

Upper Peninsula



Prescription for Health

Once you begin the application for the Food as Medicine Cold Storage Grant you will not be able to save and come back to it. To ensure you are able to finish the application once you start, we have provided the full list of questions on the application. You may use this document to assemble all the information you need before you begin.

1. Name
2. Farm Name
3. Address
4. Mailing Address (if different from farm)
5. Email
6. Phone Number
7. Website
8. Social Media website
9. Preferred Method of Contact

10. How many years have you owned your own farm?

11. Do you rent, own, or lease your farmland?

12. If your answer is rent or lease, please explain more about the arrangement. How will this infrastructure investment have long-term benefit?

13. Tell us about your previous farm experience. How many years of experience do you have working on other farms?

14. Please list the primary crops of your current operation.

15. What farm infrastructure do you already have? Please check all that apply.

- Electricity hook-up
- Clean water system
- Farm specific delivery vehicle
- Irrigation system
- Cold storage: root cellar, walk-in cooler, and/or freezer
- None of the above

16. What is your experience with season extension structure? Check all that apply, whether the experience was on another farm or your farm.

- a. I have helped build a high tunnel
- b. I have experience with crop planning, care, and/or harvesting in a high tunnel
- c. I have experience with row covers and/or cold frames.

17. Do you currently have a high tunnel on your farm? Y or N

18. Have you attended any training (conferences, classes, workshops, or programs) related to high tunnels or season extension? Please list what training you have attended or any you might be signed up for but have not yet attended.

19. Please describe your on-farm food safety experience (Produce Safety Alliance Grower Training, a written food safety plan, technical assistance from a produce safety technician, etc)

20. If awarded a grant, are you willing to meet with a produce safety technician and follow through on recommended changes?

- Yes
- Unsure. Need more information
- No

21. Farmers Market Sales

Please provide information about any sales at farmers markets. Can share up to three markets. Will need to include the market name, months you sell, and type of produce sold.

22. Do you have any other sales outlets, such as restaurants, grocery stores, schools, etc?

23. Please check off which of the following sales avenues you have a strong interest in pursuing over the next two years, either as a new market or to grow current sales. If none, leave blank.

- Farmers Markets
- CSA
- K-12 or Early Childhood centers

- Universities
- Hospitals
- Senior Care Centers or Senior Meals
- Grocery Stores
- Restaurants
- Value-added producers
- Food Banks, Food Distribution, Mutual Aid, or Food Distribution Program on Indian Reservations

24. Have you participated in any food assistance programs, whether through markets, partnerships, or independently on your farm? Food assistance programs include SNAP (Bridge Card), WIC or Senior Fresh vouchers, Double Up Food Bucks, a Prescription for Health program, or a subsidized or need based CSA program
Y or N

Project Details

The following questions are to better understand your season extension needs, what you hope to build, and the impact on your business.

25. Tell us about the structure of the high tunnel, including what features will help it withstand the winter and wind. For example, W trusses.

26. What crops do you intend to grow in the high tunnel? Please include a crop plan with details of plantings throughout the seasons.

27. Please describe how this grant award would impact your business. How will it increase sales? What sales avenues will be most supported? Will it increase availability of produce?

28. Describe the project. What size of high tunnel do you intend to construct? Who will do the building? Can you provide a crew of people to assist? How many?

29. This grant requires participants to save and submit receipts. Please describe, in detail, the systems or software you use to track sales, expenses, or other farm records. What systems will you utilize to track your receipts and other records for this grant specifically?

30. Anticipated Project Start Date

31. Anticipated Project Completion Date. Please keep in mind that the project must be completed and receipts turned in by September 20, 2024.

32. Please share the total cost of the project Include frame cost, materials, equipment, and other build-out costs using the budget template. The required budget template and a sample budget is available at https://upfoodexchange.com/INSERT_HERE

File limit 10MB

33. If you have quote from a contractor or high tunnel company, you may upload here.

File limit 10MB

34. Please upload a photo of the site where you plan to place the high tunnel.

35. What should we know about your high tunnel site? Are there trees you plan to remove? How level is the land? What soil amendments do you plan to use? What is the plan for snow removal?

36. By providing my signature below I confirm that:

- I have read and understand the requirements and conditions of the grant
- I am willing to sign a contract identifying the terms and conditions of the program.
- I am willing to sign a media release form agreeing to the required video, interview, and photography for this program.
- To the best of my knowledge, the application information is correct and complete.

Questions or concerns?

Contact Sarah at info@upfoodexchange.com or 906-225-0671 x723