



Community Grant Funding Application

Please refer to the UYWCD Community Grant Funding Guidelines prior to completing this application.

Applicant Information:

Applicant Name: _____

Organization (if applicable): _____

Primary Contact Information:

Name: _____

Address: _____

Phone: _____ E-mail: _____

Project Information:

Project Name: _____

Project Location: _____

Latitude and Longitude or PLSS: _____

Please attach a site map of project location.

Brief Project Summary (250 word limit):

Project Category(ies): *Please select the appropriate funding category(ies) for your proposed project (check all that apply):*

- Infrastructure Improvements
- Water Quality/Watershed Health
- Water Supply Planning
- Education and Outreach
- River Restoration

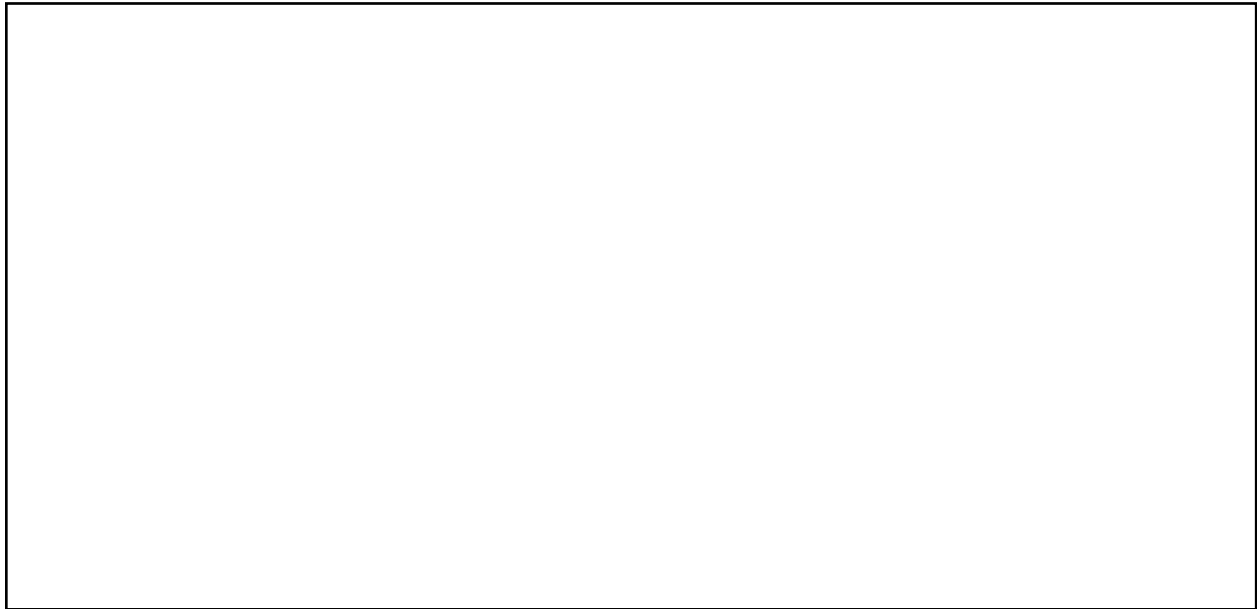
Please describe how the category(ies) selected above are addressed in your project objectives (300 word limit):

Project Timeline:

Anticipated Start Date: _____

Anticipated Completion Date: _____

Project Description and Tasks: Please outline this project by anticipated work tasks such as permitting, planning/design, construction, etc. For each task, please provide a detailed description, including methodology and anticipated start and end dates. Attach additional documentation including any existing engineering/design plans if applicable. (150 word limit)



Monitoring and Evaluation: Please describe the approach for monitoring and evaluating the progress of this project including specific measurable outcomes.(150 word limit)

Operations and Maintenance: Please outline existing and anticipated operations and maintenance costs associated with the project, including labor if applicable. Once the project is complete, how do you plan to cover ongoing expenses.(150 word limit)

Does this project require local, state or federal permitting?

Yes No

If yes, please list the anticipated permits below and include permitting status.

Is this project associated with decreed water rights?

___ Yes ___ No

If yes, please list the associated water rights holder, amount, and decreed use(s).

Does this project have the potential to cause injury to other water users?

___ Yes ___ No

If yes, please explain.

Please attach at least two letters of support for this project.

Alignment:

Please describe how your project aligns with the UYWCD Strategic Plan including goals, objectives, mission, and vision statements. (300 word limit)

Please describe how your project aligns with the Yampa/White/Green Basin Implementation Plan/Yampa River Integrated Water Management Plan, other local, state, or regional water management plans or programs, and/or any existing or planned projects in the Yampa River Basin. (250 word limit)

Budget:

Total Project Cost: _____

Requested Amount: _____

Please complete the Community Grant Funding Project Budget and Timeline Worksheet.

Project Partners: *List all partners involved with this project. Please include their role in the proposed project and the amount of their in-kind or cash contribution.*

Please describe planned efforts to meet the project budget. Should budget be exceeded please describe how additional costs may be covered. (100 word limit)

Signature of Applicant

Date

