

This Workspace form is one of the forms you need to complete prior to submitting your Application Package. This form can be completed in its entirety offline using Adobe Reader. You can save your form by clicking the "Save" button and see any errors by clicking the "Check For Errors" button. In-progress and completed forms can be uploaded at any time to Grants.gov using the Workspace feature.

When you open a form, required fields are highlighted in yellow with a red border. Optional fields and completed fields are displayed in white. If you enter invalid or incomplete information in a field, you will receive an error message. Additional instructions and FAQs about the Application Package can be found in the Grants.gov Applicants tab.

OPPORTUNITY & PACKAGE DETAILS:

Opportunity Number:	PWEAA2020
Opportunity Title:	FY 2020 EDA Public Works and Economic Adjustment Assistance Programs
Opportunity Package ID:	PKG00255947
CFDA Number:	11.300
CFDA Description:	Investments for Public Works and Economic Development Facilities
Competition ID:	PW-EAA-C
Competition Title:	EDA Construction Full Application 11.300 and 11.307
Opening Date:	10/18/2019
Closing Date:	09/30/2022
Agency:	Economic Development Administration
Contact Information:	www.eda.gov/contact

APPLICANT & WORKSPACE DETAILS:

Workspace ID:	WS00441549
Application Filing Name:	Rail Expansion Opportunity Zone Jonesboro, Arkansas Project
DUNS:	0735402880000
Organization:	JONESBORO, CITY OF
Form Name:	Application for Federal Assistance (SF-424)
Form Version:	2.1
Requirement:	Mandatory
Download Date/Time:	Mar 30, 2020 03:41:27 PM EDT
Form State:	Error(s)

FORM ACTIONS:

Application for Federal Assistance SF-424

*** 9. Type of Applicant 1: Select Applicant Type:**

C: City or Township Government

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

*** 10. Name of Federal Agency:**

Economic Development Administration

11. Catalog of Federal Domestic Assistance Number:

11.300

CFDA Title:

Investments for Public Works and Economic Development Facilities

*** 12. Funding Opportunity Number:**

PWEAA2020

* Title:

FY 2020 EDA Public Works and Economic Adjustment Assistance Programs

13. Competition Identification Number:

PW-EAA-C

Title:

EDA Construction Full Application 11.300 and 11.307

14. Areas Affected by Project (Cities, Counties, States, etc.):

Add Attachment

Delete Attachment

View Attachment

*** 15. Descriptive Title of Applicant's Project:**

. The new rail siding will also allow for proposed increased production at the industrial park. Therefore, with the expansion of the rail siding 405 jobs will be saved and 125 will be created.

Attach supporting documents as specified in agency instructions.

Add Attachments

Delete Attachments

View Attachments

Application for Federal Assistance SF-424

* 1. Type of Submission:

- Preapplication
 Application
 Changed/Corrected Application

* 2. Type of Application:

- New
 Continuation
 Revision

* If Revision, select appropriate letter(s):

* Other (Specify):

* 3. Date Received:

Completed by Grants.gov upon submission.

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier:

State Use Only:

6. Date Received by State:

7. State Application Identifier:

8. APPLICANT INFORMATION:

* a. Legal Name:

City of Jonesboro, Arkansas

* b. Employer/Taxpayer Identification Number (EIN/TIN):

71-6013749

* c. Organizational DUNS:

0735402880000

d. Address:

* Street1:

300 South Church St.

Street2:

* City:

Jonesboro

County/Parish:

Craighead

* State:

AR: Arkansas

Province:

* Country:

USA: UNITED STATES

* Zip / Postal Code:

72403-1845

e. Organizational Unit:

Department Name:

Division Name:

f. Name and contact information of person to be contacted on matters involving this application:

Prefix:

* First Name:

Regina

Middle Name:

* Last Name:

Burkett

Suffix:

Title: Director of Community Development

Organizational Affiliation:

* Telephone Number:

870-520-8398

Fax Number:

* Email:

rburkett@jonesboro.org

Application for Federal Assistance SF-424

16. Congressional Districts Of:

* a. Applicant

* b. Program/Project

Attach an additional list of Program/Project Congressional Districts if needed.

17. Proposed Project:

* a. Start Date:

* b. End Date:

18. Estimated Funding (\$):

* a. Federal	<input type="text" value="2,038,600.00"/>
* b. Applicant	<input type="text" value="509,650.00"/>
* c. State	<input type="text" value=""/>
* d. Local	<input type="text" value=""/>
* e. Other	<input type="text" value=""/>
* f. Program Income	<input type="text" value=""/>
* g. TOTAL	<input type="text" value="2,548,250.00"/>

*** 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

- a. This application was made available to the State under the Executive Order 12372 Process for review on
- b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- c. Program is not covered by E.O. 12372.

*** 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)**

Yes No

If "Yes", provide explanation and attach

21. *By signing this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**

** I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix: * First Name:
Middle Name:
* Last Name:
Suffix:

* Title:

* Telephone Number: Fax Number:

* Email:

* Signature of Authorized Representative:  * Date Signed: