



# Partner Agency Application Packet

---

Requirements and procedures for membership to the Food Bank of Iowa network.

A member of:



# About Us

## Vision and Mission

### Our Vision

A hunger free Iowa.

### Our Mission

We provide food for Iowa children, families, and seniors to lead full and active lives, strengthening the communities where they live.

## What We Do

Food Bank of Iowa distributes donated food and grocery products through Iowa’s largest network of emergency food providers, consisting of over 600 partner agencies in 55 counties. Food Bank of Iowa operates distribution centers in Des Moines and Ottumwa.

Donated products are received from all sectors of the food industry, including: growers; packers; processors; manufacturers; wholesalers; brokers and retailers. We also receive commodities from the United States Department of Agriculture (USDA).

### The Flow of Food



## Partner Agencies We Serve

- Food Pantries: Individuals in need visit the site and receive grocery items to prepare at home.
- Meal Providers: Individuals in need receive prepared meals or snacks.

## **Benefits of Partnership**

Partnership with Food Bank of Iowa offers many benefits to your agency.

- We leverage purchasing power to offer you food and products you otherwise may not be able to afford.
- We offer online ordering of our products as well as online pick-up and delivery scheduling.
- You will have regular learning opportunities through annual agency conferences, orientation and monthly newsletters to help you run your agency most efficiently and offer tips on use of food, storage and safe handling, grant and fundraising opportunities, volunteer recruitment resources, recall alerts, etc.
- Potential direct access to donated products from retail stores.

## **Criteria for Membership as a Partner Agency**

Food Bank of Iowa agency members are 501(c)3 non-profit organizations or churches that are incorporated for the purpose of serving the ill, needy or infants (minor children), provide direct service to the hungry, and do not redistribute product to any other entity. The pre-application checklist indicates our minimum requirements. If you do not or cannot meet these requirements, you will not be considered a candidate for membership as a partner agency.

The need in your community, the location and proximity of your agency in relation to other existing FBOI partners will be considered in addition to the minimum requirements.

In some cases, Food Bank of Iowa may be able to work with an applying agency to meet a requirement they have not fulfilled.

## **What is a 501(c)3?**

Section 501(c)3 is the portion of the US Internal Revenue Code that allows for federal tax exemption of nonprofit organizations, specifically those that are considered public charities, private foundations or private operating foundations. It is regulated and administered by the US Department of Treasury through the Internal Revenue Service.

In order to qualify for 501(c)3 status, an entity must be organized and operated exclusively for religious, charitable, scientific, testing for public safety, literary, or educational purposes, to foster national or international amateur sports competition, or for the prevention of cruelty to children or animals.

In order for a corporation or other qualifying entity to receive 501(c)3 status, it must apply to the IRS for recognition by filing Form 1023, Application for Recognition of Tax Exemption. The application is a thorough examination of the organization's structure, governance and programs.

Your agency is eligible to become a partner agency through one of the following:

- Having 501(c)3 status
- Being part of an umbrella-owned and operated parent organization who has 501(c)3 status (We must have a copy of the 501(c)3 and a letter attached stating the affiliation and offering approval to use the 501c3)
- Completing the IRS Church Qualifier form

For more information on 501(c)3s or how to become one, please visit [www.501c3.org](http://www.501c3.org)

## **IRS Church Qualifier**

Churches who are not 501(c)3s can apply under the church entity by compliance with the 14 criteria employed by the IRS in defining a church (listed below). All applicants applying in this manner should provide a letter on church letterhead signed by its chief executive officer affirming the organization is, in fact, a church by these criteria.

1. A distinct legal existence
2. A recognized creed and form of worship
3. A definite and distinct ecclesiastical government
4. A formal code of doctrine and discipline
5. A distinct religious history
6. A membership not associated with any (other) church or denomination
7. A complete organization of ordained ministers ministering to their congregations
8. Ordained ministers elected after completing prescribed courses of study
9. A literature of its own (newsletter or Sunday morning program)
10. Established places of worship
11. Regular congregations
12. Regular religious services
13. Religious instruction for the young
14. Schools for the preparation of its ministers

## **Site Inspections**

Food Bank of Iowa and Feeding America require your agency to pass a site inspection before it can be approved for partnership. Upon approval, the site will be inspected at least every two years.

**What are we looking for?** When we complete a site inspection, we are checking to see how your program operates (client intake, understanding fees, responsibilities of staff/volunteers), view your facilities, and review your food safety procedures to ensure:

- You have a clean storage area
- Food and non-food household items are stored in separate areas
- All food is stored at least 6 inches off the ground and away from an exterior wall
- Food is stored in a temperature-controlled space
- Food is NOT stored at a personal residence
- “first in, first out” distribution methods are being utilized
- Your equipment is clean, and you have working thermometers and up-to-date temperature logs

## **Handling Fees/Food Ordering**

- Only order food that you can distribute – while still having a small amount on reserve
- Only order food that you have the capacity to transport from Food Bank of Iowa to your agency location if you schedule a pick-up.
- Be on time for scheduled pick-up times. If you are unable to make your pick up, call the Food Bank of Iowa prior to your scheduled appointment.
- Understand your requirement to distribute a minimum of 2,000 lbs. per fiscal year to maintain active membership with the Food Bank of Iowa.
- Food Bank of Iowa operates on a handling fee system. The handling fee is not the cost of the food, but rather a handling fee associated with acquiring and storing the product. Fees are assessed at varying rates from \$.00-.16/lb.

## **Partner Agency Handbook**

Every agency, upon acceptance as a partner, will receive a Partner Agency Handbook that outlines many of the policies and procedures for being a partner agency of the Food Bank of Iowa. This manual will serve as a “how-to” source to reference. Agencies are expected to maintain the guidelines in the Partner Agency Handbook.

## **Pre-Application Checklist**

The following is a checklist of minimum requirements your agency must meet to be considered for membership as a partner agency with the Food Bank of Iowa. You should be able to check all the boxes below to proceed with the application process.

- You are a 501(c)3 non-profit organization or a church located in the Food Bank of Iowa’s 55 county service area.
- Your organization has been in operation a minimum of 90 days with an ongoing food program.
- You are providing service to 51%+ financially needy clients and an underserved population.
- You will use the donated product only as related to your agency’s purpose of serving the ill, needy or infants (minor children).
- You have a location at your facility that includes proper and adequate physical storage/preparation/distribution space not located in a personal residence.
- Your agency operates for distribution/meals a minimum of twice per month for a minimum of two hours per distribution/meal.
- Your agency has established criteria for the individuals you serve that are consistent and posted at your pantry/feeding site. This must include distribution of USDA commodities to households (not exceeding) 185% of the federal poverty level.
- You have personnel/volunteers who are accountable for record keeping, inventory control and a system for keeping track of and entering statistics.
- You have the ability and willingness to access and submit information via the internet.
- You will agree to pay handling fees listed on the product inventory invoice.
- You will adhere to food safety guidelines and complete Food Safety Training.

- Your staff, visitors, and clients who qualify will receive food free of charge with absolutely no conditions levied, implied, or exchanged.
- You will order and distribute a minimum of 2,000 lbs. per fiscal year (FYI, according to USDA, 1 meal = 1.2 pounds of food).
- You will pass a site inspection prior to membership and allow for appropriate on-going monitoring by Food Bank of Iowa representatives.
- Your agency will use the Food Bank of Iowa at least once every six months.
- You have sufficient transportation to pick up your orders.
- You have sufficient funding sources to cover expenses.



# Partner Agency Application

Instructions for completing the fillable application:

Click on, "Click here to enter text" to enter your answers to each question.

Boxes can be filled with an  by clicking on them.

Where a line appears \_\_\_\_, you may click on the line to enter the requested text.

The same will apply to the Terms and Conditions Agreement.

When you complete the application, please save, print, sign and return to Tami Nielsen at [tnielsen@foodbankiowa.org](mailto:tnielsen@foodbankiowa.org) or mail application to Food Bank of Iowa, 2220 E 17<sup>th</sup> St. Des Moines, IA 50316

Date:

New Applicant

Re-Applicant

## CONTACT INFORMATION

### **AGENCY INFORMATION**

Agency Name:

Physical Address:

City: Zip Code:

County:

Web address:

Phone Number: Fax Number:

### **APPLICANT CONTACT PERSON**

Name and Title:

Contact Person Telephone number:

Contact Person Email:

### **ADMINISTRATION**

Director of Agency (Exec. Dir., Pastor, Board Chair):

Director of Agency's Telephone:

Director of Agency's Email:

Bill to Name and Address:

City: Zip Code:

## AGENCY BACKGROUND

Are you a designated 501c3 nonprofit charitable organization as defined by the Internal Revenue Code Section 170e3? Yes  No

*(A copy of the IRS Final Letter of Determination or IRS Church Qualifier form must accompany this application)*

How long has your food program been in operation?



## Partner Agency Application

What is the primary purpose of your agency?

Why do you wish to become a partner agency of Food Bank of Iowa?

### PROGRAM INFORMATION

Are you providing service to 51+% financially needy clients? How do you determine this?

What type(s) of food program(s) do you have? (Check all that apply)

- Pantry (food distributed to clients for offsite use)
- Meal site (meals served on site)
- Residential facility
- Emergency shelter with meals served on site
- Adult or child day care facility
- Senior program
- Other (please describe below):

Does anyone in your agency have certification in food safety? Yes  No

*(If yes, include a photocopy of your certificate with this application)*

What other non-food programs does your agency operate?

Describe how your agency plans to continue serving in the event of a pandemic or natural disaster?





## Partner Agency Application

**Describe your food program in detail. Who does it serve? How long in operation? How does it work?**

**Describe how you let people know about your food program.**

**How often does your agency distribute/serve food?**

- Daily
- Multiple times per week
- Once per week
- Twice per Month
- Other (please specify):

**Which day(s) of the week:**

**Time(s) of day:**

**Do you set boundary restrictions for providing food to clients?**

- No, the food programs(s) has/have no boundaries
- Yes, check all that apply
  - Service area, based on city
  - Service area, based on zip code
  - Service area, based on county
  - Program specific clients
  - Other (please specify):

**Does your agency maintain more than one site? If so, please include the number of sites and the addresses.**

**Use a three- month average to answer the next two questions.**

**For an on-site feeding program, how many total meals are typically served in one month?**



# Partner Agency Application

**For a food pantry, how many individuals and households are typically served in one month?**

**How do you collect this data?**

**List the criteria for a person to participate in your food program. How is this verified?**

**What type(s) of documentation must clients provide to receive food?**

- Social Security card
- A State issued ID
- Proof of address
- Proof of income
- None
- Referral – If so, who from?
- Other (please specify)

**Describe any other requirements placed on people to whom your agency provides assistance.**

**Describe what types of records your agency keeps for your food program and how these are maintained.**

**Please estimate the percentage of food that comes from these sources:**

- \_\_\_ Retail purchases (supermarket, grocery store)
- \_\_\_ Wholesale/food brokerage purchases
- \_\_\_ Restaurant donations
- \_\_\_ Community food drives
- \_\_\_ Hosting religious congregation
- \_\_\_ Other (please specify):

**What percentage of your food do you anticipate sourcing from the Food Bank of Iowa?**



# Partner Agency Application

## PROGRAM FUNDING

Describe how your program is funded.

Do you charge fees for any services provided? Yes  No

If yes, please explain.

Do you charge fees to staff and volunteers, please explain?

Does your agency receive any government funding or reimbursement?

If yes, please describe.

Do you understand that the handling fee cannot be passed on to the program participant, staff or visitors? Yes  No

## FACILITY DESCRIPTION

Please describe your dry storage space:

What type(s) and number of refrigerators do you have?

- Domestic Unit \_\_\_\_\_
- Commercial one-door \_\_\_\_\_
- Commercial two-door \_\_\_\_\_
- Commercial three-door \_\_\_\_\_
- Walk-in unit \_\_\_\_\_



# Partner Agency Application

## What type(s) and number of freezers do you have?

- Domestic unit \_\_\_\_\_
- Commercial one-door \_\_\_\_\_
- Commercial two-door \_\_\_\_\_
- Commercial three-door \_\_\_\_\_
- Walk-in unit \_\_\_\_\_

Are the premises inspected by Health Officials? Yes  No

Date of last inspection and score:

Does your agency have a company contracted to handle pest control? Yes  No

If yes, what is the company's name and how often do they come?

If no, how does your agency handle pest control?

Describe your inventory control procedures – how is the stored food handled and used?

How will you ensure Food Bank of Iowa products are used only for approved programs?

Is there anything else we should know about your program or your application?



# Partner Agency Application

## OTHER INFORMATION

**Will your agency respond to direct referrals from the Food Bank of Iowa or other community agencies?** Yes  No

If yes, please explain any limitations on possible referrals. If no, please explain.

**Are you a member of any other Food Bank?** Yes  No

If yes, which one(s)?

**Does your agency have internet access?** Yes  No

**All counties are offered delivery at least one time per month. Do you prefer delivery?** Yes  No

**If you prefer to pick up from FBOI, does your agency plan to pick up product:**

Weekly  Monthly  Other

**Does your agency have reliable transportation to pick up your FBOI orders? Please explain.**

**Does your transportation have cooling capacity for fresh produce and frozen goods?**

Signature of Agency Director: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
(Director at the Food Bank of Iowa)