



**MURRAY**  
CITY COUNCIL

Complete and return to:  
Murray City Council Office  
10 East 4800 South #290  
Murray City, Utah 84107  
  
Email: [jkennedy@murray.utah.gov](mailto:jkennedy@murray.utah.gov)

## APPLICATION FOR FUNDS

In accordance with Utah Code Ann. §10-8-2, all funds distributed by the city must show a financial service equivalent to the money allocated. The city also requires that substantial effort be made by the individual requesting funds to raise their own funds. The city will match funds raised by the individual organization up to the city's collective maximum amount. The city shall determine the maximum amount of money to be allocated for this purpose and it will be divided among the approved requests.

All applications must be received by April 30, 2025 at 5:00 p.m. and applicants must plan to attend and present at a future public hearing (date to be determined). Late or incomplete applications will not be considered. Awards will be based on an allocated budget amount to be determined during the city's budget process. Funding is not guaranteed.

I acknowledge that I have read the above statement and agree to abide by it:

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

## APPLICANT INFORMATION

Legal Name of Applicant/Agency: \_\_\_\_\_

Applicant Website: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address (if different from Physical Address):

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

## APPLICANT CONTACT INFORMATION

Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

## PROGRAM INFORMATION

Funding Request Amount (Maximum of \$\_\_\_\_\_):

Is your organization a 501(c)?

Yes \_\_\_\_\_

No \_\_\_\_\_

Program is:

\_\_\_\_\_ New program/service - not previously provided in the most recent 12 months

\_\_\_\_\_ Existing program/service - previously provided in the most recent 12 months

1. What service will you be providing with the use of these funds? (500 characters or less):

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2. Why is this service needed in Murray? (350 characters or less):

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3. What is the monetary value of the service being provided (please specify details)?:

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4. How many people are expected to be serviced with this program?: \_\_\_\_\_

5. When is the program offered?: \_\_\_\_\_

6. What is the expected timeline for expenditure of requested funds?: \_\_\_\_\_

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7. What is the expected timeline and duration of the program (if different from expenditure timeline)?: \_\_\_\_\_

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8. Where is the program held (if different from agency location)?: \_\_\_\_\_

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9. What public purpose will this program serve (i.e., how will this benefit a majority of Murray residents)?:

a. How does the appropriation benefit the community as a whole?

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b. Does the appropriation directly relate to the functions of government?

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c. What is the intended ultimate goal or benefit to the public?

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d. What percentage of the beneficiaries are Murray residents?

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## **PROGRAM OVERSIGHT**

10. Identify and Describe other sources of funding used for the program:

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11. Briefly describe your agency's fiscal oversight/internal controls to minimize opportunities for fraud, waste, and mismanagement:

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12. How does your agency plan to segregate these funds from other agency funds for purposes of identification, tracking, reporting and audit?:

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13. What other financial resources are committed to the program?:

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14. Describe the organization's relative experience in undertaking a program of similar scope and complexity:

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15. How will these funds further the mission of your organization?

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## **ATTACHMENTS**

Please include the following documents with your application, Incomplete applications will not be considered for funding.

Proof of non-profit status

By-Laws

Articles of Incorporation/Utah Certificate of Formation

Organization chart

Existing Annual Budget

Proposed program budget, including line-item expenses

Personnel policies and volunteer policies

Presentation

Certificate/proof of insurance (professional and general liability)



## **CERTIFICATIONS**

### **THE APPLICANT CERTIFES TO THE BEST OF HIS/HER KNOWLEDGE AND/OR ACKNOWLEDGES:**

- a. The information submitted to the Murray City in this application, and substantially in connection with this application, is true and accurate.
- b. The applicant organization is compliant with applicable laws, regulations, ordinances, and orders applicable to it that could have an adverse material impact on the project. Adverse material impact includes lawsuits, criminal or civil actions, bankruptcy proceedings, regulatory action by a governmental entity, or inadequate capital to complete the project.
- c. The applicant organization is not in default under the terms and conditions of any grant or loan agreements, leases, or financing arrangements with its creditors that could have an adverse material impact on the program.
- d. The applicant organization must disclose, and will continue to disclose, any occurrence or event that could have an adverse material impact on the program.
- e. If funded, grant awards will be made in the form of a sub-recipient agreement executed between the applicant and the City. The grant period, scope, allowable budget, and reporting requirements will be outlined in the contract between the nonprofit and the City. Payments will be made on an itemized basis; no lump sums will be distributed through this program.
- f. Submitting incomplete, false, or misleading information in connection with an application may result in the applicant being found ineligible for financial assistance.
- g. Applicant must complete entire application to be eligible.

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE