

Butchery Innovation and Revitalization Program

Funding Application

For questions or assistance, please contact businessfinance@iowaeda.com.

Iowa Economic Development Authority
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Des Moines, Iowa 50315
iowaeda.com

APPLICATION DEADLINE: April 18, 2024 – NOON

Introduction

The Butchery Innovation and Revitalization Fund is designed to provide financial assistance in the form of grants to businesses for projects relating to small-scale meat processing, licensed custom lockers, and mobile slaughter units.

Eligible businesses must:

- Employ less than 75 individuals.
- Hold a current license from the United States Department of Agriculture (USDA) or the Department of Agriculture and Land Stewardship (IDALS) or be actively working with USDA or IDALS to obtain a license.
- Demonstrate one-to-one matching financial support for the project.
- Be in good standing with Iowa Department of Revenue, Iowa Alcoholic Beverage Division and Iowa Department of Inspection and Appeals, as applicable. Failure to bring business to good standing prior to completion of application will result in denial.

NOTE: Applicants are first required to complete an assessment of the applicant's proposed investment completed by the Center for Industrial Research and Service at Iowa State University (CIRAS). Refer to CIRAS Assessment Form on IEDA [Butchery Innovation webpage](#) to begin that process. Deadline to submit CIRAS assessment is Nov. 28, 2022.

Eligible projects and expenses include:

- Expand, refurbish, or establish a meat processing business, licensed custom locker, or mobile slaughter unit.
- Renting or purchasing buildings, equipment, and refrigeration and freezer facilities.

Financial considerations include:

- No more than 50 percent of the total project budget can be requested to meet the matching requirement of the program.
- Requesting more than 50% of the qualified investment will disqualify the application
- Maximum award request is \$100,000.

Grant Review and Scoring Process

The review committee will evaluate applications and provide a numerical score and recommendation to the IEDA Board. Numerical scores will be based on the following criteria:

- *25 Points. The extent to which the project expands processing capacity or increases efficiency.*
- *25 points. The sufficiency of the proposed project's financing structure, the feasibility of the sources of funds, and the appropriateness of the proposed uses of the funds.*
- *15 points. The extent to which the proposed investment is consistent with the opportunities identified in the assessment completed by CIRAS.*
- *15 points. The number and quality of jobs to be created by the applicant as a result of the project or the extent to which the proposed investment uses automation to address workforce issues.*
- *10 points. The financial need of the applicant: Applicants that received a business improvement grant from IDALS or a previous grant from the butchery program will receive fewer points.*
- *10 points. The completeness of the application information and sufficiency of detail used to describe the project in the application.*

Grant Award & Notification Process

- IEDA Board will consider recommendations at monthly board meetings.
- IEDA Board approved applications will be notified in writing.
- Awards will be disbursed on a reimbursement basis.
- Amount of reimbursement will be based on the percentage of grant to the Total Project Cost.

PRIOR TO APPLICATION, PLEASE CONFIRM BUSINESS IS IN GOOD STANDING WITH IOWA DEPARTMENT OF REVENUE, IOWA ALCOHOLIC BEVERAGE DIVISION AND IOWA DEPARTMENT OF INSPECTION AND APPEALS, AS APPLICABLE. FAILURE TO BRING BUSINESS TO GOOD STANDING PRIOR TO COMPLETION OF APPLICATION WILL RESULT IN DENIAL.

Application Instructions

1. Complete CIRAS Assessment
2. Complete Butchery Innovation and Revitalization application via AdobeSign"
 - Available in the "How Do I Apply" section on IEDA's [Butchery Innovation webpage](#):

Please allow eight weeks or more for the application review process, presentation to the IEDA Board and initiation of the contracting phase.

Applicant Information

Business Legal Name:

Doing Business As (if applicable):

Business Physical Address:

City:

State:

ZIP:

Business Mailing Address:

(If different from above)

City:

State:

ZIP:

Business County:

Contact Name:

Contact Title:

Contact Phone Number:

Contact Email Address:

Sales Tax Permit Number:

Withholding Tax Number:

US DOT Number:

Business Structure (check applicable box).

Cooperative

Corporation

Limited Liability Company

S-Corporation

Sole Proprietorship

State of Incorporation:

1. Type of eligible meat processing establishment:

- State-Inspected Federally-Inspected
 Licensed Custom Locker Mobile Slaughter Unit

2. Provide the establishment number issued to the business by the Iowa Department of Agriculture and Land Stewardship (IDALS) or USDA and the name of the licensee if different from the applicant.

	Establishment Number	Name of Licensee if different from applicant.
IDALS		
USDA		

- If the business is not yet licensed, is the business actively working towards obtaining a license?
 - If yes, please explain any actions taken towards obtaining a license.

3. Provide any license number the business has been issued by Iowa Department of Inspection and Appeals (DIA) and/or Iowa Alcoholic Beverages Division (ABD).

	License Number	Name of Licensee if different from applicant.
DIA		
ABD		

4. If the business is a mobile slaughter unit, does the business comply with applicable laws, regulations, and the most current mobile slaughter unit compliance guide issued by the United States department of agriculture food safety and inspection service? **NO**

Business Information

5. Provide a brief description of the Business. Include information about the Business' products or services and its markets and/or customers.

6. Is the business located in Iowa?

For the purposes of this program, a business is located in Iowa if at least 98 percent of the business's employees work at the business's operations in Iowa or if the employees that are paid at least 98 percent of the business's payroll work at the business's operations in Iowa.

IEDA may request payroll documentation to verify the percentage of employees or percentage of payroll at the business' operations in Iowa.

7. Has the business received grant or other financial assistance from the State of Iowa in the last three years?

8. List the Business's Iowa locations and the current number of individuals employed at each location including full-time, part-time, and seasonal/other temporary employees.
IEDA may request payroll documentation to verify the number of employees at the business' operations in Iowa.

9. List the Business's locations outside of Iowa and the current number of individuals employed each location including full-time, part-time, and seasonal/other temporary employees.
IEDA may request payroll documentation to verify the number of employees at the business' operations outside of Iowa.

10. Identify the Business' owners and percent ownership:

Project Information

1. Select the applicable eligible project type (hold Ctrl to select all that apply):
 - Refurbish Business
 - New Business
 - Rent or Purchase Building
 - Rent or purchase of refrigeration or freezer facility
 - Rent or Purchase of Refrigeration or Freezer Facility
 - Rent or Purchase of Equipment
2. Describe the investment being proposed.
3. Have you completed the CIRAS Assessment?
 - If no, return to the IEDA Butchery Page at <https://www.iowaeda.com/grow/butchery-innovation-revitalization> and scroll down to the "How Do I Apply" section to begin the CIRAS Assessment.
4. How have you incorporated the CIRAS Assessment into the investment plans being proposed?

5. Provide the project timeline, including start of construction, equipment purchase/installation and project completion. *Work to be completed prior to April 2023 should not be included in the project budget or timeline.*

Activity	Activity Dates

6. Amount of financial assistance requested from IEDA:
The business should request no more than 50 percent of the total project budget to meet the matching requirement of the program. The maximum award request is \$100,000. Requesting more than 50% of the qualified investment will disqualify the application.

7. Complete the chart below with the sources and uses of funds for the project.
Note: The Total Project Budget and Total Funding Sources should match. Budgets should include costs to be incurred after April 2023.

Funding Uses			Funding Sources		
	Purchase	Lease		Amount	Status of Funding Source
Building Acquisition			IEDA Grant (requested grant)		
Building Construction			Bank Loan		
Building Remodeling			SBA Loan		
Cooling/Refrigeration			Business – Internal Financing		
Processing Equipment			Other (describe below)		
Mobile Processing Unit					
Other (describe below)			Other (describe below)		
TOTAL PROJECT BUDGET		\$ 0.00	TOTAL FUNDING SOURCES	\$ 0.00	

8. Will the project be completed if assistance is not awarded?

9. How will the project expand the processing capacity of the business?

10. List the business' current or anticipated competitors.

11. How does this project increase ability for small-scale farmers to have animals processed locally?

12. What opportunities does this project create for local small-scale farmers to market processed meat under private labels?

13. Will the project use automation to address workforce issues?

Explain how.

14. Will the business need to hire additional employees as part of the project?

If yes, provide an estimate or range of wages for new jobs and a description of any benefits offered (such as paid time off or health insurance).

Estimate of Wages (or Range)	List of Benefits Offered

Attachments

Please attach the following documents:

1. CIRAS Assessment documents. This attachment should include the information provided to CIRAS and their response. **REQUIRED**
2. Documentation of sources of funds. *If any portion of the project will be paid by the applicant business, provide documentation that sufficient funds are available.* **REQUIRED**
3. A business plan or marketing plan, if available.
4. For USDA inspected plants, provide a copy of FSIS Form 5200 (*Most recent Grant of Inspection or Application for Inspection*).

SAMPLE FORM

Certification & Release of Information

The applicant certifies the following:

1. Are there any judgments or court actions currently pending or completed in the last five years against the applicant entity, or any current or prospective officer, principal, director, or owner?

If yes, please provide the date and a description of each judgment or court action:

2. In the last five years, has any current or prospective officer, principal, director, or owner been accused or convicted of any wrongdoing or crime, other than a misdemeanor?

If yes, please provide the date and a description of each charge or conviction:

3. Have there been any current or past bankruptcies on the part of the applicant entity (or predecessor entities), or on the part of any current (or prospective) officer, principal, owner or in any business dealings of current (or prospective) officers, principals, or owners of the applicant entity?

If yes, please provide the date and a description of the outcome of any bankruptcy:

4. In the last five years have there been, or are there currently any investigations of potential violations of public health, safety (including workplace safety) or environmental laws by the applicant entity, or any current or prospective officer, principal, director, or owner?

If yes, please provide the date and a description of each investigation or violation:

5. In the last five years have there been, or are there currently any violations of antitrust laws by the applicant entity, or any current or prospective officer, principal, director, or owner?

If yes, please provide the date and a description of each violation:

6. At any time since May 20, 2021, has the applicant required a customer, patron, client, patient or other person invited onto the premises of the business to provide proof that the person has received a vaccination for COVID-19 prior to entering the business ([see 2021 Iowa Acts, House File 889](#))?

If yes, please explain:

The undersigned representative of the applicant hereby gives permission to the Iowa Economic Development Authority (IEDA) to research the Business' history, make credit checks, contact the Business' financial institutions, insurance carriers, and perform other related activities necessary for reasonable evaluation of this application. The undersigned authorizes the Iowa Department of Revenue (IDR) to provide to IEDA state tax information pertinent to the applicant's standing with IDR, including but not limited to information related to state income tax, sales and use tax, state withholding, and claimed state tax credits. The undersigned authorizes the Iowa Department of Workforce Development to provide to IEDA employment and wage information to verify eligibility for the program.

The undersigned understands that all information submitted to IEDA related to this application is subject to Iowa's Open Record Law (Iowa Code, Chapter 22), unless specifically marked as confidential section.

The undersigned understands that IEDA reserves the right to negotiate the financial assistance.

The undersigned is aware that funds will not be disbursed until a contract has been executed and the appropriate terms have been met.

The undersigned hereby certifies that all representations, warranties, or statements made or furnished to IEDA in connection with this application are true and correct in all material respect. The undersigned understands that it is a criminal violation under Iowa law to engage in deception and knowingly make, or cause to be made, directly or indirectly, a false statement in writing for the purpose of procuring economic development assistance from a state agency or subdivision.

For the Applicant:

Name: _____
Auto Completed Upon Signing

Title: _____
i.e. CEO / Manager/ Owner/ Etc.

Signature: _____

Date: _____
Auto Completed Upon Signing