
**WEST COAST INLAND NAVIGATION DISTRICT
FUNDING APPLICATION**

PROJECT NUMBER: _____
(To be populated by WCIND)

FUNDING CYCLE: ON _____ OFF _____

APPLICATION DATE: _____

1. MEMBER COUNTY: _____

2. PROJECT CATEGORY:

- Public Navigation Marine Law Enforcement Environmental Education
 Boater Recreation Boating Safety & Education Disaster Relief

3. PROJECT TITLE: _____

4. PROJECT DESCRIPTION AND PUBLIC BENEFIT TO RESULT: _____

5. IMPLEMENTATION BY THIRD-PARTY OPERATOR (TPO)? YES NO
IF YES, PROVIDE THE FOLLOWING:

TPO NAME:		TPO MANAGER:	
FEID:		PHONE:	
ADDRESS:		CITY:	
STATE:		ZIP:	



6. TYPE AND STATUS OF REQUIRED PERMITS, AUTHORIZATIONS, EASEMENTS OR LEASES NECESSARY FOR THE PROJECT:

TYPE:	STATUS:

7. ESTIMATED PROJECT START DATE: _____ COMPLETION DATE: _____

8. REQUIRED ATTACHMENTS:

- A. VICINITY MAP IF APPLICABLE
- B. SITE DEVELOPMENT PLAN IF APPLICABLE
- C. PERMITS IF APPLICABLE

9. WCIND FUNDS REQUESTED: _____ DOLLARS

10. COMPLETE ATTACHED BUDGET DETAIL - LIST AMOUNT(S) AND SOURCE(S) OF OTHER PROJECT FUNDS. CLEARLY IDENTIFY AND ENUMERATE THE AMOUNT AND SOURCE OF ALL MATCHING FUNDS. ACCORDING TO SECTION 374.976 F.S. AND RULE 66A-2, F.A.C., MATCHING FUNDS ARE REQUIRED FOR BOATING SAFETY AND EDUCATION, AND BOATER RECREATION PROJECTS.

11. ESTIMATED TOTAL PROJECT COST: _____ DOLLARS

12. APPLICANT IDENTIFICATION:

LIAISON AGENT: _____

ADDRESS: _____

TELEPHONE NO.: _____

EMAIL.: _____

13. SIGNATURE: _____

14. DATE: _____



BUDGET ESTIMATE DETAIL	Grant Funds	Matching Funds ¹	Total
Construction Expenses			
(specify)			
Contractual Services			
(specify)			
Materials			
(specify)			
Equipment			
(specify)			
Salaries ²			
Other			
(specify)			
GRAND TOTAL	\$	\$	\$

SOURCE(S) OF MATCHING FUNDS: _____
 Additional Information: _____

¹ Matching funds are **required** only for Boating Safety and Education, and Boater Recreation projects, but are encouraged for all projects.

² Salaries are **only** eligible as a grant expense for Marine Law Enforcement projects.

