

PILOT PROJECT FUNDING APPLICATION

PROJECT TITLE:

PROJECT FUNDING REQUEST: \$

MATCH COMMITMENT: \$

TOTAL PROJECT COST (Sum of Funding Request and Match Commitment): **\$**

PERCENTAGE OF TOTAL COST PROVIDED BY APPLICANT (percentage of Match Commitment relative to Total Project Cost):

APPLICANT'S ORGANIZATION (see definitions of Applicant and Local Government in 62-570 F.A.C.):

CONTACT INFORMATION:

Name:
Street Address:
City, State, Zip:
Tel:
Fax:
Email:

PROJECT LOCATION:

Geographic Location of Project, city and county (include street address if available):
Latitude (decimal degrees):
Longitude (decimal degrees):

GENERAL INFORMATION:

1. Can this project cause harm to the ecological resources in the area. Project activities and information to be evaluated to determine whether projects are harmful can include: addition of chemical or biological substances, alteration of the topography, changes to flora and fauna, habitat loss, history of environmental impacts during other applications of a similar technology, insufficient project information provided due to the proprietary nature of a technology.

Yes
 No

2. Does this project provide water quality benefits and/or water quantity benefits. Check all that apply.

- Project provides water quality benefits.
- Project provides water quantity benefits.

3. If the project provides water quantity benefits check all that apply.

- Project is located in a water resource caution area.
- Project contributes to implementation of an adopted minimum flow or minimum water level recovery or prevention strategy.

4. Does this project utilize an innovative technology.

- Yes
- No

5. Does this project measure the effectiveness of an innovative technology or an existing technology. Check one.

- Project measures the effectiveness an innovative technology.
- Project measures the effectiveness of an existing technology.

6. Is the project identified as a high priority project in the most recent annual report required by Section 403.0675(1), F.S.

- Yes
- No

6.a. If yes, identify the annual report and cite the section, page of the report.

7. Is there an obligated funding source for the full match amount.

- Yes
- No

7.a. If yes, identify the source(s) below.

8. Is the project located in a rural area of opportunity as defined in Section 288.0656, Florida Statutes.

- Yes
- No

8.a. If yes, identify area.

9. Has your organization funded projects with its own funds to improve water quality and/or water quantity.

- Yes
- No

9.a. If yes, provide a brief summary of the what the projects were and when they were completed/implemented.

PROJECTS WITH WATER QUALITY BENEFITS

1. Enter in the table below the quantity of nitrogen and/or phosphorus and/or sediment the project is estimated to remove from the water body. Enter amounts in pounds/year (lbs/yr).

Description	Nitrogen (lbs/yr)	Phosphorus (lbs/yr)	Sediment (lbs/yr)
Pre-Project			
Post-Project			
Load Reduction			
% Reduction			

2. Describe in detail how the estimated reduction(s) were determined.

3. Provide an estimated cost per pound to remove the nitrogen or phosphorus, whichever is greater. Provide an estimated cost per pound to remove the sediment.

3.a. Explain how the estimated cost(s) per pound was determined.

4. Provide the name of the receiving waterbody.

5. Is the receiving waterbody impaired for nutrients, nitrogen or phosphorus.

Yes

No

PROJECTS WITH WATER QUANTITY BENEFITS

1. Name(s) of affected waterbodies:

2. Describe the anticipated impact the project will have on restoring or increasing water flow or level.

3. Provide the estimated number of gallons conserved.

3.a Describe in detail how the estimated number of gallons was determined.

4. Provide the estimated cost per thousand gallons of water conserved.

4.a. Explain how the estimated cost per thousand gallons was determined.

PROJECT DESCRIPTION

1. Provide a detailed description of all activities and BMPs the funding and match commitment will be used for, including but not limited to a description of each BMP, type of BMP(s), number/type of structures in each BMP and how they will function.
Include sufficient information to demonstrate that the project does not cause harm to the ecological resources in the area.

2. If this project is utilizing innovative technologies, describe how it meets the definition for innovative technologies as defined in 62-570, F.A.C.

PROJECT MONITORING:

1. For projects that benefit water quality describe how the monitoring will be performed and how it will provide data to determine actual load reduction benefits.

2. For projects that benefit water quantity describe how the monitoring will be performed and how it will provide data to determine actual amount of water conserved.

PROJECT TIME LINE

1. Is the project fully permitted.

- Yes
 No

- 1.a. If no, what is the anticipated date for being fully permitted.

2. Is the project fully designed.

- Yes
 No

2.a. If no, what is the anticipated date for being fully designed.

3. Provide the time line for the project. Provide anticipated start and end dates for each task in the table below. Dates should be based on how far along the project is at the time of this funding application.

Description	Start Date (mm/dd/yy)	End Date (mm/dd/yy)
Project Construction		
Project Monitoring		

PROJECT BUDGET:

In the table below, provide the estimated funding amounts for each applicable task. The totals should equal the funding and match commitment amounts.

Task	Funding Amount	Match Amount
Construction	\$	\$
Monitoring	\$	\$
Totals	\$	\$

CERTIFICATION

FORM TITLE: PILOT PROJECT FUNDING APPLICATION

I, the undersigned Authorized Representative of the Applicant, hereby certify that all information contained herein and in the attached is true, correct, and complete to the best of my knowledge and belief. I further certify that I have been duly authorized to file the application and to provide these assurances.

Authorized Representative _____
(signature) (name typed)

Signed this _____ Day of _____, 20_____

ATTACHMENTS AND REFERENCES

List the file names for all attachments that are included with this application (such as maps, design plans, etc.), a description of what the attachment contains, and the total number of attachments submitted, including the application.

Filename:
Description:

Filename:
Description:

Filename:
Description:

Total Number of Files Submitted (include the application in the total #) _____