



**PARTNERS IN
CONSERVATION
APPLICATION
FY 2013-14**

Application Processing Information

(to be completed by EMSWCD):

Application #: _____

Date App Rcv'd: _____

Date Acted On: _____

Funding Recommended (Yes/No): _____

APPLICATION INSTRUCTIONS:

1. Please fill out all sections and respond to all questions. Make sure all responses are numbered.
2. Your Application may be 8-10 pages in total length (not including instructions or attachments).
3. Please remember to use the separate excel spreadsheet provided for the detailed budget.
4. Attach a project location map, if applicable, and photographs of the site (not counted toward the page limit).
5. Attach brief biographies (one-two paragraphs) for key staff involved in the project.
6. Attach one page current annual organizational budget - actual and projected income and expenses.
7. Letters of support from key partners are required. (not counted toward the page limit).
8. You may attach a site drawing, letters of support, cover letter, other supporting materials (not counted toward the limit). Please limit number of attachments to 15 pages.
9. Electronic submission is preferred – if you submit electronically you will be sent a reply email stating that your application has been received. If you do not receive a reply email, do not assume your submission was received. You are responsible for following up and making sure your application is received in the District office by the stated deadline.
10. If you are submitting a hard copy of the application:
 - a. Use 8.5 x 11 paper.
 - b. Copies should be paper-clipped and double-sided if possible.
 - c. Do not use staples, bindings, or folders.
 - d. Submit one signed and dated original and 1 photocopy.
11. Faxed copies will not be accepted.
12. **All applications, whether electronic or hard copy, must be received in the EMSWCD office by 4:00 pm, January 16, 2014.**
13. For more information, contact Lissa Adams, CFO and Grants Manager, 503-222-7645 x 117; lissa@emswcd.org

GENERAL INFORMATION

EMSWCD Funds Requested: \$ _____ Total Project Cost: \$ _____
 Does "Total Project Cost" include cash only, or all costs? Cash only Cash & in-kind support combined

Name of Project: _____

Project Location: _____
Physical Address *County*

Watershed *Latitude & Longitude of project (if applicable)*

CONTACT INFORMATION

Applicant Org:	Applicant Contact:
Mailing Address: Zip:	
Phone: Email:	

Landowner(s):	
Landowner Address: Zip:	
Phone: Email:	

Project Manager:	Agency/Org:
Address:	Zip:
Phone:	Email:

Fiscal Agent:	Contact:
Address:	Zip:
Phone:	Email:

PROJECT INFORMATION

Natural resource issue(s) addressed by the project: Check all that apply. See PIC guidelines.

- | | | |
|--|---|--|
| <input type="checkbox"/> Restoration/conservation | <input type="checkbox"/> Pollution prevention | <input type="checkbox"/> Engineering of a conservation project |
| <input type="checkbox"/> Sustainable agriculture/gardening | <input type="checkbox"/> Monitoring | <input type="checkbox"/> Environmental Education |
| <input type="checkbox"/> Sustainable stormwater management | | |

1. Project Summary – Briefly (75 words or less) describe your project.

2. Briefly describe your organization, including mission statement.

For Question 3 please limit to 2 pages maximum narrative – maps, drawings and photos do not count toward the page limit. Attach a site map, project drawing, and/or photos if applicable.

3. Detailed project description for which funds are requested. Explain the need in a local context, why your organization decided to address the need, your anticipated outcomes, and the benefits to the community and/or watershed. Briefly outline what you plan to do over the grant period.

For Questions 4 –12 please limit to 2-3 pages for all questions combined.

4. How will success of the project be determined? Use specific metrics (For example: acres or square feet of habitat restored, number of volunteers, number of volunteer hours, number of native plants and trees planted, square feet of stormwater redirected from impervious surfaces to sustainable stormwater infiltration systems, number of youth/adults reached through an education program, behavior change observed, etc.) **Who will evaluate the project and how will they do it?**

5. How is your organization qualified to take on this project? (For example, what unique history, technical expertise, or relationships enable your group to lead this project?) **How does this project fit into your organization's long range plans?**

6. Describe how the project relates to regional and local plans. (For example: local watershed assessment or action plan, local Agricultural Water Quality Management Area Plan, local conservation or stewardship plan, city or neighborhood plan, etc.)

7. Does your project serve low income and/or minority populations? If so, please specifically state how you reached this conclusion and cite references if applicable.

8. Describe what's been done so far on the project, or what's been done in the past to address the resource concern. Also describe your organization's past involvement, if applicable.
9. How will the project be sustained after the grant period is over?
10. Describe your project's key partners. What role do they have in implementing the project and why were they selected as partners?

11. What is the proposed timeline for the project (from start date through monitoring phase)?

Start Date

Completion Date

Monitoring period (dates)

Description of timeline and who is responsible for each item:

12. Have the required permits been obtained for the project? Yes No Not Required

Further explanation if necessary:

13. Budget narrative. Briefly describe (please limit to one page) the expenses and revenues (secured and unsecured) in the budget, clearly defining tasks and items purchased?

14. Project Budget – *please use the separate excel form provided on our website for the detailed budget.*

We, the undersigned, attest that, to the best of our knowledge, the information contained in this Application is true, that the proposed project is not required by a state or federal agency directive, and that the project will be completed within 24 months from the date of EMSWCD's approval of funding (unless a longer timeline has been agreed upon in advance by all parties). We understand that this submitted Application is a matter of public record. We understand that EMSWCD's consideration of this Application may not result in an award of funding.

Should funding be awarded, we understand that: 1) until all designated signatories have signed an EMSWCD project agreement, we may not incur any project expenses that EMSWCD will be asked to reimburse or count toward the required match; 2) we will be required to provide proper accounting of project expenses; and 3) we will be required to carry out the necessary and normal maintenance to sustain the value of the project once it is completed. We realize that income received from EMSWCD may be reportable to the IRS, and that we may be required to follow Oregon public contracting law, including soliciting bids/quotes for labor and materials.

By their signatures, the landowner(s) attest that they have no plans to sell their property as of the date of this application, and they agree to provide, upon prior request and at a mutually acceptable time, site access to the applicant and/or representatives of EMSWCD for a period up to two years following project completion to allow project work to be implemented, monitored, and maintained.

AUTHORIZED SIGNATURES: (PLEASE SIGN IN BLUE INK)

Applicant _____
Date

 Print/Type Signer's Name and Title

Project Manager _____
Date

Fiscal Agent (if applicable) _____
Date

 Print/Type Signer's Name and Title

Landowner (if applicable) _____
Date

ATTACHMENT CHECKLIST
(Please include as appropriate)

<input type="checkbox"/> Project location map	<input type="checkbox"/> Site drawings/diagrams
<input type="checkbox"/> Photographs of site	<input type="checkbox"/> Letters of Support
<input type="checkbox"/> Other materials (Please list below)	
•	
•	
•	

APPROVED AS TO FORM *zls*
James H. Van Dyke
 CITY ATTORNEY