St. Louis County Environmental Services Department

2008 – 2010 Recycling and Waste Reduction Grant Application

I. APPLICATION INFORMATION

To be considered for the 2008 St. Louis County Recycling and Waste Reduction Grant, applicants must complete this application form. Funding consideration of your request will be based on whether or not the project meets the minimum eligibility requirements identified and the project criteria that the St. Louis County Environmental Services Department has established. Please complete the entire application and return before **June 1, 2009**. Contact Mary McReynolds, Solid Waste Planner at 749-0648 or 1-800-450-9278 with any questions you may have.

Date Submitted:_____St. Louis County Date Stamp:

Name of Government Unit(s):_____

Address:_____

City:_____ Zip Code:_____

Contact Person:_____ Title:_____

Telephone Number:_____ Fax Number:_____

E-mail address:_____

Project Title: _____

Total Project Cost $_____
2000 Census resident population:_____ Grant amount requested:$_____
(not to exceed $2.00/resident)

All LUGs with populations equal or greater than 500 must provide a minimum of 25% of the project funding in dollars or in-kind equivalents (SLC 75%funds/LUG 25% funds and/or in-kind.)
All LUGs with populations less than 500 must provide a minimum of 10% of the project funding in dollars or in-kind equivalents (SLC 90%funds/LUG 10% funds and/or in-kind.)

LUG will: (Please complete either item a or b below.)

a. Provide grant match of the grant award. The match will be as follows:
   Cash $_____
   In-kind service $_____ (attach separate sheet itemizing In-kind sources)

b. Seek exemption from the required match due to hardship. (To qualify for hardship status, the applicant must meet any of the criteria stated in the "2008 - 2010 Recycling and Waste Reduction Grant Overview").

Please state reason for hardship exemption request:_____
_____

Grant request must meet <u>at least</u> one of the following goals as identified by the St. Louis County:

II. GOALS (Place check the applicable boxes)

☐ Implement, maintain, or improve recycling program(s) in your community

☐ Implement, maintain, or improve waste reduction program(s) in your community

☐ Implement, maintain, or improve special wastes management program(s) in your community

☐ Implement, maintain, or improve waste education program(s) in your community

☐ Develop, maintain, or improve long-term waste recovery efforts in your community

☐ Implement or improve community clean-up activities

III. GRANT REQUEST DESCRIPTION

1) Please describe the overall scope of your project and how it meets the goals stated in Section II. (Attach additional sheet if necessary). Please type or print.

_____

_____

_____

_____

2) What is the project schedule? Begin Date:_____ End Date:_____

3) Please complete your grant request budget below and attach documentation verifying expense(s).

ITEM DESCRIPTION	ST. LOUIS COUNTY AMOUNT	APPLICANT AMOUNT (Cash or In-Kind)	TOTAL
		Total	$

IV AGREEMENTS AND AUTHORITY

1) Please attach a copy of the resolution the authorizing application for this grant.

2) If two or more neighboring governmental units are entering into a partnership for the purposes of this grant a formal agreement among the parties must be presented to the County before any award contract will be entered into.

By my signature below, I certify, as the Grant applicant, that all the information I have provided in this application is true and correct to the best of my knowledge. Further, I understand that if I have knowingly provided any false information it is fraudulent and any award received may be withdrawn and/or subject to be repaid to St. Louis County.

_____

PRINTED NAME OF APPLICANT

_____ _____

SIGNATURE of APPLICANT DATE