



Aquatic Weeds Management Fund Early Infestation Grant Application

FOR ECOLOGY USE
Application Number

- P A R T 1 -

1. PROJECT TITLE (Five words or less)

2. APPLICANT NAME (Public Body)
Name:
Address (Different from Signatory):
Federal Identification No.:

3. AUTHORIZED SIGNATORY (The person whose name is listed here must sign Box 9 of this application)
Name:
Title:
Address:

If this project involves or impacts more than one public body, do all these public bodies support this project? Yes No
If no, please provide a more detailed explanation in Part 2 of this application.

4. APPLICANT STAFF CONTACT

Name:

Title:

Address:

Telephone number: **Fax number:** **E-mail address:**

5. PROJECT DATA (Actual PROJECT data, not data of applicant)

What is the population in the PROJECT area? _____

Is the PROJECT located in a basin with Endangered Species Act listed species or critical or depressed salmonid stocks? Yes No

Will the location of the PROJECT be statewide? Yes No
*If no, please include county(s), Water Resource Inventory Area designation(s), legislative district(s), and Congressional district(s), where at least five percent of the PROJECT will be accomplished, **BELOW**.*

The total of each separate designation must equal 100%

County(s) of the Project:	
Name	Percent

State Legislative District(s) of the Project:			
	Number	Percent	

Congressional District(s) of the Project:			
	Number	Percent	

Water Resource Inventory Area(s) of the Project:			
	Number	Percent	

6. PROJECT DURATION	
Project Length: _____ months	
Anticipated Start Date:	
Anticipated Project Completion Date:	

7. PROJECT TYPE (Please circle the appropriate type.)
Planning, Implementation, Education, Research
Has this activity been identified in an Ecology approved plan? <input type="checkbox"/>Yes <input type="checkbox"/>No
<i>If yes, please identify planning document title and date Ecology approval was given:</i>

8. Cost Breakdown:	Your Project Amount
Total Project Cost This amount is the total cost of the project including Ecology and non-Ecology sources.	\$
Eligible Project Cost This amount represents that portion of the total project cost that is eligible for Ecology grant assistance.	\$
Ecology Grant Amount This amount represents the Ecology grant request, at 75 percent of the maximum eligible project cost for an activity project or 87.5 percent of the maximum eligible project cost for a demonstration or pilot project or an Early Infestation project.	\$
Applicant Share This amount represents the difference between the Ecology grant request and the maximum eligible project cost.	\$

9. SIGNATURE BOX	
I CERTIFY TO THE BEST OF MY KNOWLEDGE THAT THE INFORMATION IN THIS APPLICATION IS TRUE AND CORRECT AND THAT <u>I AM LEGALLY AUTHORIZED TO SUBMIT THIS INFORMATION ON BEHALF OF THE APPLICANT.</u>	
Printed Name	Signature
Title	Date

10. APPLICATION SUBMITTAL	
Send five copies, one of which contains an original signature, to:	
<u>U.S. Postal Mailing Address:</u> Department of Ecology Water Quality Program Financial Management Section P.O. Box 47600 Olympia, WA 98504-7600	<u>Overnight Mail or Hand Delivery Address:</u> Department of Ecology Water Quality Program Financial Management Section 300 Desmond Drive Lacey, WA 98503
NOTE: APPLICATIONS MUST BE RECEIVED AT THE DEPARTMENT OF ECOLOGY BY 5:00 P.M. ON THE CLOSING DATE. NO FACSIMILE OR ELECTRONIC APPLICATIONS WILL BE ACCEPTED. TO ENSURE DELIVERY OF APPLICATION BY THE DEADLINE, YOU MAY WISH TO CONSIDER USING RETURN RECEIPT MAIL.	
<i>If you require this document in an alternative format, please contact the Secretary at (360) 407-6502 (Voice) or (TTY) at 711 or 1-800-833-6388.</i>	

Aquatic Weeds Management fund
Early Infestation Projects
Grant Application
Part 2
Project Proposal

This is the narrative section of your application in which you describe your project. The information that you provide here will be used to evaluate the merit of your project and will provide the basis for our evaluation. Before describing your project, please carefully review the information in Chapter V - of the Aquatic Weeds Management Fund Program Guidelines.

Please contact Kathy Hamel of the Water Quality Program regarding specific questions: by e-mail at kham461@ecy.wa.gov or by telephone at (360) 407-6562

Project Proposal

The project proposal should answer the following questions or include the following elements:

Please provide a brief summary overview of the proposed project.

1. What waterbody or waterbodies are being targeted for action and what is the plant species of concern? _____

Where is the waterbody (or waterbodies) located in relation to other infestations of this plant? _____

Do the plants in this waterbody pose a threat of infestation to other nearby waterbodies?

Please include a map of the targeted waterbody with the application, including documentation of infestation size. *Infestations beyond a pioneering stage may not be eligible for Early Infestation funding.*

2. What impacts will the invasive plant have on public use and water-based recreation if it is not contained? _____

3. What degree of environmental and economic damage may be caused by not containing the invasive plant? _____

4. How committed are you to continue the project after the initial infestation is contained?

Project sponsors must commit to either: An existing long-term commitment of financial and human resources to continue the containment effort; or include in the project proposal an element to establish long-term commitment and funding for this project.

5. Do you have local citizen support for the project--especially support of those citizens who live on, use, or have an interest in managing the aquatic plants in the targeted waterbody?

6. Who will be the key people who will make this project a success? Please list the people who will actually lead or work on the project. Note their commitment to the project and any special skills they bring to the endeavor. _____

7. What methods do you propose using to eradicate or contain the pioneer infestation?

8. Please provide a budget and a timeline for implementation. Provide the total cost of the project, not just the state share.

Salaries, wages and benefits (SWB):	\$ _____
Indirect cost up to 25% of SWB:	_____
Material, supplies	_____
Equipment	_____
Contracts	_____
Other	_____
In-kind contributions	_____
Total	\$ _____