

June 2001

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

INTEGRATED WASTE MANAGEMENT BOARD

Park Playground Accessibility and Recycling Grant Program
Proposition 12 Funds (Villaraigosa-Keeley Act)
Accessibility for the Mobility-Impaired

**2nd Cycle
GRANT APPLICATION**



Available to California
Cities, Counties, Park Districts, Special Districts, and Federally Recognized California Indian
Tribes that Manage Public Parks with Playgrounds

Applications must be mailed by Friday, August 31, 2001.
Hand-delivered, late, faxed or E-mailed applications will not be accepted.

Maximum Points: 100

**Applicants Must Score 70% (70 of 100 Points)
To Be Considered For Funding**

**Waste Tire and Playground Grants Hotline Number
(916) 341-6441**

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Grant Applicant: _____

Name of Park Playground and Location: _____

The application is self-explanatory and contains instructions. The appendices provide a sample Budget Itemization Form; sample Procurement Policies; term and word definitions; an application checklist; and scoring criteria. A completed application should include answers to all ten (10) criteria as well as the following completed forms: Work Statement; Budget Itemization; Verification of Playground Inspection form; Summary of Current and Previous Grant Awards; and a Resolution, Joint Power Agreement (JPA), or Memorandum of Understanding (MOU).

**GENERAL CRITERIA
NEED**

(Criterion #1 – 25 points)

The Grant application must clearly describe and demonstrate the local need, the benefits, and expected end results for the project.

(10 pts.) Describe your project, why the project is needed, and how it will benefit the community. (Describe the district or agency project funding needs, customer needs in terms of mobility-impaired accessibility to the playground/equipment, and/or facilities, and barriers to mobility in the existing facility, etc.)

(5 pts.) Address identified gap in service and current unmet need for the mobility-impaired. (Describe the length of time that the playground, equipment and/or facilities may not be available if it is not refurbished and the resulting lack of services, equipment or facilities for mobility-impaired children or the target population.)

Grant Applicant: _____

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(5 pts.) Describe existing barriers to and within the playground. Describe in specific terms how the district or managing agency will correct the problems and barriers to accommodate mobility-impaired children.

Support the existence of the problem and project need (described in the first part of this criterion) with data from surveys, maintenance and safety reports, studies, accident reports, etc. Provide statistics about the targeted population, such as number of children and number of mobility-impaired children who may use the refurbished equipment and facilities. (Note: photos of equipment and pictures illustrating problems and barriers to accessibility will be accepted. Photos do not replace the description.)

(5 pts.) Describe health and safety threats or environmental concerns for users including the mobility-impaired on the existing playground, such as problems with animal feces, lead-based paints, splinters from decaying wood structures, contamination from pressure-treated wood, potential burns from metal slide surfaces, debris on playground, hard fall surfaces, or other existing health and safety hazards due to equipment design or to inappropriate equipment (be specific).

Grant Applicant: _____

Name of Park Playground and Location: _____

**GENERAL CRITERIA
OBJECTIVES
(Criterion #2 – 5 points)**

Goals and objectives must be developed using the identified need from Criteria #1 and the Work Statement. Describe, in the sections below, how this was determined.

(2 pts.) How was identified need as described in Criterion #1 determined for this project? Community workshops, planning sessions, user input, etc.

(3 pts.) Describe specific goals and objectives for the project. (The goals should reflect what you wish to accomplish by refurbishing this playground. The related objectives should be specific, measurable, relevant to the project, and time-limited. Please see the definitions for goals and objectives in Appendix D.)

Grant Applicant: _____

Name of Park Playground and Location: _____

PARK PLAYGROUND ACCESSIBILITY AND RECYCLING GRANT PROGRAM

WORK STATEMENT

The Work Statement is a part of Criterion #2 and must match your Budget Itemization Form.
If additional space is needed, the Work Statement form may be reproduced as necessary.

Task #	Task Description	Budget		Product or Results	Staff/Contractor	Time Period
		Grant \$	Match \$			
	Pre-Installation Phase					
	Installation Phase					
	Post-Installation Phase					

Grant Applicant: _____

Name of Park Playground and Location: _____

**GENERAL CRITERIA
METHODOLOGY
(Criterion #3 – 5 points)**

What do you need to do, by task, to achieve the stated objectives and complete this project?

(2 pts.) Describe how the proposed tasks in the Work Statement are the best way to address the identified need as described in Criterion #1.

(1 pt.) Identify staffing required to complete the proposed playground project. For example, district or agency staff titles, architect, engineer, contractor, etc.

(1 pt.) List any cooperating individuals and/or organizations and describe their involvement. For example, the Rotary Club, neighborhood volunteers, parents, a private business that will provide volunteer services or staff, etc. (For the purposes of this question, the applicant agency is not considered a cooperating individual or organization)

(1 pt.) Present a specific funding plan for future maintenance and operational costs.

Grant Applicant: _____

Name of Park Playground and Location: _____

**GENERAL CRITERIA
EVALUATION
(Criterion #4 – 5 points)**

Describe your methods to evaluate the project and determine whether the goals, objectives, and tasks will be accomplished successfully.

(2 pts.) How will you determine if the goals, objectives, and tasks for this project have been met (post-construction inspection, use by the targeted population, user surveys etc.)?

(2 pts.) How will you measure the project's impact on the community and the playground users?

(1 pt.) Describe any evaluation reports that will illustrate the success of the project.

List staff responsible for the project evaluation and evaluation reports:

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

Grant Applicant: _____

Name of Park Playground and Location: _____

Budget Itemization Form
(criterion #5 – 10 points)

Pre-Installation Phase

(See Appendix B – Budget Sample)

Task #	Item	Description (detailed)	Grant \$	Match \$	Total \$
	personnel				
	bid advertising				
	materials & supplies				
	consultants/contractors				
	other				
		Task 1 Total			

Installation Phase

Task #	Item	Description (detailed)	Grant \$	Match \$	Total \$
	personnel				
	materials & supplies				
	consultants/contractors				
	other				
		Task 2 Total:			

Task #	Item	Description (detailed)	Grant \$	Match \$	Total \$
	personnel				
	equipment				
	signage				
	consultant/contractor				
	other				
		Task 3 Total:			

Grant Applicant: _____

Name of Park Playground and Location: _____

Post-Installation Phase

Task #	Item	Description (detailed)	Grant \$	Match \$	Total \$
	personnel				
	materials & supplies				
	advertising				
	other				
Task 4 Total:					
Total Grant Funds			\$		
Total Matching Funds (at least 50% of grant funds)				\$	
Total Project Funds					\$

- *This form may be reproduced and enlarged as necessary.*
- *The Budget Itemization and the Work Statement must match.*
- *At least 50% of grant funds must be expended on recycled-content equipment, materials and/or supplies.*
- *Specify with an asterisk which materials equipment and/or supplies contain recycled-content materials.*
- *Attach estimates.*

Grant Applicant: _____

Name of Park Playground and Location: _____

GENERAL CRITERIA

COMPLETENESS, LETTERS OF SUPPORT, EXPERIENCE, ETC. (Criterion #6 – 15 points)

Completeness (4 Pts.)

Applicant must submit: 1) a completed original and three (3) copies of the application; the original and three (3) copies must be marked as "original" and "copy;" 2) an application signed by the person whose title is designated in the resolution; 3) an application in which the original and three (3) copies that are double-sided and fastened in the upper left-hand corner, do not bind the application; and 4) an application which includes an approved resolution or a resolution timeline (see sample resolution) and a completed Verification of Playground Inspection Form.

Letters of Support (6 Pts.)

Application packet includes at least three (3) letters of support for the project.
All letters of support must be submitted with your application packet.
Do not send letters to IWMB separately.

Experience (5 Pts.)

Address the ability of the applicant to coordinate grant activities. Describe the project manager's experience coordinating similar grants in the space below. Attach resumes, endorsements, references, etc.

CHECK ONE BOX

- Using the table on the following page, list IWMB grants received in the past three fiscal years (1997/1998, 1998/1999, 1999/2000) and their relationship to the current proposal, such as playground cover grant.

OR

- This agency has received no other grants from IWMB.

Grant Applicant: _____

Name of Park Playground and Location: _____

SUMMARY OF CURRENT AND PREVIOUS IWMB GRANT AWARDS

For Fiscal Years 1997/1998, 1998/1999, 1999/2000 only

Type of Grant	Agreement Number	Grant Award \$	Brief Program Description (1-2 Sentences)	Audit? (date/agency)

Grant Applicant: _____

Name of Park Playground and Location: _____

PROGRAM CRITERIA
Recycled-Content Purchasing Policy or Directive
(Criterion #7 - 10 points)

Definition of recycled-content purchasing policy or directive: Either 1) a policy which specifies purchasing recycled-content products instead of non-recycled products whenever price, quality, and availability are comparable or 2) a directive or memo instructing recycled-content purchasing practices. Examples include: a re-refined oil purchasing policy or a more general "recycled-content" procurement policy. See Appendix A – Sample Procurement Policies.

(3 pts.)

Does your organization have a recycled-content purchasing policy or directive? Yes No

Date policy or directive was adopted: _____ (The policy or directive may be adopted during the application process.)

(2 pts.)

Briefly describe your recycled-content purchasing policy or directive (do not attach your policy/directive):

(3 pts.)
Check the boxes that correspond with the types of recycled or re-used products you have purchased or used.

<input type="checkbox"/> Office paper supplies	<input type="checkbox"/> Furnishings: benches, tables, chairs	<input type="checkbox"/> Shipping boxes
<input type="checkbox"/> Toner cartridges	<input type="checkbox"/> Leisure/play equipment	<input type="checkbox"/> Finishes: paint, wall coverings
<input type="checkbox"/> Construction/building materials	<input type="checkbox"/> Floor coverings	<input type="checkbox"/> Re-used concrete, asphalt, brick
<input type="checkbox"/> Re-treaded tires	<input type="checkbox"/> Compost/mulch	<input type="checkbox"/> Rubberized Asphalt Concrete
<input type="checkbox"/> Janitorial paper products	<input type="checkbox"/> Containers/storage systems	<input type="checkbox"/> Others, please list
<input type="checkbox"/> Re-refined oil		

Equipment/vehicles using re-refined oil: (mowers, trucks, vans etc.)

(2 pts.)

Evaluate your Recycled-Content Purchasing Policy or Directive

1. What areas need improvement?

2. What aspects have been successfully implemented?

If your district, agency or tribe receives a grant award, you will be required as part of the final report to provide information on the amount of recycled-content products purchased such as paper, re-refined oil, paint, compost, etc. for the previous fiscal year.

Grant Applicant: _____

Name of Park Playground and Location: _____

PROGRAM CRITERIA

Recycling Program (Criterion #8 - 5 Points)

The degree to which a recycling program has been developed and implemented by the district or agency. The degree to which the program lessens or avoids unfavorable environmental effects.

Explain how the district, agency or tribe in which the playground project is located handles easily recycled internal waste such as paper, bottles, and cans. Describe other programs such as grasscycling, composting or use of mulch and compost in parks. Describe how the district, agency or tribe integrates waste management and recycling practices into its special events and/or recreational programs.

Age of Playground (Criterion # 9 - 10 points)

Applicant verifies that the playground was installed prior to January 1, 1990 (CHECK ONE BOX):

- The playground was installed prior to 1970. (10 Points)
- The playground was installed between and including 1970 and 1979. (7 Points)
- The playground was installed between and including 1980 and 1989. (5 Points)

Economic Need (Criterion #10 - 10 points)

The following points are assigned based on the playground project location. Check only one box and provide the playground project zip code and the zip code median household income. (See instructions regarding how to look up the project zip code's median household income.)

Applicants eligible for 10 points qualify for "Extreme Financial Hardship" and need only provide a minimum 25% grant amount requested (see page 6 of the "Application Information and Instructions" for a grant match example.)

- The playground project is located within a zip code for which the median household income is between and including 70.00% - 75.00% (\$25,059 - \$26,849) of the state median household income (\$35,798). (5 Points)
- The playground project is located within a zip code for which the median household income is between and including 64.01% - 69.99% (\$22,912 - \$25,058) of the state median household income (\$35,798.) (7 Points)
- The playground project is located within a zip code for which the median household income is below 64.00% (\$22,911) of the state median household income (\$35,798.) (10 Points)

Playground Project Zip Code: _____ Zip Code Median Household Income: \$ _____

Grant Applicant: _____

Name of Park Playground and Location: _____

VERIFICATION OF PLAYGROUND INSPECTION

This form must be included in your application

“Health and Safety Code § 115730(3)(c) states that all public agencies operating playgrounds and all other entities operating playgrounds open to the public shall have a playground safety inspector, certified by the National Playground Safety Institute, conduct an initial inspection for the purpose of aiding compliance for upgrades and improvements specified in this section and in the Playground Safety and Recycling Act.”

To be eligible for this grant, this inspection must have occurred on or after January 1, 1998.

Name of playground: _____

Name of district, agency or tribe managing the playground: _____

Date the playground was inspected: _____

Name of playground inspector: _____

Mailing address of playground inspector: _____

Telephone number of playground inspector: _____

**Do not include the inspection report
with your application.**

Grant Applicant: _____

Name of Park Playground and Location: _____

Please submit an approved resolution with your application or the following acknowledgement.

Approved resolution enclosed in the application.

Our governing body will consider this resolution on: _____.

We acknowledge that the approved resolution must be received by IWMB prior to the award of the grant agreement.

SAMPLE RESOLUTION

WHEREAS, The voters of California passed the Safe Neighborhood Parks, Clean Water, Clean Air, and Coastal Protection Bond Act of 2000 (Villaraigosa-Keeley Act). This act authorized the California Integrated Waste Management Board to establish a grant program to: 1. Assist local agencies in meeting the state and federal accessibility standards relating to public playgrounds; and 2. Conserve resources and develop markets for recycled-content materials and equipment; and

WHEREAS, the California Integrated Waste Management Board has been delegated the responsibility for the administration of the program within the State, setting up necessary procedures governing program applications; and

WHEREAS, said procedures established by the California Integrated Waste Management Board require the applicant to certify by resolution approval of the application before submission of said application to the State; and

WHEREAS, if awarded a grant, the applicant will enter into an agreement with the State of California for development of the project;

*NOW, THEREFORE, BE IT RESOLVED that the _____ (*Title of Governing Body*) authorizes the submittal of an application to the California Integrated Waste Management Board for a 00/01 Park Playground Accessibility and Recycling Grant Program. The _____ (*Title of Official*), or his/her authorized designee of the _____ (*Name of Jurisdiction*) is hereby authorized and empowered to execute in the name of the _____ (*Name of Jurisdiction*) all necessary applications, contracts, agreements, amendments and payment requests hereto for the purposes of securing grant funds and to implement and carry out the purposes specified in the grant application.

The foregoing resolution was passed by the _____ (*Title of Governing Body*) this _____ day of _____, _____. Effective: _____, _____.

ATTEST:

Signed: _____ Date: _____
(Name and Title of Official Authorized to Sign)

* The wording in this paragraph is appropriate for a jurisdiction applying individually. See below for alternative wording for regional program resolutions.

Lead Applicant for a Joint Agreement: NOW, THEREFORE, BE IT RESOLVED that the _____ (*Name of Jurisdiction*) authorizes the submittal of a regional application on behalf of _____, _____, _____ and _____ to the California Integrated Waste Management Board for a Park Playground Accessibility and Recycling Grant Program. The _____ (*Title of Official*), or his/her designee, is hereby authorized and empowered to execute in the name of _____ (*Name of Jurisdiction*) all necessary applications, contracts, payment requests, agreements, and amendments hereto for the purposes of securing grant funds and to implement and carry out the purposes specified in the grant application.

Cooperative Project Participants: NOW, THEREFORE, BE IT RESOLVED that the _____ (*Name of Jurisdiction*) authorizes the _____ (*Name of Lead Jurisdiction*) to submit to the California Integrated Waste Management Board a regional application for the Park Playground Accessibility and Recycling Grant Program on its behalf. The designee of _____ (*Name of Lead Jurisdiction*) is hereby authorized and empowered to execute all necessary applications, contracts, payment requests, agreements, and amendments hereto for the purposes of securing grant funds and to implement and carry out the purposes specified in the grant application.

Grant Applicant: _____

Name of Park Playground and Location: _____

APPLICATION SUBMITTAL

Applicants must mail an **original and three copies** of the application to the address below. Identify the original application with a mark or stamp indicating “original” and mark or stamp the copies, “copy”. The original and three (3) copies must be typed in a font of no less than 10 point, printed on recycled-content paper, double-sided and fastened in the upper left-hand corner (do not bind the applications.)

Applications submitted to IWMB must be postmarked or exhibit a commercial carrier tracking number dated by **Friday, August 31, 2001**. Applications postmarked or exhibiting a commercial carrier tracking number dated after **Friday, August 31, 2001** will not be accepted and will be returned to the applicant. **Hand-delivered, faxed or E-mailed applications will not be accepted at any time.**

Other than the Resolution, missing or corrected information received after the deadline will be returned to the applicant and will not be considered. It is the applicant's responsibility to ensure that the application is submitted on time to IWMB.

Please submit application to:

**Integrated Waste Management Board
Park Playground Accessibility and Recycling Grant Program
Financial Assistance Branch, Grants Administration Unit
ATTN: Kelley Tyack
P.O. Box 4025, MS 10
Sacramento, CA 95812-4025**