

**APPENDIX 2: NY PLATES Application  
Program Specific Questions**

**PROGRAM SPECIFIC ELIGIBILITY CRITERIA**

What is the Organization's HPNAP EFRO# or current HPNAP contract number?	
Is the Organization's facility open to the public?	<input type="checkbox"/> YES or <input type="checkbox"/> NO
Does the Organization's program provide food relief services at least three (3) days/week for a minimum of 6 months of the year?	<input type="checkbox"/> YES or <input type="checkbox"/> NO
Has the Organization been operating as an emergency food program vetted by the NYS DOH HPNAP or a HPNAP contractor for a minimum of six (6) months during the period of May 2025 to April 2026?	<input type="checkbox"/> YES or <input type="checkbox"/> NO
Has the Organization submitted at least six (6) months of service reports during the period of May 2025 to April 2026 to NYS DOH HPNAP or HPNAP contractors prior to submitting a NY PLATES application?	<input type="checkbox"/> YES or <input type="checkbox"/> NO
Is the Organization in good standing, including having no health code violations or unresolved HPNAP service issues?	<input type="checkbox"/> YES or <input type="checkbox"/> NO
If the Applicant and/or owner of the project site is a religious organization, will the project site identified in the Application and any equipment to be paid for with NY PLATES funding be used for purposes other than the HPNAP supported program?	<input type="checkbox"/> YES or <input type="checkbox"/> NO
Will the Applicant be the entity entering into contracts and paying project related costs?	<input type="checkbox"/> YES or <input type="checkbox"/> NO
Will the Project be funded in whole or in part by an existing or proposed tax credit structure (e.g., New Market Tax Credits, Low-Income Housing Tax Credits, etc.) or other similarly structured financing arrangements, or will Project Costs serve as an eligible basis to generate Tax Credits?	<input type="checkbox"/> YES or <input type="checkbox"/> NO

**TYPE OF APPLICANT** Refer to the NY PLATES RFA Section 7: Definitions

- Emergency Food Program
- Other Emergency Food Program
- Municipality
- Food Bank

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**SITE CONTROL**

If your lease requires the permission of the landlord to undertake the proposed project, please provide a letter of support from the landlord or realty entity, on their letterhead, indicating support for the project. **Such a letter must be uploaded with the lease in the DASNY Grants Application Portal, Project Location(s) and Site Control Documentation.**

**NY PLATES FUNDING**

Requested Grant Amount	\$
Refer to Section One of the RFA and select the correct "Eligible Applicant Priority and Grant Funding Level."	<input type="checkbox"/> Priority 1 - Emergency Food Program, Other Emergency Food Program, and Municipality providing food relief services  <input type="checkbox"/> Priority 2 - Food Bank

**ENVIRONMENTAL OR REGULATORY PERMITS**

Specify the environmental or regulatory permits required for this project. If none are required, respond with "N/A."	
If environmental or regulatory permits are required, have those permits been secured?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
If "no," please explain.	

**ELIGIBILITY FOR TAX-EXEMPT FINANCING**

Has the Applicant previously received financing from the sale of tax-exempt bonds for <u>this Project</u> ? If yes, attach a schedule describing the details of such financing.	<input type="checkbox"/> YES or <input type="checkbox"/> NO
Does the Applicant anticipate applying for financing for <u>this Project</u> from the sale of other bonds?	<input type="checkbox"/> YES or <input type="checkbox"/> NO

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<p>*Have any funds been expended, or obligations incurred to date on that portion of the Project for which this Application is made? <u>If yes</u>, attach a schedule showing details of such disbursements (date, purpose, payee, etc.).</p>	<input type="checkbox"/> <b>YES</b> or <input type="checkbox"/> <b>NO</b>
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\*Costs incurred and paid prior to April 1, 2026, are not eligible for NY PLATES funding.

**PROJECT NEED**

<b>Achieving NYS DOH/State Regulations, Code Enforcement, and Other Regulatory Requirements</b>
<b><i>Question 1: Regulatory Compliance Strategy</i></b>
<p>Describe the organization's current understanding of and compliance with all relevant NYS DOH regulations, building codes, and food safety standards applicable to the proposed capital project.</p>
<p>Detail the plan for ensuring that the proposed improvements will meet or exceed all current and anticipated future regulatory requirements. Include specific examples of how the project will address any identified gaps or areas for improvement in the organization's current operations.</p>

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If the project involves construction or significant renovation, please outline the steps that will be taken to obtain necessary permits and approvals from relevant authorities.

***Question 2: Infrastructure and Equipment for Compliance***

Explain how capital improvements (e.g., expanded space, upgraded infrastructure, new equipment like cold storage, freezers, or food transport vehicles) will directly contribute to meeting NYS DOH/State and local regulations and code enforcement.

Provide specific details on how the new or upgraded equipment will enhance food safety, temperature control, storage capacity, or transportation efficiency to ensure compliance with all relevant standards. For example, if proposing new refrigeration, describe its capacity, temperature monitoring capabilities, and energy efficiency.

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**Addressing Social Vulnerability and Food Insecurity**

***Question 3: Impact on Socially Vulnerable Populations***

Identify the specific socially vulnerable populations within your service area that your organization serves, using metrics like the Social Vulnerability Index (SVI).

Describe how the proposed capital project will directly enhance capacity to combat hunger and food insecurity for these identified vulnerable populations.

Provide data or evidence to support claims about the level of food insecurity and social vulnerability in the service area.

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<b>Question 4: Project Reach and Accessibility</b>
Explain how the proposed capital improvements will expand the organization's reach and/or improve accessibility to nutritious food for underserved communities and individuals experiencing food insecurity.
Detail how the project will address barriers to access, such as transportation, geographic location, or language, for the populations served.
If applicable, describe how the project will increase the volume or variety of food distributed to those most in need.



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<b>Question 2: Monthly Meal Distribution and Capacity</b>
<b>Current Monthly Meal Volume:</b> State the average number of meals or pounds of food the organization distributes on a monthly basis. Please provide a clear methodology for how this number is calculated (e.g., per person served, per meal package).
<b>Projected Impact on Meal Volume:</b> Explain how the proposed capital project will directly enable the organization to increase its monthly meal distribution. Quantify the projected increase in meals per month as a direct result of the capital improvements.
<b>Scalability and Sustainability:</b> Describe how the organization's operational capacity will be enhanced by the proposed project to sustain and potentially further increase meal distribution in the future.

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**Question 3: Depth and Breadth of Community Impact**

**Beyond Meal Numbers:** Beyond the number of meals distributed, describe other ways the organization impacts the community. This could include:

- Partnerships with other community organizations (schools, senior centers, faith-based groups, etc.).
- Nutritional education programs or resources provided.
- Access to other essential services is facilitated through food distribution.
- Volunteer engagement and community involvement.

**Measuring Impact:** How does the organization measure the broader impact of its services on food security and community well-being? Please provide examples of any data collection or feedback mechanisms used.