



FY 2026 Municipal Community Mitigation Fund Grant Application

Application Instructions:

- I. All applications must be received by the Massachusetts Gaming Commission by January 31st, 2025, at 11:59 p.m. to be considered for funding for the FY 2026 grant round.
- II. Each municipality may only submit **ONE** application as a Word Document.
- III. Each project must have its own form within the appropriate category. Forms can be found below as Parts A-E. If there is more than one project in a category, please copy the form. All attachments should directly follow the relevant project form.
- IV. Be sure to fill in all the information requested on the application. Applications that are left incomplete will not be accepted.
- V. All applications must submit a detailed scope of work and timeline for implementation for all projects identified in the application.
- VI. All applications must contain appropriate backup materials that support the application.
- VII. The Municipal Grant Manager will be the person responsible for compiling the information for the quarterly reports. The application must be signed by the municipal administrator or an individual with signatory authority. Submit this completed form as well as any relevant attachments to MGCCMF@Massgaming.gov or as a response to the COMMBUYS BID BD25-1068- 1068C-1068L-109685

For more detailed instructions as well as the full FY 2026 Application Guidelines visit

<https://massgaming.com/about/community-mitigation-fund/>

Municipal Grant Manager Information:
Applicant: City of Holyoke – Office of Planning and Economic Development
Vendor Code: VC6000192102
Name: Jennifer Keitt
Title: Senior Project Manager
Email Address: keittj@holyoke.org
Telephone: (413) 322-5655
Address: City Hall Annex, 20 Korean Veterans Plaza, Suite 406, Holyoke, MA 01040-5000

Grant Budget Summary

Your community's FY 2026 proposed allocation can be found at <https://massgaming.com/about/community-mitigation-fund/>. Use the space below to total all requests by category. Please clarify how many discreet projects your community plans to undertake per category.

Total FY 2026 Allocation:		
Application Totals by Category	# of Projects	Requested Amount
A. Community Planning	7	\$220,000
B. Public Safety	1	\$24,000
C. Transportation	1	\$30,000
D. Gambling Harm Reduction	1	\$20,000
E. Specific Impact		
TOTAL		\$294,000

I. Are you requesting a waiver for any program requirement?

Yes

No

II. If yes, you must fill out a CMF Municipal Waiver Form. The waiver form can be found as Appendix E to the RFR on COMMBUYS or online at <https://massgaming.com/about/community-mitigation-fund/forms/>. Applications without a completed waiver form will not be considered for a waiver.

Budget Category Summary

Use the space below to provide an overview of all projects to be covered by this funding. You may add as many items as is pertinent to your application (you can add rows by right clicking on the row and selecting "add row"). Please provide a category, name, brief description, and amount for each item.

Category	Project Name	Description	Amount
A. Community Planning	Explore Holyoke website	Continued maintenance and upgrades to exploreholyokey.com	\$35,000
	Race/Main Street Placemaking	Placemaking for vacant and blighted lot in high tourism area.	\$30,000
	Puerto Rican Cultural District	Support & funding for district manager to plan events	\$40,000
	Public Art	Local artist education for public art	\$60,000

	MGM Promotions	Strengthen promotions of Holyoke at MGM, printing costs, video production, etc.	\$20,000
	MGM Shuttle Service	Shuttle service between MGM and Holyoke for special events	\$15,000
	Sister City Initiative	These requested funds would be to host official visits from Tralee and San Juan in 2026 in regards to the initiatives we are working on together.	\$20,000
B. Public Safety	Speeding/Traffic Mitigation	Traffic and speeding mitigation efforts to include traffic sign software fees that support traffic signs posting speed limits to slow cars down and to also post important traffic updates like road closures and detours.	\$24,000
C. Transportation	Bike share program	This project aims to secure funding to ensure Holyoke's continued participation in a bikeshare initiative within the city of Holyoke.	\$30,000
D. Gambling Harm Reduction	Harm Reduction Action Plan	Holyoke will create an action plan, based on results of the harm reduction survey, to address concerns of gambling addiction or unhealthy behaviors around gambling.	\$20,000
E. Specific Impact			

Applicant Certification

On behalf of the aforementioned applicant, I hereby certify that the funds that are requested in this application will be used solely for the purposes articulated in this application.

Aaron Vega

1/31/2025

Signature: _____

Date: _____

Aaron Vega, Director
 City of Holyoke Office of Planning and Economic
 Development (OPED)

Name and Title of Signatory: _____

Part A-Community Planning - The application should include sufficient backup information for the review team to fully understand the project(s). This information could include locus maps, requests for proposals, detailed scopes of work, drawings etc.

Project Name: ExploreHolyoke.com			
Please provide below the contact information for the individual managing this aspect of the grant.			
Project Contact		Additional Project Contact (if applicable)	
Name: Jennifer Keitt		Name:	
Title: Senior Project Manager		Title:	
Department: Office of Planning & Economic Development		Department:	
Email Address: keittj@holyoke.org		Email Address:	
Telephone: (413) 322-5655		Telephone:	
Address: City Hall Annex, 20 Korean Veterans Plaza, Suite 406, Holyoke, MA 01040-5000		Address:	
<p>I. Please use the space below to identify the impact of the gaming establishment on your municipality. You may use the impacts identified in the FY 2026 Guidelines relevant to this category. If you are using an impact not identified in the guidelines, please use the space below to identify the impact. Please provide documentation or evidence that gives support for the determination that the operation of the gaming facility caused or is causing the impact (i.e., surveys, data, reports, etc.)</p>			
<p>Gaming establishments draw a sizable number of staff and customers that would not otherwise be in the area. The marketing capabilities of gaming establishments may put other competing local businesses at a disadvantage. This gives local communities and businesses the chance to draw casino employees and customers to their areas, advertise recreational and entertainment options, and assist localities in competing with gambling facilities for business.</p>			
<p>II. Please describe the project in detail and how the proposed project will address the impact indicated above. Please include a breakdown of the proposed scope of work, the scope should be sufficiently detailed to allow the review team to understand the steps required for project completion.</p>			
<p>Funds requested will go toward the continued maintenance of exploreholyoke.com in collaboration with cdeVision LLC which was originally made possible through previous rounds of Community Mitigation Funds. cdeVision will create a marketing video archive of past, present and future reels of city events. A portion of these funds will continue to provide operational maintenance, updates, and integrated social media plan to continue efforts towards promotion of local businesses and events.</p>			
Proposed MGC Grant Budget			
Please use the following table to outline the project budget. Please include as an attachment any requests for proposals, quotes, or estimates that would quantify the costs associated with the mitigation.			
Description of Purchase/Work	Timeline	QTY	Budget
ExploreHolyoke.com	Fall 2025 – Fall 2027	1	\$35,000
	TOTAL:		\$35,000

Part A-Community Planning - The application should include sufficient backup information for the review team to fully understand the project(s). This information could include locus maps, requests for proposals, detailed scopes of work, drawings etc.

Project Name: Race/Main Street Placemaking			
Please provide below the contact information for the individual managing this aspect of the grant.			
Project Contact		Additional Project Contact (if applicable)	
Name: Jennifer Keitt		Name:	
Title: Senior Project Manager		Title:	
Department: Office of Planning & Economic Development		Department:	
Email Address: keittj@holyoke.org		Email Address:	
Telephone: (413) 322-5655		Telephone:	
Address: City Hall Annex, 20 Korean Veterans Plaza, Suite 406, Holyoke, MA 01040-5000		Address:	
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<p>Gaming establishments draw a sizable number of staff and customers that would not otherwise be in the area. This gives local communities and businesses the chance to draw casino staff and customers to their areas, advertise recreational and entertainment options, and help communities compete with the gaming establishment for business and tourism.</p>			
<p>II. Please describe the project in detail and how the proposed project will address the impact indicated above. Please include a breakdown of the proposed scope of work, the scope should be sufficiently detailed to allow the review team to understand the steps required for project completion.</p>			
<p>In order to capitalize on the increased tourism activity brought on by the MGM casino, we are seeking funding for placemaking at major tourism sectors downtown. The City of Holyoke, in collaboration with Nueva Esperanza, Mass In Motion, Greater Holyoke Chamber of Commerce and Beyond Walls, are activating a vacant and blighted lot in a high tourism area. The goal is to expand on the activation through a placemaking process that continues to serve the community. We know that placemaking inspires people to collectively reimagine and reinvent public spaces as the heart of every community. Strengthening the connection between people and the places they share.</p>			
Proposed MGC Grant Budget			
Please use the following table to outline the project budget. Please include as an attachment any requests for proposals, quotes, or estimates that would quantify the costs associated with the mitigation.			
Description of Purchase/Work	Timeline	QTY	Budget
Race/Main Street Placemaking	Fall 2025 – Fall 2027	1	\$30,000
	TOTAL:		\$30,000

Part A-Community Planning - The application should include sufficient backup information for the review team to fully understand the project(s). This information could include locus maps, requests for proposals, detailed scopes of work, drawings etc.

Project Name: Puerto Rican Cultural District			
Please provide below the contact information for the individual managing this aspect of the grant.			
Project Contact		Additional Project Contact <i>(if applicable)</i>	
Name: Stephanie Colon		Name:	
Title: Mass In Motion Coordinator		Title:	
Department Office of Planning and Economic development		Department:	
Email Address: mimcoordinator@holyoke.org		Email Address:	
Telephone: (413) 322-5655		Telephone:	
Address: City Hall Annex, 20 Korean Veterans Plaza, Suite 406, Holyoke, MA 01040-5000		Address:	
<p>I. Please use the space below to identify the impact of the gaming establishment on your municipality. You may use the impacts identified in the FY 2026 Guidelines relevant to this category. If you are using an impact not identified in the guidelines, please use the space below to identify the impact. Please provide documentation or evidence that gives support for the determination that the operation of the gaming facility caused or is causing the impact (i.e., surveys, data, reports, etc.)</p>			
<p>Gaming establishments draw a sizable number of staff and customers that would not otherwise be in the area. This gives local communities and businesses the chance to draw casino staff and customers to their areas, advertise recreational and entertainment options, and help communities compete with the gaming establishment for business and tourism.</p>			
<p>II. Please describe the project in detail and how the proposed project will address the impact indicated above. Please include a breakdown of the proposed scope of work, the scope should be sufficiently detailed to allow the review team to understand the steps required for project completion.</p>			
<p>Holyoke recently received final designation of our Puerto Rican Cultural District. This request will provide support & funding for a district manager to plan events within the district.</p>			
Proposed MGC Grant Budget			
Please use the following table to outline the project budget. Please include as an attachment any requests for proposals, quotes, or estimates that would quantify the costs associated with the mitigation.			
Description of Purchase/Work	Timeline	QTY	Budget
Puerto Rican cultural District	Fall 2025 – Fall 2027	1	\$40,000
	TOTAL:		\$40,000

Part A-Community Planning - The application should include sufficient backup information for the review team to fully understand the project(s). This information could include locus maps, requests for proposals, detailed scopes of work, drawings etc.

Project Name: Public Art			
Please provide below the contact information for the individual managing this aspect of the grant.			
Project Contact		Additional Project Contact (if applicable)	
Name: Jennifer Keitt		Name:	
Title: Senior Project Manager		Title:	
Department: Office of Planning & Economic Development		Department:	
Email Address: keittj@holyokey.org		Email Address:	
Telephone: (413) 322-5655		Telephone:	
Address: City Hall Annex, 20 Korean Veterans Plaza, Suite 406, Holyoke, MA 01040-5000		Address:	
<p>I. Please use the space below to identify the impact of the gaming establishment on your municipality. You may use the impacts identified in the FY 2026 Guidelines relevant to this category. If you are using an impact not identified in the guidelines, please use the space below to identify the impact. Please provide documentation or evidence that gives support for the determination that the operation of the gaming facility caused or is causing the impact (i.e., surveys, data, reports, etc.)</p>			
<p>Gaming establishments draw a sizable number of staff and customers that would not otherwise be in the area. This gives local communities and businesses the chance to draw casino staff and customers to their areas, advertise recreational and entertainment options, and help communities compete with the gaming establishment for business and tourism.</p>			
<p>II. Please describe the project in detail and how the proposed project will address the impact indicated above. Please include a breakdown of the proposed scope of work, the scope should be sufficiently detailed to allow the review team to understand the steps required for project completion.</p>			
<p>Public art installations are known to draw tourists. Monies awarded will build on Holyoke's current art scene by expanding to include local artist education and training.</p>			
Proposed MGC Grant Budget			
Please use the following table to outline the project budget. Please include as an attachment any requests for proposals, quotes, or estimates that would quantify the costs associated with the mitigation.			
Description of Purchase/Work	Timeline	QTY	Budget
Public Art		1	\$60,000
	TOTAL:		\$60,000

Part A-Community Planning - The application should include sufficient backup information for the review team to fully understand the project(s). This information could include locus maps, requests for proposals, detailed scopes of work, drawings etc.

Project Name: MGM Promotions			
Please provide below the contact information for the individual managing this aspect of the grant.			
Project Contact		Additional Project Contact (if applicable)	
Name: Jennifer Keitt		Name:	
Title: Senior Project Manager		Title:	
Department: Office of Planning & Economic Development		Department:	
Email Address: keittj@holyoke.org		Email Address:	
Telephone: (413) 322-5655		Telephone:	
Address: City Hall Annex, 20 Korean Veterans Plaza, Suite 406, Holyoke, MA 01040-5000		Address:	
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<p>Gaming establishments draw a sizable number of staff and customers that would not otherwise be in the area. This gives local communities and businesses the chance to draw casino staff and customers to their areas, advertise recreational and entertainment options, and help communities compete with the gaming establishment for business and tourism.</p>			
<p>II. Please describe the project in detail and how the proposed project will address the impact indicated above. Please include a breakdown of the proposed scope of work, the scope should be sufficiently detailed to allow the review team to understand the steps required for project completion.</p>			
<p>Monies awarded will help strengthen promotion of Holyoke at the MGM casino, including printing costs of materials, video production, and other marketing materials/ideas related to strengthening the connection and collaboration.</p>			
Proposed MGC Grant Budget			
Please use the following table to outline the project budget. Please include as an attachment any requests for proposals, quotes, or estimates that would quantify the costs associated with the mitigation.			
Description of Purchase/Work	Timeline	QTY	Budget
MGM Promotions	Fall 2025 – Fall 2026	1	\$20,000
	TOTAL:		\$20,000

Part A-Community Planning - The application should include sufficient backup information for the review team to fully understand the project(s). This information could include locus maps, requests for proposals, detailed scopes of work, drawings etc.

Project Name: MGM Shuttle			
Please provide below the contact information for the individual managing this aspect of the grant.			
Project Contact		Additional Project Contact (if applicable)	
Name: Jennifer Keitt		Name:	
Title: Senior Project Manager		Title:	
Department: Office of Planning & Economic Development		Department:	
Email Address: keittj@holyoke.org		Email Address:	
Telephone: (413) 322-5655		Telephone:	
Address: City Hall Annex, 20 Korean Veterans Plaza, Suite 406, Holyoke, MA 01040-5000		Address:	
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<p>Gaming establishments draw a sizable number of staff and customers that would not otherwise be in the area. This gives local communities and businesses the chance to draw casino staff and customers to their areas, advertise recreational and entertainment options, and help communities compete with the gaming establishment for business and tourism.</p>			
<p>II. Please describe the project in detail and how the proposed project will address the impact indicated above. Please include a breakdown of the proposed scope of work, the scope should be sufficiently detailed to allow the review team to understand the steps required for project completion.</p>			
<p>Funds would go toward increased shuttle service between MGM Casino and Holyoke for special events. The shuttle service is the critical connection between the city and MGM to promote further collaboration with the Casino and a form for locals and visitors to explore both Holyoke events and Springfield's growing Casino.</p>			
Proposed MGC Grant Budget			
Please use the following table to outline the project budget. Please include as an attachment any requests for proposals, quotes, or estimates that would quantify the costs associated with the mitigation.			
Description of Purchase/Work	Timeline	QTY	Budget
Shuttle service	Fall 2025 – Fall 2027	1	\$15,000
	TOTAL:		\$15,000

Part A-Community Planning - The application should include sufficient backup information for the review team to fully understand the project(s). This information could include locus maps, requests for proposals, detailed scopes of work, drawings etc.

Project Name: Sister City Initiative			
Please provide below the contact information for the individual managing this aspect of the grant.			
Project Contact		Additional Project Contact <i>(if applicable)</i>	
Name: Jennifer Keitt		Name:	
Title: Senior Project Manager		Title:	
Department: OPED		Department:	
Email Address: keittj@holyoke.org		Email Address:	
Telephone: (413) 322-5655		Telephone:	
Address: City Hall Annex, 20 Korean Veterans Plaza, Suite 406, Holyoke, MA 01040-5000		Address:	
<p>I. Please use the space below to identify the impact of the gaming establishment on your municipality. You may use the impacts identified in the FY 2026 Guidelines relevant to this category. If you are using an impact not identified in the guidelines, please use the space below to identify the impact. Please provide documentation or evidence that gives support for the determination that the operation of the gaming facility caused or is causing the impact (i.e., surveys, data, reports, etc.)</p>			
<p>Gaming establishments draw a sizable number of staff and customers that would not otherwise be in the area. This gives local communities and businesses the chance to draw casino staff and customers to their areas, advertise recreational and entertainment options, and help communities compete with the gaming establishment for business and tourism.</p>			
<p>II. Please describe the project in detail and how the proposed project will address the impact indicated above. Please include a breakdown of the proposed scope of work, the scope should be sufficiently detailed to allow the review team to understand the steps required for project completion.</p>			
<p>Both Tralee Ireland and Salinas Puerto Rico are Sister Cities to Holyoke. Current initiatives include collaborating on the Fiesta Patronales in both Holyoke and Salinas as well as solidifying our Volleyball connections. With Tralee our St Patrick's Parade Committee, Mass Humanities, the GSCVB and TAC members are working on dual promotion of our parades, a library exchange of local writers, across the Atlantic Fredrick Douglas reading, utilizing the Artery in Holyoke to have authentic Tralee artisan goods for sale in Holyoke, a genealogy connection for travelers between our communities and more. These requested funds would be to host official visits from Tralee and San Juan in 2026 in regard to the initiatives we are working on together.</p>			
Proposed MGC Grant Budget			
Please use the following table to outline the project budget. Please include as an attachment any requests for proposals, quotes, or estimates that would quantify the costs associated with the mitigation.			
Description of Purchase/Work	Timeline	QTY	Budget
Sister City Initiative	Fall 2025 – Fall 2026	1	\$20,000
	TOTAL:		\$20,000

Part B- Transportation The application should include sufficient backup information for the review team to fully understand the project(s). This information could include locus maps, requests for proposals, detailed scopes of work, etc.

Project Name: Bike Share Program			
Please provide below the contact information for the individual managing this aspect of the grant. If there are multiple people involved in the grants management, please add more lines to accommodate their information.			
Project Contact:		Additional Project Contact (if applicable)	
Name: Stephanie Colon		Name:	
Title: Mass In Motion Coordinator		Title:	
Department: OPED		Department:	
Email Address: mimcoordinator@holyoke.org		Email Address:	
Telephone: (413) 322-5655		Telephone:	
Address: City Hall Annex, 20 Korean Veterans Plaza, Suite 406, Holyoke, MA 01040-5000		Address:	
<p>I. Please use the space below to identify the impact of the gaming establishment on your municipality. You may use the impacts identified in the FY 2026 Guidelines relevant to this category. If you are using an impact not identified in the guidelines, please use the space below to identify the impact. Please provide documentation or evidence that gives support for the determination that the operation of the gaming facility causes or is causing the impact (i.e., surveys, data, reports, etc.)</p>			
<p>The opening of the MGM casino in Springfield has increased the amount of traffic associated with the gaming establishment thereby increasing congestion on the major routes leading to/from the gaming establishment. It has also resulted in increased vehicular/bicycle/pedestrian conflicts and placed a strain on public transit services. MGM has not only stimulated tourism but has led to transportation challenges in our communities. Due to the surge in foot traffic and tourism in the City of Holyoke, catalyzed by the opening of MGM Springfield, the city finds itself in a critical time to take action to manage the influx of need for different modes of transportation.</p>			
<p>II. Please describe the project in detail and how the proposed project will address the impact indicated above. Please include a breakdown of the proposed scope of work, the scope should be sufficiently detailed to allow the review team to understand the steps required for project completion.</p>			
<p>This project aims to secure funding to ensure Holyoke’s continued participation in a bikeshare initiative within the city of Holyoke. The City of Holyoke would use the funds to cover the admin fee associated with being a part of the bikeshare program to continue to ensure bikeability within the city of Holyoke and additional support for education, events and community bike rides</p>			
Proposed MGC Grant Budget			
Please use the following table to outline the project budget. Please include as an attachment any requests for proposals, quotes, or estimates that would quantify the costs associated with the mitigation.			
Description of Purchase/Work	Timeline	QTY	Budget
Bike share program	Fall 2025 – Fall 2027	1	\$30,000
	TOTAL:		\$30,000

Part C- Public Safety - The application should include sufficient backup information for the review team to fully understand the project(s). This information could include locus maps, catalog cuts of proposed equipment purchases, quotes, training course syllabus, etc.

Project Name: Speeding/Traffic Mitigation			
Please provide below the contact information for the individual managing this aspect of the grant.			
Project Contact:		Additional Project Contact <i>(if applicable)</i>	
Name: Joseph Zurheide		Name:	
Title: Sargeant		Title:	
Department: Police Department		Department:	
Email Address: 348@holyokep.org		Email Address:	
Telephone: (413) 536-6431		Telephone:	
Address: 138 Appleton Street, Holyoke, MA 01040		Address:	
<p>I. Please use the space below to identify the impact of the gaming establishment on your municipality. You may use the impacts identified in the FY 2026 Guidelines relevant to this category. If you are using an impact not identified in the guidelines, please use the space below to identify the impact. Please provide documentation or evidence that gives support for the determination that the operation of the gaming facility caused or is causing the impact (i.e., surveys, data, reports, etc.)</p>			
<p>The opening of the MGM casino in Springfield has increased the amount of traffic associated with the gaming establishment thereby increasing congestion on the major routes leading to/from the gaming establishment. It has also resulted in increased vehicular/bicycle/pedestrian conflicts and placed a strain on public transit services. MGM has not only stimulated tourism but has led to transportation challenges in our communities.</p>			
<p>II. Please describe the project in detail and how the proposed project will address the impact indicated above. Please include a breakdown of the proposed scope of work, the scope should be sufficiently detailed to allow the review team to understand the steps required for project completion.</p>			
<p>Traffic and speeding mitigation efforts to include traffic sign software fees that support traffic signs posting speed limits to slow cars down and to also post important traffic updates like road closures and detours.</p>			
Proposed MGC Grant Budget			
Please use the following table to outline the project budget. Please include as an attachment any requests for proposals, quotes, or estimates that would quantify the costs associated with the mitigation.			
Description of Purchase/Work	Timeline	QTY	Budget
Traffic/speeding mitigation software fee	Fall 2025 – Fall 2027	1	\$24,000
	TOTAL:		\$24,000

Part D- Gambling Harm Reduction- The application should include sufficient backup information for the review team to fully understand the project(s). This information could include other relevant research, Requests for Proposals, etc.

Project Name: Harm Reduction – Action Plan			
Please provide below the contact information for the individual managing this aspect of the grant			
Project Contact:		Additional Project Contact <i>(if applicable)</i>	
Name: Jennifer Keitt		Name:	
Title: Senior Project Manager		Title:	
Department: OPED		Department:	
Email Address: keittj@holyoke.org		Email Address:	
Telephone: (413) 322-5655		Telephone:	
Address: City Hall Annex, 20 Korean Veterans Plaza, Suite 406, Holyoke, MA 01040-5000		Address:	
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<p>As referenced in the guidelines, certain groups of people are disproportionately at risk of gambling-related harm by the presence of a casino. These groups can be linked by race, ethnicity, gender, age, people who have recently immigrated, veteran status, and/or socioeconomic status.</p>			
<p>II. Please describe the project in detail and how the proposed project will address the impact indicated above. Please include a breakdown of the proposed scope of work, the scope should be sufficiently detailed to allow the review team to understand the steps required for project completion.</p>			
<p>Holyoke will create an action plan, based on results of the harm reduction survey, to address concerns of gambling addiction or unhealthy behaviors around gambling.</p>			
Proposed MGC Grant Budget			
Please use the following table to outline the project budget. Please include as an attachment any requests for proposals, quotes, or estimates that would quantify the costs associated with the mitigation.			
Description of Purchase/Work	Timeline	QTY	Budget
Harm Reduction – Post Survey work	Fall 2025 – Fall 2027	1	\$20,000
	TOTAL:		\$20,000