

**Application Form for LTAP Grant  
Sustainable Communities**

**1. Cover Page**

**Please print or type all information.**

Project Title \_\_\_\_\_

Project Contact Person \_\_\_\_\_ Telephone number / fax \_\_\_\_\_

Applicant/Organization Legal Name \_\_\_\_\_ Tax ID number(s) of involved parcels (if applicable) \_\_\_\_\_

Reservoir Watershed location of project (if applicable) \_\_\_\_\_ Stream Corridor location of project (if applicable) \_\_\_\_\_

Please check box of the appropriate municipal entity to describe applicant.  
County  Town  Village  Other -describe \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ County/Town/Village \_\_\_\_\_

Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_ E-mail \_\_\_\_\_

Responsible municipal officer of applicant organization / Title \_\_\_\_\_

Note: Grant Proposals must be accompanied by a certified copy of the resolution(s) from the municipal board authorizing the Applicant to apply for, receive, and administer CWC grant funding.

Does this Proposal include a copy of such authorization(s) / resolution(s)? Yes \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_  
Amount requested Total Project Budget Total Local Match Total Other Grants and Volunteer

Estimated Dates for Starting and Completing the Project: \_\_\_\_\_

Are you proposing a multi-year Project? Yes \_\_\_\_\_ No \_\_\_\_\_

Has the Applicant been previously awarded an LTAP grant? Yes \_\_\_\_\_ (Project Title \_\_\_\_\_) No \_\_\_\_\_

If "Yes" to the previous question, is the Applicant currently in compliance with the contract terms of the previously awarded grant? Yes \_\_\_\_\_ No \_\_\_\_\_ (If not, please explain.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date: \_\_\_\_\_

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**2. Project Summary**

Project Title \_\_\_\_\_ Applicant \_\_\_\_\_

Please **BRIEFLY** summarize your program or project within this space. State the problem being addressed; why the project is needed; project location; how the project will address water quality and local quality of life; roles of municipal and private organizations; and other relevant information.

Describe how you will evaluate the short and long-term effectiveness of the proposed Project in terms of water quality and local quality of life improvements:

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Describe how you will document the completion of the proposed Project:

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**2. Project Summary (continued)**

List **KEY** Project Personnel and their qualifications.

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List Consultants and their role toward benefit and completion of the project.

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List and describe the skill and value of Volunteer Services.

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**3. Project Background** (Describe long term objectives, specific goals, pertinent details about the area that will be served, pertinent details about project milestones and schedule, and expand upon your description of the roles of municipal agencies/organizations towards the completion and benefits of this project. Up to 4 pages total (excluding maps and drawings).

Project Title \_\_\_\_\_ Applicant \_\_\_\_\_

Page \_\_ of \_\_ pages      List attachments \_\_\_\_\_

**Application Form for LTAP Grant  
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Provide an estimate of when the following major milestones will occur. Enter start and completion target dates or not applicable as relevant for each activity. This schedule will be attached to the contract for selected projects with provisions for updating as needed by submitting revisions in writing to CWC. While LTAP funds may be used for the planning portion of projects only, a greater local share contribution and/or other grants (i.e. for construction expenses) can improve an application ranking and therefore the associated information is requested in this schedule.

1. Request for proposals from consultants.

List consultants and expected contract dates:

2. Project or Program design(s):

3. Program rules / standards:

4. Permits (list all required permits with target receipt dates):

5. Project bidding (if any):

6. Construction start and completion dates (if any):

7. Program implementation date and duration (if any):

8. Other major milestones (list):

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**5. Project Budget**

Project Title \_\_\_\_\_ Applicant \_\_\_\_\_

Page \_\_ of \_\_ pages List attachments \_\_\_\_\_

Provide a breakdown of the TOTAL project costs. Identify program elements mentioned in the Summary and Background sections. Use form shown or attach your own form, with back-up sheets as needed. Show other grants, volunteer services, and in-kind contribution as local share. Other Grants and Volunteer Services should not be included in Total Cost. While LTAP funds may be used for the planning portion of projects only, a greater local share and/or other grants (i.e. for construction expenses) can improve an application ranking and therefore those costs are included in the requested Budget.

<b>Item description</b>	<b>Local Share</b>	<b>Funding Requested</b>	<b>Total Cost</b>
Personnel costs (Title, # of hours, rate)			
Consultant costs (Name, start, duration)			
Construction, equipment and materials			
Indirect			
Administrative			
Legal			
Contingency			
Other			
<b>Total Costs</b>	\$		\$
<b>Other Grants</b>			
Value of Volunteer Services (Title, # of hours, rate)			
<b>Total Other Grants and Volunteer Services</b>	\$		