

The Montana Emergency Tourism Assistance Program (“METAP”)

**Application and Guidelines**

Community MT

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### **The Montana Emergency Tourism Assistance Program (METAP) Guidelines**

The Montana Emergency Tourism Assistance Grant Program (METAP) is a state-funded opportunity authorized by the 2023 Montana Legislature’s enactment of Senate Bill 540 (“SB 540”). On an annual basis beginning July 1, 2023, there is an appropriated $750,000 from the Lodging Facility Tax fund to the Montana Department of Commerce (“Commerce”) to distribute grant awards for tourism-related emergency service projects in rural areas.

The Montana Department of Commerce (“Commerce”), Community MT Division (“Community MT”), will administer the METAP in accordance with these Guidelines. To the extent these Guidelines conflict with SB 540, the terms of SB 540 control.

**Definitions**

Consistent with § 1(4) of SB 540, the Department has adopted the following definitions:

**Emergency Services:** Emergency services, as defined by 10-4-101(6), MCA, are services provided by a public or private safety agency, including law enforcement, firefighting, ambulance or medical services.

**Rural:** For purposes of the METAP grant, a Rural area is defined as any area that is not "Urban,” as defined below.

**Urban:** Urban places are defined as either: 1) a census urban area with a population at or exceeding 30,000 people according to the most recent United States census; or 2) an incorporated city/town within 10 miles of one of those large urban areas. Areas in Montana that meet this definition currently include Billings, Bozeman, Butte, Great Falls, Helena, Kalispell, Missoula, Belgrade, Columbia Falls, East Helena, Laurel, Walkerville, and Whitefish.

**Eligible Applicants**

Eligible entities, as defined by SB 540, must be in or serve a rural area. Applicants may use this [map](https://www.arcgis.com/apps/dashboards/1482e71be2a34511ab6577fa7689ffdb) to determine rural eligibility. The following entities are eligible to apply for a METAP grant:

* A rural incorporated city or town;
* A rural county government;
* A rural consolidated government;
* A rural tribal government (a waiver of sovereign immunity likely will be required for a tribal government to receive funding); or
* Any entity that provides emergency services or response units to a rural area.

## Eligible Projects

Eligible applicants may use SB 540 funds to purchase or provide tourism-related emergency services.

Funding recipients generally may use METAP grant funds for the following activities:

* Ambulances;
* Police vehicles;
* Firefighting vehicles or equipment;
* Hospital or emergency response equipment; and
* Search and rescue team supplies or equipment.

A project related to tourism-related emergency services other than those listed above also may be approved by the Department. Please contact Community MT Division staff prior to submitting an application for additional guidance.

## Ineligible Projects

METAP grant funds generally cannot be used to pay for the following activities:

* Operation and maintenance of costs or expenses;
* Grant administration and management expenses;
* Research or other grant opportunities;
* Financial expenses, including but not limited to interest expense, bond issuance costs, or any other debt related costs or expenses; or
* Any otherwise eligible project costs incurred prior to the date of announcement of the grant award by the Department.

## Allocations

The maximum amount that will be awarded for a METAP grant is $75,000. Applicants may apply for one (1) METAP grant per funding cycle. Applicants with an open METAP grant generally are ineligible to apply for an additional grant until their current project is completed and closed out, unless approved in writing in advance by the Department.

## Application Submission and Award Process

#### Application Submission:

To be considered for priority funding, an eligible applicant must apply by 5:00PM on September 30, 2024. Applications received after September 30, 2024 may be reviewed by the Department if additional funding is available. Applications will be reviewed in the order received.

#### File Transfer Service:

To apply for grant funding, an applicant must upload the application to the State of Montana File Transfer Service (FTS). To access the FTS, an applicant must register with OKTA. To register with OKTA, go to the FTS [page](https://transfer.mt.gov/Home/Login) and select ‘Register now!’ from the Login screen and follow the prompts. After registration, an applicant can access the FTS to upload the application for submission. Please see these [instructions](https://comdev.mt.gov/_shared/CDBG/docs/Grants/2CDBGPFAppGdlns/ePass-OKTA-FTS-Instructions-CDD.pdf) for additional help.

#### Award Process:

Commerce will review and award applications in the order they are received. Applications that meet all of the eligibility requirements described above will be awarded up to the max amount until all grant funds are obligated.

All applicants will be notified of award decisions by email.

The disbursement of grant funds for awarded projects are subject to grantee’s completion, and submission to Commerce, of the following:

1. a completed budget and implementation schedule for the project;
2. a completed contract with Commerce, a provision of which must include an attestation that funds will only be used for rural tourism-related emergency services.

#### Reimbursement Basis for Grant Disbursements

Commerce shall disburse grants by reimbursement as grant recipients incur eligible project expenses in accordance with the terms of the contract. If actual project expenses are lower than the projected expense of the project, Commerce may, at its sole discretion, recapture the amount over actual costs for redistribution to other applications.

#### Project Reports and Completion Notices

As required by Commerce, Grantees shall provide a quarterly progress report, including completing Commerce’s invoice tracking sheet, identifying the following:

1. work that has been undertaken on the project;
2. the percentage of work completed;
3. the amount of funds expended to date;
4. remaining funds;
5. a description of any significant problems; and
6. whether the project encountered any modification necessary to the scope of work, budget, or schedule.

If the project is completed in an efficient manner, all of these items may occur in a single reporting effort.

The quarterly report and invoice tracking sheet can be found on Commerce’s website.

Grantees also must submit a final report to Commerce at the completion of the project. The final report must confirm the project was completed as intended from the applicant.

#### Project Management:

The grantee is fully responsible for managing the project and ensuring that it is completed on time and within budget. If cost overruns occur, the cost of the overrun is the full and sole responsibility of the grantee.

#### Project Completion:

Projects must be completed by December 31, 2026. The grantee may request a one-time extension, which Commerce may approve at its discretion.

#### Return of Funds:

At the Department’s sole discretion, the grantee will be required to and agrees it shall return to the Department any and all funds that are determined by the Department to have been spent in violation of the terms and conditions of the grant contract.

# METAP APPLICATION

# INSTRUCTIONS

***Section I.***

**ALL METAP APPLICATIONS SUBMITTED TO COMMERCE MUST CONTAIN THE FOLLOWING REQUIRED INFORMATION:**

1. Project Name: The name of the project for which the applicant is seeking a grant.
2. Primary Contact: The name, title, mailing address, telephone number, and email address of the individual directly responsible for management of the project.
3. Project Type: Check the box to indicate the project type requesting funding.
4. Description of Prospective Project: Provide a narrative description of the prospective project, including a description of:
   1. the problems to be addressed;
   2. the need and/or purpose for the proposed project;
   3. how the proposed project is appropriate, cost effective, and a long-term solution;
   4. how the proposed project complies with the tourism-related emergency services requirement;
   5. a list of tasks to be undertaken.
5. Required Documents:

Please submit the following documents as attachments at the end of the application.

* 1. Budget

Complete the attached project budget and identify estimates of the total project cost. Cost estimates from a qualified professional may be requested by the Department to justify the proposed budget; applicants are encouraged to provide estimates from qualified contractors or vendors as part of the application, in support of the amount of funds requested. Cost estimates also must show the total cost of the project and be itemized by the list of task elements to be completed.

* 1. Implementation Schedule

Complete the attached implementation schedule and identify each step in the project through the completion of work. Specific calendar dates are recommended.

1. Certification: An authorized project representative must sign a statement that the information contained in the application is true

# METAP APPLICATION

***Section I***

#### 1. Project Name:

**2. Primary Contact**: Title: Address: City: Zip Code: Phone: E-mail:

**3.** Project Type: Must be tourism-related emergency services

Ambulances

Police Vehicles

Firefighting vehicles or equipment

Hospital or emergency response equipment

Search and rescue team supplies or equipment

Other projects that relate to emergency services (please explain)

#### 4. Description of Prospective Project

1. Project summary and problems to be addressed (please provide narrative response):
2. Provide a narrative description for the need or purpose of the project:
3. Explanation as to why the proposed project is appropriate, cost-effective, and a long-term solution to the problem:
4. Explanation as to how the proposed project complies with the tourism-related emergency services requirement:
5. List of tasks to be completed (please provide narrative response):

#### 5. Required Documentation

**Please submit the following documents as attachments to support the project as attachments to the application:**

1. Cost Estimates; and
2. Implementation Schedule.

#### Photos documenting problems/proposed solutions are recommended, but not required.

**6. Certification to Submit:**

**The undersigned authorized representative hereby certifies that** (a) the information set forth in this application is correct to the best of his/her knowledge; (b) s/he has received, read, and understood these guidelines and agrees to comply with all requirements imposed by SB 540; (c) the representatives of this proposal have authorized the submittal of this application; (d) s/he has the authority to act on behalf of the applicant on whose behalf s/he is submitting this application, and (e) agrees to comply with all applicable state or federal laws and statues associated with carrying out the project, including providing Commerce with all information required by SB 540.

#### Signature Date Printed Name and Title

**PROJECT BUDGET**

(Please modify the budget line items to best reflect specific project needs)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **ADMINISTRATION** | **Source: SB540** | **Source: <other funding>** | **Source:** | **TOTAL** |
|  |  |  |  | $0 |
|  |  |  |  | $0 |
|  |  |  |  | $0 |
|  |  |  |  | $0 |
|  |  |  |  | $0 |
|  |  |  |  | $0 |
| **TOTAL ADMINISTRATION** | $0 | $0 | $0 | $0 |
|  |  |  |  |  |
| **ACTIVITIES** |  | | | |
|  |  |  |  | $0 |
|  |  |  |  | $0 |
|  |  |  |  | $0 |
|  |  |  |  | $0 |
|  |  |  |  | $0 |
|  |  |  |  | $0 |
|  |  |  |  | $0 |
| **TOTAL ACTIVITY** | $0 | $0 | $0 | $0 |
|  |  |  |  |  |
| **TOTAL PROJECT BUDGET** | **$0** | **$0** | **$0** | **$0** |

#### IMPLEMENTATION SCHEDULE

(Please modify the implementation schedule tasks to best reflect specific project needs) Quarterly Progress reports must be submitted to the Department

|  |  |
| --- | --- |
| **TASK** | **MONTH** |
|  |  |
| **PROJECT START UP** |  |
| Preparation of MDOC Contract |  |
|  |  |
| **PROCUREMENT OF PROFESSIONAL ASSISTANCE** |  |
| Submit Request for Proposals to DOC for approval, if required |  |
| Publish RFP |  |
| Select professional |  |
| Execute agreement with professional |  |
|  |  |
| **PROJECT IMPLEMENTATION** |  |
| Prepare draft deliverables |  |
| Submit interim Request for Funds, Progress Report and draft deliverables |  |
| Public review and comment |  |
| Finalize deliverables |  |
|  |  |
| **PROJECT CLOSE OUT** |  |
| Submit final deliverables |  |
| Submit final Request for Funds and Completion Report |  |