

Cost share grant application 2017



Do not fill in gray boxes.
District use only.

Applicant type (check one) Homeowner Non-profit - 501(c)(3)
 Business or corporation Public agency or local government unit School

Project type (check all that apply) Raingarden Vegetated swale Lake/creek/wetland buffer
 Shoreline/bank stabilization Wetland restoration Pervious hard surface Infiltration basin
 Conservation practice Other _____

Applicant information

Works or resides in district?

Name _____ Address _____
City/State/Zip _____
Phone _____ Alt phone _____ Email _____

Primary contact Same as applicant (leave blank)

Name _____ Address _____
City/State/Zip _____
Phone _____ Alt phone _____ Email _____

Project location

Address _____ City/State/Zip _____
Property Identification Number (PID) _____
Property owner(s) _____

Project located in district?

Project summary

Title _____
Total project cost _____ Grant amount requested _____
Estimated start date _____ Estimated completion date _____
Sub-watershed _____

Tributary to a waterbody?
 No Yes, indirectly Yes, adjacent

Is project tributary to a water body? No, water remains on site Yes, indirectly Yes, directly adjacent

Project located in priority drainage area?

2-3 sentence project description

Is this work required as a part of a permit? No Yes

(If yes: describe how the project provides water quality treatment beyond permit requirements on the next page.)

Site visit One of the requirements for a complete application is a site visit from district staff.

Have you had a site visit? No Yes

(If you answered no, please contact staff to schedule one: 952-607-6512)

Project details

Checklist To be considered complete the following must be included with the application.

- | | |
|--|---|
| <input type="checkbox"/> location map | <input type="checkbox"/> project time-line |
| <input type="checkbox"/> site plan & design schematics | <input type="checkbox"/> proof of property ownership |
| <input type="checkbox"/> itemized budget or contractor bid | <input type="checkbox"/> plant list & planting plan
(if project includes plants) |

Description

Describe the current site conditions, as well as site history, and past management.

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Is time-line reasonable?

Is budget reasonable?

Is plan comprehensive?

Does plant list conform to district's approved plant list?

What are the project objectives and expected outcomes? Give any additional project details.

Are there multiple objectives?

Does the project have well-defined, measurable results?

List other key participants and their roles

Does the project demonstrate strong partnerships & support?

Which cost share goals does the project support? (check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Improve watershed resources | <input type="checkbox"/> Increase awareness of the vulnerability of watershed resources. |
| <input type="checkbox"/> Increase familiarity with and acceptance of solutions to improve waters | |
| <input type="checkbox"/> Foster water resource stewardship | |

How does the project support the goals you checked?

Project details (continued)

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Benefits Estimate the project benefits in terms of restoration and/or **annual** pollution reduction. If you are working with a designer or contractor, they can provide these numbers. If you need help, contact the district cost share program coordinator.

Benefit	Amount
Water captured	gal / year
Water infiltrated	gal / year
Phosphorus removed	lbs / year
Sediment removed	lbs / year
Land restored	ft ²

Does the project provide water quality treatment?

Does the project provide restoration?

How will you share the project results with your community?

Is there educational value to the project?

Will the project be visible to the public?

Are there other projects that could be initiated as a result of this one?

Evaluation

How will the project be monitored and evaluated?

Maintenance agreement

I acknowledge that receipt of a grant is contingent upon agreeing to maintain the project for the number of years outlined in the cost share guidelines document Yes

Authorization

Name of landowner or responsible party _____

Signature _____ Date _____