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| **Anoka CWMA ◦ Invasive Species Cost Share Application** Deadline to Apply: August 3rd, 2018 |

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| **Name** |  |
| **Address** |  |
| **Phone** |  |
| **Email** |  |
| **Project Location** |  |
| **Project Size** |  |
| **Any native species present?** |  |
| **Targeted Invasive Species** |  |
| **Brief Project Description, Environmental Benefits and any Special Considerations** |  |
| **Project Timeline** |  |
| **Amount Requested** |  |
| **List items and/or services to be purchased with grant funds** |  |
| **Do you plan to revegetate with native plants? If yes, which?** |  |
| **Would you like to work with ACD staff, do work yourself, and/or hire a contractor?** |  |
| **Please provide a picture and/or sketch of the area.** |

**Additional Requirements:** Projects must be maintained for a minimum of 10 years; maintenance is the responsibility of the applicant. The project may be visited and monitored by ACD staff during the 10- year maintenance period. Please inform ACD if you move within this time.

I understand that a cost share contract and maintenance agreement will be sent following project approval. This shall be signed and returned prior to beginning any work on the project.

***Signature*:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Date*:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Submit Application Materials to:**

Carrie Taylor, Restoration Ecologist

Anoka Conservation District

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Ham Lake, MN 55304

Carrie.Taylor@AnokaSWCD.org ◦ 763-434-2030 x 19