

# Cost share grant application 2018



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.

- location map
- site plan & design schematics
- itemized budget or contractor bid
- project time-line
- proof of property ownership
- plant list & planting plan  
(if project includes plants)

## Description

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

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

List other key participants and their roles

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

- Improve watershed resources
- Increase awareness of the vulnerability of watershed resources
- Increase familiarity with and acceptance of solutions to improve waters
- Foster water resource stewardship

How does the project support the goals you checked?

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Is time-line reasonable?

Is budget reasonable?

Is plan comprehensive?

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

Are there multiple objectives?

Does the project have well-defined, measurable results?

Does the project demonstrate strong partnerships & support?

## 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 <sup>2</sup>

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 \_\_\_\_\_