CITY OF
SHORELINE

Neighborhood Mini-Grant
Application

For Office Use Only	Date Received by City: _____

Application Directions: *Please read the Neighborhood Mini-Grant application packet thoroughly before submitting your Application. The Application should contain a thorough scope of work, timeline, budget, and details of the neighborhood match.*

Neighborhood Association Name: _____

Neighborhood Association Mailing Address (if applicable): _____

Project Coordinator's Name: _____

    Telephone (best): _____ Telephone (alternate): _____

    Email: _____

    Coordinator's Mailing Address: _____

1. **Name of Project:** _____

2. **What is the neighborhood opportunity or need identified and how does the project address it?**

_____

_____

_____

3. **Describe the project and intended impact: what will be accomplished, who will be served, scope of work, time line for proposed activities, neighborhood geographic area to be affected.**

_____

_____

_____

_____

_____

_____

_____

_____

4. Who was involved in the idea development and subsequent decision to pursue this project?
Please attach Neighborhood Association meeting minute(s) at which this project was identified and approved by the Association for a Mini-Grant request.

_____

5. If this is a physical improvement project, describe location:

Location: _____
(Attach a map or site drawing if necessary to explain site)

Describe location and ownership of property: _____

_____

If the project is on private property, what is the project's measurable benefit to the public?

_____

_____

6. Will your project require on-going maintenance or repair? If so, how will it be provided?
Note: If the Mini-Grant project has been installed on private property, or on property owned by another public entity, such as the School District, King County, or Seattle City Light, the applicant will be required to work with the property owner to develop and implement a maintenance plan.

_____

_____

_____

What is the proposed project start date: _____   **Completion date:** _____

7. Project work plan (_describe key project activities and when each will occur_)

Activity   Projected completion date

_____ _____

_____ _____

_____ _____

8. Are any permits or other types of permission required from other parties for this project to be implemented?
If permits or formal letters are not yet in hand, describe current status of research and outcome of relevant contacts to date.

_____

_____

9. BUDGET - Anticipated items and budget required for project:
Attach quotes for items or services, and/or hourly rates for required services.
Specify items/expenses that will be covered with Mini-Grant funding as well as those items/expenses that the Neighborhood Association will cover through match.

BUDGET ITEMS IN MINI-GRANT REQUEST

Item/Resource professional	Source/vendor	Estimated cost Hourly rate

REQUEST TOTAL – Amount of funding requested from Mini-Grant _____

Note that if a vendor does not include tax on materials and supplies, the City will need to pay the tax and will deduct it from the grant amount funded.

10. MATCH
List how you will arrive at your 1:2 match for the project ($1 of neighborhood contribution for every $2 of city grant funding) e.g. in-kind services, donated materials or money, or volunteer labor. The value of volunteer labor is $21/hour. Technical/professional services may be values at market rate, with proof of market rate.

Match Item	Source/vendor	Estimated value

TOTAL – estimated value of match _____

TOTAL PROJECT BUDGET (grant request + match to be provided) _____

11. VOLUNTEERS – If using volunteers please describe specifically who you will recruit, how you have or will secure their participation in the project and their specific role(s) in this mini-grant project.

12. COMMUNITY PARTICIPATION

Describe how this project builds neighborhood connections and expands resident engagement.

_____

_____

Describe specific outreach efforts planned to promote or involve diverse neighborhood populations.

_____

_____

_____

If you have engaged other community partners, describe who has been involved in developing this project and how they are involved.

_____

_____

_____

Signed by Person Authorized to Sign Agreement between the City & Neighborhood Association

_____   _____   _____

Print Name   Signature of Applicant **(in blue ink)**   Date

No later than June 30, submit one original copy of Application to Neighborhood Coordinator, City of Shoreline, 17500 Midvale N., Shoreline, WA 98133; and send one electronic (un-signed) copy of application to cperenyi@shorelinewa.gov

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Date Approved: _____   Amount Approved: $_____

Approved by: _____   Signature: _____

Comments: _____