

CLEAN STORMWATER GRANT
GENERAL/HIGH PRIORITY
APPLICATION FORM

Thank you for taking the time to apply for a Fresno Metropolitan Flood Control District Clean Stormwater Program Grant. Please read the application carefully and in its entirety prior to filling out. Be certain to provide complete information for each section. If a section does not apply to your project, indicate why it does not apply. You may use additional sheets of paper if necessary to fully support your request. **Applications that are incomplete may be disqualified.** Please call or email the Grant Administrator at (559) 456-3292 or Environmental@fresnofloodcontrol.org, if you need assistance or have any questions.

Applications must be postmarked by, or received in the District office before, Thursday, December 1, 2022 at 5PM.

Project Title: _____

Project Manager/Coordinator: _____
(Individual responsible for ensuring project is carried out)

Name of Organization: _____

Mailing Address: _____

Daytime Phone: () _____ Cell: () _____

Email Address: _____

Amount Requested: \$ _____ Total Project Cost: \$ _____

Project Start and End Dates: _____

Check all of the following Clean Storm Water Grant project category that most appropriately describe your project (see website for a full description of each project category):

- High Priority Grant Project**
- Public Information/Education Project
- School Project
- Community Involvement/Volunteer Project
- Storm Water Quality Information and Education
- Household Hazardous Waste Information and Education
- Storm Water Pollution Prevention Assistance and Education to Businesses
- Other: _____

1. GROUP DESCRIPTION

Describe your group's purpose and history.

2. PROJECT DESCRIPTION

Write a brief description of the proposed project.

3. PROJECT OBJECTIVES

Write a brief description of how your project will address each of the Clean Storm Water Grant objectives you checked on page 1.

4. PROJECT LOCATION

Tell us where your project will be conducted. If necessary, attach a map to the application. Projects must be within the District boundary.

5. MAJOR PROJECT TASKS

Describe the project's tasks and milestones, including start and end dates for each.

6. PROJECT PARTICIPANTS

Who will participate in your project and in what capacity? Do you plan to involve volunteers? Do you plan to work with other organizations? If so, list.

7. DISTRICT INVOLVEMENT

Do you plan to include a District presentation or District educational materials as part of your project? Presentations by District staff to involved teachers, students, volunteers, or other participants are encouraged, but not required, and have no effect on your applications weight.

8. PUBLICITY

Do you plan to publicize your project? If so, describe how you plan to do so (e.g., using television, newspapers, newsletters, direct mailing, etc.).

9. EVALUATION AND CONTINUATION

How will you evaluate the success of your project? How will the project contribute to any on-going or long-term activities and benefits?

10. PREVIOUS GRANTS

Have you received a District Clean Stormwater Grant or other grants in the past? If yes, have your past grants been completed successfully?

11. PROJECT READINESS

What other steps or funding are required to start and complete your project besides the Clean Stormwater Grant?

12. BUDGET

Please list planned expenditures for your project on the provided budget form (page 7).

List in **Section “A”** eligible expenses for which your group will seek reimbursement. Eligible uses of grant funds include, but are not limited to: purchase of materials, supplies and nursery stock; equipment rental; printing and postage for publicity and promotional materials; refreshments and other incentives for volunteers; bus transportation for school field trips; and honoraria and other expenses for workshops, conferences and in-services.

Be sure to itemize costs and provide a brief, but detailed description on your proposed expenditures. For example, “supplies” would be considered an inadequate description, and must be detailed in the form of a specific list of materials, such as: books, refreshments, printing and copying, equipment, etc. Include shipping, handling and taxes where applicable.

List in **Section “B”** expenses for which your group will not be seeking reimbursement (due to ineligibility or otherwise), but have anticipated are necessary in order to complete the project. Include the source of funding for these expenses.

Please note, your first subtotal, labeled “Subtotal – Eligible Expenses/Total Grant Funding Requested” should reflect the total amount of funding for which your project is seeking grant funding. Your project will not be awarded grant funding in excess of this amount, nor can this subtotal be added to once the application is submitted, therefore it is imperative that your expense report be thorough and exhaustive. You may add lines to the expense report as necessary to fit all expenses in the report.

EXPENSE REPORT

EXPENSE REPORT	
A. ELIGIBLE EXPENSE ITEMS	Budgeted Amounts
Description	
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16.	
17.	
18.	
Subtotal – Eligible Expenses/ Total Clean Stormwater Grant Program Funding Requested	
\$	
B. OTHER EXPENSES (include funding source)	
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
Subtotal – Other Expenses	
\$	
TOTAL PROJECT COST	
\$	

The information on the enclosed application has been prepared by me, or under my direction, and is a true and accurate representation of the organization and the proposed project.

Signature of Executive Officer or Project Manager/Coordinator

Date

Print name and
position:

Return the Clean Storm Water Grant application by mail, fax or email to:

Grant Administrator
Fresno Metropolitan Flood Control District
5469 E. Olive Avenue
Fresno CA 93727
(559)456-3292 | Fax: (559) 456-3194
Environmental@fresnofloodcontrol.org