Effective August 27, 2020, Coronavirus Relief Fund (CRF) granting entities are required to include the below list of assurances in their grant applications and/or grant awards. Granting entities can add to these assurances, but please do not alter or remove any of the listed assurances without prior approval from the Deputy Secretary of the Agency of Administration.

Unless noted otherwise, the grant assurances apply to all CRF grant programs.

An authorized signatory of [PLACEHOLDER] must attest to the following by checking the box next to the statement and signing this document.

* 1. I have the authority to request payment from the State of Vermont. I am requesting payment for costs incurred in connection with section 601 of the Social Security Act, as added by section 5001 of the Coronavirus Aid, Relief, and Economic Security Act, Pub. L. No. 116-136, div. A, Title V (Mar. 27, 2020) (“section 601”).
* 2. As required by federal law, the proposed uses of the funds provided will only cover costs that-
  1. are necessary expenditures incurred due to the public health emergency with respect to the Coronavirus Disease 2019 (COVID-19).
  2. were not accounted for in the state budget most recently approved as of March 27, 2020.
  3. were incurred during the period that begins on March 1, 2020 and ends on December 30, 2020.
* 3. ***[Applies only to grants provided to cover costs]*** [PLACEHOLDER] will report on incurred expenses, in a form and at a frequency prescribed by the State of Vermont and will cooperate with the State of Vermont in creating and retaining appropriate documentation to demonstrate that the proposed uses meet the requirements of section 601.
* 4. ***[Applies only to grants provided to private entities to cover revenue losses]*** [PLACEHOLDER] will report on revenue losses, in a form and at a frequency prescribed by the State of Vermont and will cooperate with the State of Vermont in creating and retaining appropriate documentation to demonstrate that the proposed uses meet the requirements of section 601.
* 5. To the extent that actual expenditures or demonstrated need is less than the total grant award amount, [PLACEHOLDER] agrees to return the balance of unspent funds to the State of Vermont. If the United States Department of the Treasury recoups funds from the State of Vermont based on a determination that these grant award funds were used in a manner not in compliance with section 601, [PLACEHOLDER] agrees that the State of Vermont may recover funds from [PLACEHOLDER] by reducing future funding in State budgets.
* 6. [PLACEHOLDER] must repay the grant or portion of the grant to the [GRANTING ENTITY] if: any grant funds received were issued in error; are based on incorrect representations made to the [GRANTING ENTITY]; or any costs forming the basis of a grant award under this program are covered by other federal grants or federally forgiven loans received by [PLACEHOLDER]. I agree that the final determination of whether there has been a duplication of benefits and the amount to be repaid, if any, will be made by the [GRANTING ENTITY].
* 7. ***[Applies only to grants provided to cover costs]*** [PLACEHOLDER] has applied for FEMA-Public Assistance funding first for all FEMA-eligible expenses before applying to this grant. [PLACEHOLDER] will only use this grant to cover expenses that are not eligible for FEMA-Public Assistance reimbursement.
* 8. [PLACEHOLDER] shall maintain and make available to the State of Vermont and/or United States Department of the Treasury, upon request, all documents and financial records sufficient to establish compliance with subsection 601(d) of the Social Security Act, as amended, (42 U.S.C. 801(d)). Records must be maintained for 5 years after final payment is made using Coronavirus Relief Funds. Records to support compliance with subsection 601(d) may include, but are not limited to, copies of the following:
  1. General ledger and subsidiary ledgers used to account for (a) the receipt of Coronavirus Relief Fund payments and (b) the disbursements from such payments to meet eligible expenses related to the public health emergency due to COVID-19;
  2. Budget records for 2019 and 2020;
  3. Payroll, time records, human resource records to support costs incurred for payroll expenses related to addressing the public health emergency due to COVID-19;
  4. Receipts of purchases made related to addressing the public health emergency due to COVID-19;
  5. Contracts and subcontracts entered into using Coronavirus Relief Fund payments and all documents related to such contracts;
  6. Grant agreements and grant subaward agreements entered into using Coronavirus Relief Fund payments and all documents related to such awards;
  7. All documentation of reports, audits, and other monitoring of contractors, including subcontractors, and grant recipient and subrecipients;
  8. All documentation supporting the performance outcomes of contracts, subcontracts, grant awards, and grant recipient subawards;
  9. All internal and external email/electronic communications related to use of Coronavirus Relief Fund payments; and
  10. All investigative files and inquiry reports involving Coronavirus Relief Fund payments.
* 9. To the best of my knowledge, neither [PLACEHOLDER] nor [PLACEHOLDER]'s principals (officers, directors, owners, or partners) are presently debarred, suspended, proposed for debarment, declared ineligible or excluded from participation in Federal programs, or programs supported in whole or in part by Federal funds.
* 10. ***[Applies only to non-Federal entities[[1]](#footnote-1)]*** [PLACEHOLDER] will complete the Subrecipient Annual Report annually within 45 days after its fiscal year end, informing the State of Vermont whether a Single Audit is required for the prior fiscal year. If a Single Audit is required, [PLACEHOLDER] will submit a copy of the audit report to the State of Vermont within 9 months. For fiscal years ending on or after December 25, 2015, a Single Audit is required if the subrecipient expends $750,000 or more in Federal assistance during its fiscal year and must be conducted in accordance with 2 CFR Chapter I, Chapter II, Part 200, Subpart F.
* 11. [PLACEHOLDER] will submit reports as required by the State of Vermont, Agency of Administration, and/or [GRANTING ENTITY].
* 12. The [GRANTING ENTITY] may share the information on this grant with other Vermont state agencies, and other Vermont agencies can share information with [GRANTING ENTITY] for the purpose of verifying [PLACEHOLDER]’s eligibility for this or another grant or stimulus payment related to the COVID-19 pandemic.
* 13. All of [PLACEHOLDER]’s tax returns are completed and filed through the date of application filing.
* 14. [PLACEHOLDER] complies with local, state and federal labor laws.
* 15. [PLACEHOLDER] is in good standing with the Vermont Secretary of State.
* 16. ***[Applies only to grants that will be used to provide hazard pay to employees]***Please certify the following:

1. [PLACEHOLDER] has established a process to permit eligible employees to elect not to receive hazard pay funded by a grant provided pursuant to the Program and record keeping procedures to track which employees have elected not to receive a grant.
2. [PLACEHOLDER] acknowledges and agrees that grant funds received for hazard pay will only be used to cover hazard pay for eligible employees in accordance with section 601 of the Social Security Act, as added by section 5001 of the Coronavirus Aid, Relief, and Economic Security Act, Pub. L. No. 116-136, div. A, Title V (Mar. 27, 2020) (“section 601”).

* 17. ***[Applies only to grant programs that advance pay Coronavirus Relief Funds to subrecipients]*** [PLACEHOLDER] may deposit Fund payments into interest bearing accounts provided that if recipients separately invest amounts received from the Fund, they must use the interest earned or other proceeds of these investments only to cover expenditures incurred in accordance with section 601(d) of the Social Security Act and the Guidance on eligible expenses. If the subrecipient does not fully expend the grant award amount, the interest earned will be returned to the State along with the unspent balance.
* 18. I attest, under penalty of perjury, that all information provided on this form is true and accurate. I understand that the State of Vermont will rely on this certification as a material representation in making this grant award. Further, I understand that intentional misrepresentation of information is fraud and may subject me or my organization to disqualification from receiving further benefits, administrative penalties, and criminal prosecution.

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

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

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. As defined by 2 CFR § 200.69, a non-Federal entity means a state, local government, Indian tribe, institution of higher education (IHE), or nonprofit organization that carries out a Federal award as a recipient or subrecipient. [↑](#footnote-ref-1)