



*July 2008*

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY  
***Integrated Waste Management Board (CIWMB)***

## **HOUSEHOLD HAZARDOUS WASTE GRANT PROGRAM**

17th Cycle, Fiscal Year (FY) 2008/09

### **APPLICATION PACKAGE**

**APPLICATION DUE DATE: SEPTEMBER 228, 2008**

#### **Required Documents**

The following is a listing of the narratives and forms that are required as part of the Household Hazardous Waste Grant Program Application Package. Please double-check your application to be certain that everything on the checklist (last page of the Application Package) is included and arranged in the order prescribed. Forms are also available on the CIWMB website at: <http://www.ciwmb.ca.gov/Grants/forms>.

- Application Form
- Environmental Justice Certification
- Resolution and/or Letter of Authorization (LOA)
- Environmentally Preferable Purchases and Practices Policy
- Environmentally Preferable Policy, Purchases, Practices Evaluation form
- Project Narrative (not to exceed 13 pages)
- Work Plan Form
- Facility Description Profile (Attachment 1 to Work Plan)
- Program Description Profile (Attachment 2 to Work Plan)
- Budget Form
- Reliable Contractor Declaration form (if applicable)
- EPPP Policy Notification (if applicable)
- Letters of Support

Failure to include these documents with your application will cause a reduction in points for completeness during the scoring process. Resolutions and EPPP Policy Notification documents may be submitted after the application deadline; these documents must be received by the CIWMB Financial Assistance Division no later than **October 6September 29, 2008**. **Failure to meet this deadline will result in the disqualification of the application from consideration for award.**

#### **Application Format and Submittal**

- Copies: One application with original signature (blue ink preferred), and one copy
- Paper: 8½ X 11, printed double-sided, single spaced, on 100% post consumer fiber, and numbered consecutively
- Stapled, not bound: upper left-hand corner
- Font: Comparable to 12 pt. Times New Roman
- Addressed to the appropriate mailing address of the CIWMB

**HOUSEHOLD HAZARDOUS WASTE GRANT PROGRAM, 17th Cycle (FY 2008/09)**

Complete and submit all sections.

APPLICANT / ORGANIZATION INFORMATION			
APPLICANT / ORGANIZATION NAME (MUST MATCH RESOLUTION):		REQUESTED GRANT AMOUNT:	
PARTICIPATING JURISDICTIONS (FOR REGIONAL PROGRAMS ONLY):		MATCHING GRANT AMOUNT: <i>(IF APPLICABLE)</i>	
		TOTAL AMOUNT: <i>(ROUND AMOUNTS TO THE NEAREST WHOLE DOLLAR)</i>	
MAILING ADDRESS:		PROJECT ADDRESS:	
CITY:		CITY:	
COUNTY:	ZIP CODE:	COUNTY:	ZIP CODE:
PRIMARY CONTACT NAME:	SIGNATURE AUTHORITY NAME: <i>(AS AUTHORIZED IN RESOLUTION)</i>	AUTHORIZED DESIGNEE NAME: <i>(IF APPLICABLE, AS AUTHORIZED IN LETTER OF AUTHORIZATION-LOA)</i>	
TITLE:	TITLE:	TITLE:	
TELEPHONE NUMBER:	TELEPHONE NUMBER:	TELEPHONE NUMBER:	
FAX NUMBER:	FAX NUMBER:	FAX NUMBER:	
EMAIL ADDRESS:	EMAIL ADDRESS:	EMAIL ADDRESS:	
INDICATE WHICH TYPE OF ENTITY YOU ARE (CHECK ONLY ONE):			
<input type="checkbox"/> CITY <input type="checkbox"/> COUNTY <input type="checkbox"/> CITY COUNTY <input type="checkbox"/> QUALIFYING INDIAN TRIBE <input type="checkbox"/> OTHER (LIST TYPE) _____			
LEGISLATIVE DISTRICT NUMBERS (TO FIND YOUR DISTRICT, USE MAILING ADDRESS ABOVE AND GO TO <a href="http://www.ciwmb.ca.gov/Profiles/Juris/">www.ciwmb.ca.gov/Profiles/Juris/</a> )		FEDERAL TAX IDENTIFICATION NUMBER:	
ASSEMBLY:	SENATE:		

PROJECT DESCRIPTION
Please provide a brief description of the project (3-5 sentences):

**ENVIRONMENTAL JUSTICE CERTIFICATION**

*CIWMB Grantees must in the performance of the Grant Agreement conduct their programs, policies, and activities that substantially affect human health or the environment in a manner that ensures the fair treatment of people of all races, cultures, and income levels, including minority populations and low-income populations of the State. (Govt. Code §65040.12(e) and Public Resources Code §71110(a))*

<b>Must check box</b>	
<input type="checkbox"/>	Our organization will comply with these principles of Environmental Justice.

**RESOLUTION REQUIREMENT**

Submit either an approved Resolution, valid up to 5 years, with your application or the following acknowledgement (*If applicable, submit a current Letter of Authorization (LOA) for signature designee*)

<b>Must check one</b>	
<input type="checkbox"/>	<p><i>For entities with governing bodies:</i>                  We acknowledge that an approved Resolution and, if applicable, LOA designating an additional authorized signatory is enclosed in the application.</p> <hr/> <p><i>For entities without governing bodies:</i>                  We acknowledge that a letter bearing the entity’s letterhead, signed by the person with authority to contractually bind that entity, authorizing application and designating signature authority is enclosed in the application.</p>
<input type="checkbox"/>	We acknowledge that our approved Resolution must be received by the CIWMB no later than <b><u>109/0629/2008</u></b> . We further acknowledge that if our Resolution is received after this date, our application will be disqualified.

*Note: See Application Guidelines for Resolution and Letter of Authorization (LOA) information and examples*

**ENVIRONMENTALLY PREFERABLE PURCHASES AND PRACTICES POLICY**

Acknowledgement that your organization has an Environmentally Preferable Purchases and Practices Policy

<b>Must check one</b>	
<input type="checkbox"/>	Yes, our organization has an Environmentally Preferable Purchases and Practices Policy. Date adopted: _____
<input type="checkbox"/>	No, our organization does not have an Environmentally Preferable Purchases and Practices Policy. We acknowledge that our organization must adopt one and send notification (see Application Guidelines for Notification) to the CIWMB of such adoption by <b><u>109/0629/2008</u></b> , or our application will be disqualified.

*Note: See Application Guidelines for Environmentally Preferable Purchases and Practices Policy example and Notification*

**LEADERSHIP IN ENERGY AND ENVIRONMENTAL DESIGN (LEED) CERTIFICATION**

<input type="checkbox"/>	We certify that LEED construction principles using sustainable green building and development practices will be used in the creation of all new and improved buildings and structures.
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*For more information see: <http://www.usgbc.org/>*

**SUBMITTAL OF APPLICATION CONSTITUTES ACCEPTANCE OF GRANT AGREEMENT PROVISIONS**

<input type="checkbox"/>	By checking this box, Applicant acknowledges that submittal of this application constitutes acceptance of all Grant Agreement provisions as contained in the Terms and Conditions and Procedures and Requirements. To download these documents see: ( <a href="http://www.ciwmb.ca.gov/HHW/Grants/17thCycle/default.htm">http://www.ciwmb.ca.gov/HHW/Grants/17thCycle/default.htm</a> )
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**APPLICATION CERTIFICATION**

*Certification: I declare, under penalty of perjury under the laws of the State of California, that I have read all information in the Application Guidelines and Instructions and that all information submitted for the CIWMB's consideration for award of grant funds is true and accurate to the best of my knowledge.*

X

*Signature Authority - as authorized in Resolution; or Authorized Designee - as authorized in submitted Letter of Authorization*

*Date*

*Print Name*

*Print Title*

<b>ENVIRONMENTALLY PREFERABLE POLICY, PURCHASES, PRACTICES EVALUATION</b>		
<b>ENVIRONMENTALLY PREFERABLE PURCHASES AND PRACTICES POLICY</b>		
<b>Must Check One</b>		
<input type="checkbox"/>	No, our organization has not adopted a policy.	
<input type="checkbox"/>	Yes, our organization has adopted a policy.	If yes, date adopted:
<b>ENVIRONMENTALLY PREFERABLE PURCHASES</b>		
<b>CHECK THE RECYCLED-CONTENT OR OTHER ENVIRONMENTALLY PREFERABLE PRODUCTS YOU HAVE PURCHASED WITHIN THE PAST YEAR.</b>		
<input type="checkbox"/> Re-refined oil - lubricating oils for motors and engines	<input type="checkbox"/> Steel - fencing, power tools, automobiles, furniture	<input type="checkbox"/> Water based cleaning solutions for printers and equipment
<input type="checkbox"/> Latex paint, graffiti abatement, interior and exterior paint	<input type="checkbox"/> Tire-derived - flooring, mats, playground and track surfaces	<input type="checkbox"/> Less toxic chemicals, pesticides, and cleaners
<input type="checkbox"/> Retread tires -passenger, truck, bus, trailer, equipment tires	<input type="checkbox"/> Solvents - for cleaning heavy equipment, printers, and parts	<input type="checkbox"/> Low/no VOC (volatile organic compound) products
<input type="checkbox"/> Glass - windows, fiberglass insulation, beakers	<input type="checkbox"/> Paper – copy paper, brochures, flyers, educational materials	<input type="checkbox"/> Low energy use – lights, appliances, and equipment
<input type="checkbox"/> Paper products (janitorial supplies), boxes, ceiling tiles	<input type="checkbox"/> Compost/mulch – landscaping materials, erosion control	<input type="checkbox"/> Water efficient products
<input type="checkbox"/> Plastic - lumber, carpet, signs, promotional items	<input type="checkbox"/> Less polluting equipment, vehicle, and machinery	<input type="checkbox"/> Other, please list:
<b>ENVIRONMENTALLY PREFERABLE PRACTICES</b>		
<b>CHECK THE ENVIRONMENTALLY PREFERABLE PRACTICES YOU HAVE PERFORMED WITHIN THE PAST YEAR THAT RESULT IN RESOURCE CONSERVATION AND/OR EFFICIENCY.</b>		
<input type="checkbox"/> Integrated pest management	<input type="checkbox"/> Renewable energy	<input type="checkbox"/> Water-efficiency
<input type="checkbox"/> Grasscycling	<input type="checkbox"/> Energy efficiency	<input type="checkbox"/> Other, please list:
<input type="checkbox"/> Composting/mulching	<input type="checkbox"/> Sustainable construction	
<input type="checkbox"/> Operations and maintenance, xeriscaping, natural fertilizers	<input type="checkbox"/> Demolition debris recycling	
<b>ENVIRONMENTALLY PREFERABLE POLICY, PURCHASES, PRACTICES EVALUATION</b>		
<b>PLEASE EVALUATE YOUR ORGANIZATIONS CURRENT POLICY, PURCHASES AND PRACTICES AND DESCRIBE HOW THEY WILL BE IMPROVED IN THE COMING YEAR. ATTACH ADDITIONAL SHEETS IF NECESSARY.</b>		
<b>IMPROVEMENTS, LIST HERE:</b>		
<b>CHALLENGES, LIST HERE:</b>		

*Note: See Application Guidelines for Environmentally Preferable Purchases and Practices Policy example*

### WORK PLAN (Exhibit C)

List the goals, objectives, tasks/activities, sub-tasks, staff/contractor, and timeframes necessary to complete your project. The Work Plan tasks/activities should match the tasks/activities identified in the Budget.

<b>GOAL</b>					
<b>OBJECTIVE</b>					
<b>TASK #</b>	<b>TASK/ACTIVITY DESCRIPTION</b>	<b>RESPONSIBLE PERSON</b> <small>(contractor or staff, include name &amp; title)</small>	<b>EVALUATION METHOD</b> <small>(survey, workshop, etc.)</small>	<b>TIMEFRAME</b> <small>(month/year-month/year)</small>	<b>BUDGET CATEGORY</b>

*Note: See Application Guidelines for Work Plan example*

*Submit Attachment 1 or 2 as applicable.*

**BUDGET (Exhibit D)**

List costs for each task/activity or sub-task identified in the Work Plan. The personnel calculation or cost is the hourly rate multiplied by hours worked. Round the Budget amounts to the nearest whole dollar. Include copies of bids/estimates for all major items and indicate those items on the Budget with an asterisk.

<b>TASK #</b>	<b>CATEGORY/DESCRIPTION</b>	<b>AMOUNT</b>
	<b>PERMANENT COLLECTION FACILITY:</b>	<b>(INCLUDE AMOUNTS)</b>
	<b><u>NON-PERSONNEL COSTS:</u></b>	_____
		(INCLUDE CATEGORY TOTAL)
	<b><u>PERSONNEL:</u></b>	
	<b>TEMPORARY OR MOBILE COLLECTION:</b>	<b>(INCLUDE AMOUNTS)</b>
	<b><u>NON-PERSONNEL COSTS:</u></b>	_____
		(INCLUDE CATEGORY TOTAL)
	<b><u>PERSONNEL:</u></b>	
	<b>RESIDENTIAL COLLECTION:</b>	<b>(INCLUDE AMOUNTS)</b>
	<b><u>NON-PERSONNEL COSTS:</u></b>	_____
		(INCLUDE CATEGORY TOTAL)
	<b><u>PERSONNEL:</u></b>	
	<b>PUBLICITY EDUCATION:</b>	<b>(INCLUDE AMOUNTS)</b>
	<b><u>NON-PERSONNEL COSTS:</u></b>	_____
		(INCLUDE CATEGORY TOTAL)
	<b><u>PERSONNEL:</u></b>	
	<b>PERSONNEL: (PROGRAM PLANNING, MANAGEMENT, AND ADMINISTRATION)</b>	<b>(INCLUDE AMOUNTS)</b>
		_____
		(INCLUDE CATEGORY TOTAL)
	<b>OTHER: (DESIGN, ETC.)</b>	<b>(INCLUDE AMOUNTS)</b>
		_____
		(INCLUDE CATEGORY TOTAL)
	<b>INDIRECT COSTS: (NOT TO EXCEED 10% OF GRANT FUNDS REIMBURSED AND MUST BE SUPPORTED BY A COST ALLOCATION PLAN.)</b>	<b>(INCLUDE AMOUNTS)</b>
		_____
		(INCLUDE CATEGORY TOTAL)
	<b>BUDGET TOTAL</b>	<b>(INCLUDE BUDGET TOTAL)</b>
		_____

*Note: See Application Guidelines for Budget example*

*This document may be reproduced, enlarged, and customized as necessary. Personnel calculation: rate X hours = cost*

This form must be completed and submitted to the California Integrated Waste Management Board (CIWMB) prior to authorizing a contractor(s) to commence work. Failure to provide this documentation in a timely manner may result in nonpayment of funds to the contractor(s).

This form is intended to help the CIWMB's Grantees comply with the Unreliable List requirement of their Terms and Conditions.

The Unreliable List provision requires the following:

Prior to authorizing a contractor(s) to commence work under the Grant, the Grantee shall submit to the CIWMB a declaration signed under penalty of perjury by the contractor(s) stating that within the preceding three (3) years, none of the events listed in Section 17050 of Title 14, California Code of Regulations, Natural Resources, Division 7, has occurred with respect to the contractor(s). Please see the reverse of this page for a listing of events, or refer to [www.ciwmb.ca.gov/Regulations/Title14/](http://www.ciwmb.ca.gov/Regulations/Title14/).

Please return the completed form(s) to:

California Integrated Waste Management Board  
*Household Hazardous Waste Grant Program*  
Attn: Jo Glenn  
*Financial Assistance Division, 9<sup>th</sup> floor*  
P.O. Box 4025  
Sacramento, CA 95812-4025

GRANTEE INFORMATION	
GRANTEE NAME:	GRANT NUMBER:
PRIMARY CONTACT NAME:	
CONTRACTOR INFORMATION	
CONTRACTOR NAME:	
AUTHORIZED CONTRACTOR REPRESENTATIVE NAME:	
MAILING ADDRESS:	
<i>As the authorized representative of the above identified contractor, I declare under penalty of perjury under the laws of the State of California that within the preceding three (3) years, none of the events listed in Section 17050 of Title 14, California Code of Regulations, Natural Resources, Division 7, has occurred with respect to the above identified contractor.</i>	
<i>Signature</i>	<i>Date</i>

**RELIABLE CONTRACTOR DECLARATION**

CIWMB 168 (Revised 2/08)

**Title 14 CCR, Division 7, Chapter 1****Article 5. Unreliable Contractors, Subcontractors, Borrowers and Grantees****Section 17050. Grounds for Placement on Unreliable List**

The following are grounds for a finding that a contractor, any subcontractor that provides services for a board agreement, grantee or borrower is unreliable and should be placed on the board's Unreliable Contractor, Subcontractor, Grantee or Borrower List ("Unreliable List"). The presence of one of these grounds shall not automatically result in placement on the Unreliable List. A finding must be made by the Executive Director in accordance with section 17054, and there must be a final decision on any appeal that may be filed in accordance with section 17055 et seq.

- (a) Disallowance of any and/or all claim(s) to the board due to fraudulent claims or reporting; or
- (b) The filing of a civil action by the Attorney General for a violation of the False Claims Act, Government Code section 12650 et seq; or
- (c) Default on a board loan, as evidenced by written notice from board staff provided to the borrower of the default; or
- (d) Foreclosure upon real property loan collateral or repossession of personal property loan collateral by the board; or
- (e) Filing voluntary or involuntary bankruptcy, where there is a finding based on substantial evidence, that the bankruptcy interfered with the board contract, subcontract, grant or loan; or
- (f) Breach of the terms and conditions of a previous board contract, any subcontract for a board agreement, grant, or loan, resulting in termination of the board contract, subcontract, grant or loan by the board or prime contractor; or
- (g) Placement on the board's chronic violator inventory established pursuant to Public Resources Code section 44104 for any owner or operator of a solid waste facility; or
- (h) The person, or any partner, member, officer, director, responsible managing officer, or responsible managing employee of an entity has been convicted by a court of competent jurisdiction of any charge of fraud, bribery, collusion, conspiracy, or any act in violation of any state or federal antitrust law in connection with the bidding upon, award of, or performance under any board contract, subcontract, grant or loan; or
- (i) The person or entity is on the list of unreliable persons or entities, or similar list, of any other federal or California state agency; or
- (j) The person or entity has violated an Order issued in accordance with section 18304; or,
- (k) The person or entity has directed or transported to, has or accepted waste tires at, a site where the operator is required to have but does not have a waste tire facility permit; or,
- (l) The person or entity has transported waste tires without a waste tire hauler registration; or,
- (m) The person or entity has had a solid waste facility or waste tire permit or a waste tire hauler registration denied, suspended or revoked; or,
- (n) The person or entity has abandoned a site or taken a similar action which resulted in corrective action or the expenditure of funds by the Board to remediate, clean, or abate a nuisance at the site; or
- (o) The following are additional grounds for a finding that, a person or entity described below should be placed on the Unreliable List:
  - (1) The person or entity owned 20% or more of an entity on the Unreliable List at the time of the activity that resulted in its placement on the Unreliable List;
  - (2) The person held the position of officer director, manager, partner, trustee, or any other management position with significant control (Principal Manager) in an entity on the Unreliable List at the time of the activity that resulted in its placement on the Unreliable List;
  - (3) The entity includes a Principal Manager who:
    - 1. Was a Principal Manager in an entity on the Unreliable List at the time of the activity that resulted in its placement on the Unreliable List; or,
    - 2. Owned 20% or more of an entity on the Unreliable List at the time of the activity that resulted in its placement on the Unreliable List;
  - (4) The entity has a person who owns 20% or more of the entity, if that person:
    - 1. Was a Principal Manager in an entity on the Unreliable List at the time of the activity that resulted in its placement on the Unreliable List; or,
    - 2. Owned 20% or more of an entity on the Unreliable List at the time of the activity that resulted in its placement on the Unreliable List.
  - (5) The entity has another entity which owns 20% or more of the entity, if that other entity:
    - 1. Is on the Unreliable List; or,
    - 2. Owned 20% or more of an entity on the Unreliable List at the time of the activity that resulted in its placement on the Unreliable List.
  - (6) Subsection (o) is not intended to apply to a person or entity that purchases or otherwise obtains an entity on the Unreliable List subsequent to its placement on the Unreliable List.

**EPPP POLICY – SECONDARY DEADLINE NOTIFICATION**

Applicants who do not have an EPPP Policy in place when they submit their Applications may certify in their Application that they will adopt one and will send the Notification (below) to the CIWMB. CIWMB must receive the Notification by 109/0629/2008 or the Application will be disqualified.

**IMPORTANT!** Notification sent by U.S. Postal Service or a commercial delivery service should be sent in a manner that allows for tracking by the sender and that provides for verification of delivery. Failure to do so is at the risk of the applicant and if delivery is delayed or the Notification is lost by the Post Office or delivery service, the burden is on the applicant to demonstrate timely delivery and receipt by the CIWMB of Notification.

APPLICANT INFORMATION	
GRANT PROGRAM NAME:	
APPLICANT / ORGANIZATION NAME:	
PRIMARY CONTACT NAME:	TITLE:
TELEPHONE NUMBER:	FAX NUMBER:
EMAIL ADDRESS:	
Check box	
<input type="checkbox"/>	Yes, our organization has an Environmentally Preferable Purchases and Practices Policy.
	DATE ADOPTED: _____ BY: (E.G., GOVERNING BODY NAME, EXECUTIVE OFFICER, ETC.) _____
<i>Certification: I declare, under penalty of perjury, under the laws of the State of California, that the above information is true and accurate to the best of my knowledge.</i>	
X	
<i>Signature Authority - as authorized in Resolution; or Authorized Designee - as authorized in submitted Letter of Authorization</i>	
<i>Date</i>	
<i>Print Name</i>	
<i>Print Title</i>	

Submit notification to:

California Integrated Waste Management Board  
 Household Hazardous Waste Grant Program, Attn: Jo Glenn  
 Financial Assistance Division, 9<sup>th</sup> Floor  
 1001 "I" Street  
 P.O. Box 4025  
 Sacramento, CA 95812-4025  
 Phone: (916) 341-6118

## APPLICATION CHECKLIST

### HOUSEHOLD HAZARDOUS WASTE GRANT PROGRAM, 17th Cycle (FY 2008/09)

This application checklist is provided for your convenience and is not intended to be all inclusive. Prior to submitting your application, check the QA website at: <http://www.ciwmb.ca.gov/HHW/Grants/17thcycle/Apply/QandA.htm> for additional information. You are responsible for completing and submitting all required documentation.

<b>GRANT APPLICATION FORM (CIWMB 243-HWG)</b>	
<input type="checkbox"/>	All applicable information and documents are provided; applicable boxes are checked.
<input type="checkbox"/>	Application Certification is signed by the: 1) Signature Authority as authorized in Resolution , or 2) Authorized Designee. <i>Authorized Designee may sign only if the Letter of Authorization has been submitted to the CIWMB.</i>
<b>ENVIRONMENTAL JUSTICE CERTIFICATION AND LEED CERTIFICATION</b>	
<input type="checkbox"/>	Boxes are checked.
<b>BUSINESS RELATED FORMS</b>	
<input type="checkbox"/>	Reliable Contractor Declaration form included (if applicable)
<input type="checkbox"/>	General Checklist of Business Permits, Licenses and Filings form included (if applicable) available at: <a href="http://www.ciwmb.ca.gov/HHW/Forms/">http://www.ciwmb.ca.gov/HHW/Forms/</a>
<b>RESOLUTION REQUIREMENT—See Guidelines and Instructions: Required Documents for Resolution, and Letter of Authorization (LOA) information and examples</b>	
<input type="checkbox"/>	Approved Resolution is included with Application; box is checked, or
<input type="checkbox"/>	If applicable, approved Resolution not submitted with Application but will be submitted to the CIWMB for receipt by <b>109/0629/2008</b> ; box is checked.
<input type="checkbox"/>	If applicable, Letter of Authorization (LOA) is included with Application. A LOA is not required to be submitted with the Application; however, it must be submitted prior to Designee’s exercise of his/her authority.
<b>ENVIRONMENTALLY PREFERABLE PURCHASES AND PRACTICES POLICY EVALUATION—See Guidelines and Instructions: Required Documents section for example</b>	
<input type="checkbox"/>	Appropriate boxes are completed on the EPPP Evaluation.
<input type="checkbox"/>	EPPP Policy Notification (pending Policy being adopted). Must be submitted by <b>109/0629/2008</b>
<b>PROJECT NARRATIVE —See Guidelines and instructions: Grant Application Scoring Guidelines Section for detailed information regarding narrative</b>	
<input type="checkbox"/>	Narrative does not exceed 13 pages (not including letters of support or other attachments)
<b>WORK PLAN —See Guidelines and Instructions: Required documents Section for information and example</b>	
<input type="checkbox"/>	Appropriate boxes are completed on the Work Plan.
<input type="checkbox"/>	Facility Description Profile (Attachment 1 to Work Plan)
<input type="checkbox"/>	Program Description Profile (Attachment 2 to Work Plan)
<b>BUDGET— See Guidelines and Instructions: Required documents Section for information and example</b>	
<input type="checkbox"/>	Appropriate boxes are completed on the Budget.
<b>APPLICATION FORMAT SUBMITTAL</b>	
<input type="checkbox"/>	Copies: One application with original signature (blue ink preferred), and one copy
<input type="checkbox"/>	Paper: 8½ X 11, printed double-sided, single spaced, on 100% post consumer fiber, and numbered consecutively
<input type="checkbox"/>	Stapled, not bound: upper left-hand corner
<input type="checkbox"/>	Font: Comparable to 12 pt. Times New Roman
<input type="checkbox"/>	Addressed to the appropriate mailing address of the CIWMB