation to the COVID-19 pandemic and to support the long-term sustainability of rural health care. Long-term sustainability is defined as "improved health outcomes, improved access to quality health care, and creating and maintaining sustainable economic development for small communities." Often, health care is the key economic driver for small, rural communities, and the closures of rural health care facilities creates negative ripple effects throughout the regional economy.

Track Two: Impact applications must define how the proposed project will contribute to improving rural health care access, rural health outcomes, or the economic viability of rural health care.

USDA encourages applicants to consider projects in the following high need areas: developing health care services that offer a blend of behavioral care with other medical services, encouraging rural residents to seek care at their nearest hospitals, supporting health care as an anchor institution in small communities, and expanding access to telehealth, electronic health data sharing, workforce development, transportation, paramedicine, obstetrics, behavioral health, farmworker health care, and cooperative home care.

Track Two: Impact applicants may request and use grant funding for one or more of the purposes outlined below. When applying for funding under this program,

applicable time period. This limitation is placed on cash compensation and does not include other health care or retirement plan compensation.

- c. Construction, renovation, purchase, or acquisition costs for facilities located in nonrural areas
- d. Purchase or acquisition costs for facilities or property
- e. To pay for existing indebtedness unrelated to the COVID-19 pandemic
- f. To pay obligations incurred before the beginning date or after the ending date of the grant agreement
- g. Any purpose prohibited in 2 CFR part 200 (link available here: <https://ecfr.io/Title-2/Part-200>) or 2 CFR part 400 (link available here: <https://ecfr.io/Title-2/Part-400>)

Step 3: Application Submission

Submit your complete application to the USDA Rural Development state office in the state in which your project is headquartered. Rural Development state office contact information is available at <https://www.rd.usda.gov/about-rd/state-offices>. For applicants with headquarters located in the District of Columbia, submit your application to:

USDA Rural Development
ATTN: Special Projects Coordinator Jamie Davenport
1400 Independence Avenue, SW, STOP 0787
Washington, D.C. 20250

Track Two: Impact Grant applications must be received by the applicable Rural Development office by 4 p.m. local time on October 12, 2021. **Track Two: Impact** applications received after October 12, 2021 will not be considered.

The USDA Rural Development state office will conduct initial eligibility reviews. The USDA Rural Development national office will coordinate application reviews, rankings, and selections based on information received by the agency as of October 12, 2021, and according to the selection criteria in the NOFA.

Applications must contain all parts necessary for Rural Development to determine applicant and project eligibility, ensure environmental and architectural requirements are met, calculate a priority score, and rank the application.

To apply for a **Track Two: Impact Grant**, provide the following information :

- A summary page, double-spaced between items, listing the following information (**not** in narrative form):
 - ♦ Specify funding track requested: **Track Two: Impact Grant**
 - ♦ Applicant name
 - ♦ Amount of grant request
 - ♦ Project description: No more than three sentences summarizing applicant entity, location of assistance, and purpose of grant funds
- A detailed Table of Contents containing page numbers for each component of the application
- SF-424 "Application for Federal Assistance," available at this link: <https://go.usa.gov/xFWt6>
- SF-424A "Budget Information – Non-Construction Programs," available at this link: <https://go.usa.gov/xFWz3>
- or-
- SF-424C "Budget Information – Construction Programs," available at this link: <https://go.usa.gov/xFWza>
- Organizational documents demonstrating the applicant is an eligible entity as described in Section IV, "Eligibility Information" of the Notice of Funding Availability (NOFA). The NOFA and additional program materials are available at the program webpage: <https://www.rd.usda.gov/erhc>.
- Nonprofit applicants must provide:
 - ♦ Articles of organization, incorporation, or association
 - ♦ By-laws
 - ♦ Evidence of good standing
 - ♦ Evidence of ties to the local rural community
 - ♦ Ties to the local rural community may be demonstrated through one or more of the following:
 - Close association with – or control by – a local unit of government
 - Broad-based ownership and control by members of the community, as demonstrated through a listing and description of board members that are representative of the community or service area

- Certification of Non-Lobbying Activities (available at this link: <https://go.usa.gov/xFWzX>)
- Standard Form LLL, "Disclosure of Lobbying Activities," if applicable (available at this link: <https://go.usa.gov/xFWzn>)
- Certification regarding any known relationship or association with a USDA employee in accordance with 7 CFR part 1900, subpart D (available at this link: <https://go.usa.gov/xFWzP>)
- A written narrative that addresses Need, Methodology, and Innovation, including:
 - ♦ A description of the purpose of the proposed project, detailing the needs of the rural community(ies) and how those needs were identified; expected outcomes, focus areas, and the aims the project will support
 - ♦ An assessment of the innovative nature of the strategy
 - ♦ A description of expected outcomes (including quantifiable impacts, when possible) to the health care community and associated rural community(ies)
- A written narrative that illustrates organizational capacity and strength of consortium, including:
 - ♦ Evidence of an agreement formalizing a consortium for purposes of this grant funding
 - This agreement must be signed by an authorized representative of the lead entity applicant, and an authorized representative of each consortium partner.
- A description of the composition of the consortium membership and how each partner is needed to successfully accomplish project activities
- A description of the abilities and contributions of the lead applicant organization and other consortium members
- Evidence and description of how the consortium will maintain ties to the local rural community(ies)
- A description of how the consortium will impact rural community(ies) and providers, and how the network will strengthen its relationship with the community and region it serves
- The identification of a project director (or details of your strategy to identify one) to manage the grant
- Include the manager's key activities and expected percentage of time to be devoted to the project.
- Workplan and Proposed Budget
 - ♦ Provide a project work plan that clearly illustrates the consortium's goals, strategies, activities, and proposed measurable outcomes encompassing the period of performance. The work plan must identify the individual or organization responsible for carrying out each activity, include a timeline for the period of performance, and illustrate its relation to the COVID-19 pandemic.
 - ♦ Provide a complete, consistent, and detailed budget presentation for up to a three-year period of performance through the submission of the SF-424A budget form (available at this link: <https://go.usa.gov/xFWz3>) and a budget narrative that justifies the appropriateness of the requested funds.
- Evaluation, Impact, and Replicability
 - ♦ Describe how the proposed progress toward meeting program goals contributes to the long-term sustainability of rural health care by improving rural health care access, improving rural health outcomes, and sustaining health care as an economic driver for the rural community or region.
 - ♦ Describe how progress toward meeting program goals and determination of a return on investment will be tracked, measured, and evaluated.
 - ♦ Explain a process for evaluating how the consortium's resources will be used to increase access to health care services, improve rural health outcomes, and support health care as a key economic driver for small communities. Include a discussion regarding the consortium's plan for any necessary data collection among members of the consortium.
 - ♦ Identify factors and strategies that will lead to project viability, sustainability of the consortium's activities after federal funding ends, and establishment of an evidence-based model for the dissemination of lessons learned for future replication.

Grant Disbursements

Rural Development will make payments under the grant agreement in accordance with 2 CFR 200.305. All requests for advances or reimbursements must comply with 2 CFR 200.306 "Cost sharing or matching" (available at this link: <https://go.usa.gov/xFKgb>). Rural Development customarily disburses funds on a reimbursement basis. If selected for funding, applicants must provide proper documentation before grant funds are disbursed.

Specific documentation requirements may differ depending on the approved project details for which the grant is received. These will be specified in the grant agreement. Typically, the following documentation is required for grant disbursements, which will occur either by direct deposit or electronic funds transfer:

1. Written request for funds
2. RD 1924-18, "Partial Pay Estimate" (as applicable for construction related projects), available at this link: <https://forms.sc.egov.usda.gov/efcommon/eFileServices/eForms/RD1924-18.PDF>
3. SF-270, "Request for Advance or Reimbursement," or SF-271, "Request for Reimbursement for Construction Programs" (if applicable); available at this link: <https://www.grants.gov/forms/post-award-reporting-forms.html>
4. Appropriate documentation to justify the amount requested, such as receipts, invoices, payroll records, CPA certifications, or other documentation

Construction Requirements

For projects involving construction, applicants selected for funding must submit a preliminary architectural feasibility report or engineering documentation, completed in accordance with agency guidelines in RD Instruction 1942-A, Guide 6 (available at this link: <https://www.rd.usda.gov/files/1942a.pdf>).

Any construction work completed with grant funds under this award must meet Davis-Bacon Act conditions set forth in section 9003(f) of the Farm Security and Rural Investment Act of 2002 (7 U.S.C. 8103(f)).

Reporting Requirements

If selected for funding, your letter of conditions and grant agreement will specify the reporting requirements throughout the grant period. Reporting periods are

quarterly or semi-annually, depending on the approved project details. Typically, reporting requirements include:

1. Form SF-425, "Financial Status Report" (available at this link: <https://www.grants.gov/forms/post-award-reporting-forms.html>) Reports are due 30 calendar days after the end of the reporting period. A final report is due within 120 days after the end of the grant period.
2. Form SF-PPR, "Performance Progress Report." This report is due 30 days after the end of the reporting period. A final report is due within 90 days after the end of the grant period.
3. Annual financial statements. The type(s) of statements required depends on the amount of federal financial assistance expended during the grantee's fiscal year in accordance with 2 CFR part 200 (available at this link: <https://ecfr.io/Title-2/Part-200>) as adopted by Rural Development in 2 CFR part 400 (as available at this link: <https://ecfr.io/Title-2/Part-400>).

Rural Development is interested in establishing evidence-based models regarding the long-term sustainability of rural health care. Additionally, Rural Development is interested in disseminating lessons learned for future replication in other rural areas. Recipients of **Track Two: Impact** funding may be asked to participate in activities intended to strengthen evidence-based models and to disseminate lessons learned.

Use and Disposition of Equipment and Property

Grant recipients can use equipment acquired through the project for as long as needed. If there is no longer a need for the equipment for activities funded through this grant or for activities sponsored by other federal agencies, equipment can be sold or used for other activities. However, certain disposition requirements apply.

Equipment with a fair market value of \$5,000 or more requires the grantee to provide compensation to the agency in accordance with Rural Development disposition requirements. Equipment with a fair market value of less than \$5,000 may be used for other purposes without compensation to the agency.

Figure 2: Evaluation Criteria Table

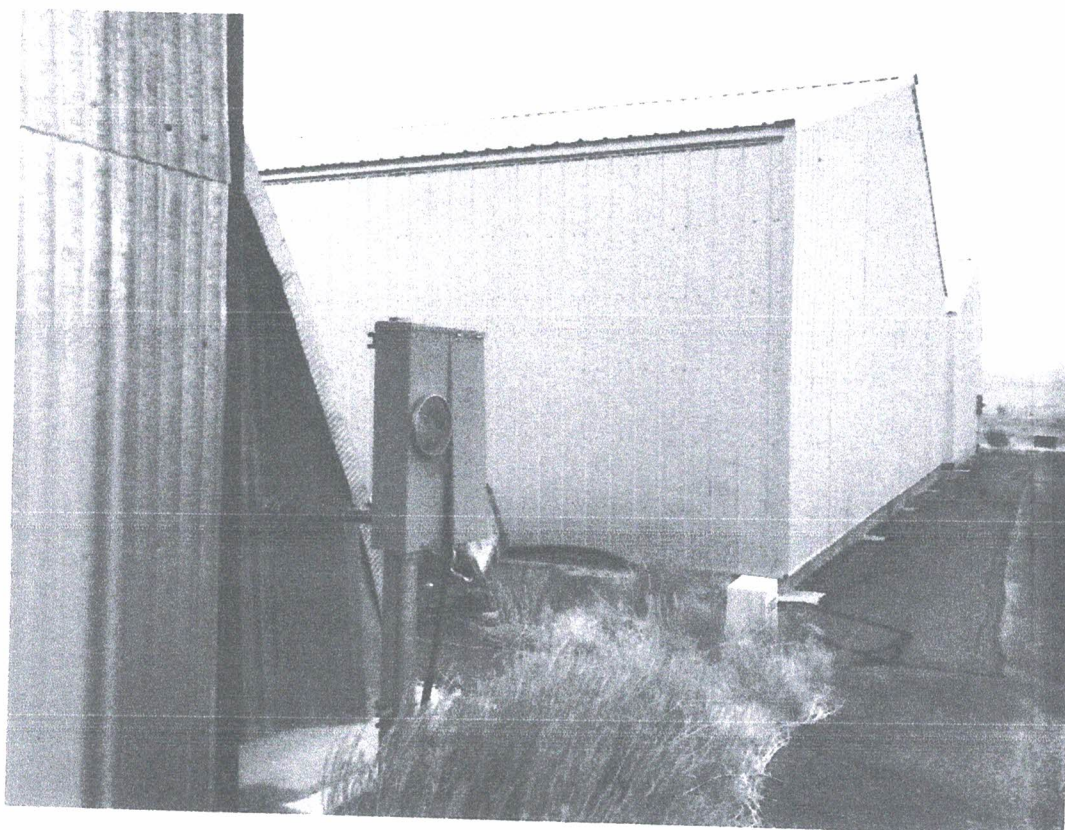
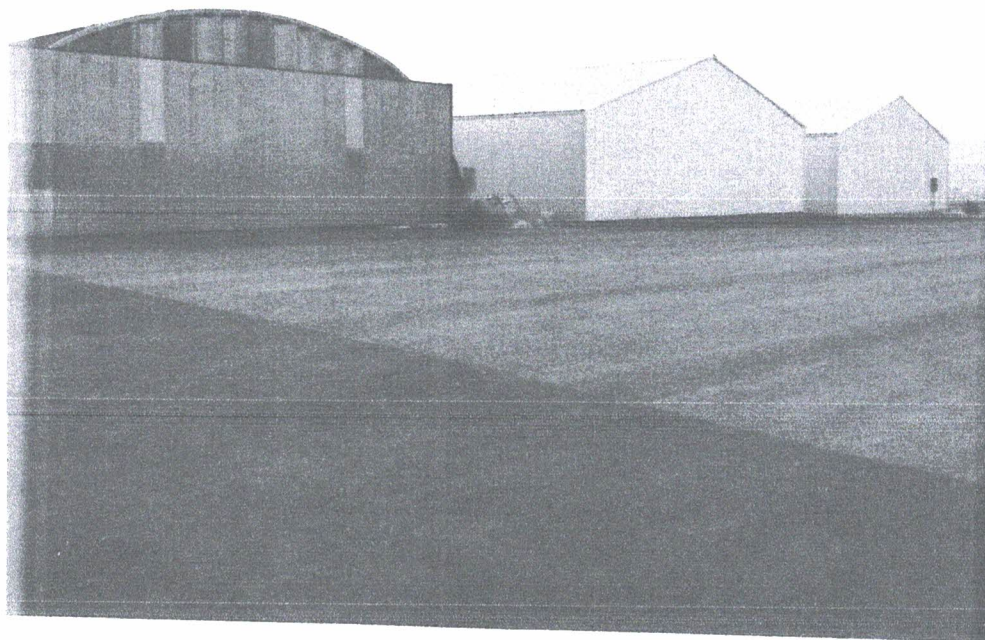
Evaluation Criterion	Points
(a) Distressed Communities and Communities below the poverty line threshold priority. Ten (10) points will be given for facilities located in distressed communities (according to the EIG index), or communities below the poverty line. For applications supporting two or more facility locations, these priority points will only be given if 50 percent or more of the requested award funds will support distressed communities or communities below the poverty line. EIG's Distressed Communities Index is a measure of community well-being using seven economic metrics. To learn more, visit https://eig.org/dci. To determine whether a facility is located in a Distressed Community, view the EIG Distressed Community Map (available at this link: https://ruraldevelopment.maps.arcgis.com/apps/webappviewer/index.html?id=06a26a91d074426d944d22715a90311e).	10
(b) Income priority. A maximum of 15 points will be given. If the median household income of the project's service area is below the higher of the poverty line or:	N/A
i. 60 percent of the state nonmetropolitan median household income	15
ii. 70 percent of the state nonmetropolitan median household income	12
iii. 80 percent of the state nonmetropolitan median household income	9
iv. 90 percent of the state nonmetropolitan median household income	6
(c) Population priority. A maximum of ten (10) points will be given. If the facility is located in a rural community having a population, according to the most recent decennial Census, of:	N/A
i. 5,000 or fewer	10
ii. 5,001 to 10,000	6
iii. 10,001 to 15,000	3

Evaluation Criterion	Points
(d) Need, Methodology, and Innovation. A maximum of 25 points will be given. Rural Development will use a panel of qualified reviewers to assess need, methodology, and innovation among the following factors: i. The extent to which the application clearly describes the purpose of the proposed project, the local and regional health care environment, how the need was identified, expected outcomes, focus area(s) and the aim(s) the project would support ii. The extent to which the applicant describes an innovative approach to address the need, goals, and objectives and the appropriateness of the proposed strategy iii. The extent to which the applicant's project will provide demonstrable impact to rural community(ies) and the health care community	25
(e) Organizational Capacity and Strength of Consortium. A maximum of 15 points will be given. Rural Development will use a panel of qualified reviewers to assess organizational capacity and strength of consortium among the following factors: i. Clarity of the roles and responsibilities for each consortium member and the extent to which the network members demonstrate the strength of their mutual commitment in carrying out planned activities ii. The extent to which the application identifies the composition, capacity, and expertise of each consortium member, and successfully connects this expertise to the consortium members' (and project director's) proposed responsibilities iii. The extent to which the application describes the geographical relationship with the rural service population. Urban-based applicants also must demonstrate how the rural population will be served, and that a high degree of local rural control of the project will be maintained. iv. Strength of the relationship between the consortium and the community or region it serves. Degree to which the consortium collaborates with appropriate organizations in the community to fulfill the goals of the consortium and the project. v. Strength and qualifications of the project director, who will dedicate a sufficient amount of time to the program and be responsible for monitoring the program and ensuring award activities are carried out. This element includes measuring the effectiveness of the application in clearly demonstrating how the project director's role contributes to the success of the network.	15
(f) Workplan and Proposed Budget. A maximum of ten (10) points will be given. Rural Development will use a panel of qualified reviewers to assess the workplan and proposed budget among the following factors: i. The feasibility of activities and objectives identified in the work plan – including measurable outcomes – and the degree to which these expected outcomes will be met by the end of the period of performance ii. The reasonableness of the proposed budget for each year of the period of performance in relation to the objectives, the complexity of the project activities, and the anticipated results	10

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**Gary Hackbart
HC 82 Box 1169
Duck Creek Village, UT 84762**

**435-682-2569
435-559-0269 CL**



**Gary Hackbart
HC 82 Box 1169
Duck Creek Village, UT 84762**

**435-682-2569
435-559-0269 CL**

A little personal background,

Purchased my Utah property July 4, 1971, and Completed Construction on my mountain home summer 1973.

Purchased hanger next to Panguitch City hanger last year.

Had my pilots' license since 1959 and I'm still actively flying.

Use my Panguitch hanger primarily for winter aviation.

I've been the UT24 Manager for about 15 years and been involved in the operation and maintainance of UT 24 since 1974.

REQUEST:

Install a Garkane meter on city property and connect to my hanger to share the minimum with the city hanger present/future renter.

Or,

I would offer to purchase the city hanger.

Thanks for allowing me a few moment of your time!

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (for example: Braille, large print, audiotope, American Sign Language, and so on) should contact the responsible agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information can be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at "How to File a Program Discrimination Complaint" and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.

USDA is an equal opportunity provider, employer, and lender.

Mention of a trade name or brand name does not constitute or imply endorsement or recommendation by USDA.



Emergency Rural Health Care Grants Application Checklist

Track Two: Impact Grants *(continued)*

Nonprofit applicants must provide:

- ☐ Articles of organization, incorporation, or association
- ☐ By-laws
- ☐ Evidence of good standing
- ☐ Evidence of ties to the local rural community

Ties to the local rural community may be demonstrated through one or more of the following:

- ☐ Close association with – or control by – a local unit of government
- ☐ Broad-based ownership and control by members of the community, as demonstrated through a listing and description of board members representative of the community or service area
- ☐ Substantial public funding as demonstrated through pledged taxes, revenue bonds, local government sources, or community-wide fundraising campaigns
- ☐ Evidence of eligibility. Applicants must submit sufficient documentation to demonstrate how the health care facility(ies) or project to be funded primarily serves rural areas, is located in a rural area, and serves a population with a median household income below the poverty line or applicable percentage defined in the NOFA. This submission must describe the proposed facility or project and its service area, including:
 - ☐ Location of the facility(ies) and their associated population demographics
 - ☐ Description of the area and number and demographics (if known) of the population to be served, sufficiently detailed to verify Project Location Eligibility as outlined in

Section IV – “Eligibility Information” – of the NOFA

Evidence the facility(ies) or project primarily serves rural residents

- ☐ A written budget narrative providing a detailed project budget, which also includes the following information:
 - The amount of funds requested from each Use of Funds category, with a description of how the figure was calculated
 - A breakdown of project cost demonstrating the percentage of total project costs the grant assistance will cover, which is dependent on population and median household income
 - The time period for which the assistance is requested. All awards are limited to up to a 36-month grant period based on project complexity
- ☐ Environmental information necessary to support Rural Development’s environmental findings. Details are available at this link: <https://www.rd.usda.gov/rd/1542a>
- ☐ For projects involving construction, a preliminary architectural feasibility report or engineering documentation, completed in accordance with agency guidelines in RD Instruction 1942-A, Guide 6 (available at this link: <https://www.rd.usda.gov/files/1942a.pdf>)
- ☐ Description and certification of applicant’s matching funds or cost share sources
 - Three years of the most recent audits or financial statements, including a current balance sheet and income and expense statement. If audits are not available, applicants may provide this information on:
 - Forms RD 442-7, “Operating Budget” – including projected cash flow (available at

(continued next page)

Emergency Rural Health Care Grants Application Checklist

Track Two: Impact Grants *(continued)*

- Provide a complete, consistent, and detailed budget presentation for up to a three-year period of performance through the submission of the SF-424A budget form (available at this link: <https://go.usa.gov/xFWz9>) and a Budget Narrative that justifies the appropriateness of the requested funds.
- ☐ Evaluation, Impact, and Replicability
 - Describe how the proposed progress toward meeting program goals contributes to the long-term sustainability of rural health care by improving rural health care access, improving rural health outcomes, and sustaining health care as an economic driver for the rural community or region.
 - Describe how the proposed progress toward meeting program goals contributes to the long-term sustainability of rural health care by improving rural health care access, improving rural health outcomes, and sustaining health care as an economic driver for the rural community or region.
 - Describe how progress toward meeting program goals and determination of a return on investment will be tracked, measured, and evaluated.
- Explain a process for evaluating how the consortium's resources will be leveraged and used to increase access to health care services, improve rural health outcomes, and support health care as a key economic driver for small communities. Include a discussion regarding the consortium's plan for any necessary data collection amongst members of the consortium.
- Identify factors and strategies that will lead to project viability, sustainability of the consortium's activities after federal funding ends, and establishment of an evidence-based model for dissemination of lessons learned for future replication.
- ☐ Obtain a Dun and Bradstreet Data Universal Numbering System (DUNS) number (available at this link: <https://dunbrosolutions.com/webform/>) and register in the System for Award Management (SAM) (available at this link: <https://sam.gov/content/home>) prior to submitting an application

Before You Submit

Please read the Notice of Funds Availability (NOFA) published in the *Federal Register* on August 12, 2021. A copy is available at the program webpage: <https://www.rd.usda.gov/enr/>.

This Application Checklist is a supplement to the NOFA. Should anything in this guide appear to be in conflict with the NOFA, the NOFA takes precedence.

As the leading federal agency for rural development prosperity, we work to help rural communities grow and prosper.

For additional resources and information about our business, community or housing programs, contact our program specialists at 1-800-670-6553 or visit us online at www.rd.usda.gov.

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August 2021

Fraud Risk Assessment

Continued

*Total Points Earned: 316/395 *Risk Level: Very Low Low Moderate High Very High
 > 355 316-355 276-315 200-275 < 200

	Yes	Pts
1. Does the entity have adequate basic separation of duties or mitigating controls as outlined in the attached Basic Separation of Duties Questionnaire?	X	200
2. Does the entity have governing body adopted written policies in the following areas:		
a. Conflict of interest?	X	5
b. Procurement?	X	5
c. Ethical behavior?	X	5
d. Reporting fraud and abuse?	X	5
e. Travel?	X	5
f. Credit/Purchasing cards (where applicable)?	X	5
g. Personal use of entity assets?	X	5
h. IT and computer security?		5
i. Cash receipting and deposits?		5
3. Does the entity have a licensed or certified (CPA, CGFM, CMA, CIA, CFE, CGAP, CPFO) expert as part of its management team?		20
a. Do any members of the management team have at least a bachelor's degree in accounting?		10
4. Are employees and elected officials required to annually commit in writing to abide by a statement of ethical behavior?	X	20
5. Have all governing body members completed entity specific (District Board Member Training for local/special service districts & interlocal entities, Introductory Training for Municipal Officials for cities & towns, etc.) online training (training.auditor.utah.gov) within four years of term appointment/election date?	X	20
6. Regardless of license or formal education, does at least one member of the management team receive at least 40 hours of formal training related to accounting, budgeting, or other financial areas each year?	X	20
7. Does the entity have or promote a fraud hotline?	X	20
8. Does the entity have a formal internal audit function?		20
9. Does the entity have a formal audit committee?		20

*Entity Name: Panguitch City

*Completed for Fiscal Year Ending: 6/30/2021 *Completion Date: 5/5/2021

*CAO Name: Lori Talbot *CFO Name: Carla Farnsworth

*CAO Signature: Lori Talbot *CFO Signature: Carla Farnsworth

*Required

Basic Separation of Duties

See the following page for instructions and definitions.

	Yes	No	MC*	N/A
1. Does the entity have a board chair, clerk, and treasurer who are three separate people?	X			
2. Are all the people who are able to receive cash or check payments different from all of the people who are able to make general ledger entries?			X	
3. Are all the people who are able to collect cash or check payments different from all the people who are able to adjust customer accounts? If no customer accounts, check "N/A".			X	
4. Are all the people who have access to blank checks different from those who are authorized signers?			X	
5. Does someone other than the clerk and treasurer reconcile all bank accounts OR are original bank statements reviewed by a person other than the clerk to detect unauthorized disbursements?	X			
6. Does someone other than the clerk review periodic reports of all general ledger accounts to identify unauthorized payments recorded in those accounts?	X			
7. Are original credit/purchase card statements received directly from the card company by someone other than the card holder? If no credit/purchase cards, check "N/A".	X			
8. Does someone other than the credit/purchase card holder ensure that all card purchases are supported with receipts or other supporting documentation? If no credit/purchase cards, check "N/A".	X			
9. Does someone who is not a subordinate of the credit/purchase card holder review all card purchases for appropriateness (including the chief administrative officer and board members if they have a card)? If no credit/purchase cards, check "N/A".	X			
10. Does the person who authorizes payment for goods or services, who is not the clerk, verify the receipt of goods or services?	X			
11. Does someone authorize payroll payments who is separate from the person who prepares payroll payments? If no W-2 employees, check "N/A".	X			
12. Does someone review all payroll payments who is separate from the person who prepares payroll payments? If no W-2 employees, check "N/A".	X			

* MC = Mitigating Control



A Change of Pace

Credit Card Payment Authorization

I authorize regularly scheduled charges to my Credit Card. I will be charged the amount indicated below each billing period. A receipt for each payment will be provided upon request and the charge will appear on my Credit Card Account Statement. I agree that no prior notification will be provided unless the date or amount changes, in which case I will receive notice from Panguitch City at least 10 days prior to the payment being collected.

I _____ authorize Panguitch City to charge my Credit Card below for \$_____ on the _____ of each month.

Credit Card Information

____ Visa ____ Mastercard ____ AMEX ____ Discover

Cardholder Name _____

Credit Card Number ____ - ____ - ____ - ____

Expiration Date ____/____

Security Code (CVV) _____

Billing Zip Code _____

Email Address _____

Signature _____ Date _____

PANGUITCH CITY VOLUNTEER AGREEMENT

4. NAME OF VOLUNTEER	5. NAME OF INDIVIDUAL OR GROUP LEADER (Last, First, Middle)	
6. STREET ADDRESS, APT. #	7. CITY, STATE, ZIP CODE	
8. EMAIL ADDRESS	9. PHONE Home: _____	10. Date of Birth

EMERGENCY CONTACT INFORMATION OF INDIVIDUAL

13. NAME (Last, First, Middle)	14. PHONE Home: _____ Mobile: _____	15. EMAIL ADDRESS
16. STREET ADDRESS, APT. #	17. CITY, STATE, ZIP CODE	

PARENTAL OR LEGAL GUARDIAN CONSENT FOR VOLUNTEER UNDER AGE 18

18. PARENT OR LEGAL GUARDIAN (Last, First, Middle)	19. PHONE Home: _____ Mobile: _____	20. EMAIL ADDRESS
21. STREET ADDRESS, APT. #	22. CITY, STATE, ZIP CODE	

23. I affirm that I am the parent/guardian of the above named volunteer. I understand that the agency volunteer program does not provide compensation and that the service will not confer on the volunteer the status of a Federal employee. I have read the Volunteer Service Agreement in its entirety and give my permission for _____ to participate in the specified volunteer activity.
(NAME OF YOUTH)

VOLUNTEER (OR PARENT OR LEGAL GUARDIAN IF UNDER 18)

27. Hold Harmless. Upon working for the City by any of its agents, invitees and/or volunteers for the purposes specified herein, _____ shall defend, indemnify, and hold the City harmless from any and all actual or alleged claims, demands, causes of action, liability, loss, damage and/or injury (to property or persons, including without limitation wrongful death), whether brought by an individual or other entity, or imposed by a court of law or by administrative action of any federal, state, or local governmental body or agency, arising out of or incident to any acts, omissions, negligence, or willful misconduct of _____, its agents, invitees, family members etc. in connection with or arising out of _____ use of the Property. This indemnification applies to and includes, without limitation, the payment of all penalties, fines, judgments, awards, decrees, attorney's fees, and related costs or expenses, and any reimbursements to the City for all legal expenses and costs incurred by it.

I understand that I will not receive any compensation for the above service and that volunteers are NOT considered employees except as required by law.

I understand that volunteer service is not creditable for leave accrual or any other employee benefits.

I understand that either the government or I may cancel this agreement at any time by notifying the other party.

I understand that all publications, films, slides, videos, artistic, or similar endeavors, created as a result of my volunteer service as described in this agreement, will become the property of the Panguitch City, and as such, will be in the public domain and not subject to copyright laws.

I (or parent or legal guardian if under 18) do consent do not consent for the Agency to have free and unrestricted use of my likeness and voice in an image and/or video recording(s). I am aware that if used, they will be in the public domain and may appear on video, web, or printed media.

28. SIGNATURE OF VOLUNTEER (OR PARENT OR LEGAL GUARDIAN IF UNDER 18) DATE



PANGUITCH CITY BUSINESS LICENSE APPLICATION

25 South 200 East, PO Box 75, Panguitch Utah 84759, Phone: 435-676-8585,
Email tyrissa.panguitchcity@gmail.com

A Change of Pace

Date: 8/12/21

Name of Business Shack Central LLC DBA: Lil orbits
Type of Business Food booth
Business Address N River Lane Rd City Panguitch State UT Zip 84759
Mailing Address PO Box City Panguitch State UT Zip 84759
State Sales Tax # 15295903-005-UTC Contractor License # _____
Business Email m Business Phone # (435) 6 _____
Name of Business Owner (if partnership, list all partners; if corporation, list principal officers)
Sheena Stewart
Address 1 Riverlane Rd PO Box 412 City Panguitch State UT Zip 84759
Phone # (435) Email Address m
Name of Manager Nick Stewart Manager Phone # 1

LICENSE FEES (Circle all that apply to your business)

General Fee -	\$25.00
Home Occupation (one time only fee)	\$25.00
Beer Permit -	\$50.00
Vendor Permit -	
Up to 30 days -	\$20.00
Yearly -	\$25.00

Total amount due - \$ ~~50.00~~ 425.00

NEW APPLICATIONS - This is an application for a business license; the actual license will be issued only when the completed application is received, reviewed and approved by the city council. All information must be accurately completed or the issuance of the license will be delayed. Issuance of the license shall in no way relieve the applicable zoning, health, building and fire regulations. All state and Federal regulations must be complied with.

RENEWAL APPLICATIONS - Renewal forms are sent out the first of every year. If you did not receive one please contact Tyrissa at the Panguitch City Office. **Late Fee** - \$10.00 (If paid after February first of each said year.)

HOME OCCUPATIONS - Home occupations require a conditional use permit. This includes ALL vacation rentals.

I, We, Sheena Stewart hereby agree to conduct said business strictly in accordance with the Laws and Ordinances covering such business, and understand that it is unlawful to make any false statement, declaration, or report as required in this application.

Date 8/12/21 Signed by Sheena S. Stewart

FOR OFFICIAL USE ONLY

Approved _____ License # _____ Receipt # _____ Total Paid \$ 25.00 pd



PANGUITCH CITY BUSINESS LICENSE APPLICATION

25 South 200 East, PO Box 75, Panguitch Utah 84759, Phone: 435-676-8585,
Email tyrisa.panguitchcity@gmail.com

A Change of Pace

Date: 8-23-2021

Name of Business Aspen 202, LLC DBA: 8/23/2021
Type of Business short term rental
Business Address 202 W. Aspen Valley Dr City Panguitch State UT Zip 84759
Mailing Address 1 City Murray State UT Zip 84121
State Sales Tax # Dnding Contractor License # N/A
Business Email gmail.com Business Phone #
Name of Business Owner (if partnership, list all partners; if corporation, list principal officers)
Lance & Michelle Sawyer
Address 202 W Aspen Valley Dr City Panguitch State UT Zip 84759
Phone # Email Address
Name of Manager Garret Sawyer Manager Phone#

LICENSE FEES (Circle all that apply to your business)

General Fee -	\$25.00
Home Occupation (one time only fee)	\$25.00
Beer Permit -	\$50.00
Vendor Permit -	
Up to 30 days -	\$20.00
Yearly -	\$25.00

Total amount due - \$ 50

NEW APPLICATIONS - This is an application for a business license; the actual license will be issued only when the completed application is received, reviewed and approved by the city council. All information must be accurately completed or the issuance of the license will be delayed. Issuance of the license shall in no way relieve the applicable zoning, health, building and fire regulations. All state and Federal regulations must be complied with.

RENEWAL APPLICATIONS - Renewal forms are sent out the first of every year. If you did not receive one please contact Tyrisa at the Panguitch City Office. Late Fee - \$10.00 (If paid after February first of each said year.)

HOME OCCUPATIONS - Home occupations require a conditional use permit. This includes ALL vacation rentals.

I, We, Michelle Sawyer hereby agree to conduct said business strictly in accordance with the Laws and Ordinances covering such business, and understand that it is unlawful to make any false statement, declaration, or report as required in this application.

Date 8/23/2021 Signed by Michelle Sawyer

FOR OFFICIAL USE ONLY

Approved License # Receipt # Total Paid \$ 50 pd CC



PO Box 75 Panguitch, UT 84759 435-676-8585 panguitchcity@gmail.com

In accordance with the Panguitch Zoning Ordinance, individuals desiring to have a conditional use permit, or a home occupation permit, or a variance.

It is necessary for all neighbors **within 300 feet of the exterior boundaries of your property** to be made aware of this type of request.

NAME: Lance & Michelle Sawyer ADDRESS: 202 W Aspen Valley Dr Date 8-23-2021

EMAIL: aspen20211c@gmail.com PHONE: 801-879-1538

Is making application to have (Explain in detail) Vacation rental property
Accommodating 6 guests

If this application is for animals: state number of animals, type of animal and approximant square footage of land being used. (No barn or coop shall be constructed closer than 50 to the nearest street or dwelling. One cow or one horse for each 10,000 square feet or one sheep for each 4,000 square feet. Pigs, billy goats, mink and other dangerous animals are not allowed.)

If this application is for a vacation rental, is there more than one structure on the premises? Y/N

If yes describe the secondary structure N/A
Located at _____

It is not necessary that you approve; it is important that you sign this statement indicating that you are aware of the proposed request.

Signatures:

Lance Sawyer VAN RANSLER SAWYER
Michelle Sawyer
Shelby Menet

Comments if any:

lot 3
199 West
215 W Aspen Valley
vacation house

Planning and Zoning

SEPTEMBER 8, 2021 EMAIL SURVEY

An email survey was used for a conditional use permit for a vacation rental at 202 W Aspen Valley Drive owned by Lance and Michelle Sawyer.

THE MOTION PASSED.

<u>Member</u>	<u>Vote</u>
Chris Hatch	YES
Trudi Owens	YES
Clint Albrecht	YES
Chad Veater	YES

Panguitch City Council

September 14, 2021

Pending Business

- Cameron Motel/other blights and abatement

Donations

City Council Donation July 2021 – June 2022

3/2021 Highway 143	
7/2021 Garfield Memorial Health Care Foundation	500.00
7/2021 Panguitch Homecoming	2000.00
8/2021 Livestock Show	2000.00
9/2021 PHS Rodeo team	100.00
9/2021 PHS Yearbook	100.00

City Council Donation July 2020 – June 2021

3/2020 Highway 143	
6/2020 Junior Livestock Show	2000.00
7/2020 Panguitch Homecoming	2000.00
8/2020 PHS Rodeo team	100.00
8/2020 Car Show	100.00
10/2020 Miss Utah	800.00
10/2020 Christmas Nativity	400.00
11/2020 Christmas in the Country	300.00
11/2020 Sub for Santa	500.00
2/2021 Basketball Region Program/PHS JR	100.00
2/2021 Easter Egg Hunt	300.00
3/2021 MidUtah Radio	400.00
3/2021 Sportscast	400.00
3/2021 Bryce Canyon Half marathon	250.00
Total	\$7,650.00

City Council Donations – July 2018 – June 2019

3/2018 Highway 143	1500.00
7/2018 Panguitch Homecoming	2000.00
7/2018 Junior Livestock Show	2000.00
9/2018 Eagle Scout Project – Nathaniel Sarles	
10/2018 Eagle Scout Project – Klyn Fullmer	481.00
11/2018 Sub for Santa	500.00
11/2018 Christmas in the Country	300.00
2/2019 Bryce Canyon Half & 5K	250.00
2/2019 Mid Utah Radio Basketball ads	300.00
2/2019 Sportscast	400.00
3/2019 PHS Wrestling	225.00
3/2019 Easter Egg Hunt	400.00
4/2019 FCCLA Nationals	600.00
4/2019 FBLA Nationals	300.00
5/2019 Garfield Memorial Foundation Dinner	500.00
6/2019 Lions Club Fridge	1200.00
6/2019 Horse Shoe Pits	1500.00

Total **\$12,856.00**

City Council Donations – July 2019 – June 2020

4/2019 Highway 143	1500.00
6/2019 Junior Livestock Show	2000.00
7/2019 Panguitch Homecoming	2000.00
9/2019 PHS Rodeo Team	125.00
9/2109 Old 89 Car Show	500.00
9/2019 Christmas nativity	500.00
10/2019 Sub for Santa	500.00
10/2019 Christmas in the Country	300.00
11/2019 Eagle Scout Project – Koby McEwen	500.00
1/2020 Mid Utah Radio State Wrestling	250.00
2/2020 Bryce Canyon Half Marathon	250.00
2/2020 Mid Utah Radio Basketball ads	400.00
2/2020 Sportscast	400.00
3/2020 Easter Egg Hunt	400.00
3/2020 PHS Wrestling	250.00
3/2021 MidUtah Radio	400.00

Total **\$10,275.00**