



## Natural Resource Improvement Grant Application

**Applicant Information:**

<b>Name</b>	<b>Address</b>	<b>Phone</b>	<b>Email</b>
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**Project Location:**

<b>Address</b>	<b>Watershed</b>
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**Owner Contact Information:** If different from above.

<b>Name</b>	<b>Address</b>	<b>Phone</b>	<b>Email</b>
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**Project Type(s):**

- Shoreline Stabilization     
  Groundwater Conservation     
  Agricultural Projects and Practices  
 Stormwater Treatment Projects     
  Habitat Improvement and Management     
  Other: \_\_\_\_\_

**Nature of the Problem Being Addressed:** What natural resource problem is being addressed? What is the cause of the Problem? \_\_\_\_\_

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**Brief Project Description:** Include goals of project, approach being proposed, size of project, timeline of project elements.

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**Project Alternatives Considered:** What other projects, approaches or project elements have been considered and why is the proposed project preferable? \_\_\_\_\_

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**Environmental Benefits:** Include the benefited natural resource(s) and landowners and the amount of benefit per year – be as quantitative as possible. \_\_\_\_\_

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- Project Map:** Attach a map showing the location of the project within the county with property boundaries.
- Project Plan:** Attach a drawing with a scale bar or other indication of the size of project components, a north arrow, labels for project components, and cross sections if needed to convey project specifications.
- Project Budget:** Include an itemized list of quantities and costs for all materials, professional services, delivery fees, etc. Please indicate if the landowner/applicant is providing labor or equipment.
- Project Photos:** Photos of the project site may be submitted digitally.

**Special Considerations:** Provide site or project-specific information that warrants consideration. \_\_\_\_\_

\*Attach additional pages if needed. All attachments should include the project ID and are an integral part of this application.

Project ID: \_\_\_\_\_



**Grant Request:**

Total Estimated Project Cost: \$ \_\_\_\_\_  
 Applicant In-Kind Match Committed: \$ \_\_\_\_\_  
 Applicant Cash Match Committed: \$ \_\_\_\_\_  
 Other Non-Public Match Committed: \$ \_\_\_\_\_ (cash or in-kind)  
 Other Public Match Committed: \$ \_\_\_\_\_ (cash or in-kind) (Source) \_\_\_\_\_  
 Total Grant Requested: \$ \_\_\_\_\_

Would you consider grant funding in an amount less than requested?  Yes  No

**Process:** Following official encumbrance of funds toward this project the Applicant and ACD agree to complete the following tasks as assigned below.

Task	Stipulation	Responsibility	
		Applicant	ACD
Complete project design/plan	Design/plan must be developed by a qualified professional in accordance with funding source design specifications.		
Secure quotes (three or more preferred)	If the lowest project quote from a qualified contractor is within 15% of the estimate and Applicant does not install the project, Applicant will reimburse ACD for planning and design expenses		
Develop an operations and maintenance plan			X
Secure rights to property if needed		X	
Execute a Natural Resource Improvement Grant Contract		X	X
Secure all permits			
Secure an installation contractor(s) and materials			
Install the project			
Comply with operations and maintenance requirements for the life of the project.		X	
Complete routine project inspections and provide maintenance guidance.			X

**Signature of Applicant:**

I (we) certify that the information contained within this application is true and accurate and that I(we) have read and understand the Natural Resource Improvement Grant Policies and Guidelines. I(we) further commit to install the project provided the quoted eligible installation cost pursuant to a finalized project plan/design is within 15% of the estimate. In the event that I(we) opt not to install the project even if the quoted cost is within 15% of the estimate, we agree to reimburse ACD for actual expenses associated with project planning and design. Additional grant funds may be available to defray a portion of actual costs in excess of the estimated project cost, the approval of which would require additional ACD Board action prior to project installation.

Applicant(s) Signature(s)	Date
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Submit Application Materials To:

Anoka Conservation District, 1318 McKay Drive NE Suite 300 Ham Lake, MN 55304



**To be completed by ACD Staff**

**Project Cost Eligibility:** Depending on the funding sources, identify match requirements and list project elements included in the budget that are ineligible, or eligible only as in-kind match. Round all numbers to the nearest dollar.

Ineligible Project Element		Landowner In-Kind Match (\$)	
Description	Value	Description	Value
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
<b>Total</b>	<b>\$</b>	<b>Total</b>	<b>\$</b>

**Funding:** Identify funding sources. Add rows if necessary.

Description (source)	Value
Landowner Match - In-Kind	\$
Landowner – Cash	\$
Other Non-Public ( )	\$
Other Non-Public ( )	\$
Local Public Funds ( )	\$
Local Public Funds ( )	\$
State Funds ( )	\$
State Funds ( )	\$
Federal Funds ( )	\$
<b>Total</b>	<b>\$</b>

**Staff Recommendation:** Summarize funding from above and verify that match requirements are met.

Description	Value		
Total Estimated Project Cost	\$		
Less Ineligible Project Elements	-\$	% of Total Eligible Cost	
<b>Total Eligible Project Cost</b>	<b>\$</b>	Actual	Threshold
Total Landowner Match	\$	%	≥ ___%
Total Other Non-Public Match	\$	%	≥ ___%
Total Local Public Funds	\$	%	≤ ___%
Total State Funds	\$	%	≤ ___%
Total Federal Public Funds	\$	%	≤ ___%
<b>Total Funding</b>	<b>\$</b>		

**Staff Notes:** Include special considerations, conditions on funding, additional information needs. \_\_\_\_\_

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**ACD Board Action:** Board meeting date: \_\_\_\_\_ Total funds encumbered \$ \_\_\_\_\_

Approval stipulations: \_\_\_\_\_

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