



## Erie County CARES Municipal Reimbursement Program Guidelines

### PROGRAM OVERVIEW

To mitigate the impact of COVID-19 on Erie County's 38 municipalities, and the people that they serve, the County is providing financial support through the Erie County CARES Municipal Reimbursement Program to cover direct costs incurred in responding to the COVID-19 public health emergency.

Act 24 of 2020 was signed by Governor Wolf on May 29, 2020. This legislation provides \$625 million in Coronavirus Aid, Relief, and Economic Security (CARES) Act funding by means of block grants for counties in the commonwealth through the Department of Community and Economic Development (DCED). Erie County has received \$24.3 million in block grant funding, of which \$1.25 million has been committed to the Municipal Reimbursement Program.

### ELIGIBLE USES OF FUNDING

Under federal law, eligible uses of Erie County CARES funding for municipalities must meet three conditions. Expenditures must be:

- Necessary due to the COVID-19 public health emergency;
- Unbudgeted as of March 27, 2020 when the CARES Act was enacted; and
- Incurred between March 1, 2020 and December 30, 2020.

***Funds distributed through Erie County CARES may not replace state or municipal spending, nor may it be used as a substitute for lost government revenue.***

Examples of allowable expenditures include:

- Cleaning supplies
- Cleaning/disinfection of public buildings and public amenities
- Virtual work equipment or software (laptop, computer camera, etc.)
- Hazard pay (additional pay for performing hazardous duty or work involving direct COVID-19 exposure risk)
- Legal fees
- Facility modification (signs, shields, etc.)
- Payroll or benefits expenses for employees whose work duties are substantially dedicated to mitigating or responding to the COVID-19 public health emergency
- Classified advertising
- Overtime related to response
- Postage due to office closure
- PPE (masks, gloves, etc.)
- Training linked to responding to COVID
- Professional services related to responding to COVID

## **SUBMITTING A REIMBURSEMENT REQUEST**

Requests for reimbursement must be made through the online form available at <https://eriecountypa.submittable.com> and submitted by the municipality's highest elected official. The applicant will be required to provide municipal and expenditure information, as well as certify the submission. The application does not require the submission of invoice or check copies, but a transaction detail report is required.

**Requests seeking reimbursement for expenses incurred between March 1, 2020 through August 31, 2020 must be submitted using the online form by September 30, 2020.\***

\*Applications will be reviewed and approved on a rolling basis between August 31<sup>st</sup> and September 30<sup>th</sup>. An additional Municipal Reimbursement Program cycle may open in late October, depending on the availability of funding.

## **ADDITIONAL PROVISIONS**

Because the Municipal Reimbursement Program is funded with CARES Act monies, recipients of Erie County CARES funds are subject to the Single Audit Act (31 U.S.C. §§ 7501-7507) and the related provisions of the Uniform Guidance, 2 C.F.R. § 200.303 regarding internal controls, §§ 200.330 through 200.332 regarding subrecipient monitoring and management, and subpart F regarding audit requirements.

Documenting expenditures is essential to managing compliance risk and minimizing the possibility that costs are deemed ineligible, thereby requiring that the municipality return funds to Erie County.

Erie County CARES fund recipients are obligated to retain records relating to the use of the monies, including, but not limited to, invoices, contracts, receipts, purchase orders, correspondence, and records demonstrating that funds were spent for purposes permitted by the CARES Act and related federal guidance. Such records must be made available to representatives of Erie County upon request and in the requested format.

## **QUESTIONS?**

Questions may be directed to Melinda Meyer at the Erie County Department of Planning and Community Development at [mmeyer@eriecountypa.gov](mailto:mmeyer@eriecountypa.gov) or Jessica Horan-Kunco at the Erie Area Council of Governments at [jhkunco@erieareacog.org](mailto:jhkunco@erieareacog.org).

## REIMBURSEMENT REQUEST FORM

(For reference only. All applications must be submitted online at <https://eriecountypa.submittable.com>)

Erie County Municipality:

Primary Contact Name:

Primary Contact Title:

Primary Contact Email:

Primary Contact Phone #:

Mailing Address:

Mailing Address 2: (optional)

Mailing City:

Mailing State:

Mailing Zip:

Website:

EIN #:

Eligible Expenditures: Complete the attached Excel spreadsheet and upload it to your application.

Municipal Resolution: The municipality's legislative body must adopt a resolution or pass a motion at a public meeting to approve the submission of this Erie County CARES Municipal Reimbursement request for COVID-19 related expenditures. See the sample resolution that has been provided. Upload a copy of your resolution or motion.

Certification:

- The municipality certifies that the expenditures for which reimbursement is sought have not already been reimbursed by any other federal, state, or local funding source.
- The municipality certifies that this reimbursement request meets the following three conditions, as outlined in the CARES Act. The expenditures submitted for reimbursement were (1) necessary due to the COVID-19 public health emergency, (2) unbudgeted as of March 27, 2020 when the CARES Act was enacted, and (3) incurred on or after March 1, 2020 through December 30, 2020.
- The municipality agrees to (1) maintain detailed accounting records with respect to the expenditures detailed in this reimbursement request, and (2) make such records available to its auditors, as well as Erie County and the Commonwealth of Pennsylvania upon request. Such records must be maintained for a minimum of five years.
- The municipality agrees to abide by all reporting requirements of Erie County, the Commonwealth of Pennsylvania, and/or the Federal government as a condition of accepting CARES Act funding.
- I am the representative of the municipality listed above who is authorized to submit this form.
- I attest that the information provided in this reimbursement request is true, accurate, and complete.

I certify the submission of this reimbursement request. (Check box)

Electronic Signature:

**SAMPLE RESOLUTION**

**RESOLUTION (number)**

**A Resolution to Approve the Application for  
Erie County CARES Municipal Reimbursement Program**

**WHEREAS**, the Federal government through the Coronavirus Aid, Relief, and Economic Security (CARES) Act and the State government through the Act 24 of 2020 legislation acknowledges that the Covid-19 pandemic has caused municipalities to make unbudgeted expenditures in order to provide for the safety of their staff and residents.

**WHEREAS**, the Federal/ State government have provided guidance on eligible use of the funding through the Pennsylvania Department of Community and Economic Development / U.S. Department of the Treasury to the Erie County Department of Planning and Economic Development.

**WHEREAS**, the Erie County Department of Planning and Economic Development has provided information to all Erie County municipalities on the activities that are eligible for grant funding and the process to request grant funding.

**WHEREAS**, (name of Municipality) has reviewed the Erie County CARES Municipal Reimbursement Program guidelines and completed the application process provide by the County of Erie.

**WHEREAS**, the (name of the Municipal Legislative Body) has reviewed the completed application prior to submission to the County of Erie and finds it to be in good order; and

**WHEREAS**, the (name of the Municipal Legislative Body) agrees to the terms and conditions set forth in the application portal.

**IT IS HEREBY RESOLVED** by the (name of the Municipal Legislative Body), Erie County, Pennsylvania approves the filing of an application for Erie County CARES Municipal Reimbursement Program.

**ADOPTED** this (\_\_\_\_) day of (month), 2020.

\_\_\_\_\_  
**(NAME OF MUNICIPAL LEGISLATIVE BODY)**  
**(Signatures of chairperson and/or legislators)**

**Attest:**

\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_