



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. Tell us about your previous farm experience. How many years of experience do you have farming on your farm? How many years working on other farms? How many acres do you currently farm? Share your farming story!
  
11. Please list the primary crops of your current operation.
  
12. Do you rent, own, or lease your farmland?
  
13. If your answer is rent or lease, please explain more about the arrangement. How will this infrastructure investment have long-term benefit?
  
14. Please indicate the total number of employees, including owners, and whether they are part-time or full-time.

15. How much were your gross produce sales in the last year?

- \$5,000-\$10,000
- \$10,000-\$25,000
- \$25,000-\$50,000
- \$50,000-\$75,000
- \$75,000-\$100,000
- Above \$100,000

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

- Electricity hook-up
- Clean water system
- Hoop house
- Farm specific delivery vehicle
- Irrigation system
- Some cold storage
- None of the above

17. What kind of cold storage do you currently have? Check all that apply.

- Root Cellar
- Walk-in Cooler
- Freezer

18. 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)

19. 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

20. 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.

21. Institutional Sales

If you sell to institutions, please share your top institutional sales by dollar. Institutions include K-12 schools, early childhood centers, universities, hospitals, and senior centers. It does not include grocery stores or restaurants, unless they are housed within an institution. For example, sales to a hospital cafe count as an institutional sale. You will

need to include the institution name, location, and type of produce sold.

22. Retail Sales

Please share information about other wholesale markets you participate in, such as grocery stores, restaurants, and specialty shops. You will need to share the type of sales channel (grocery, restaurant, etc), the location, and the type of produce sold.

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. Please check off which of the following food assistance programs you have participated in, whether through markets, partnerships, or through your farm business independently.

- SNAP (Bridge Card)
- WIC or Senior Fresh vouchers
- Double Up Food Bucks
- A Prescription for Health program
- Subsidized or need based CSA program

**Project Details**

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

25. 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? What products will be stored?

26. Describe the cold storage infrastructure you want to build. Do you plan to install a ready-made walk-in cooler (new or used) or a coolbot system? Will you build yourself or hire out construction? Details should include whether there is already a building

onsite to house the structure, why you have chosen the particular style of cold storage, the dimensions of the storage area, and how many months of the year you anticipate actively using the storage.

27. 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?
28. Anticipated Project Start Date
29. Anticipated Project Completion Date
30. Total cost of project. Include cold storage unit cost, materials, equipment, and other build-out costs (including construction of building to house storage if necessary)
31. Please upload a budget for the project here. The required budget template and a sample budget is available at <https://upfoodexchange.com/cold-storage-grant-program/>  
*File limit 10MB*
32. If you have quote from a contractor or cooler company, you may upload here.  
*File limit 10MB*
33. 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](mailto:info@upfoodexchange.com) or 906-225-0671 x723**