



TEXAS DEPARTMENT OF AGRICULTURE  
COMMISSIONER SID MILLER

★ **TDA GO!** ★  
TEXAS DEPARTMENT OF AGRICULTURE GRANTS ONLINE

# TDA-GO

# Reminders

- Set up TDA-GO account at MINIMUM 5 days before the grant deadline.
  - Takes 24-48 hours to be approved
- TDA-GO times out after 30 minutes, so Save your work as you go.
  - Have drafts of all your writings and other documents.

# Reminders

- Review all sections before you certify and submit. Once you submit, you CANNOT edit or make changes.
- Application must be submitted before the deadline.
  - System automatically closes at the time listed, based on Central Standard (CT) time and will not accept late submissions.
- Regularly check TDA-GO account and email for updates.




# **New TDA-GO Users**




# Step#1a

- Go to TDA-Go website: <https://tda-go.intelligrants.com/>



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★ TDA GO! ★  
TEXAS DEPARTMENT OF AGRICULTURE GRANTS ONLINE

Public Reports ▾

### Welcome to the online Grants Management System - TDA Go!

Because this is a new online management system, all organizations will need to register with the system.

**Steps to Get Started:**

- The initial Registration for your organization must be completed by an Authorized Official (AO) for the organization
- Once the AO registers the organization, they will receive an email *Notification of Access Approval* from the online systems administrator
- The AO can then designate access to your organizational account for additional staff members as they deem appropriate

To visit the official TDA website, click [here](#).

### Announcements

CDBG Grant Recipients

Due to a nation-wide outage of HUD financial system, TDA is currently unable to draw federal funds for CDBG grants. We are working to process payments intermittently when the system allows, but we are unable to anticipate the date funds will be released for specific Payment Requests. HUD is working diligently to resolve the issue and we will provide updates as information becomes available.

## Login

Username

Password

[Log In](#)

[Login Assistance](#)

[New User/Organization Registration](#)

Go to the top  
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# Step#1b

- Click New User/Organization link found in the log in box on the right-hand side of the webpage

## Login

Username

Password

[Login Assistance](#)

[New User/Organization Registration](#)



# Step#1c

- Fill in the required fields and any optional fields desired.

## Legend

First Name **(Required)**

Last Name **(Required)**

SAM/UEI/ENI **(Required)** Enter 000000000000 if you do not have this number.

Organization Name:**(Required)** **(ENTER YOUR FIRST AND LAST NAME)**

Title **ENTER "AGLINK GRANT APPLICANT"**

Street Address **(Required)**

State **(Required)**

Country **(Required)**

Zip Code **(Required)**

Email **(Required)**

Phone # **(Required)**

Username: **(Required)** **USE YOUR EMAIL**

Password **(Required)**

Verify password: **(Required)** PUT IN PASSWORD AGAIN

- Click Save

New User Registration

Page instructions for the registration modal

First Name *	Middle Name
<input type="text"/>	<input type="text"/>
Last Name *	Prefix <input type="text"/>
<input type="text"/>	Suffix <input type="text"/>
Title *	SAM Number (UEI Number) *
<input type="text"/>	<input type="text"/> <input type="button" value="Search"/>
FEIN *	
<input type="text"/>	
Organization *	Address *
<input type="text"/>	<input type="text"/>
Address 2 *	City *
<input type="text"/>	<input type="text"/>
State *	Zip Code *
<input type="text"/>	<input type="text"/>
County *	Email *
<input type="text"/>	<input type="text"/>
Phone *	Phone 2
<input type="text"/>	<input type="text"/>
Fax	Cell Phone
<input type="text"/>	<input type="text"/>
Website	Username *
<input type="text"/>	<input type="text"/>
Password *	Verify Password *
<input type="text"/>	<input type="text"/>
Notes	
<input type="text"/>	



# Step#1d

- Hit Save
  - New user registration will be sent to TDA staff for approval. You will receive an email indicating approval within 24-48 hours. After approval, the New User can log on and access the TDA-Go platform.

Mindy Fryer TDA GO! Registration Approved

TDA-GO@IntelliGrants.com(TDA-GO@IntelliGrants.com via ama)    Reply    Reply All    Forward    ...

To: Mindy Weth Fryer    Expires: 1/12/2022    Mon 12/13/2021 10:12 AM  
Retention Policy    Inbox (30 days)

*The actual sender of this message is different than the normal sender. Click here to learn more.*

**WARNING: This email originated from outside of the Texas Department of Agriculture email system. DO NOT click links or open attachments unless you expect them from the sender and know the content is safe.**

The user Mindy Fryer has been approved for TDA GO! To access the system please navigate to <https://tda-go.intelligrants.com>.



# Existing TDA-GO Users



# Step#1a

- Enter current username and password in the log in box on the right-hand side of the webpage

## Login

Username

Password

[Log In](#)

[Login Assistance](#)

[New User/Organization Registration](#)



# **TDA-GO Password Reset**



# Step#1a

- Click on log in assistance link

## Login

Username

Password

[Login Assistance](#)

[New User/Organization Registration](#)



# Step#1b

- Enter the email address and username. Click on the email button. A reset link will be sent to the email address supplied.

## Forgot Password

Email

Username

[Forgot Username](#)



# Step#1c

- Click the Reset password link within the 15-minute window. On the profile page, you'll supply a new password into the Password and Confirm password fields.

From: [TDA-GO@IntelliGrants.com](mailto:TDA-GO@IntelliGrants.com) <[TDA-GO@IntelliGrants.com](mailto:TDA-GO@IntelliGrants.com)>  
Sent: Monday, June 26, 2023 1:01 PM  
To: Mindy Weth Fryer <[Mindy.Fryer@TexasAgriculture.gov](mailto:Mindy.Fryer@TexasAgriculture.gov)>  
Subject: Password Reset

**WARNING:** This email originated from outside of the Texas Department of Agriculture email system. DO NOT click links or open attachments unless you expect them from the sender and know the content is safe.

You have requested a password reset. Please use the link below reset your password. It will expire in 15 minutes.

[Reset Password](#)

If you did not request this reset and would like to invalidate and cancel the request, please click [here](#).



# Step#1d if needed

- If you forget your username, click forgot username and supply the email address. Click on the email button. A reset link will be sent to the email address supplied.

## Forgot Password

Email

Username

[Forgot Username](#)



# **TDA-GO User Roles**



# Authorized Official (AO)

- Authorized person to enter into legal agreements on behalf of the organization.
- TDA-GO tasks:
  - Create new user accounts for organization members
  - Initiate applications
  - Complete all required application fields
  - Certify and Submit an application
  - Execute Grant Agreements
  - Initiate/Complete/Submit Payment request/Performance reports/Amendments



# Project Director (PD):

- Personnel in grant administration.
- TDA-GO tasks:
  - Create new user accounts for organization members
  - Initiate applications
  - Complete all required application fields
  - Initiate/Complete/Submit Payment request/Performance reports



# Consultant/Researcher (C/R)

- A third-party person assisting with the grant application; or employee/researcher/staff/PIs/professors assisting with a grant application/proposal that **DOES NOT** need to see every grant application for the organization.
- TDA-GO tasks:
  - Initiate applications
  - Complete all required application fields



# How to Assign Roles



# Step#1

- After logging in to your TDA-GO account, the AO (the person who created the account) will see the Dashboard. In the upper right-hand corner, click on the arrow next to the AO name, and click **Profile** from the drop-down menu.

The screenshot shows the TDA-GO Dashboard interface. At the top right, the user name "Mary Sue" is displayed with a dropdown arrow. A red circle highlights this name and the dropdown menu that appears below it. The menu options are "Profile", "Messages", "Edit Dashboard", and "Log Out". The "Profile" option is also circled in red. The dashboard contains several sections: "My Tasks" with a table of tasks, "Initiate New Application" with a table of applications, and "Announcements" with a message box.

Home   Searches ▾

Mary Sue ▾

- Profile
- Messages
- Edit Dashboard
- Log Out

## Dashboard

### My Tasks

Initiate Related Document

Filter

#### My Tasks

Name	Document Type	Organization	Status	Status Date	Due Date
<a href="#">ADG-2025-TGO-00001</a>	Training Application	<a href="#">Test Grantee Organization</a>	Application canceled	8/14/2024 11:37:27 AM	12/31/2024 11:59:59 AM
<a href="#">ADG-2025-TGO-00003</a>	Training Application	<a href="#">Test Grantee Organization</a>	Application canceled	8/28/2024 11:39:12 AM	12/31/2024 11:59:00 AM
<a href="#">ADP2026001</a>	Grant - Agricultural	<a href="#">Test Grantee Organization</a>	Application in Process	10/29/2025 1:22:44 PM	

### Initiate New Application

Filters

#### Initiate New Application

Name	Provider	Availability	Description
<a href="#">Agricultural Development Grant_eah</a>	TXDOA Provider	8/8/2024 12:00:00 AM - Open Ended	
<a href="#">Boll Weevil Application - 2026-2027</a>	TXDOA Provider	1/1/2025 12:00:00 AM - 12/31/2026 11:59:00 PM	
<a href="#">CDBG - CEDAF</a>	TXDOA Provider	7/10/2025 12:00:00 AM - Open Ended	CEDAF

### Announcements

This is an announcement from TDA Go staff.



# Step#2

- The profile page will let you see basic information for the primary AO and the Organization (includes personal, contact, address, additional, and login information). Located on the left-hand side of the webpage, the AO can access the Organization information. The AO can update general information for the organization as well as add and manage organization members.

**Organization Information**

- Test Grantee Organization
- Organization Information
- Organization Members
- Organization Details

## Person Information

**Profile**

**Basic Information**

First Name:  Middle Name:

Last Name:  Prefix:  Suffix:

Title:

**Contact Information**

**Organizations**

Test Grantee Organization

Role Name	Active Date	Inactive Date	Assigned By
Authorized Official	6/22/2020		Foushee, Jacob

Save



# Step#3

- To add a new member, click on **Organization Members**. To the right in the box titled “Members Search”, click the **Plus(+)** button to add a person. (Only to add other AOs or PDs).

**Organization Members**

Instructions:

- Use the available search criteria to filter the members table.
- To add a new member, click the Add New button and follow the instructions.
- You can limit system access by setting the Active/Inactive dates.

**Members Search**

Name  Role  Active  **+**

**Members**

Person Name	Role Name	Active Date	Inactive Date	Last Modified By	Last Modified By Date	
<a href="#">Admin, Test</a>	Project Director	05/02/23		Sue, Mary	05/02/23	<input type="button" value="edit"/>
<a href="#">AO, Fourth</a>	Authorized Official	04/12/22		TDA, Support Staff	04/12/22	<input type="button" value="edit"/>
<a href="#">AO, Second</a>	Authorized Official Project Director	02/09/21 02/09/21	12/14/21	TDA, Support Staff PD, Jane	02/09/21 12/14/21	<input type="button" value="edit"/>
<a href="#">AO, Third</a>	Authorized Official	02/09/21	06/08/24	System, Grant	06/08/24	<input type="button" value="edit"/>



# Step#4

- Complete Add Person form.

## Legend

First Name of user **(Required)**

Middle Name of user **(if you have one)**

Last Name of user **(Required)**

Position title of new user **(Required)**

Address of organization **(Required)**

State **(Required)**

Country **(Required)**

Zip Code **(Required)**

Email **(Required)**

Phone # **(Required)**

Role: **(Required)**

Active Date: start date of new user **(Required)**

Inactive Date: end date of new user **(Required)**

Username: **(Required)** **USE YOUR EMAIL**

Password **(Required)**

Confirm Password **(Required)**

- Click Save

### Add Person

Instructions:

- Enter new Person information and Save.
- New Person will be added to Organization currently being viewed.

**General Information**

First Name ★  Prefix

Middle Name

Last Name ★  Suffix

Title ★

**Contact Information**

Address ★  Address 2

City ★  State ★

ZIP Code ★  County ★

Primary Phone ★  Email ★

Fax  WebSite

Cell

**Assign Roles** ★

Role ★  Active Date ★  Inactive Date ★

**Security Information**

Username ★

Password ★  Confirm Password ★

Save



# How to Access Grant(s)



# Step#1

- After logging in, your Dashboard will appear

Home   Searches ▾     ● Mary Sue ▾

## Dashboard

### My Tasks Initiate Related Document

▸ Filter

▾ My Tasks

Name	Document Type	Organization	Status	Status Date	Due Date
<a href="#">ADG-2025-TGO-00001</a>	Training Application	<a href="#">Test Grantee Organization</a>	Application canceled	8/14/2024 11:37:27 AM	12/31/2024 11:59:59 AM
<a href="#">ADG-2025-TGO-00003</a>	Training Application	<a href="#">Test Grantee Organization</a>	Application canceled	8/28/2024 11:39:12 AM	12/31/2024 11:59:00 AM
<a href="#">ADP2026001</a>	Grant - Agricultural	<a href="#">Test Grantee Organization</a>	Application in Process	10/29/2025 1:22:44 PM	

### Initiate New Application

▸ Filters

▾ Initiate New Application

Name	Provider	Availability	Description
<a href="#">Grant Agricultural Development - 2026</a>	TXDOA Provider	9/1/2025 12:00:00 AM - 12/31/2026 11:59:00 PM	
<a href="#">Grant Agricultural Development - Federal 2022</a>	TXDOA Provider	5/23/2022 12:00:00 AM - Open Ended	
<a href="#">Grant Agricultural</a>	TXDOA Provider	4/26/2023 12:00:00 AM -	

### Announcements

This is an announcement from TDA Go staff.



# Step#2

- Choose the Application by scrolling down the “Initiate New Application” box and click the blue hyperlink under the name banner. Once the program launches, it will say **Grant - AgLink Continuity Grant -2026**

**Initiate New Application**

> Filters

▼ Initiate New Application

Name	Provider	Availability	Description
<a href="#">Grant Agricultural Development - 2026</a>	TXDOA Provider	9/1/2025 12:00:00 AM - 12/31/2026 11:59:00 PM	



# Step#3

- A brief description of the project and the agreement button appears. Click **Agree**. It will say **Grant - AgLink Continuity Grant -2026**

## Grant Agricultural Development – 2026



**Provided By:** TXDOA Provider

**Provided To:** Test Grantee Organization

**Application Availability Dates:** 9/1/2025 12:00:00 AM - 12/31/2026 11:59:00 PM

**Due Date:** 12/31/2026 11:59:00 PM

**Description:**

Grants that encourage the proper development of agriculture in this state.

**Agreement Language:**

As an individual authorized to initiate a grant on behalf of my organization to request funding from the Texas Department of Agriculture, I will comply with all rules and requirements as described in the Request for Applications published to [www.texasagriculture.gov](http://www.texasagriculture.gov).

Agree

Decline



# Step#4

- After clicking the Agree button, the Document Landing Page will appear. The left column has the Grant Project Number at the top, the four (4) drop down menus: **Forms, Status Options, Tools, and Related Documents,**

Home    Searches ▾

AGL260003

Forms

Status Options

Tools

Related Documents

New Note

## Document Landing Page

<b>Template</b> Grant - AgLink Continuity Grant -2026	<b>Instance</b> Grant - AgLink Continuity Grant -2026	<b>Process</b> Application
<b>Document Name</b> AGL260003	<b>Document Status</b> Application in Process	
<b>Organization</b> Test Grantee Organization	<b>Your Role</b> Authorized Official	

Application in Process    Application Cancelled (Not Submitted)    Application Submitted    Application Approved    Grant Agreement Executed    Closeout Submitted    Closeout Revision Required    Grant Closed

# Forms

- List of required information

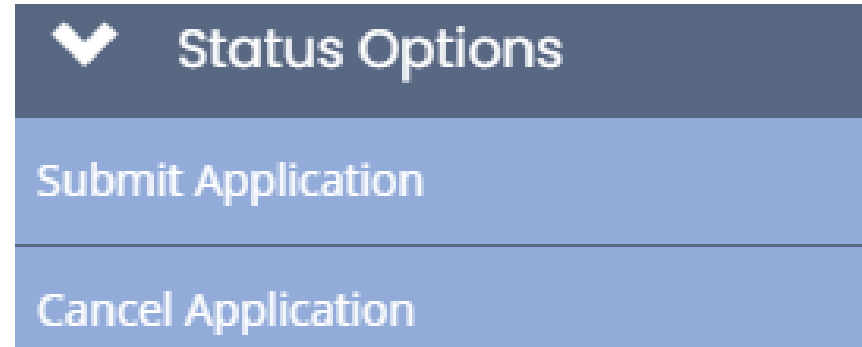


Forms	
Application	
Applicant Contact Information	<input type="checkbox"/>
Operation Information	<input type="checkbox"/>
Production/Service Capacity	<input type="checkbox"/>
Proposed Project Description	<input type="checkbox"/>
Utilization of Grant Funds Plan	<input type="checkbox"/>
Estimated Revenue and Operation Budget	<input type="checkbox"/>
Project Budget Costs	<input type="checkbox"/>
Administrative Form Uploads	<input type="checkbox"/>
Certification	<input type="checkbox"/>



# Status Options

- Application can be submitted or cancelled





# Tools

- Help navigating change and other information

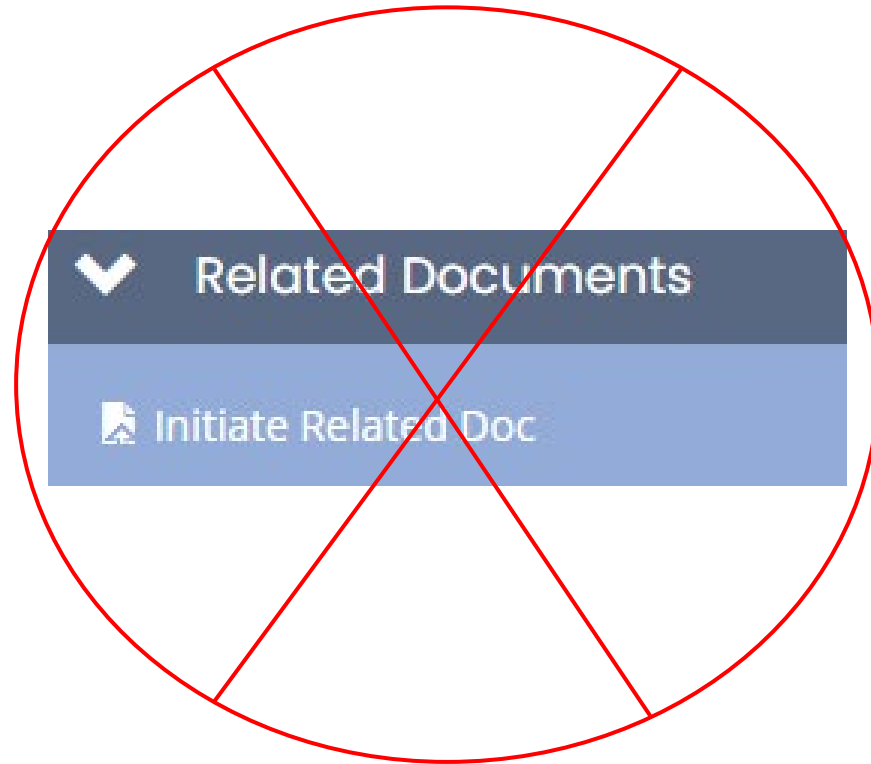
Tools

- Landing Page
- Add/Edit People
- Status History
- Attachment Repository
- Modification Summary
- Document Validation
- Notes
- Print Document
- Document Messages



# Related Documents

- This is not needed during the application process.





# How to Apply



# **Applicant Contact Information**



# Step#1

- Click the Forms drop-down and then click **Applicant Contact Information**.

The screenshot displays the 'Document Landing Page' for document AGL260003. The interface includes a top navigation bar with 'Home', 'Searches', and a user profile for 'Mary Sue'. A left sidebar lists various document sections under 'Application', with 'Applicant Contact Information' circled in red. The main content area shows document details and a progress bar.

Template	Instance	Process
Grant - AgLink Continuity Grant -2026	Grant - AgLink Continuity Grant -2026	Application

Document Name	Document Status
AGL260003	Application in Process

Organization	Your Role
Test Grantee Organization	Authorized Official

Progress Bar:

- Application in Process (Completed)
- Application Cancelled (Not Submitted)
- Application Submitted
- Application Approved
- Grant Agreement Executed
- Closeout Submitted
- Closeout Revision Required
- Grant Closed

# Step#2



- Fill out information that is marked with a red asterisks (\*). Use the drop-down menu to select the AO for the project.

## Applicant Contact Information

**Instructions:**

Please complete this page and press the save button.

Required fields are marked with an \*

**Organization DBA**

City of Sample

**Name of Authorized Official**

(This person is authorized to enter into legal agreements on behalf of the applicant/organization. This person's name will appear on the grant agreement for signature.)

Select the Authorized Official of your organization from the drop-down list below. \*

**Prefix:**

**First Name:**

**Last Name:**

**Suffix:**

**Job Title:**

**Telephone:**

**Email:**

# Step#2



- Fill out information that is marked with a red asterisks (\*). Use the drop-down menu to select the contact for the project.

## Name of Application Preparer / Administrative Contact

(This person can answer day-to-day questions about the organization and the project.) \*

A dropdown menu with the text "Second AO" and a downward-pointing arrow on the right side. The entire dropdown menu is circled in red.

Prefix:

First Name:

Last Name:

Suffix:

Position or Title:

Telephone:

Email:



# Step#2

- Type any other people who are involved in project but do not need to know about the grant process. This part is optional if there is no one else to add.

## Name of Additional Contact for Project

(Optional: This person may not have a role in the TDA-GO system, but is knowledgeable on the project's technical matters.)

Prefix:	<input type="text"/>
First Name:	<input type="text"/>
Last Name:	<input type="text"/>
Suffix:	<input type="text"/>
Position or Title:	<input type="text"/>
Telephone:	<input type="text"/>
Email:	<input type="text"/>



# Step#2

- Fill out information that is marked with a red asterisks (\*). Use the drop-down menu to select the county, US Congressional, Texas House, and Texas Senate Districts. Click the blue hyperlink to find that information.

Please select the county where your headquarters/main offices are located.

County \*

TDA Region

## Legislative Districts

Provide the legislative district(s) for the primary location of the project. This information is available [here](#). Press the plus button next to each option to add multiple selections. \*

US Congressional District:

 +

Texas House District:

 +

Texas Senate District:

 +



# Step#3

- Click the Save button in the top right-hand corner before moving on to the next section. If any required fields are not filled out, an error message will appear and, the application may not be submitted. A white check mark will indicate that you have saved and completed the section.

AGL260003

Forms

Application

Applicant Contact Information

## Applicant Contact Information

**Instructions:**  
Please complete this page and press the save button.  
Required fields are marked with an \*

New Note | Print | **Save**



# Operation Information



# Step#1

- After saving the previous form, click **Operation Information**. Fill out information that is marked with a red asterisks (\*).

AGL260003

New Note | Print | Save

## Operation Information

- Forms
- Application
  - Applicant Contact Information
  - Operation Information**
  - Production/Service Capacity
  - Proposed Project Description
  - Utilization of Grant Funds Plan
  - Estimated Revenue and Operation Budget
  - Project Budget Costs
  - Administrative Form Uploads
  - Certification

Do you have a family, employment or business relationship with an executive, officer or employee of TDA or member of the TAFE Board? \*

Yes  No

See RFGA for additional details.

Are you subject to a federal tax lien? \*

Yes  No

Have you or your business ever filed for bankruptcy? \*

Yes  No

If yes, please indicate the type of bankruptcy (e.g., Chapter 7, Chapter 11, Chapter 12, Chapter 13) and the year it was filed: \*

Type:  Year:  Status (open/closed):



# Step#2

- Any field with a **Plus(+)** can add an additional row if needed.

## Operation Information

Select the industry(ies) that is directly served by the applicant's operation. If you select "Other", you must explain. \*

Cattle    Citrus    Corn    Cotton    Nut    Olive  
 Poultry    Produce    Rice    Sorghum    Other  

Provide a brief description of the applicant's business/services:\*

Provide the City and County where the primary agricultural operation is physically located \*

City    County    State

Provide the City and County for additional locations in Texas that this project may impact. You may add additional rows if there are multiple locations.:

City    County



# Step#2

- You can delete additional rows by pressing the **Minus (-)** button.

## Operation Information

Select the industry(ies) that is directly served by the applicant's operation. If you select "Other", you must explain. \*

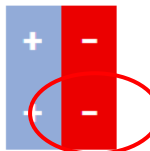

Cattle    Citrus    Corn    Cotton    Nut    Olive  
 Poultry    Produce    Rice    Sorghum    Other  

Provide a brief description of the applicant's business/services:\*

Provide the City and County where the primary agricultural operation is physically located \*

City    County    State

Provide the City and County for additional locations in Texas that this project may impact. You may add additional rows if there are multiple locations.:

City    County      
City    County    



# Step#2

- Fill out information that is marked with a red asterisks (\*).

**Describe the area and customers served.**

Number of farmers/producers served by your operation at Texas locations in this application:\*

Do you expect changes in the number of farmers/producers you will serve next season?\*

Yes, an increase    Yes, a decrease    Stay the same

What is the farthest distance (in miles) a farmer/producer travels to reach your location?\*

Has your service area grown or decreased in recent years?\*

Yes, and increase    Yes, a decrease    Stay the same

Are there other similar service providers located near your area? If yes, how far away are they?\*

**Operation Additional Information** - Optional text to add additional information about your operation. See "Request for Grant Application" for additional details.



# Step#2

- Fill out information that is marked with a red asterisks (\*).

## Business Ownership

What year was the facility first established?\*

What year did the current ownership take control of the facility?\*

Select the type of business structure:\*

Sole Proprietorship    Partnership    Corporation    Cooperative    Other  

If any major construction, expansion, renovation, or equipment projects have been accomplished, please provide the year and brief description of the project and what it accomplished.\*

Type	Year	Description
<input type="text"/>	<input type="text"/>	<input type="text"/>

## Ownership Percentage

List any person who owns more than 20% of the business listed in this application.\*

Name	Enter percent ownership
<input type="text"/>	<input type="text"/> %

**Business Ownership** - Optional text to add additional information about your business ownership. See Request for Grant Application for additional details.



# Step#2

- Fill out information that is marked with a red asterisks (\*).

---

## Employment

Provide the number of current employees. \*

Current Full Time employee

Current Part Time employee

If your organization receives grant funding, how many employees do you expect to have in each of the following categories? (Include both full-time and part-time staff as applicable.) \*

# of Full-time employees retained:  # of New Full-time employees hired:

# of Part-time employees retained:  # of New Part-time employees hired:

Provide as many of these as you have. Enter n/a if they are not applicable.

Texas Department of Agriculture Account number * (example: grain warehouse account)	<input type="text"/>
TCEQ Permit Number*	<input type="text"/>
USDA Perishable Agricultural Commodities Act (PACA) #*	<input type="text"/>
USDA License Numbers* (example: grain warehouse account)	<input type="text"/>
Gin #*	<input type="text"/>



# Step#3

- Click the Save button in the top right-hand corner before moving on to the next section. If any required fields are not filled out, an error message will appear and the application may not be submitted. A white check mark will indicate that you have saved and completed the section.

## Operation Information

New Note | Print | **Save**



# **Production/Service Capacity**



# Step#1

- After saving the previous form, click **Production/Service Capacity**. Fill out information.

AGL260003

Production/Service Capacity

New Note | Print | Save

Last Saved 2/5/2026 10:28 AM

Attention

Application

Production/Service Capacity

Provide information regarding your production/service capacity.

In this industry, a year is based on:  Calendar Year  Production Year

Start date: MM/DD/YYYY

End Date: MM/DD/YYYY



# Step#2

- A drop-down message in the top right-hand corner will bring attention to what needs to be filled out on this page before you can move forward with the application.

## ▼ Attention

- ⊘ Facility Name/ID is required.
- ⊘ Commodity is required.
- ⊘ UOM is required.
- ⊘ 2019 Annual Facility Capacity is required.
- ⊘ 2020 Annual Facility Capacity is required.
- ⊘ 2021 Annual Facility Capacity is required.
- ⊘ 2022 Annual Facility Capacity is required.
- ⊘ 2023 Annual Facility Capacity is required.
- ⊘ 2024 Annual Facility Capacity is required.
- ⊘ 2025 Annual Facility Capacity is required.
- ⊘ 2019 Facility Actual Production is required.
- ⊘ 2020 Facility Actual Production is required.
- ⊘ 2021 Facility Actual Production is required.
- ⊘ 2022 Facility Actual Production is required.
- ⊘ 2023 Facility Actual Production is required.
- ⊘ 2025 Facility Actual Production is required.
- ⊘ 2024 Facility Actual Production is required.
- ⊘ County is required.
- ⊘ Commodity in table two is required.
- ⊘ Processing production facilities changed is required.





# Step#3

- Fill out information that is marked with a red box around the text box. If you need to delete an additional rows by pressing the **Minus (-)** button.

Facility Name / ID	Commodity	Unit of Measure					
<input type="text"/>	<input type="text"/>	<input type="text"/>					
	2019	2020	2021	2022	2023	2024	2025
Facility Annual Capacity	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Facility Actual Production	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Percent of Facility Capacity Actually Produced	%	%	%	%	%	%	%

Facility Name / ID	Commodity	Unit of Measure					
<input type="text"/>	<input type="text"/>	<input type="text"/>					
	2019	2020	2021	2022	2023	2024	2025
Facility Annual Capacity	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Facility Actual Production	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Percent of Facility Capacity Actually Produced	%	%	%	%	%	%	%



# Step#3

- Fill out information that is marked with a red box around the text box. If you have more than one (1) facility, please click the **Plus(+)** button to add an additional row if needed.

## Commodity Production in Counties Served

Enter the name of each county served by your organization and the relevant commodity. Use the plus button on the right side of the screen to add rows as necessary. TDA staff will populate the total county production data during the application review.

County	Commodity	2019	2020	2021	2022	2023	2024	2025	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="button" value="+"/>

How has the processing production facilities changed in this county in the last 10 years? \*

**Production/Service Capacity** - Optional text to add additional information about your production/service capacity. See Request for Grant Application for additional details.



# Step#3

- Fill out information that is marked with a red box around the text box. If you need to delete an additional rows by pressing the **Minus (-)** button.

## Commodity Production in Counties Served

Enter the name of each county served by your organization and the relevant commodity. Use the plus button on the right side of the screen to add rows as necessary. TDA staff will populate the total county production data during the application review.

County	Commodity	2019	2020	2021	2022	2023	2024	2025		
<input style="border: 1px solid red;" type="text"/>	<input style="border: 1px solid red;" type="text"/>								+	-
<input type="text"/>	<input type="text"/>								+	-

How has the processing production facilities changed in this county in the last 10 years? \*

**Production/Service Capacity** - Optional text to add additional information about your production/service capacity. See Request for Grant Application for additional details.



# Step#4

- Click the Save button in the top right-hand corner before moving on to the next section. If any required fields are not filled out, an error message will appear and the application may not be submitted. A white check mark will indicate that you have saved and completed the section.

## Production/Service Capacity

New Note | Print **Save**

Last Saved 2/5/2026 10:28 AM

➤ Attention



# Proposed Project Description



# Step#1

- After saving the previous form, click **Proposed Project Description**. Fill out information.

AGL260003

New Note | Print | Save

## Proposed Project Description

For each question, briefly but thoroughly answer the prompt.

- Forms
- Application
  - Applicant Contact Information
  - Operation Information
  - Production/Service Capacity
  - Proposed Project Description**
  - Utilization of Grant Funds Plan
  - Estimated Revenue and Operation Budget
  - Project Budget Costs
  - Administrative Form Uploads
  - Certification
- Status Options
- Tools
- Related Documents

1. Describe the overarching vision and mission of the agricultural operation. What drives you? \*  
  
0 of 1500
2. Describe the financial hardship the business suffered due to recent disasters.  
  
0 of 1500
3. Describe how the grant funds would be used to stabilize operations and the resulting benefits to producers. How will the grant funds support business recovery and resume normal operations?  
  
0 of 1500
4. What are the consequences of funds not being awarded?  
  
0 of 1500



# Step#2

- Fill out information.

5. What are some ways the business can better prepare for future disasters to lessen the economic impact?

0 of 1500

6. Which declared disaster event directly or indirectly impacted your business (e.g., drought, flood, wildfire, freeze, storm. If drought, include length of time county was in a D-2 or higher drought status over the past 5 years.)?

0 of 1500

7. Describe how the disaster affected agricultural production in your area.

0 of 1500

8. How did the reduction in available agricultural products (reduced production) affect your business operations? For example: fewer deliveries, lower processing volumes, lost contracts, staff reductions, etc.

0 of 1500



# Step#2

- Fill out information.

9. What essential operating expenses are you currently struggling to meet (e.g., payroll, rent, utilities, loan payments)?

0 of 1500

10. Have you applied for or received other forms of disaster assistance or insurance? If yes, please describe.

0 of 1500

11. What outcomes do you expect as a result of receiving these grant funds (e.g., retain staff, restore operations, prevent closure)?

0 of 1500

12 How long do you estimate it will take for your business operations to return to pre-disaster levels? What changes/improvements will be made to implement future success?

0 of 1500



# Step#3

- Click the Save button in the top right-hand corner before moving on to the next section. If any required fields are not filled out, an error message will appear and the application may not be submitted. A white check mark will indicate that you have saved and completed the section.

## Proposed Project Description

New Note | Print | Save



# Utilization of Grant Funds Plan



# Step#1

- After saving the previous form, click **Utilization of Grant Funds Plan**. Fill out information that is marked with a red asterisks (\*).

AGL260003

Forms

Application

Applicant Contact Information

Operation Information

Production/Service Capacity

Proposed Project Description

**Utilization of Grant Funds Plan**

Estimated Revenue and Operation Budget

Project Budget Costs

Administrative Form Uploads

Certification

Status Options

Tools

Related Documents

## Utilization of Grant Funds Plan

New Note | Print | Save

**Instructions:**  
Please complete this page and press the save button.  
Required fields are marked with an \*

Detail the steps it will take to complete the project, include who will complete each task and any resulting deliverable. The timeline should be progressive (including month and year) to show when each activity will start and end. Be sure to include performance monitoring, data collection, outreach and reporting. To add additional work plans sections, press the plus button on the right. \*

*(ie: First Harvest period, maintenance, processing complete)*

Start Date MM/YYYY	End Date MM/YYYY	Work to be Completed
<input type="text"/>	<input type="text"/>	Activity: <input type="text"/> 0 of 300
		Who: <input type="text"/> 0 of 150

+



# Step#2

- Click the **Plus(+)** button to add an additional row if needed.

## Utilization of Grant Funds Plan


New Note | Print | Save

**Instructions:**  
Please complete this page and press the save button.  
Required fields are marked with an \*

Detail the steps it will take to complete the project, include who will complete each task and any resulting deliverable. The timeline should be progressive (including month and year) to show when each activity will start and end. Be sure to include performance monitoring, data collection, outreach and reporting. To add additional work plans sections, press the plus button on the right. \*

*(ie: First Harvest period, maintenance, processing complete)*

Start Date MM/YYYY	End Date MM/YYYY	Work to be Completed
<input type="text"/>	<input type="text"/>	<p>Activity:</p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p>0 of 300</p> <p>Who:</p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p>0 of 150</p>





# Step#3

- Click the Save button in the top right-hand corner before moving on to the next section. If any required fields are not filled out, an error message will appear and the application may not be submitted. A white check mark will indicate that you have saved and completed the section.

## Utilization of Grant Funds Plan

New Note | Print **Save**



# **Estimated Revenue and Operation Budget**



# Step#1

- After saving the previous form, click **Estimated Revenue and Operation Budget**. Fill out information that is marked with a red asterisks (\*).

AGL260003

Forms

Application

Applicant Contact Information

Operation Information

Production/Service Capacity

Proposed Project Description

Utilization of Grant Funds Plan

**Estimated Revenue and Operation Budget**

Project Budget Costs

Administrative Form Uploads

Certification

Status Options

Tools

Related Documents

## Estimated Revenue and Operation Budget

New Note | Print | Save

**Instructions:**  
Please complete this page and press the **save** button.  
Use the plus button to add additional rows.  
Required fields are marked with an \*

**Historical Financials \***

	2021	2022	2023	2024	2025
Revenue	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Expenditures	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Net Income	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Asset	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Liabilities	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>



# Step#2

- If a question has a Browse button in the answer box, it is necessary to upload the appropriate documents. Click Browse button to open file selection screen and upload file. Click the **Plus(+)** button to add an additional row.

## Historical Financials \*

	2021	2022	2023	2024	2025
Revenue	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Expenditures	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Net Income	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Asset	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Liabilities	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Net Position	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Debt to Equity:	NaN	NaN	NaN	NaN	NaN

## Financial Statements \*

Balance Sheet (Assets/Liabilities) and Profit and Loss Statement from the previous 3 years.

OR

Audited Financial Statement for the past 3 years (IRS Form 990 is not accepted).

Drag Files Here





# Step#3

- Click the Save button in the top right-hand corner before moving on to the next section. If any required fields are not filled out, an error message will appear and the application may not be submitted. A white check mark will indicate that you have saved and completed the section.

## Estimated Revenue and Operation Budget

New Note | Print | Save



# Project Budget Cost



# Step#1

- After saving the previous form, click **Project Budget Costs**. Fill out information that is marked with a red asterisks (\*).

AGL260003

Forms

Application

Applicant Contact Information

Operation Information

Production/Service Capacity

Proposed Project Description

Utilization of Grant Funds Plan

Estimated Revenue and Operation Budget

**Project Budget Costs**

Administrative Form Uploads

Certification

Status Options

Tools

Related Documents

## Project Budget Costs

New Note | Print | Save

**Instructions:**  
Please complete this page and press the save button.  
Required fields are marked with an \*

This section should reflect the total project budget. Provide a description of all costs along with a justification for each item. The explanations should focus on how each budget item is required to achieve the project. Be sure to itemize the request with quantities and individual estimated costs. Do not include any costs that are outside of this project.

Expense Categories	Total Funds Requested	Grant Funds (90%)	Match Funds (10%)
Personnel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
<b>Total Direct Costs</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>



# Step#2

- Fill out information. Click the **Plus(+)** button to add an additional row if needed .

## Equipment

Describe any special purpose equipment that is to be purchased or rented under the grant. "Special purpose equipment" is tangible, nonexpendable, personal property having a useful life of more than one year and an acquisition cost that equals or exceeds \$10,000 per unit.

If awarded, the grant recipient must maintain property records for equipment acquired. A physical inventory of the item will be conducted by TDA for the life of ownership.

Item Description	Rental or Purchase	Total Funds Requested
<input type="text"/>	<input type="text" value="v"/>	<input type="text" value="\$"/>
<b>Equipment Subtotal</b>		<b>\$0.00</b>

+

## Equipment Justification

For each Equipment item listed in the above table describe how this equipment will be used to achieve the completion of the project's objective(s) and outcome(s).



# Step#2

- Fill out information. Click the **Plus(+)** button to add an additional row if needed.

## Personnel

List the organization's employees whose time and effort can be specifically identified and easily and accurately traced to project activities. Add more lines if needed.

If awarded, TDA requires complete and accurate back-up documentation for salary, wages, and fringe benefit costs charged to a grant program. Supporting documentation must clearly demonstrate that personnel costs are directly attributed to the approved grant activities. Documentation that does not clearly substantiate the time worked on the grant may be deemed ineligible for reimbursement.

Name	Position/Title	Level of Effort (# of hours OR % FTE)	Total Funds Requested
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
Personnel Subtotal			\$0.00





# Step#2

- Fill out information. Click the **Plus(+)** button to add an additional row.

## Supplies

List the materials, supplies, and fabricated parts costing less than \$10,000 per unit and describe how they will support the purpose and goal of the proposal.

Item Description	Per-Unit Cost	# of Units/Pieces Purchased	Total Funds Requested
<input type="text"/>	\$ <input type="text"/>	<input type="text"/>	\$0.00
Supplies Subtotal			\$0.00



## Supplies Justification

Describe the purpose of each supply listed in the table above to be purchased and how it is necessary for the completion of the project's objective(s) and outcome(s)



# Step#2

- Fill out information. Click the **Plus(+)** button to add an additional row if needed.

## Contractual

Contractual costs are the expenses associated with purchasing goods and/or procuring services performed by an individual or organization other than the applicant in the form of a procurement relationship. If there is more than one contractor, each must be described separately. (Repeat this section for each contractor/consultant.) Please note indirect expenses are not allowable under this RFGA.

Grant regulations require that certain standards must be met to maintain oversight to ensure contractors perform in accordance with the terms, conditions, and specifications of their contracts. TDA may require a copy of the signed contract prior to work being conducted.

Name/Organization	Task/Description of work contract will cover	Total Funds Requested for each contract
<input type="text"/>	<input type="text"/>	<input type="text" value="\$"/>
<b>Contractual/Consultant Subtotal</b>		<b>\$0.00</b>



## Contractual Justification

Describe the purpose of each contractual/consultant cost.



# Step#2

- Fill out information. Click the **Plus(+)** button to add an additional row if needed .

## Other

Include any expenses not covered in any of the previous budget categories. Be sure to break down costs into cost/unit. Expenses in this section include, but are not limited to, meetings and conferences, communications, rental expenses, advertisements, publication costs, and data collection.

Item Description	Per-Unit Cost	Number of Units	Total Funds Requested
<input type="text"/>	\$ <input type="text"/>	<input type="text"/>	\$0.00
<b>Other Subtotal</b>			<b>\$0.00</b>



## Other Justification

Describe the purpose of each item listed in the table above purchased and how it is necessary for the completion of the project's objective(s) and outcome(s).

0 of 1000

## Advance of Funds

Applicants may request advance funds of up to 5% of the total award amount. If requesting an advance, you must provide a written justification explaining why the advance is necessary. The justification should clearly describe the immediate financial need, how the advance will support timely project start-up or critical early activities, and why project objectives cannot be met without the advance.



# Step#3

- Click the Save button in the top right-hand corner before moving on to the next section. If any required fields are not filled out, an error message will appear and the application may not be submitted. A white check mark will indicate that you have saved and completed the section.

## Project Budget Costs

New Note | Print | **Save**



# **Administrative Form Uploads**



# Step#1

- After saving the previous form, click **Administrative Form Uploads**. Fill out information that is marked with a red asterisks (\*).

AGL260003 New Note | Print | Save

Forms

Application

- Applicant Contact Information
- Operation Information
- Production/Service Capacity
- Proposed Project Description
- Utilization of Grant Funds Plan
- Estimated Revenue and Operation Budget
- Project Budget Costs
- Administrative Form Uploads**
- Certification

Status Options

Tools

Related Documents

## Administrative Form Uploads

Instructions:  
Please complete this page and press save.  
Required fields are marked with an \*

Click the blue hyperlink to download the form, complete the information, sign it and reupload.

### Administrative Forms

**Application for Texas Identification Number \***  
click to download (MUST USE THIS FORM ONLY)

This will NOT generate a new number. Information provided is used for background checks and to set up account for payment, if awarded.

Drag Files Here

**Direct Deposit Authorization \***  
click to download (MUST USE THIS FORM ONLY)

Drag Files Here

**W-9 IRS Federal Tax Form \***  
click to download (MUST USE THIS FORM ONLY)

Drag Files Here

**Supplement Upload**  
Add any additional documents in this section. Use the (+) or (-) to add/delete additional rows.

Drag Files Here



# Step#2

- Click the blue hyperlink to download all three(3) forms and sign them. Click the Browse button to upload the appropriate documents in their correct place.

## Administrative Forms

[Application for Texas Identification Number \\*](#)

click to download (MUST USE THIS FORM ONLY)

This will NOT generate a new number. Information provided is used for background checks and to set up account for payment, if awarded.

[Browse](#) Drag Files Here

[Direct Deposit Authorization \\*](#)

click to download (MUST USE THIS FORM ONLY)

[Browse](#) Drag Files Here

[W-9 IRS Federal Tax Form \\*](#)

click to download (MUST USE THIS FORM ONLY)

[Browse](#) Drag Files Here

### Supplement Upload

Add any additional documents in this section. Use the (+) or (-) to add/delete additional rows.

[Browse](#) Drag Files Here





# Step#2a

- Application for Texas Identification Number is required per Texas Contract Management guidelines. By completing this form, you are assisting TDA with contract management standards to set up accounts for grant awards.

## Administrative Forms

**Application for Texas Identification Number \***

click to download (MUST USE THIS FORM ONLY)

This will NOT generate a new number. Information provided is used for background checks and to set up account for payment, if awarded.

**Browse** Drag Files Here

**Direct Deposit Authorization \***

click to download (MUST USE THIS FORM ONLY)

**Browse** Drag Files Here

**W-9 IRS Federal Tax Form \***

click to download (MUST USE THIS FORM ONLY)

**Browse** Drag Files Here

**Supplement Upload**

Add any additional documents in this section. Use the (+) or (-) to add/delete additional rows.

**Browse** Drag Files Here





# Step#2b

- Direct Deposit Authorization form is required to ensure ACH payments are made.

## Administrative Forms

**Application for Texas Identification Number \***  
click to download (MUST USE THIS FORM ONLY)

This will NOT generate a new number. Information provided is used for background checks and to set up account for payment, if awarded.

[Browse](#) Drag Files Here

**Direct Deposit Authorization \***  
click to download (MUST USE THIS FORM ONLY)

[Browse](#) Drag Files Here

**W-9 IRS Federal Tax Form \***  
click to download (MUST USE THIS FORM ONLY)

[Browse](#) Drag Files Here

**Supplement Upload**  
Add any additional documents in this section. Use the (+ ) or (-) to add/delete additional rows.

[Browse](#) Drag Files Here





# Step#2c

- W-9 Federal Tax form is required per Texas Contract Management guidelines.

## Administrative Forms

**Application for Texas Identification Number \***  
click to download (MUST USE THIS FORM ONLY)

This will NOT generate a new number. Information provided is used for background checks and to set up account for payment, if awarded.

[Browse](#) Drag Files Here

**Direct Deposit Authorization \***  
click to download (MUST USE THIS FORM ONLY)

[Browse](#) Drag Files Here

**W-9 IRS Federal Tax Form \***  
click to download (MUST USE THIS FORM ONLY)

[Browse](#) Drag Files Here

**Supplement Upload**  
Add any additional documents in this section. Use the (+ ) or (-) to add/delete additional rows.

[Browse](#) Drag Files Here





# Step#2d

- Additional Supporting Documents Uploads are optional. Applicants may upload relevant documentation (i.e. letters of support, references, supporting data, etc.). Click the **Plus(+)** button to add an additional row if needed.

## Administrative Forms

**Application for Texas Identification Number \***  
click to download (MUST USE THIS FORM ONLY)

This will NOT generate a new number. Information provided is used for background checks and to set up account for payment, if awarded.

[Browse](#) Drag Files Here

**Direct Deposit Authorization \***  
click to download (MUST USE THIS FORM ONLY)

[Browse](#) Drag Files Here

**W-9 IRS Federal Tax Form \***  
click to download (MUST USE THIS FORM ONLY)

[Browse](#) Drag Files Here

**Supplement Upload**  
Add any additional documents in this section. Use the (+) or (-) to add/delete additional rows.

[Browse](#) Drag Files Here





# Step#3

- Click the Save button in the top right-hand corner before moving on to the next section. If any required fields are not filled out, an error message will appear and the application may not be submitted. A white check mark will indicate that you have saved and completed the section.

## Administrative Form Uploads

New Note | Print | Save



# Step#a

- Go back and review all eight (8) previous sections for completeness and accuracy.

Forms	
Application	
Applicant Contact Information	<input type="checkbox"/>
Operation Information	<input type="checkbox"/>
Production/Service Capacity	<input type="checkbox"/>
Proposed Project Description	<input type="checkbox"/>
Utilization of Grant Funds Plan	<input type="checkbox"/>
Estimated Revenue and Operation Budget	<input type="checkbox"/>
Project Budget Costs	<input type="checkbox"/>
Administrative Form Uploads	<input type="checkbox"/>
Certification	<input type="checkbox"/>



# Step#4b

- Go over each section to make sure all information is correct and there are no error messages. If there are no error messages in a section, the section in the drop-down menu will have a check next to it

Certification





# Step#4c

- If there are error messages in a section, the section in the drop-down menu will have an exclamation point next to it. Click on the section in the drop-down menu to review and resolve the error message.





# Step#4d

- Once all the error messages has been resolved and each section has a check mark, the application can be certified and submitted. If you made changes to a section, PLEASE remember to click save in the top right-hand corner to save your changes.





# Certification



# Step#1

- After saving the previous sections, click **Certification**. Fill out information that is marked with a red asterisks (\*).

AGL260003

Forms

Application

- Applicant Contact Information
- Operation Information
- Production/Service Capacity
- Proposed Project Description
- Utilization of Grant Funds Plan
- Estimated Revenue and Operation Budget
- Project Budget Costs
- Administrative Form Uploads
- Certification**
- Status Options
- Tools
- Related Documents

## Certification

New Note | Print | Save

**Instructions:**  
Please complete this page and press the save button.  
Required fields are marked with an \*

By signing below, Applicant:

1. Certifies all information provided in connection with this application is true and correct to the best of Applicant's knowledge;
2. Acknowledges any misrepresentation or false statement made by Applicant, or an authorized agent of Applicant, in connection with this application, whether intentional or not, will constitute grounds for denial of this application;
3. Acknowledges acceptance of funds in connection with this application acts as an acceptance of the authority of TDA and the State Auditor's Office (SAO) or any successor agency to conduct an investigation in connection with those funds, and Applicant further agrees to cooperate fully with TDA and/or SAO or its successor in the conduct of the audit or investigation, including allowing TDA and/or SAO to inspect Applicant's premises and providing all records requested;
4. Acknowledges this application and any payments owed to Applicant in connection with this application may be reduced or denied because of Applicant's owing any debt to the State of Texas, and that this application and any payments owed to Applicant in connection with this application may be denied because of delinquency in payment of a guarantee student loan and for failure to pay child support; and
5. By submission of this application, Applicant acknowledges as a condition of receipt of grant funds under this program the Applicant will be required to execute a grant agreement with the Texas Department of Agriculture, and further acknowledges that failure to timely execute the grant agreement will result in withdrawal of any grant funds awarded, and those funds will be redistributed to other qualified applicants in accordance with state law and TDA rules.

Applicant further:

1. Certifies that Applicant does not and will not knowingly employ an undocumented worker who, at the time of employment, is not lawfully admitted for permanent residence to the United States or authorized under law to be employed in that manner in the United States. Applicant understands that if, after receiving a grant, Applicant is convicted of a violation under 8 U.S.C. Section 1324a(f), Applicant shall repay the amount of the grant with interest, at the rate assigned by applicable law;
2. Certifies that no state or federal tax liens have been filed against Applicant or Applicant's property;
3. Certifies that Applicant has not been convicted of any felony or a misdemeanor involving moral turpitude;
4. Acknowledges that pursuant to the Texas Grant Management Standards (TxGMS), if Applicant fails to comply with any condition, provision, or term of an award made as a result of this application, Applicant may have to make a partial or total repayment of such award;
5. Applicant authorizes TDA to review, verify and authenticate all information provided in this application; and
6. Applicant understands TDA may request further documentation supporting this application, including contacting other agencies, organizations, facilities or third parties to verify data provided by an Applicant from the records of such agencies, organizations, facilities or third parties.

**Notice of Penalties: The penalty for knowingly making false statements or false entries, or attempts to secure money through fraudulent means, may include fines and/or incarceration and/or forfeiture of funds under applicable state law.**

This application becomes public record and is subject to disclosure. With few exceptions, you have the right to request and be informed about the information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. (Reference: Texas Government Code, Sections 552.021, 552.023, and 559.004.)



# Step#2

- Scroll down to the bottom of the page and then click the box under Signature of Authorized Representative to certify the application.

Signature of Authorized Representative

Title

Date



After saving your signature, when you are ready to submit this application to TDA, you MUST change the status by selecting "**Submit Application**" under the Status Options heading in the navigation menu to the left.

# Step#3

- Click Save.

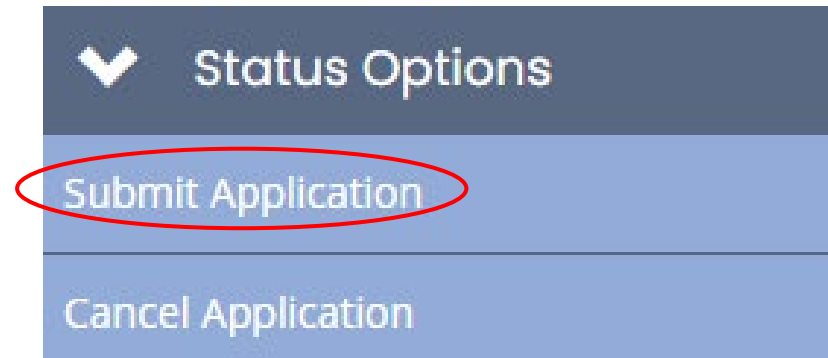


New Note | Print | Save



# Step#4

- After saving the previous form, click **Status Options**. Click the Submit Application to submit your application.





# Step#5

- If there are any errors, a Document Validation box will pop-up and will ask to make changes. After saving the previous form, click **Status Options**. Click the Submit Application to submit your application.

## Document Validation



Below is the status of each form. Select the form name to navigate and make changes to any of the forms.

Show forms that I cannot adjust

Form Name	Status	May Prevent Status Change
<a href="#">Production/Service Capacity</a>	Error(s)	Yes



# Step#6

- After submitting your application, you will receive a confirmation email. It will say Application AgLink-2026-TGO-##### for [your organization] instead of Application HDM-2021-TGO-00005 for Test Organization.

From: [websites@agatesoftware.com](mailto:websites@agatesoftware.com) <[websites@agatesoftware.com](mailto:websites@agatesoftware.com)>  
Sent: Tuesday, April 13, 2021 10:57 AM  
[REDACTED]  
Subject: Application HDM-2021-TGO-00005 Submitted

**WARNING:** This email originated from outside of the Texas Department of Agriculture email system. DO NOT click links or open attachments unless you expect them from the sender and know the content is safe.

Thank you for submitting Application HDM-2021-TGO-00005 for Test Grantee Organization. TDA staff will review and contact the persons identified in the application with any questions or concerns