



Application Form

To Obtain Hazardous Waste Cleanup Fund Grant Monies
For a Household Hazardous Waste Special Project

APPLICATION INSTRUCTIONS - Please read the attached guidance, which outlines what is required to receive a grant. Complete all five sections and submit them to DES on or before **February 1**. All funds will be distributed in accordance with Env-Wm 1000. **Incomplete or late applications will not be considered.**

I. Applicant Organization: _____

Address: _____

Legal Contact (person authorized to sign Application and Grant Agreement)

Name: _____

Title: _____

Email: _____ Phone: _____

II. Project Contact Information:

Principal Contact: _____

Mailing Address: _____

Town/ City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____ Email: _____

III. Project Information:

Descriptive Project Title _____

Project Type (check one) Infrastructure Outreach Other

Application Type (check one) New Project Continuation

Total Grant Amount Requested (from budget summary): \$_____

Project Location (address and town): _____

List of towns/ areas that will be affected by project:

Project Start Date: _____ Project Finish Date: _____

IV. Brief Summary of Project (Use extra sheet if more space is needed.):

- V. **Project Timeline** (Milestones are intended to define the specific stages and/or steps involved in accomplishing the project, and are to incorporate timelines for the initiation, execution and completion of each specific step. The number of milestones will vary depending on the goals and intended outcomes of the proposed project.):

Project Milestones	Estimated Completion Date (Purchasing must occur between July 1, 2009 and June 30, 2010.)
1.	
2.	
3.	
4.	
5.	
6.	

VI. **Total Project Budget:**

Expense Category	Grant Funds	Grant Match	Total Value
Supplies and Equipment	\$	\$	\$
Contracted Services	\$	\$	\$
Overhead Costs	\$	\$	\$
Other (explain)	\$	\$	\$
Totals	\$	\$	\$

Authorization (An original signature of the person whose name appears in section I. is required on the original application.):

(Signature of Authorized Person)

(Date)

(Print Name and Title of Authorized Person)