

Helping Hand Mini Grant Application Guidelines 2021

Program Objective: MArtap established this Helping Hand Mini Grant program to assist councils on aging/friends groups and non-profit transportation providers improve delivery of transportation services in rural and small urban areas.

Eligible uses

Mini Grants must be directly related to the agency's transportation program and may include:

- Computer hardware and software, both new and upgrades
- Fax machines, copy machines, printers, scanners, all in one machines
- Marketing and promotional materials including web page design and setup
- Driver recruitment campaigns
- Community surveys on transportation needs, postage excluded
- Tools that enhance passenger security
- Accessory equipment for vehicles including but not limited to tie-downs, tires, GPS, additional seats, wheelchairs, etc.

Required Documentation

Please submit two (2) quotes for the items you intend to purchase and the 10% local match commitment letter along with your application. Quotes may include prices listed off a website. If you need assistance obtaining quotes or would like to apply for funding for something that has not been identified in the eligible uses, please contact us.

For some items (such as computers, office equipment, tools and accessory equipment), MArtap encourages you to visit www.comm-pass.com. If you need help on this website, please contact MArtap. Other websites to reference: www.gov.connection.com www.tigerdirect.com.

Ineligible:

- Cell phones, pagers, and monthly fees
- Postage
- Other operational expenses such as salaries, rents, leases

Grant Value:

• \$1,000 maximum award with a 10 percent, local match for a \$1,100 purchase

Timeline:

- Grant application period May 14, 2021 June 14, 2021
- Award decisions June 30, 2021
- Reimbursement request deadline July 31, 2021
- No late reimbursement requests will be honored



2021 Helping Hand Mini Grant Application

| Agency: | | | | |
|----------------------------------------------------------------------------------------------|-----------------|-------------------------------|----------------|-----|
| Executive Director or Administ | rator: | | | |
| Address: | | | | |
| City, State, Zip: | | | | |
| Telephone: | Fax: | Email: | | |
| Authorized Signature: | | | | |
| List general description and couses as explained in the guide | lines. | for which grant will be use | _ | ole |
| | | | | |
| Total cost of desired purchase Less 10% local contribution Amount of Helping Hand Mini | i Grant Requesi | t (may not exceed \$1,000) | \$ \$ \$ | |
| Please explain how this grant | will improve de | livery of transportation serv | ices. | |
| | | | | |
| | | | | |
| Number of vehicles your organ | nization operat | es | | |

PLEASE NOTE: A one-page letter verifying source of 10 percent match commitment and, if necessary, further explanation of how funds will be used to improve transportation services must be included to complete the grant application. Applications must be received electronically to MARTAP@state.ma.us no later than June 14, 2020. No late applications will be considered. A confirmation will be sent via email for applications received. All applicants will receive a response. More information will follow once the MArtap Advisory Committee reviews applications in mid-June. If you have questions, please contact MArtap at 877-MArtap1 (627-8271) or email to MARTAP@state.ma.us.