

RURAL ECONOMIC ACTION PLAN



Association of Central Oklahoma Governments

4205 N. Lincoln Blvd. | Oklahoma City, OK 73105 | 405.234.2264 | acogok.org

**THIS FORM IS REQUIRED FOR ALL REAP APPLICATIONS.
IT MUST BE SIGNED AND ATTESTED BY CITY, TOWN OR
COUNTY OFFICIALS.**

Resolution Authorizing Application for Financial Assistance from the Rural Economic Action Plan Fund

WHEREAS, the Oklahoma County District 1
(GOVERNMENTAL ENTITY, E.G., CITY, TOWN OR COUNTY) desires to seek funding from the Rural
Economic Action Plan Fund for Guardrail Post Driver Attachment in the Oklahoma County District 1 ;
(PROJECT DESCRIPTIONS/DESCRIPTION OF NEED) (GOVERNMENTAL ENTITY)
and

WHEREAS, it is in the best interest of the residents of Oklahoma County District 1 to expedite the
(GOVERNMENTAL ENTITY)
preparation and submission of an application for financial assistance from the Rural Economic Action
Plan Fund in the form of a grant.

NOW THEREFORE BE IT RESOLVED that Joe Blough, Interim Commissioner of the
(CHIEF ELECTED OFFICIAL)
Oklahoma County District 1 is hereby authorized and directed to sign an application and related
(GOVERNMENTAL ENTITY)
documents necessary to file and process a grant application through the Rural Economic Action Plan
Fund on behalf of the Oklahoma County District 1 .
(GOVERNMENTAL ENTITY)

PASSED AND APPROVED by the Board of County Commissioners, Oklahoma County this _____
(GOVERNING BODY)
day of _____ 20____.

By: _____
TITLE

ATTEST: _____

RURAL ECONOMIC ACTION PLAN



Association of Central Oklahoma Governments

4205 N. Lincoln Blvd. | Oklahoma City, OK 73105 | 405.234.2264 | acogok.org

ALL APPLICATIONS SPONSORED BY ANOTHER ENTITY MUST ATTACH THIS COMPLETED RESOLUTION SIGNED BY CITY, TOWN OR COUNTY OFFICIALS.

MUNICIPAL OR COUNTY GOVERNMENT CO-SPONSOR CERTIFICATION

As the _____ of _____
(MAYOR/COMMISSIONER) (CITY, TOWN, COUNTY)

(City, Town, County), I hereby certify that I am familiar with the Rural Economic Action Plan (REAP) grant process for the ACOG region, and that I or my legal counsel have reviewed the statutory criteria for eligibility and participation in the REAP funds. Further, that I have reviewed the REAP Program policies, guidelines and rating criteria for the ACOG region.

The undersigned acknowledge and understand:

1. That the completed ACOG REAP application forms with attached information and the rating criteria for projects will be the only basis utilized to score applications. Any of the specific rating criteria which are not addressed on the REAP grant application forms will not be assigned any points, and a zero point score will be recorded for that item.
2. In the applications for projects located in unincorporated areas outside the boundaries of cities or towns, the applicant must provide written documentation evidencing an existing community organization (such as an historical society, a senior citizens group, a rural fire department, etc.). The grant applicant hereby represents that it will be fully accountable and responsible for all of the grant project implementation, operations and ongoing maintenance. The grant applicant specifically understands that the local or county government co-sponsor has no responsibility for any of the grant project implementation, operations or ongoing maintenance, except as otherwise agreed upon between the parties in a separate, written agreement.

(MAYOR/COMMISSIONER)

DATE

NAME, TITLE, SIGNATURE OF REAP
APPLICANT/BENEFICIARY

DATE