

**DICKINSON COUNTY WATER QUALITY COMMISSION
PROJECT PROPOSAL APPLICATION**

1. **Project program.** Is this a joint project? Yes ___ No ___

***Note.** A joint project is defined as two or more entities having shared responsibilities. If this is a joint application, only one entity must be designated as point of contact in Section 2.b. below. Clearly present in the application the respective shares of project costs. Attach cooperative agreements between joint applicants explaining responsibilities for personnel, project acquisition, development, operation, maintenance and results.

2.

a. Applicant(s): _____

b. Contact person: _____

c. Address: _____

d. City and zip code: _____

e. Telephone Number: _____

3. **Project Title** _____

Is the project a portion of a larger, overall project to be implemented over a multi-year period? Yes ___ No ___

If yes, write in the number of years and estimated overall project cost in the spaces provided.

Number of years: _____ **Estimated overall cost:** _____

Note: The information requested in this section is for the activities involved in this particular request only.

4. **Project Budget.**

a. See Instructions Paragraph 10.

b. **Amount Requested:** \$ _____

c. **Amount of Federal, State or other public cash match money already acquired or in process:** \$ _____

d. **Amount of private cash match funds:** \$ _____

Proposed Budget for Total Project

	<u>Commission</u>	<u>Hard</u>	<u>Soft</u>	<u>Total</u>
1. Temporary Staff				
Seasonal staff		\$ _____	\$ _____	\$ _____
(hourly rate)				
Hourly staff		\$ _____	\$ _____	\$ _____
(hourly rate)				
2. Supplies and	\$ _____	\$ _____	\$ _____	\$ _____
Services				
3. Equipment	\$ _____	\$ _____	\$ _____	\$ _____
(list all equipment over \$1,000)				
4. Travel		\$ _____	\$ _____	\$ _____
5. Land Acquisition	\$ _____	\$ _____	\$ _____	\$ _____
6. Land Development	\$ _____	\$ _____	\$ _____	\$ _____
7. Other	\$ _____	\$ _____	\$ _____	\$ _____
Total	\$ _____	\$ _____	\$ _____	\$ _____

* The Rock Tile Intakes will be a first come first served basis so this is an over all budget. The Dickinson County SWCD does not know how fast the funds will be spent other wise there would be a year by year break down.

e. Source of public and/or private cash match (list all):

5. **Type of project:**

- Public education, public awareness and information dissemination
- Creation or maintenance of grass waterways or wetlands
- Erection and maintenance of storm water run off facilities
- Dredging
- Bank stabilization Water treatment
- Water monitoring
- Watershed protection
- Activities to abate and remove invasive species
- Any other activity which will improve, protect or enhance the quality of water in the lakes in Dickinson County

6. **Project summary:** Briefly describe project in 75 words or less in the space provided below. Do not include justification and support statements in this summary.

Estimated project dates:

a. Start _____ b. Completion _____

7. **Project Narrative.**

The time line for this project is as follows:

8. **Promotion.**

10. **Applicant's signature.** Upon signing in the space provided below, the applicant agrees to conform with the requirements in the following two paragraphs pertaining to ADA and civil rights assurance.

Civil Rights Assurance of Compliance: The applicant hereby agrees that it will comply with Title VI of the Rights Act of 1964, 1873 and the age Discrimination Act of 1975 to the end that no person

in the United States shall on the grounds of race, color, national origin or otherwise subjected to discrimination under any program or activity for which the Applicant-Recipient receives grant funds and hereby gives assurance that it will immediately take any measures to effectuate this agreement.

This assurance is binding on the Applicant-Recipient, its successors, transferees, and assignees, and the person or person whose signature appears below are authorized to sign this assurance on behalf of the Applicant-Recipient.

Applicant's name and title

Date