



Partner Agency Application Document Checklist

For an application to be complete, the following documents must accompany the application:

- A written copy of the organizations 501c3 – Federal Exemption Status Letter OR written documentation of affiliation with a mainline denomination on the mainline denomination’s letterhead <http://www.irs.gov/Charities-&-Non-Profits/Exempt-Organizations-Select-Check>
- A copy of the program’s brochure or service bulletin
- A copy of the program’s Incorporation with the Georgia Secretary of State, indicating Active and In compliance
- A copy of the agency’s basic business plan <http://www.ehow.com/list6890008nonprofit-business-planbasics.html>
- A copy of the budget for the food program
- A sample of your record keeping system, including your client intake form and copies of the last 3 months of your distribution records
- A voided organizational check
- Copy of pest control contract
- If your agency is a daycare provider or a personal care home please provide a copy of your client application as well as your client fee schedule.
- Copy of Personal Care Home, Daycare or Shelter License
- A signed and dated copy of the GMFB Partnership Contract
- Any other supporting documentation requested by the GMFB Agency Relations Department

An organization must be distributing product at least 6 months prior to partnership.

Agencies with a prior partnership must go through the application process again. If there was a balance that was written off, the agency must remit total payment before being reconsidered.

Agencies are not eligible for partnership if they have been terminated by Agency Services 3 or more times. (Exceptions can be made)

If you have any questions please call Lydia Johnson at 770-534-4111 or via email at Lydia@gamountainfoodbank.org
1642 Calvary Industrial Drive SW. Gainesville, Georgia 30507



In office use ONLY

Orientation Date:

Due Date:

Partnership Application Form

Please print legibly. Attach additional pages as needed.

Date: _____

Has your organization ever been a partner agency with the ACFB? _____

If yes, what was your agency code: _____

If yes, what was the reason for becoming inactive? _____

Basic Program Information:

Name of Organization: _____

EIN (Employer Identification Number): _____

Executive Director/Pastor: _____

Program/Project Name: _____

Billing/Mailing Address: _____

City: _____ Zip code: _____

Website: _____

Program/Project Telephone: _____ Fax: _____

Executive Director email address: _____ Mobile: _____

Is this program designed to provide groceries, prepared meals, or both? _____

Physical Program Address: _____

County: _____

Contact Person Name: _____ Title: _____

Telephone: _____ Fax: _____

Email Address: _____ Mobile: _____

Counties served

(We provide services to non-profits in the following Georgia counties: (Select the counties you serve)

- List of Georgia counties: Bartow, DeKalb, Haralson, Polk, Butts, Douglas, Heard, Rockdale, Carroll, Fayette, Henry, Spalding, Cherokee, Floyd, Lumpkin, Union, Clayton, Forsyth, Morgan, Walton, Cobb, Fulton, Newton, Coweta, Gwinnett, Paulding, Dawson, Hall, Pickens

If your program is not located in one of these counties, we can refer you to the appropriate Food Bank.

What is your mission? Let us know about your organization's purpose and history.

How long has the organization been in operation? _____

How long has the food program been in operation? _____

What are your principal sources of funds? Do you receive any grant monies? If so, from who? May we contact them?

What is your annual budget for this service? (Annual Budget should match Food Program Budget)

Why was this service begun?

Describe the population you will serve.

How will using the Food Bank's resources help to achieve your vision/mission/goals?

The Food Bank is particularly interested in working with organizations that look to the long-term and seek to solve the problems of poverty and hunger. What is your vision for the future? How would you describe your program's long-term goals?

Are you aware of other agencies in your area that serve people in need with food assistance? If so, do you engage with them or will you engage with them in order to more thoroughly serve your community and not duplicate services? Explain how you connect with them?

Who are the major partners you work with? (E.g. other non-profits, other churches, schools, government agencies, etc.)

What are the reasons you work with each partner listed above?

What type of collaborative efforts is your organization involved in?

If you distribute groceries to families and individuals you are referred to as a **Food Pantry**.
If this describes your work, please answer questions 1 through 7:

Agencies that prepare meals are referred to as **On Site** programs.
If this describes your work, please skip to questions 8 through 14.

If your agency does both, please answer all questions (**Residential Programs cannot define themselves as a food pantry and on site program**).

1. What are your days and hours of operation?

2. How many households are served in an average month?

3. How much food is given to each household?

4. How often can the same household receive groceries from your program?

5. How do you determine which households to serve?

6. Describe your record keeping process for distribution.

7. How will you ensure the community knows of the presence on the food program at your site?

8. Do you prepare and serve meals on site? _____

9. Which days of the week do you serve meals? Please circle all that apply.

Sun Mon Tues Wed Thurs Fri Sat

10. Which meals to you serve? Please circle all that apply.

Breakfast Lunch Dinner Snacks

11. How many people eat at each meal? _____

12. Is this a seasonal program? _____

If so, when are you in operation? _____

13. Do you ask for a fee or a donation for the meal? _____

How will you ensure the community knows of the presence of the food program at your site?

14. Are you a **Residential Program**? _____

If yes, please answer questions 15 and 16

15. Please check a box that best describes your **Residential Program**:

- Drug Treatment Center/ Alcohol Treatment Center***: this program means any drug addiction or alcoholic treatment and rehabilitation program conducted by a private, nonprofit organization or institution, or a publically operated community mental health center.

- Group Living Arrangement/Transitional homes***: this program means a public or private nonprofit residential setting that serves no less than eight residents. This type of living arrangement provides professional support, education, and a stable living environment.

- Battered Women's and Children's Facility***: this program means a public or private nonprofit residential setting that serves battered women and their children.

- Children-Based Facility***: public or private nonprofit residential setting that provides supervised care for children, who may have experienced traumatic life situations, ie: trafficking, homelessness, ect.

16. **Residential programs** must provide the following, please check off the submitted documents:

- Fee schedule
- Completed Client contracts between client and organization (not required for Children-Based Facility)
- Pay stubs of at least one paid staff member

Directions

Help us find your program. Please provide directions to your program/storage area below. Landmarks do help. Assume we will be coming from downtown Atlanta.

Storage

All partner agencies must have a clean, dry, secure place to store and/or prepare food. All food must be stored out of cases and on shelving.

Your food storage and preparation area **must** be in place to achieve Food Bank partnership.

Please indicate below those that best describe your current storage area.

- Small area with shelving
- Small storage with refrigeration/freezer
- Small storage without refrigeration/freezer
- Large area with refrigeration/freezer
- Large area without refrigeration/freezer
- Commercial kitchen
- Commercial storage area

- _ All storage is at program address
- _ Some storage is at an alternate site

What is the square footage of your storage area?

What are the dimensions of the following appliances, if applicable? How many of each do you have?

Freezers _____

Refrigerators _____

Food Sanitation Information

If applicable, list the name of 2 of your certified food handlers and expiration dates of their **current** Food Sanitation Certificates such as ServSafe or County Health Department.

Name	Expiration Date
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Once we receive your completed application, we will check your organization’s current status with the Georgia Secretary of State and the IRS as a 501c3 exempt organization.

After approval of the application and all documentation, a staff member from the Agency Services Department will conduct an unannounced site visit during your listed distribution times. After the unannounced visit is complete, an Agency Services staff member will contact you to schedule a formal site visit. During this visit we will need to see your storage facilities and cooking area, if applicable.

Shared Maintenance Fee

The ACFB Share Contribution is a handling fee and supports our work. It is NOT a fee for food. All food is weighed and assessed a share contribution at checkout.

Currently the Share Contribution is 16 cents per pound. Many foods are given to partner agencies at less than 16 cents per pound. For example, bread and produce carry no share maintenance.

All reimbursements for the share contribution fee must be made with an organizational check—***no cash, personal checks or money orders will be accepted.***

Please keep a copy of this application for your records.

Georgia Mountain Food Bank Partnership Contract

This Agreement is made and entered into by Georgia Mountain Food Bank (GMFB), an affiliate of the Atlanta Community Food Bank (ACFB), hereafter referred to as "The Food Bank," having a place of business at 1642 Calvary Industrial Dr. SW, Gainesville, GA 30507 and the following organization which is hereafter referred to as "Partner Agency":

_____;
(Official organization name as it appears on business registration documents.) which operates or hereby agrees to be fiscally and legally responsible for the hunger relief program(s) named:

_____;
(Name of food distribution, pantry, or similar programs. This may be the same as the official organization name above) and has a current address of business at
_____ on this ___ day of _____, 20__.

This Partnership Contract, when each condition/agreement term is verified by the authorized Partner Agency organization leader's initials at the bottom of each page, and signed by both organizations, certifies that The Food Bank has accepted the partnership application of the above organization. This partnership is subject to the following conditions and agreements:

1. This Partner Agency is an established 501(c) 3 **public charity** nonprofit incorporated for the purpose of serving ill, needy (low income) or infants (minor children). A copy of the Letter of Determination from the IRS accompanies this contract.
2. This Partner Agency certifies it has been operating an on-premise feeding or grocery program for at least six (6) months prior to the date on the accompanying Partnership Application Form. The above agency must use The Food Bank's services within three (3) months of the membership approval date to initiate partnership.
3. This Partner Agency is licensed by the state of Georgia and/or county/municipal government as a food establishment according to the service provided, as applies, and will maintain said licensing during the terms of this agreement.

4. This Partner Agency will not engage in discrimination, in the provision of service, against any person because of race, color, citizenship, religion, sex, national origin, ancestry, age, marital status, disability, sexual orientation including gender identity, unfavorable discharge from the military, or status as a protected veteran.
5. Clients who are served by the Partner Agency with products from The Food Bank may NOT be required or coerced in any way to participate in religious services, prayers, or other religious practices as a precondition to receiving those products. While those services, prayers, or practices may certainly be shared and offered to clients, provisions must be made for clients who choose not to participate to receive the grocery products with equal convenience and dignity as those who do participate.
6. This Partner Agency certifies it will charge no fees (real or in-kind) to the recipient, individual or family, and that no specific donation will be requested. The IRS section 170 c states: "No fee for administrative cost or otherwise may be charged in connection with a transfer of donated property directly from an organization to the ill, needy individuals or minors." (Section 3) Under very limited and strictly defined guidelines, partner agencies that provide comprehensive services and programs to clients may be authorized by The Food Bank and applicable government agencies to have clients pay for some of those other services and programs. But in those cases, access to The Food Bank products must be received by clients with no required fees.
7. This Partner Agency and all its representatives must not sell products received from The Food Bank and its related projects for any purpose and in any manner. Products also cannot be traded, transferred to another organization, bartered or exchanged for cash, goods or services of any kind.
8. This Partner Agency will not give grocery products received from The Food Bank or its related projects to staff or volunteers. Groceries can only be provided to staff or volunteers if they go through the same eligibility process as the clients they serve and should be given during the same distribution time as clients. In addition, sharing in a meal is meant to enable staff or volunteers to interact more with clients. Neither groceries nor meals should be guaranteed or expected in return for their services or employment.
 - 8a. Donated food and beverages may be consumed by staff and volunteers who are directly involved in the preparation of a meal or providing other services during a meal. The consumption of the meal should be a part of the staff or volunteers' involvement with the clients (e.g. at the same tables and time as clients are being served).
9. This Partner Agency hereby warrants and guarantees from The Food Bank, its related projects and to the primary donor and to Feeding America (national network of food banks), that it will hold them harmless from any and all liabilities, claims, losses, causes of action, suits of law or inequity or any obligation whatsoever arising out of, or attributed to, any action done in connection with its storage and/or use of the items to it by The Food Bank. The Food Bank, the original product donor, and

Feeding America offer no express warranties in relation to the gift of goods. This Partner Agency understands that all products from The Food Bank are offered “as is”.

10. This Partner Agency agrees to adhere to additional donor and organizational stipulations for the storage, processing, record-keeping, transportation, or distribution of their donated products.
11. This Partner Agency must have adequate, proper storage space, and refrigeration/freezer space to ensure the food safety and integrity of products until it is consumed or distributed. The Partner Agency agrees to handle and store all food in the manner as is required in accordance with local, state and federal food safety and handling regulations. The Food Bank staff has visited with the Partner Agency, consulted about these storage criteria, and acknowledged all requirements have been met to start receiving The Food Bank product.
12. This partner agency will agree to supply a written plan for storage of any products received outside of GMFB and ACFB. The written plan should include the name of the provider(s), types of product received and plan for storage to provide clear separation from GMFB and ACFB product.
13. This Partner Agency agrees that products will not be stored and/or distributed from a private residence or unapproved site.
14. This partner agency agrees to sign and follow the procedures outlined in the GMFB Pick Up and Loading Policy Agreement.
15. This Partner Agency agrees to inspect and store food soon after receipt and to determine whether the food is fit for human consumption. If not, the agency will immediately advise The Food Bank staff.
16. This Partner Agency shall have a staff member or volunteer who is consistently present during operations, who has attended and is certified in either the Food Manager’s Workshop/Food Handler’s Certificate administered by the Department of Business and Professional Regulation, Division of Hotels and Restaurants Hospitality Education Program, or the Safe Food Handling Class offered by The Food Bank. A copy of this certificate will be provided to The Food Bank.
17. This Partner Agency agrees to order a minimum of 7,200 pounds per 12 month period, through GMFB and ACFB combined. (Note: Retail product/pounds, via delivery or pick-up, do not count towards your 7,200 pound requirement), and with a minimum share maintenance contribution fee of at least \$600 for each 12 month period.
18. This Partner Agency will support the operations and distribution costs of The Food Bank by paying a share maintenance fee. This Partner Agency understands that share maintenance fees are not a charge for food, but a contribution towards maintaining The Food Bank’s operational and handling requirements.

16a. This Partner Agency also agrees to pay fees for Co-Op product, delivery fees, program fees, restocking fees or other fees as are relevant.

19. This Partner Agency agrees to pay ACFB a “restocking fee” of \$50.00 for the first order not claimed by the end of the same business day of the scheduled pick up or delivery appointment time, during each 12 month period. The restocking fee will increase to \$75.00 for the second un-claimed order and \$100.00 for the third. Any additional offenses during the 12 month time period will result in reduction and/or suspension of the Partner Agency’s privileges for up to 6 months.

This Partner Agency agrees to pay GMFB a “restocking fee” of \$25.00 for the first order not claimed by the end of the same business day of the scheduled pick up or delivery appointment time, during each 12 month period. The restocking fee will increase to \$50.00 for the second un-claimed order and \$75.00 for the third. Any additional offenses during the 12 month time period will result in reduction and/or suspension of the Partner Agency’s privileges for up to 6 months.

20. This Partner Agency agrees to pay invoices, with an organizational check (**Personal checks, cash, and money orders will not be accepted**), within 30 days of the date. Late fees or other actions may be applied for late payments.
21. This Partner Agency will participate in periodic Surveys and Studies, including the Hunger in America study, to support Feeding America and The Food Bank Hunger Advocacy efforts.
22. Partner Agencies operating as a Food Pantry must serve 25 Households per month and demonstrate regular outreach to their surrounding community.
23. Partner Agencies operating as an On-Premise only agency must serve meals at least once per week.
24. This Partner Agency agrees to provide The Food Bank with timely service statistics on a regular basis, to maintain adequate distribution/usage records that reflect the use of all products, and to be monitored by The Food Bank staff. These records shall include at least the following:
- a. Copies of all The Food Bank invoices for the current 12 month period
 - b. Monthly Service Reports
 - c. Record of the number of persons fed at each meal and date of each meal; as applies
 - d. Record of grocery distribution including name of head of household, address, number of persons in household, children and seniors in the household, total weight of product distributed and discarded, and date of services; as applies
 - e. Record of required forms and eligibility for USDA TEFAP product distributed, and date of services; as applies
 - f. Record of eligibility, distribution, and usage of GNAP product; as applies
 - g. Produce program distribution; as applies
 - h. Record of other special grocery product types or sources; as applies
 - i. Record of temperature logs for all dry, frozen, and refrigerated storage areas; as applies
 - j. Record of past and current Pest Control
 - k. Record of Food Safety Log and/or ServSafe Certificate; as applies

25. This Partner Agency agrees to provide records of financial budgets, and confirmation of alternate food sourcing.
26. If applicable, this Partner Agency will provide a copy of their IRS Tax Form 990.
27. This Partner Agency will allow The Food Bank to monitor the organization regularly, including both announced and unannounced site and program inspections, at The Food Bank's discretion. Monitoring will include reviews related to product ordering, transportation, storage, food safety and utilization, as well as client non-discrimination treatment, record-keeping, and all other terms of this agreement. This Partner Agency is required to make reasonable accommodations to ensure that The Food Bank is able to monitor and inspect the Program's site as deemed necessary. Should the Partner Agency fail to be available on the first announced visit, the failure to show will be documented on their account. In the event that the Partner Agency fails to be available on the second announced visit, the Partner Agency shall be suspended until site and program inspections have been deemed to be in compliance with The Food Bank food safety and handling policies and procedures.
28. This Partner Agency must notify The Food Bank Agency Compliance Team, in writing on Agency Letterhead, in advance of planned change of their location, Executive Director, agency contacts, clients served, or type or size of food program. Planned changes in location, type or size of food program will require additional inspection by The Food Bank staff prior to implementation of the change.
29. This Partner Agency understands this agreement to have legal significance, and violation of any of these conditions and agreements may result in reduction, suspension or loss of partnership privileges up to and including termination of Partnership Contract.
30. Termination for Convenience. Either party may terminate this Agreement, for any reason or for no reason, upon not less than 30 days prior written notice to the other party.

Signed:

Signature: Partner Agency **Executive Director/Pastor**

Date

Print: Partner Agency **Executive Director/Pastor**

Agency Name

Agency Code

Signature: **Georgia Mountain Food Bank Representative**

Date

Print: **Georgia Mountain Food Bank Representative**