

**TEXAS FACILITIES COMMISSION  
FEDERAL SURPLUS PROPERTY PROGRAM**

P.O. Box 13047, Austin, Texas 78711 \* TEL: (512) 463-2688 \* FAX: (512) 236-6173 \*  
[federal.surplus@tfc.state.tx.us](mailto:federal.surplus@tfc.state.tx.us) [www.tfc.state.tx.us/fsp](http://www.tfc.state.tx.us/fsp)

**APPLICATION FOR ELIGIBILITY**

**INSTRUCTIONS FOR COMPLETING THE APPLICATION FOR ELIGIBILITY FORM  
TO RECEIVE FEDERAL SURPLUS PROPERTY (41 CFR 101-44.207)**

*See pages 8-11 for list of required supporting documentation that must be submitted with application.*

**All donees\* must reapply every three (3) years. To reapply, a donee must submit a completed Application for Eligibility along with required supporting documentation. Once we have it on file, some documentation (i.e. IRS letter, SBA letter, Articles of Incorporation, or proof of public agency status) do not have to be re-submitted unless your status or legal name has changed. (\*donee = the applicant organization)**

**Instructions for completing page 2:**

**SECTION I:** Provide the full legal name of your organization and Federal Employer ID#. Provide the complete mailing address of your organization as recognized by the U.S. Postal Service, including the nine-digit Zip Code. If the street address is different from the mailing address, provide that address or directions if located on a rural or remote area. Provide a phone number, fax number (if available) and an email address (required). **E-mail addresses provided will receive notices about program updates, account status, compliance actions, and available property.**

**SECTION II:** Check the appropriate box that describes your organization. Organizations that do not fall under at least one of these categories are not eligible for the Federal Surplus program.

**SECTION III:** Check the appropriate box or boxes (check as many as apply) that indicate the type or purpose of your organization. If you are unable to determine which box to check, please contact this office for assistance. Please see pages 8-11 for an explanation of the eligibility requirements for each type of organization.

**SECTION IV:** Indicate source(s) of funding for your organization. Depending on your organization type, you may need to include a comprehensive description of all programs or services, a description of the operational facilities and/or supporting documentation regarding funding source(s). Please see pages 8-11 to determine if this requirement applies to your organization. Public agencies (i.e. cities, counties, state agencies, public schools) are not required to submit additional documentation for this section. Payment for property must be in the form of a check drawn on the account of your organization or parent/charter organization.

**SECTION V:** Nonprofit organizations must provide a current, valid IRS Tax Exemption Letter indicating your organization is exempt under Section 501(C) of Internal Revenue Code. The name of the organization on the IRS letter must match the name provided in Section I of this application. If not, applicant must include sufficient evidence, such as amendments to Articles of Incorporation or Assumed Name filing certificates, to establish the connection. Please see pages 8-11 to determine if this requirement applies to your organization. Public agencies (i.e. cities, counties, state agencies, public schools) and VFDs are not required to submit documentation for this section.

**SECTION VI:** Most nonprofit organizations are required to submit evidence of current approval, accreditation or license from a nationally recognized accrediting or licensing organization. Recreational, social service, referral only, religious and counseling service programs are not eligible to participate in the program. Please see pages 8-11 to determine if this requirement applies to your organization. Public agencies (i.e. cities, counties, state agencies, and public schools) and VFDs are not required to submit additional documentation for this section.

**SECTION VII:** Provide an original, dated signature of applicant's Authorizing Official (i.e. Chief Executive or Financial Officer, County Judge, Mayor, City Manager, Superintendent, Fire Chief, Executive Director, CEO/President, Board Chairman, or other person with executive authority to execute legal documents for the applicant). Applications submitted by counties must be signed by the County Judge. Type or print the name and title of authorizing official on the lines provided.

**INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED. IF YOU HAVE QUESTIONS OR NEED ASSISTANCE, PLEASE CALL (512) 463-2688.**

**SUBMIT PAGES 2-6 OF APPLICATION TO:**

*Applications may be emailed, faxed or mailed.*

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**SIGNATURE FROM AUTHORIZING OFFICIAL IS REQUIRED ON PAGES 2 - 6**

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**APPLICATION FOR ELIGIBILITY**

PLEASE TYPE OR PRINT LEGIBLY IN BLUE OR BLACK INK WHERE APPROPRIATE

**I. ORGANIZATION NAME & INFORMATION:** *Payments must be in the name of donee or parent company.*

<u>Montague County</u>	<u>75-6001078</u>
LEGAL NAME OF ORGANIZATION	FEDERAL EMPLOYER ID (EIN)
<u>11339 State Hwy. 59 North</u>	<u>Montague TX 76251</u>
STREET ADDRESS (no P.O. Boxes)	CITY STATE ZIP CODE
<u>P.O. Box 475</u>	<u>Montague TX 76251</u>
MAILING ADDRESS (if different from above)	CITY STATE ZIP CODE
<u>Montague</u>	<u>940-894-2401</u>
COUNTY	TELEPHONE #
	<u>940-894-3999</u>
	FAX #
FISCAL YEAR END DATE: <u>09/30/2020</u>	EMAIL: <u>l.moore@co.montague.tx.us</u>

**II. APPLICANT STATUS:** *(check only one)*

- Public/Government agency (includes public schools)       SBA 8(a) Business       Nonprofit organization

**III. TYPE OR PURPOSE OF ORGANIZATION:** *(Check the box that best describes your organization. See pages 8-11 for requirements for specific types of organizations)*

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> City   | <input type="checkbox"/> School District  | <input type="checkbox"/> Volunteer Fire Dept., EMS or Rescue Squad  |
| <input checked="" type="checkbox"/> County                                    | <input type="checkbox"/> Elementary, Middle, or High School                     | <input type="checkbox"/> Emergency Services District  |
| <input type="checkbox"/> State Agency   | <input type="checkbox"/> College or University                                  | <input type="checkbox"/> Provider of Assistance to the Impoverished                                       |
| <input type="checkbox"/> Conservation (i.e. soil, water, or utility district) | <input type="checkbox"/> Child Care Center or Preschool                         | <input type="checkbox"/> Provider of Assistance to the Homeless   |
| <input type="checkbox"/> Economic Development                                 | <input type="checkbox"/> Foster Care or Adoption Services                       | <input type="checkbox"/> Program Funded for Older Americans   |
| <input type="checkbox"/> Radio or TV Station                                  | <input type="checkbox"/> Sheltered Workshop / Vocational Rehabilitation Program | <input type="checkbox"/> SBA 8(a) Business  |
| <input type="checkbox"/> Library  | <input type="checkbox"/> Residential Treatment Center                           | <input type="checkbox"/> Veterans' Service Organization (as defined by the Secretary of Veterans Affairs) |
| <input type="checkbox"/> Museum   | <input type="checkbox"/> Clinic or Hospital                                     | <input type="checkbox"/> Service Educational Activity (as defined by DOD)                                 |
| <input type="checkbox"/> Zoo, Planetarium or Aquarium                         | <input type="checkbox"/> Other health center _____                              | <input type="checkbox"/> Other _____  |

**IV. SOURCE(S) OF FUNDING:**  Tax-supported     Grants     Contributions     Other \_\_\_\_\_

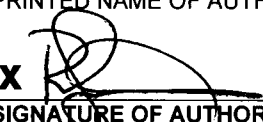
**V. (For non-profit organizations only) HAS THE ORGANIZATION BEEN DETERMINED TO BE TAX EXEMPT UNDER SECTION 501 OF THE INTERNAL REVENUE CODE OF 1986?**     Yes     No

**VI. IS THE ORGANIZATION APPROVED, ACCREDITED, OR LICENSED?**     Yes     No  
IF YES, BY WHAT AUTHORITY? \_\_\_\_\_

**VII. SIGNATURE & TITLE OF AUTHORIZING OFFICIAL FOR ORGANIZATION** (ex. Chief Executive or Financial Officer, Mayor, County Judge, Superintendent, President, CEO, Fire Chief)

Rick Lewis  
PRINTED NAME OF AUTHORIZING OFFICIAL


County Judge  
TITLE

**X**   
SIGNATURE OF AUTHORIZING OFFICIAL

1-27-2020  
DATE

## AUTHORIZED REPRESENTATIVES

- I. An "Authorized Representative" is a person authorized to sign for the release of property on your organization's behalf. **An Authorized Representative must sign in the "Signature" provided space below to sign for the release of property.** All others listed below may visit our warehouses and will be included in email broadcasts from our office but will not be able to sign for the release of property.
- II. All representatives listed in any prior applications or account updates will be deleted from the account.
- III. **E-MAIL ADDRESSES PROVIDED MAY RECEIVE NOTICES ABOUT PROGRAM UPDATES, ACCOUNT STATUS, COMPLIANCE ACTIONS, AND AVAILABLE PROPERTY.**
- IV. Valid driver's license or state issued photo identification may be required prior to entering state or federal facilities.
- V. **The Authorizing Official will automatically be included as an Authorized Representative unless indicated below:**
  - a. \_\_\_\_\_ (initial here) I, as the Authorizing Official, do NOT want to be an Authorized Representative able to sign for property. (Leave blank if the Authorizing Official should be an Authorized Representative.)

NAME	TITLE	TELEPHONE and EMAIL ADDRESS	SIGNATURE
(example) John Doe	County Judge	(512) 123-4567 John.doe@gmail.com	John Doe
<i>Roy Darden</i>	<i>County Commissioner Pct 1</i>	<i>Darden PCT1@gmail.com 940-366-0050</i>	
<i>Larry D. Byas</i>	<i>ROAD FOREMAN</i>	<i>940-841-0282 dardenpet1@gmail.com</i>	<i>LD Byas</i>
<i>EVAN BREWER</i>	<i>ROAD HAND</i>	<i>940-232-3483</i>	<i>Evan Brewer</i>

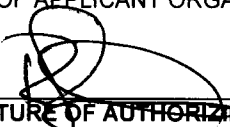
Applicant hereby certifies the information provided is correct and complete and s/he understands and agrees to all terms and conditions.

**Montague County**

NAME OF APPLICANT ORGANIZATION

**Rick Lewis**

PRINTED NAME OF AUTHORIZING OFFICIAL

**X**   
SIGNATURE OF AUTHORIZING OFFICIAL



*1-27-2020*  
DATE

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NAME	TITLE	TELEPHONE and EMAIL ADDRESS	SIGNATURE
(example) John Doe	County Judge	(512) 123-4567 John.doe@gmail.com	John Doe
Mike Mayfield	Commissioner	Mayfield-Mike@att1005.com 940-531-8904	
Jay Clements	Road Foreman	940-841-2223	

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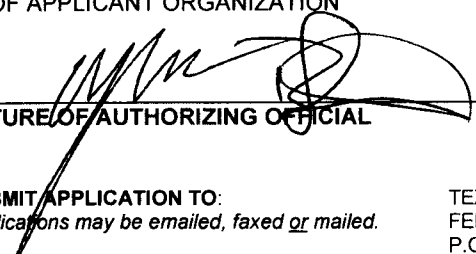
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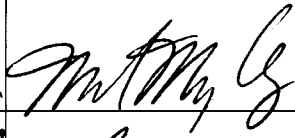
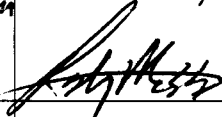
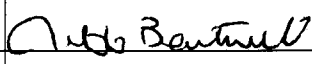
1-16-2020  
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(example) John Doe	County Judge	(512) 123-4567 John.doe@gmail.com	John Doe
MARK Murphey	Comm #3	940-841-0679 murphey3@gmail.com rusty.messer2391@gmail.com	
Rusty Messer	Foreman #3	940-531-2391	
Roger Teague	Row Hand	940 867 6486	Roger Teague
JEFF BOWWELL	Row Hand	Jbowwell196@gmail.com 940-867-9940	
MARC BARNES	Row hand	940-284-3806	Marc Barnes

Applicant hereby certifies the information provided is correct and complete and s/he understands and agrees to all terms and conditions.

**Montague County**

NAME OF APPLICANT ORGANIZATION

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PRINTED NAME OF AUTHORIZING OFFICIAL

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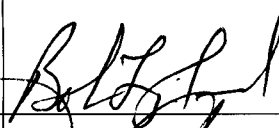
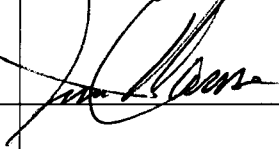
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(example) John Doe	County Judge	(512) 123-4567 John.doe@gmail.com	John Doe
Bob Langford	County Comm #4	940-531-0380	
Jimmy Harris	Foreman	940-531-8874	
Michael Forrester	Road Hand	940-727-2615	Michael Forrester
Ricky Roberts	Road Hand	940-867-9900	Ricky Roberts
Frank Wallace	Road Hand	940-704-9167	Frank Wallace

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**Montague County**

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(example) John Doe	County Judge	(512) 123-4567 John.doe@gmail.com	<i>John Doe</i>
Marshall W. Thomas	Sheriff	(940) 894-2871 mthomas@montaguesheriff.com	<i>Mar W Thomas</i>
Jack W. Lawson	Chief Deputy	(940) 894-2871 jlawson@montaguesheriff.com	<i>Jack Lawson</i>
Ethan J. Romine	Sergeant	(940) 894-2871 eromine@montaguesheriff.com	<i>Ethan Romine</i>
SHAUN M. JONES	MAINTENANCE	Shawn Jones DT@windstream.net	<i>Shawn Jones</i>
LARRY MARSHALL	MAINTENANCE	LARRY_1123@icloud.com	<i>Larry Marshall</i>

Applicant hereby certifies the information provided is correct and complete and s/he understands and agrees to all terms and conditions.

**Montague County**

NAME OF APPLICANT ORGANIZATION

**Rick Lewis**

PRINTED NAME OF AUTHORIZING OFFICIAL

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# NONDISCRIMINATION ASSURANCE

**Montague County**

(Legal Name of Applicant Organization)

the donee, agrees that the program for or in connection with

which any property is donated to the donee will be conducted in compliance with, and the donee will comply with and will require any other person (any legal entity) who through contractual or other arrangements with the donee is authorized to provide services or benefits under said program to comply with all requirements imposed by or pursuant to the regulations of the General Services Administration (41 C.F.R., 101-6.2 and 101-8) issued under the provisions of Title VI of the Civil Rights Act of 1964, as amended, Section 606 of Title VI of the Federal Property and Administrative Services Act of 1949, as amended, Section 504 of the Rehabilitation Act of 1973, as amended, Title IX of the Education Amendments of 1972, as amended, Section 303 of the Age Discrimination Act of 1975, and the Civil Right Restoration Act of 1987, to the end that no person in the United States shall on the ground of race, color, national origin, sex, or age, or that no otherwise qualified handicapped person shall solely by reason of the handicap, be excluded from participation in, be denied benefits of, or be subjected to discrimination under any program or activity for which the donee received Federal assistance from the General Services Administration; and hereby gives assurance that it will immediately take any measures necessary to effectuate this agreement.

The donee further agrees (1) that this agreement shall be subject in all respects to the provisions of said Federal statutes and regulations (2) that this agreement obligates the donee for the period during which it retains ownership or possession of the property, (3) that the United States shall have the right to seek judicial enforcement of this agreement, and (4) that this agreement shall be binding upon any successor in interest of the donee and the word "donee" as used herein includes any such successor in interest.

COUNTY/COUNTIES SERVED BY APPLICANT ORGANIZATION: Montague County

X



SIGNATURE OF AUTHORIZING OFFICIAL

1-27-2020  
DATE

## PAYMENT INFORMATION

Payment is due 30 days from the invoice date. Payment for property must be in the form of a check drawn on the account of your organization or parent/charter organization. **State agencies** may pay via Interagency Transaction Voucher (ITV). Our agency code is 303. If you have questions about how to submit a payment, please contact us at 512-463-2688 or [federal.surplus@tfc.state.tx.us](mailto:federal.surplus@tfc.state.tx.us).

For new accounts for **non-profit organizations, SBA 8(a) businesses, and volunteer fire/EMS/search & rescue departments**, you must submit the following with your application:

- A voided check or deposit slip, copy of recent bank statement or letter from bank certifying payment account name. The name on the account must match the name on your application and IRS letter (if applicable). If your organization has a "DBA" that you will be submitting payment under, and that is not listed on your IRS letter, then you must submit evidence that your "DBA" has been registered with the proper authority.
- If a parent/charter organization will be submitting payment on your behalf, then you must also provide an explanation of the relationship between your organization and parent organization.

For account renewals for **non-profit organizations, SBA 8(a) businesses, and volunteer fire/EMS/search & rescue departments**, please check one of the following:

- Our organization will continue using the same payment account in our organization's name.
- Our organization will have a parent organization pay on our behalf.

Name of Parent Organization: \_\_\_\_\_

Relationship: \_\_\_\_\_

**ALL** applicant organizations must provide a Payment Point of Contact who will receive notices regarding overdue payments:

Name: Jennifer Fenoglio Title: Treasurer

Email: j.fenoglio@co.montague.tx.us Phone: 940-894-2161



# DONEE CERTIFICATIONS & AGREEMENTS

**NOTE:** "State agency" = Texas Facilities Commission; "Donee" = your organization

## (a) THE DONEE CERTIFIES THAT:

(1) It is a public agency, a nonprofit institution or organization exempt from taxation under section 501 of the Internal Revenue code of 1954, or an SBA 8(a) business; within the meaning of section 203(j) of the Federal Property and Administrative Services Act of 1949, as amended, and/or the regulations of the General Services Administration (GSA).

(2) If a public agency, the property is needed and will be used by the recipient for carrying out or promoting for the residents of a given political area one or more public purposes, or if a nonprofit tax-exempt institution or organization, the property is needed for and will be used by the recipient for educational or public health purposes, including research for any such purpose, or for programs for older individuals, or SBA or SEA organizations, or assistance to homeless/impooverished, or assistance to Veterans. The property is not being acquired for any other use or purpose, or for sale or other distribution; or for permanent use outside the State, except with prior approval of the State agency and GSA.

(3) Funds are available to pay all costs and charges incidental to donation.

(4) This transaction shall be subject to the nondiscrimination regulations governing the donation of surplus personal property issued under Title VI of the Civil Rights Act of 1964, Title VI Section 606 of the Federal Property and Administrative Services Act of 1949, as amended, and Section 504 of the Rehabilitation Act of 1973, as amended, Title IX of the Education Amendments of 1972, as amended, and Section 303 of the Age Discrimination Act of 1975 and the Civil Right Restoration Act of 1987.

(5) In accordance with 28 C.F.R. Section 42.401-42.415, the Federal Surplus Property Program collects information related to a donees race and national origin in order to provide GSA officials, upon request, with enough information for determining compliance with applicable civil rights laws. Data is collected for those donees who: (1) are eligible to participate in the FSP Program; (2) those actually participating in the recipient's programs and activities; (3) those denied participation in the recipient's program.

(4) If a SBA 8(a) business, the terms identified in (b), (c), and (d) may not apply. SBA 8(a) businesses must follow SBA guidelines.

## (b) THE DONEE AGREES TO THE FOLLOWING FEDERAL CONDITIONS:

(1) All items of property shall be placed in use for the purpose(s) for which acquired within one year of receipt. Property shall be continued in use for such purposes for at least one year from the date the property was placed in use. Some property must be used longer than one year (see Section (c)). In the event the property is not so placed in use, or continued in use, the donee shall immediately notify the State agency, and at the donee's expense, return such property to the State agency, or otherwise make the property available for transfer or other disposal by the State agency, provided the property is still usable as determined by the State agency.

(2) Such special handling or use limitations as are imposed by General Services Administration (GSA) on any item(s) or property.

(3) In the event the property is not used or handled as required by (b)(1) and (2), title and right to the possession of such property shall at the option of GSA revert to the United States of America and upon demand the donee shall release such property to such person as GSA or its designee shall direct.

## (c) THE DONEE AGREES TO THE FOLLOWING FEDERAL CONDITIONS, APPLICABLE TO ITEMS WITH A UNIT ORIGINAL ACQUISITION COST OF \$5,000 OR MORE AND PASSENGER MOTOR VEHICLES, REGARDLESS OF ACQUISITION COST. THE FOLLOWING CONDITIONS DO NOT APPLY TO VESSELS 50 FEET OR MORE IN LENGTH AND AIRCRAFT, FOREIGN GIFTS OR OTHER ITEMS OF PROPERTY REQUIRING SPECIAL HANDLING OR USE LIMITATIONS, REGARDLESS OF THE ACQUISITION COST OR PURPOSE FOR WHICH ACQUIRED:

(1) The property shall be used only for the purpose(s) for which acquired and for no other purpose(s).

(2) There shall be a period of restriction which will expire after such property has been used for the purpose(s) for which acquired for a period of 18 months from the date the property is placed in use. (Not applicable to Service Educational Activities (SEAs) or SBA 8(a) Businesses).

(3) In the event the property is not used or handled as required by (b)(1) and (2) and (c)(1) and (2), title and right to the possession of such property shall at the option of GSA revert to the United States of America and upon demand the donee shall release such property to such person as GSA or its designee shall direct.

## (d) THE DONEE AGREES TO THE FOLLOWING TERMS, RESERVATIONS, AND RESTRICTIONS:

(1) From the date it receives the property and through period(s) of time the conditions imposed by (b), (c) and (f) remain in effect, the donee shall not sell, trade, lease, lend, bail, cannibalize, encumber, or otherwise dispose of such property, or remove it permanently, for use outside the State, without the prior approval of GSA under (b) and (f), or the State agency under (c) and (f). The proceeds from any sale, trade, lease, loan, bailment, encumbrance or other disposal of the property shall be remitted promptly by the donee to GSA or the State agency, as the case may be.

(2) In the event any of the property is sold, traded leased, loaned, bailed, cannibalized, encumbered, or otherwise disposed of by the donee from the date it receives the property through the period(s) of time the conditions imposed by (b), (c) and (f) remain in effect, without prior approval of GSA or the State agency, the donee, at the option of GSA or the State agency, shall pay to GSA or the State agency, as the case may be, the proceeds of the disposal or the fair market value or the fair rental value of the property at the time of such disposal, as determined by GSA or the State agency.

(3) If at any time, from the date it receives the property through the period(s) of time the conditions imposed by (b), (c) and (f) remain in effect, any of the property is no longer suitable, usable, or further needed by the donee for the purpose(s) for which acquired, the donee shall promptly notify the State agency, and shall, as directed by the State agency, return the property to the State agency, release the property to another donee or another State agency, a department or agency of the United States, sell or otherwise dispose of the property. The proceeds from any sale shall be remitted promptly by the donee to the State agency.

(4) The donee shall make reports to the State agency on the use, condition, and location of the property and on other pertinent matters as may be required time to time by the State agency.

(5) At the option of the State agency, the donee may abrogate the State conditions set forth in (c) and the State terms, reservations, and restrictions pertinent thereto in (d) by payment of any amount as determined by the State agency.

## (e) THE DONEE AGREES TO THE FOLLOWING CONDITIONS, APPLICABLE TO ALL ITEMS OF PROPERTY:

(1) The property acquired by the donee is on an "as is, where is" basis, without warranty of any kind, and the Government of the United States of America, the State of Texas, its agencies or assigns, and employees thereof will be held harmless from any or all debts, liabilities, judgments, costs, demands, suits, actions, or claims of any nature arising from or incident to the donation of the property, its use, or final disposition.

(2) Where a donee carries insurance against damages to or loss of property due to fire or other hazards and where loss of or damage to donated property with unexpired terms, conditions, reservations or restrictions occurs, GSA or the State agency, as the case may be, will be entitled to reimbursement from the donee out of the insurance proceeds, of any amount equal to the unamortized portion of the fair market value of the damaged or destroyed donated items.

## (f) THE DONEE AGREES TO THE FOLLOWING ADDITIONAL TERMS AND CONDITIONS APPLICABLE TO THE DONATION OF AIRCRAFT AND VESSELS (50 FEET OR MORE IN LENGTH) HAVING AN ACQUISITION COST OF \$5,000 OR MORE, AND FOREIGN GIFTS OR OTHER ITEMS OF PROPERTY REQUIRING SPECIAL HANDLING OR USE LIMITATIONS, REGARDLESS OF THE ACQUISITION COST OR THE PURPOSE FOR WHICH ACQUIRED:

(1) The donation shall be subject to the additional special terms, conditions, reservations, and restrictions set forth in the Conditional Transfer Document or other agreements executed by the authorized donee representative.

(g) THE DONEE CERTIFIES by signing and submitting this lower tier proposal, the prospective lower tier participant, as defined in 41 CFR105-68, certifies to the best of its knowledge and belief that it and its principals: (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency. (b) Where the prospective lower tier participant is unable to certify to any of the above, such prospective participant shall attach an explanation to this proposal.

(h) THE DONEE UNDERSTANDS that by execution of this document, it is considered a sub recipient of federal financial assistance pursuant to the Single Audit Act of 1984 and further agrees to provide the State agency with results of the audit required by OMB Circular A-133.

(i) THE DONEE UNDERSTANDS that e-mail addresses provided may receive notices about program updates and available property. Additionally, information on property donated to your organization, including pictures and service charge(s) paid, may be used by Federal Surplus Property Program for marketing and outreach purposes.

X

SIGNATURE OF AUTHORIZING OFFICIAL

DATE

1-27-2020

## PROPERTY COMPLIANCE PERIOD

Participating organizations (referred to as "donees" by the federal government) are required to use the property obtained through the program for a specific amount of time before the property can be sold, transferred or otherwise disposed of. The compliance period is often determined by the "original acquisition cost" of the item. The "original acquisition cost" is defined as the amount the federal government paid when it was initially purchased.

- Property must be used for the program approved for participation in the Federal Surplus Property program.
- All property must be placed into use within one year of the invoice date.
- Property is considered "in use" as soon as it is ready and able to serve its intended purpose.
- The compliance period varies according to item and donee type but is **at least** 12 months from date put into use.
  - For property valued at less than \$5,000 in original acquisition cost, the compliance period is 12 months from the date put into use.
  - For property valued at \$5,000 or more in original acquisition cost and all passenger motor vehicles, the compliance period is 18 months from the date put into use. Not applicable to Service Educational Activities.
  - For items requiring special handling or use limitations for which a Conditional Transfer Document (CTD) must be signed, donee will adhere to the terms and conditions of use set forth on the CTD.
  - Some items, such as non-combat aircraft and vessels longer than 50 feet, have a compliance period of 60 months (5 years) from the date put into use.
  - Some items, such as combat aircraft and firearms, are considered "perpetual use." Donee organizations do not obtain title or ownership to property designated "perpetual use" by the federal government. The compliance period is considered to be "perpetual" or ongoing on these items. If a donee has a perpetual use item that is no longer needed or used, then the donee must contact TFC for return instructions. The donee may not dispose of a perpetual use item without prior, written approval from TFC.
- TFC staff performs scheduled and unscheduled onsite property compliance visits to ensure the property is being used as represented. The donee agrees to make the property available for visual inspection by TFC staff in a timely manner.
- If the property is not paid for in full or is not being used or handled as required, the donee will be required, at its expense, to return the property to TFC or offer for transfer to another donee, as instructed by TFC.
- Property must be used and stored at the street address listed on page 2 of this Application, or at other appropriate donee-managed satellite locations (for example, county precinct barns, district fire stations, school campuses, maintenance/transportation warehouse). Property may not be removed indefinitely from an approved location without prior, written approval from TFC.
- Property may not be stored at a personal residence, unrelated business or storage facility, or any other location that is not managed by the donee organization. Property is not intended for personal use; it must be readily accessible to all donee staff.
- Donees are required to complete reports regarding property use as a condition of participating in the program.
- **During the compliance period, the donee may not sell, trade, lease, lend, bail, cannibalize, encumber, or otherwise dispose of such property, or remove it permanently, for use outside the State, without the prior approval of GSA.**
- **If property is sold, transferred, or otherwise disposed of during the compliance period, the donee may be subject to penalties and fines, as well as possible state or federal prosecution.**

I understand and agree to the above terms and conditions regarding property compliance and reporting and the Certifications & Agreements on page 5.

**IMPORTANT NOTE FOR SBA 8(a) APPLICANTS:** If applying as an SBA 8(a) business, I understand that the property compliance terms identified above do not apply to my business and that as an SBA 8(a) business I must follow SBA property compliance guidelines. Additionally, I understand that I may not have access to certain items – including aircraft or property with an original acquisition cost of \$5,000 or more – if my business is due to graduate from the SBA 8(a) program with insufficient time to cover the entire federally required compliance period for that item.

X



SIGNATURE OF AUTHORIZING OFFICIAL

1-27-2020  
DATE

SEND APPLICATIONS TO:  
*Applications may be emailed,  
faxed or mailed.*

TEXAS FACILITIES COMMISSION  
FEDERAL SURPLUS PROPERTY PROGRAM  
P.O. BOX 13047, AUSTIN, TX 78711-3047  
TEL: (512) 463-2688 FAX: (512) 236-6173  
EMAIL: [Federal\\_surplus@tfc.state.tx.us](mailto:Federal_surplus@tfc.state.tx.us)

# DONEE FEEDBACK & PROPERTY REQUEST LIST

*This page is optional, but highly encouraged for new applicants*

Donee Organization Name: Montague County

### How did you hear about us?

- Co-worker       From another similar organization       Email broadcast  
 At an event (please specify): \_\_\_\_\_  
 Other (please explain): \_\_\_\_\_

### Where would you prefer to shop?

- San Antonio Warehouse       Fort Worth Warehouse       Both

### How do you prefer to shop? (check as many as you like)

- Looking at the "New Arrivals & Specials" email broadcasts  
 Browsing our online inventory  
 In-person at the warehouse

### What attracted you to using the FSP program (when compared to buying brand new)? (check as many as you like)

- Low fees  
 Variety/Type of Items Available  
 Convenience/Quicker process compared to your organization's traditional purchasing process  
 Only option due to limited budget  
 Level of Customer Service/Past Positive Experience with Federal Surplus Property Program  
 Ability to submit requests  
 Other (please explain)

### What item(s) is your organization is in need of?

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## DETAILED REQUIREMENTS FOR SPECIFIC TYPES OF ORGANIZATIONS

Please review to determine which of the following eligibility category your organization falls under, and if you are required to submit additional documentation. For account renewals, some documentation (i.e. IRS letter, SBA letter, Articles of Incorporation, or proof of public agency status) may not have to be re-submitted unless your status or legal name has changed. Questions? Please contact us at (512)463-2688 or [federal\\_surplus@tfc.state.tx.us](mailto:federal_surplus@tfc.state.tx.us).

### **Government or Public Agency**

1. Public agency includes (a) State or department, agency, or instrumentality thereof; (b) Political subdivision of the state, including any unit of local government or economic development district or any department, agency or instrumentality thereof; or (c) Instrumentality created by contract or other agreement between states or political subdivisions. Public agency purposes include, but are not limited to, programs such as conservation, economic development, education, parks and recreation, public health and public safety, and to provide services to homeless or impoverished persons.
2. Cities, counties, state agencies and public schools are **NOT** required to submit any additional documentation.
3. Other types of public agencies must submit proof of public agency status (i.e. charter or statute creating the agency or evidence of tax-supported status) and/or a narrative describing the services provided by the agency. See the other categories listed below for more details.

### **Emergency Services District (tax-supported)**

1. Required additional documentation that must be submitted with application:
  - a. Letter from the chief or president that contains information on the department, including:
    - i. number of firefighters and/or emergency services personnel;
    - ii. training schedule; and
    - iii. area(s) covered.
  - b. Proof of Public Agency Status – i.e. Election Results, Charter, Organizing Document, or Other Evidence of Approval by Proper Government Authority (i.e. Commissioners Court Meeting Minutes)

### **Volunteer Fire Department, Search & Rescue, or Emergency Medical Services**

1. In order to be eligible under this category, must be funded annually in whole or part by state, county, city or emergency services district. Approved organizations in this category must submit funding information annually.
2. Required additional documentation that must be submitted with application:
  - a. Letter from the chief or president that contains information on the department, including:
    - i. number of firefighters and/or emergency services personnel;
    - ii. training schedule; and
    - iii. area(s) covered.
  - b. Evidence that department is endorsed by AND receives funding from a government entity, such as the state, county, city or emergency services district. Examples: letter of endorsement from the head of the government entity (i.e. county judge, city mayor/administrator, or ESD president) or a copy of a current, signed contract.
  - c. Articles of incorporations, bylaws, charter or other organizing document (*optional*)

### **Conservation (includes both public agencies and non-profits)**

1. Includes soil, water, irrigation, and utility districts, and non-profit water supply corporations. Must be a public agency (i.e. city-owned) or nonprofit organization. For-profit organizations do not qualify under this category.
2. Required additional documentation that must be submitted with application:
  - a. Certificate of approval or charter from proper authority demonstrating services are provided to the public (i.e. Certificate of Convenience and Necessity from Texas Commission on Environmental Quality or Public Utility Commission, or charter/enabling legislation)
  - b. (*Non-profits only*) IRS letter certifying tax-exempt status. Articles of incorporations, bylaws, or other organizing document. (*Optional*)

### **Health Organization (Public Agency)**

1. Required additional documentation that must be submitted with application:
  - a. Proof of public agency status (i.e. charter or statute creating the agency or evidence of tax-supported status).
  - b. Complete narrative about your agency, including:
    - i. Description of services provided;
    - ii. Number and type of patients served;
    - iii. Description of facilities, including number of beds; and
    - iv. Overview of key staff and their qualifications.

### **SBA 8(a) Business**

1. Businesses that are currently part of the U.S. Small Business Administration's 8(a) Business Development Program may participate in the FSP program. Businesses are only eligible to receive property during their nine (9) year membership in the 8(a) program. **IMPORTANT NOTE:** Some of the terms and conditions on pages 5-6 do not apply to SBA 8(a) businesses. As an SBA 8(a) business, you must follow SBA property compliance guidelines. Please contact your SBA District Office for their complete terms and conditions.
2. Required additional documentation that must be submitted with application:
  - a. Letter from U.S. Small Business Administration certifying membership in 8(a) Business Development Program.

## DETAILED REQUIREMENTS FOR SPECIFIC TYPES OF ORGANIZATIONS

Please review to determine which of the following eligibility category your organization falls under, and if you are required to submit additional documentation. For account renewals, some documentation (i.e. IRS letter, SBA letter, Articles of Incorporation, or proof of public agency status) may not have to be re-submitted unless your status or legal name has changed. Questions? Please contact us at (512)463-2688 or [federal.surplus@tfc.state.tx.us](mailto:federal.surplus@tfc.state.tx.us)

### **Service Educational Activity**

1. The following Service Educational Activities are eligible: American National Red Cross, Armed Services YMCA of the USA, Big Brothers/Big Sisters of America, Boys & Girls Clubs of America, Boy Scouts of America, Camp Fire, Inc., Center for Excellence in Education, Girl Scouts of the USA, Little League Baseball, Inc., Marine Cadets of America, National Association for Equal Opportunity in Higher Education, National Civilian Community Corps, National Ski Patrol System, Inc., Naval Sea Cadet Corps, Operation Raleigh, United Service Organizations, Inc., U.S. Olympic Committee, Young Marines of the Marine Corps, and League/Marine Corps League.
2. Required additional documentation that must be submitted with application
  - a. Proof of association with the national organization (ex. Charter from Boy Scouts of America).

### **Health Organization (Non-Profit)**

1. Includes, but not limited to, hospital, clinics, residential treatment centers, rehabilitation facilities, and blood or tissue banks.
2. Must be licensed, accredited or approved by nationally recognized accrediting or licensing agency (Ex. Dept. of State Health Services) or the current recipient of research grants by a recognized authority such as the National Institutes of Health, or by similar national advisory council or organization.
3. Required additional documentation that must be submitted with application:
  - a. Letter from IRS certifying status as a 501(C) non-profit. IRS ruling letter must include current name and address.
  - b. Complete narrative about your organization, including:
    - i. Description of services provided;
    - ii. Number and type of patients served;
    - iii. Description of facilities, including number of beds; and
    - iv. Overview of key staff and their qualifications.
  - c. Certificate of accreditation, license, or letter of approval from a nationally recognized accrediting or licensing agency OR research grant from National Institutes of Health or similar national advisory organization.
  - d. Articles of incorporations, bylaws, charter or other organizing document (*optional*)
  - e. List of additional research grants awarded (*optional*)

### **Provider of Assistance to Impoverished (Non-Profit)**

1. Services to impoverished persons (as defined in section 673 of the Community Services Block Grant Act) (42 U.S.C. 9902) must be the primary function of the organization. If any activity operates a broad spectrum of programs through which assistance to the impoverished is peripheral and incidental, the entity would not be eligible. If located in or around a religious facility, food banks must have a direct entrance not requiring entrance through a place of worship to be eligible.
2. Required additional documentation that must be submitted with application:
  - a. Letter from IRS certifying as a 501(C) non-profit. IRS ruling letter must include current name and address.
  - b. Latest Annual Financial Statement
  - c. Public Recognition as an Impoverished Assistance Provider. Submit at least one of the following:
    - i. Provide letter of endorsement from an official (i.e. Mayor, Head of Welfare Dept., Social Services Director, county supervisor, head of agency that oversees program, etc.) indicating services provided by applicant. The letter must indicate that assistance to the impoverished is the organization's primary focus, and the name must match the IRS document.
    - ii. You may also include documented receipt of Federal/State Block Grant Funds for poverty programs, or
    - iii. Proof of membership or affiliation with national organization that provides support for impoverished (i.e. Second Harvest National Food Bank Network, Habitat for Humanity, Salvation Army).
  - d. Complete narrative about your organization, including:
    - i. Comprehensive description of services (assistance to impoverished must be primary mission);
    - ii. Number of individuals receiving assistance and frequency of assistance (daily, weekly or monthly);
    - iii. Requirements for clients to be eligible to receive services, including any required fees;
    - iv. Description of facilities;
    - v. Hours/days of operation;
    - vi. Description of funding source(s) with supporting documentation; and
    - vii. Overview of staff (paid/volunteer, full-time/part-time) including list of key staff and their qualifications.
  - e. Description of how your organization determines if a person is eligible to receive assistance, and how your organization determines if that person is impoverished. Your organization's primary function must to provide money, goods, or services to families or individuals whose annual incomes are below the poverty line (as defined in section 673 of the Community Services Block Grant Act) (42 U.S.C. 9902). If recipients are required to complete an application before receiving services, please attach a sample application.
  - f. Proof of current accreditation, approval or licensing if appropriate (i.e. child care or medical/health center).
  - g. Signed Articles of Incorporation, Bylaws, Charter or other organizing document
  - h. Brochures (or other printed materials) or link to website (*Optional*)

## DETAILED REQUIREMENTS FOR SPECIFIC TYPES OF ORGANIZATIONS

Please review to determine which of the following eligibility category your organization falls under, and if you are required to submit additional documentation. For account renewals, some documentation (i.e. IRS letter, SBA letter, Articles of Incorporation, or proof of public agency status) may not have to be re-submitted unless your status or legal name has changed. Questions? Please contact us at (512)463-2688 or [federal\\_surplus@tfc.state.tx.us](mailto:federal_surplus@tfc.state.tx.us)

### **Provider of Assistance to Homeless Persons (Non-Profit)**

1. Examples of eligible programs include:
  - a. Overnight, daytime and around-the-clock shelters, including shelters for battered spouses, abused children, and orphans. (NOTE: Child care/day care centers should see "Education Organization (Non-Profit) category below)
  - b. Foster care and adoption agencies.
  - c. Transitional housing for temporary residence of parolees, or persons with mental health or addiction issues.
  - d. Food banks that provide food directly to facilities where homeless people are fed may be eligible. If located in or around religious facility, food banks must have direct entrance not requiring entrance through place of worship.
2. Services to the homeless must be the primary function of the organization. If any activity operates a broad spectrum of programs through which assistance to the homeless is peripheral and incidental, the entity would not be eligible. Property donated must be used in a program primarily for homeless persons.
3. Required additional documentation that must be submitted with application:
  - a. Letter from IRS certifying status as a 501(C) non-profit. IRS ruling letter must include current name and address.
  - b. Public Recognition as a Homeless Assistance Provider. Please provide a letter from a local city official (i.e. Mayor, Head of Welfare Dept., Social Services Director, etc.) indicating services provided by applicant. The letter must indicate that assistance to the impoverished is the organization's primary focus, and the name must match the IRS document. You may also include:
    - i. Occupancy permit or fire and safety inspection certificate.
    - ii. Documented receipt of FEMA funds for Federal/State Block Grant Funds for homeless programs
  - c. Complete narrative about your organization, including:
    - i. Comprehensive description of services provided (assistance to homeless must be primary mission);
    - ii. Number of individuals receiving assistance and frequency of assistance (daily, weekly or monthly);
    - iii. Requirements for clients to be eligible to receive services, including any required fees;
    - iv. Description of facilities, including hours/days of operation;
    - v. Description of funding source(s) with supporting documentation; and
    - vi. Overview of staff (paid/volunteer, full-time/part-time) including list of key staff and their qualifications.
  - d. Proof of current accreditation, approval or licensing if appropriate (i.e. child care or medical/health center).
  - e. Signed Articles of Incorporation, Bylaws, Charter or another organizing document (*Optional*)
  - f. Brochures (or other printed materials) or link to website (*Optional*)

### **Provider of Assistance to Older Americans (Non-Profit)**

1. Includes adult day care, multi-purpose senior centers, and social, transportation, nutrition or legal services.
2. Organizations must receive funds appropriated under the Older Americans Act of 1965, Title IV or Title XX of the Social Security Act, Titles VIII and X of the Economic Opportunity Act of 1964, or Community Services Block Grant Act.
3. Required additional documentation that must be submitted with application:
  - a. Letter from IRS certifying status as a 501(C) non-profit. IRS ruling letter must include current name and address.
  - b. Certification establishing that applicant is receiving state, federal or local government-appropriated funds for operation of older individual program under the Older Americans Act of 1965, Title IV or Title XX of the Social Security Act, Titles VIII and X of the Economic Opportunity Act of 1964, or Community Services Block Grant Act
  - c. Complete narrative about your organization, including:
    - i. Description of services provided;
    - ii. Description of facilities;
    - iii. Overview of key staff and their qualifications; and
    - iv. Number of individuals receiving assistance and frequency of assistance (daily, weekly or monthly).
  - d. Proof of current accreditation, approval or licensing if appropriate (i.e. medical center)
  - e. Articles of incorporations, bylaws, charter or other organizing document (*optional*)

### **Education Organization (Non-Profit)** \*Public schools & colleges should see the Government or Public Agency category on page 7.

1. Includes charter schools, private schools (K-12 or higher education), research organizations, child care centers and Vocational Rehabilitation Programs/Sheltered Workshops who receive grant funding from Texas Workforce Commission to provide training to persons with physical or mental disabilities
2. Must be accredited or approved by nationally recognized accrediting agency (i.e. Texas Education Agency, Southern Association of Colleges & Schools' Commission on Colleges, Texas Department of Family and Protective Services or Texas Workforce Commission) or the current recipient of research grants by a recognized authority (i.e. National Institute of Education) or a similar national advisory organization.
3. Required additional documentation that must be submitted with application:
  - a. Certificate of accreditation or letter of approval from a nationally recognized accrediting agency OR research grant from National Institute of Education or similar national advisory organization.
  - b. Letter from IRS certifying status as a 501(C) non-profit. IRS ruling letter must include current name and address.
  - c. Complete narrative about your organization, including: course levels, enrollment, facilities, and staff information.
  - d. Articles of incorporations, bylaws, charter or other organizing document (*optional*)
  - e. List of additional research grants awarded (*optional*)

## DETAILED REQUIREMENTS FOR SPECIFIC TYPES OF ORGANIZATIONS

Please review to determine which of the following eligibility category your organization falls under, and if you are required to submit additional documentation. For account renewals, some documentation (i.e. IRS letter, SBA letter, Articles of Incorporation, or proof of public agency status) may not have to be re-submitted unless your status or legal name has changed. Questions? Please contact us at (512)463-2688 or [federal.surplus@tfc.state.tx.us](mailto:federal.surplus@tfc.state.tx.us).

### **Museums, Libraries, Nature Centers, Planetariums, Aquariums & Zoos**

1. Must be open to the public, and, at minimum, accedes to any request submitted for access during "business hours" (interpreted here to be approximately 9:00 am to 4:00 pm, although reasonable variation from these hours may be considered due to individual circumstances, such as a museum located in a commercial location with strict business hours, or restrictions based on zoning or other state or local ordinances). Furthermore, exhibits must be primary focus, and must not be incidental to the primary function of the institution. Also, must have a minimum of one fulltime staff member or the equivalent (i.e. one staff member who works 40 hours per week or two staff members who work 20 hours each per week).
2. Required additional documentation that must be submitted with application:
  - a. Letter from IRS certifying status as a 501(C) non-profit. IRS ruling letter must include current name and address.
  - b. Complete narrative about your organization, including
    - i. description of type(s) of exhibits & location(s);
    - ii. staff roster, including name of curator (or equivalent) whose primary job is to care for the museum and its exhibits, and average number of hours each staff member works per week (may be volunteer or paid);
    - iii. days and hours open to the public;
    - iv. admission fee (if any);
    - v. description of the local community and population served by the museum; and
    - vi. square footage of the museum.
  - c. Pictures of exhibits, exhibit signage, facilities, and posted hours of operation.
  - d. Articles of incorporations, bylaws, charter or other organizing document.
  - e. Latest Annual Financial Statement or Budget.
  - f. Brochures, pamphlets, website, or other promotional materials (*optional*).
  - g. Organizational Memberships (*optional*)

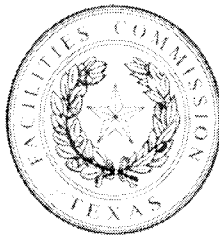
### **Veterans' Organizations**

1. Select veterans' service organizations are eligible for FSP following the passage of the FOR VETS Act of 2013. For eligibility purposes, "Veterans Organizations" means organizations eligible to receive Federal surplus property for purposes of providing services to veterans under 40 U.S.C. 549(c)(3)(C). Eligible veterans organizations are those whose (1) membership comprises substantially veterans (at least 33%); and (2) representatives are recognized by the Secretary of Veterans Affairs under 38 U.S.C. 5902. The Department of Veterans Affairs maintains a searchable Web site of recognized organizations. The address is <http://www.va.gov/ogc/apps/accreditation/index.asp>.
2. Examples of organizations and its local chapters/districts that may be eligible: African American PTSD Association, American Ex-Prisoners of War, Inc., American GI Forum National Veterans Outreach Program, American Legion, AMVETS, Armed Forces Services Corporation, Army and Navy Union, U.S.A., Inc., Associates of Vietnam Veterans of America, Blinded Veterans Association, Catholic War Veterans of the U.S.A., Inc., Disabled American Veterans, Fleet Reserve Association, Gold Star Wives of America, Inc., Italian American War Veterans of the United States, Inc., Jewish War Veterans of the U.S.A., Legion of Valor of the United States of America, Inc., Marine Corps League, Military Order of the Purple Heart, National Amputation Foundation, Inc., National Association for Black Veterans, Inc., National Association of County Veterans Service Officers, Navy Mutual Aid Association, Non Commissioned Officers Association of the U.S.A., Paralyzed Veterans of America, Polish Legion of American Veterans, U.S.A, The Retired Enlisted Association, United Spanish War Veterans, United Spinal Association, Inc., Veterans of Foreign Wars of the United States, Veterans of the Vietnam War, Inc. & the Veterans Coalition, Vietnam Era Veterans Association, and Vietnam Veterans of America.
3. Required additional documentation that must be submitted with application:
  - a. Complete narrative about your organization, including:
    - i. Description of services provided;
    - ii. Percentage of membership comprised of veterans; and
    - iii. Facility information & location.
  - b. Proof of affiliation with an eligible veterans organization recognized by the Secretary of Veterans Affairs under section 5902 of title 38 of the FORVETS Act of 2013 (see *Dept. of Veterans website*: <http://www.va.gov/ogc/apps/accreditation/index.asp>.)

#### **SEND APPLICATIONS TO:**

Applications may be emailed, faxed or mailed.

TEXAS FACILITIES COMMISSION  
FEDERAL SURPLUS PROPERTY PROGRAM  
P.O. BOX 13047  
AUSTIN, TX 78711-3047  
TEL: (512) 463-2688 FAX: (512) 236-6173  
EMAIL: [Federal.surplus@tfc.state.tx.us](mailto:Federal.surplus@tfc.state.tx.us)



**DONEE REQUEST FORM**  
**Texas Facilities Commission**  
**Federal Surplus Property Program**

<http://tfc.state.tx.us/divisions/supportserv/prog/fedsurplus/index.html>

**CATEGORY** \_\_\_\_\_ (Office Use)

**ACCOUNT #** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**ORGANIZATION:** \_\_\_\_\_

**REPRESENTATIVE:** \_\_\_\_\_  
(Print Name)

**DEPARTMENT:** \_\_\_\_\_

**PHONE #** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**ITEMS THE DONEE WOULD LIKE TO SEE STOCKED IN THE WAREHOUSE:**

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**EVERY ATTEMPT WILL BE MADE TO SATISFY YOUR REQUESTS**

*~ We will see you soon! Call our office or email if you have any questions. ~*

**Please Remit To Your District by Fax, Mail, or by Email:**

**NORTH DISTRICT (FORT WORTH)**

2826 North Beach Street  
Fort Worth, TX 76111-6201  
Phone: (817) 831-6767  
Fax: (817) 838-6428  
[fortworth.surplus@tfc.state.tx.us](mailto:fortworth.surplus@tfc.state.tx.us)

**CENTRAL DISTRICT (AUSTIN)**

6506 Bolm Road  
P O Box 13047  
Austin, TX 78711  
Phone: (512) 475-3705  
Fax: (512) 236-6173  
[federal.surplus@tfc.state.tx.us](mailto:federal.surplus@tfc.state.tx.us)

**SOUTH DISTRICT (SAN ANTONIO)**

2103 Ackerman Road  
San Antonio, TX 78219-3017  
Phone: (210) 661-2381  
Fax: (210) 662-8316  
[sanantonio.surplus@tfc.state.tx.us](mailto:sanantonio.surplus@tfc.state.tx.us)