



# Workplace Accommodations Grant

## Checklist

- Grant application
- Photograph of existing building and conditions
- Supporting materials (drawings/graphics, etc.) demonstrating impact of update
- Estimated time to complete project
- Cost analysis of project
- 4 copies of completed request including pictures, supporting materials, and cost analysis.

**Grant applications will be reviewed for consideration in the order they are received. This grant is available until all available funds have been committed and disbursed.**

**Please note, Grant application MUST be received, reviewed and APPROVED before ANY work can begin on your project. Work started prior to grant approval cannot be funded.**



# **Workplace Accommodation Grant Program**

## **Eligible Applicants**

Small business owners or tenants within the Sweetwater County area may apply for the grant. Tenants are required to have written approval from property owners to participate in the program.

## **Workplace Accommodation Grant**

The Workplace Accommodation Grant entitles the applicant reimbursement towards the total cost (sales tax amount excluded) of a workplace accommodation or modification project. Sales tax amounts will not be included in the approved grant amount and are the responsibility of the applicant.

Approved grant applicants will receive up to \$5,000.00 in reimbursement based on project needs. The maximum reimbursement amount per application will be dependent upon the number of applications received during the grant cycle.

A description of the improvement or modification and how it will increase access for individuals or offer increased employment opportunities must be provided.

## **Application Process**

1. Complete the application. Obtain the following documents and attach to the application:
  - a. Photograph of existing building and conditions
  - b. Supporting materials (drawings/graphics, etc.) demonstrating impact of update
  - c. Estimated time to complete project
  - d. Cost analysis of project
  - e. 4 copies of completed request including pictures, supporting materials, and cost analysis.
2. Submit the application and additional documents. Grants will be reviewed by a committee, including at least one board member from the High Desert Human Resources Association.
3. The applicant will be informed of the status of their grant application in writing within two months. PLEASE NOTE: Workplace accommodations requested through the grant that are made prior to receiving notice of grant award will not be reimbursed.

## **Disbursement of Grant Funds**

1. Once the project is complete, the applicant must submit the following items to the High Desert Human Resources Association, Workplace Accommodation Grant Program at #5 Birdie Court, Rock Springs, WY 82901 or by email to [highdeserthr@gmail.com](mailto:highdeserthr@gmail.com) for review:
  - a. Copies of all bills and invoices or supporting documents for labor and materials
  - b. Copies of confirmed payment (receipts, canceled checks, etc.)
  - c. A final photograph of the work
2. Verification of the workplace accommodation will be completed by a committee member. Once verified, the committee member will notify the High Desert Human Resources Association Board.
3. Funds will be released and issued to the applicant.

## **Additional Requirements**

### **Permit Requirement**

The applicant will be responsible for securing the necessary permits required by the municipality where the business is located.

### **Project Time Period**

Applicant must submit an approximate time line of the completion of the project with the grant application. Projects must be completed within 1 (one) year from the grant approval date.

# Workplace Accommodation Grant Program Application

Date Submitted:	
Name of Applicant:	
Phone #:	
Name of Business:	
Property Address:	
Mailing Address:	
Applicant is the:	Property Owner <input type="checkbox"/> Tenant <input type="checkbox"/>
Property Owner's Name: (if different from applicant)	
Property Owner's Address:	
Property Owner's Phone:	

**Detailed Description of Workplace Accommodation:**


# Workplace Accommodation Grant Program Application (cont.)

Estimated cost of project \_\_\_\_\_

Amount of grant request \_\_\_\_\_

Expected duration of project (start to finish) \_\_\_\_\_

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Signature of Applicant

Date

## **General Conditions**

It is expressly understood and agreed that the applicant shall be solely responsible for all safety conditions and compliance with all safety regulations, building codes, ordinances, and other applicable regulations.

It is expressly understood and agreed that work completed prior to final approval is ineligible for funding. It is expressly understood and agreed that the applicant will not seek to hold High Desert Human Resources Association and/or its agents, officers and/or board members liable for any property damage, personal injury, or other loss relating in any way to the Workplace Accommodate Grant Program.

The applicant authorizes the High Desert Human Resources to recognize such improvements in press releases using descriptions of the improvement or modification and the project's potential or real impacts to increase access for individuals to the business or offer increased employment opportunities.

If at any time you wish to withdraw your application, you must notify the High Desert Human Resources Association in writing at #5 Birdie Court, Rock Springs, WY 82901 or by email to [highdeserthr@gmail.com](mailto:highdeserthr@gmail.com), as soon as possible.

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Signature of Applicant

Date

# Workplace Accommodation Grant Program Application (cont.)

If the applicant is not the property owner, the property owner or an authorized representative must review and co-sign the application below.

As owner of the property at \_\_\_\_\_  
Property Address

I have reviewed the above application and authorize the tenant, \_\_\_\_\_  
Print Tenant Full Name

At said address to perform the improvements described above as part of the Workplace  
Accommodation Grant Program.

\_\_\_\_\_  
Signature of Property Owner or Authorized Representative      Date

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**REMINDER**

**All of the following must be included with the completed application:**  
(Absence of items will delay the process.)

- Photograph of existing building and conditions
- Supporting materials (drawings/graphics, etc.) demonstrating impact of update
- Estimated time to complete project
- Cost analysis of project
- 4 copies of completed request including pictures, supporting materials, and cost analysis