DGMS Community Assistance Program (CAP) Application Process

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Please note, the simulated test data contained in this presentation is for demonstration purposes only and not representative of actual data. It is intended solely to illustrate system functionalities to aid new users in submitting CAP Applications in DCRA's new DGMS.



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Log into DGMS using your DGMS Log in

You will automatically be directed to Home. Please click on Opportunities.



2/11/2025

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If your organization is eligible to apply, click the Qualify button.

Home C	pportunities	Applications	Grants	Monitoring	Closeout	×			
Apportunity Y26 Community Assistance Program									
EGMS ID AN-26CAP-001	Stat Put	us lished		Application Due Date 6/2/2025					
* Required to Save ▲ Required to Submit Overview Files History Messages									
Overview Files	B O History	Messages			* Required to Sav	e 🛦 Required to Submit			
Overview File: Opportunity Informati Opportunity Name Y26 Community Assistance F	on History	Messages Type Directed			* Required to Save Program PG-26CAP-0001	e A Required to Submit			
Overview File: Opportunity Informati Opportunity Name Y26 Community Assistance I Funding Organization Maska Department of Comme conomic Development (DCC	on History Program erce, Community, and ED)	• Messages • Type • Directed Funding Organ	ization Division/Offi	ce O	* Required to Save Program PG-26CAP-0001 * Maximum # Applications Allowed 1	e A Required to Submit			



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Once the status shows "Qualified", select Create Application. Home Opportunities Applications Grants Monitoring Closeout Opportunity **Create Application** Qualified Converted to Application FY26 Community Assistance Program EGMSID Status Application Due Date AN-26CAP-001 Qualified 6/2/2025 You may save and * Required to Save A Required to Submit exit the application. III Overview Files History Messages Make a note of the ▲ Opportunity Information EGMS ID before **Opportunity Name** Type Program ID Directed PG-26CAP-0001 FY26 Community Assistance Program saving and exiting. Funding Organization Unit Maximum # Applications Allowed **Funding Organization** Alaska Department of Commerce, Community, and 1 Economic Development (DCCED) Program Type **Fiscal Year** Other 2026

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The "Create Application" pop-up window will automatically populate the announcement in the Application Title field. Add your Organization name as shown below.

Create Application	×
	 Required to Save A Required to Submit
erview	
Application Information	
Application Title	
FY26 Community Assistance Program - Organization Name	
	Save and Continue Close
	*
	Save and Contir
	to next step



Overview Section





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Project information is not needed for the CAP Application.





Contacts

▲ Contacts Associate Ξ									
Showing 1 to 1 of 1 records									
4	Project Role	Name 个	Email	Is Key Contact	Is User				
T	Project Director/Manager	Reserve SPI	✓ coummatotemmei-3604@yopmail.com	×	~				

Additional organizational contacts may be added here. However, all contacts will need to be registered with the organization for full user access.

Ensure one contact	▲ Contacts Save Associate							
is the Key Contact.	Showing	1 to 1 of 1 records Project Role	Is Key Contact	ls User				
The Key Contact can be updated at any	•	Project Director/Manager 🔻	Borough Testcase	petersburg_manager@yopmail.com		~		
time.								

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Once the Overview section is complete, review and check "I Agree" on the Acknowledgement.

 Acknowledgement 			
I hereby certify that the information provided above is accurate and complete.	Acknowledgement	Submitted By	Submitted On



CAP Application Form





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Under Details you will see the electronic version of prior year paper applications.





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Current Fiscal Year Proposed Budget for CAP Funding

	Save	d Successfully!		x
	▲ Curr	ent Fiscal Year Proposed Community Assistance Program Budget	Save Add Other	=
Use dropdowns to	Showing	1 to 13 of 13 records	 Records are sorted by Created Date ascending ord 	ler -
	4	*Category	*Amount	
select the budget		Other - New Category	10,000.00	
category and enter		Education	25,000.00	When finished.
dollar amount. If the	•	Electricity	25,000.00	click the Save box
Budget category		EMS	25,000.00	to continuo
noodod is not listed	V	Fire	\$25,000.00	to continue.
needed is not listed,		Fuel	\$25,000.00	
select Add Other	V	General Administration	\$25,000.00	
	V	Harbors	\$25,000.00	

Reminder: the Current Fiscal Year Proposed Budget is for the CAP Application Fiscal Year.



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Once saved, the system will calculate the **estimated** current FY total.

Curre	ent Fiscal Year Proposed Community Assistance Program Budget	Save Add Other
wing	1 to 13 of 13 records	* Records are sorted by Created Date ascending on
4 *	*Category Fuel	/ *Amount \$25,000.00
¥	General Administration	\$25,000.00
Ŧ	Harbors	\$25,000.00
Ψ	Health	\$25,000.00
Ŧ	Insurance	\$25,000.00
¥	Other	\$0.00
Ŧ	Public Safety	\$25,000.00
¥	Road Maintenance	\$25,000.00
¥	Water/Sewer	\$25,000.00
	Current Fiscal Year Estimated Payment	\$300,000.00



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Repeat the process for Previous Fiscal Year CAP Budget.

A Prev	ious Fiscal Year Community Assistance Program Statement of Expenditures for Prior	Add Other
Showing	1 to 14 of 14 records	* Records are sorted by Created Date ascending order
4	*Category	*Amount
Ŧ	General Administration	\$25,000.00
Ŧ	Harbors	\$25,000.00
Ŧ	Health	\$25,000.00
¥	Insurance	\$25,000.00
V	Other	\$0.00
V	Public Safety	\$25,000.00
¥	Road Maintenance	\$25,000.00
¥	Savings/Not Spent	\$25,000.00
v	Water/Sewer	\$25,000.00
	Previous Fiscal Year Estimated Payment	\$325,000.00
	Total Records: 14	

Fill in the Statement of Expenditures Summary.

▲ Statement of Expenditures Summary							
Savings/Not Spent Explanation N/A	Current Fiscal Year Estimated Payment 0 \$310,000.00	Previous Fiscal Year Estimated Payment 0 \$325,000.00					



Review the Certification and check the Acknowledgement box.

▲ Certification
As the highest ranking official, I certify the PETERSBURG BOROUGH understands the requirements for receiving the community assistance payment and agrees to comply with all laws and regulations (AS 29.60.850 - 879; 3 AAC 180.010 - 900) governing the community assistance funds.
Acknowledgement
Acknowledged Date: 1/16/2025, 2:23 AM
Acknowledged By: Borough Testcase
Title Borough Manager

Clicking Save on the top right-hand corner of your screen will digitally sign and timestamp the CAP Application.



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Validate Application



After Validation, click the Back button to see the CAP application timestamped and validated.

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Additional Documentation

Types of additional documentation include:

- CAP funding year budgets with non-code ordinance.
- Two years prior funding year Audit or Certified Financial Statement with Resolution.
- Resolutions for the application (as applicable).
- Additional information requested by the Department.
- Additional documents not submitted with the CAP application can be submitted through the DGMS at a later time using the Forms & Files upload feature, the Messages feature, or the Chatter feature.



Any additional Documents that are required for CAP Payments to be issued can be uploaded in the Application Files Section



Confirm and Submit





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Submitted applications are available to view on the Applications tab of the Grantee portal. Filter by "Applications Submitted".

	Home	Opportunities Ap	plications	Grants	Monitoring	Closeout			
App	▲ Applications - Submitted ¥								
Showing	Showing 1 to 1 of 1 records								
+	EGMS ID	Application Title	Funding	Opportunity Title	Funding	Organization	Application Due Date	Submitted On 4	
	AP-26CAP-002	FY26 Community Assistance Progra	am FY26 Co	ommunity Assistance Pro	gram Alaska D	Department of Commerce, Com	06/02/2025	01/16/2025, 02:47 AM	
	Total Records: 1								



This concludes the Tutorial

For additional information and questions, please contact: Division of Community and Regional Affairs Grants and Funding Section Lindsay Reese, Grants Administrator 3 caa@alaska.gov



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