

Household Hazardous Waste Grant (16th Cycle) 2007-2008

**COUNTY-WIDE COORDINATION GRANT
APPLICATION COVER SHEET**

Applicant (lead agency coordinator):	
Department or Agency:	
Street Address:	
Mailing Address (if different from street address):	
City & Zip Code:	County:
State Senate District:	State Assembly District:

County-wide Jurisdiction Participants: (list)

Primary Contact (Name & Title):	
Phone:	Fax:
Email Address:	

Signature Authority (Name & Title, as authorized in Resolution):	
Phone:	Fax:
Email Address:	

Consultant if applicable (Name & Company):	
Phone:	Email Address:

Work Plan and Budget (brief description of activities and estimated expenditures – Include a 3 to 5 sentence description of the proposed project. See Final Report Form and Application instructions for eligible activities)

Total Grant Request: \$ _____

<u>Proposed Activities</u>	<u>Estimated Costs</u>

Total Grant Request: \$ _____

Proposed Activities

Estimated Costs

Certification: I declare, under penalty of perjury, under the laws of the State of California, that all information submitted for CIWMB's consideration for allocation of grant funds is true and accurate to the best of my knowledge. Proposed Project is consistent with the jurisdiction's adopted Household Hazardous Waste Element.

_____ - (Check the box and initial.) Applicant certifies, under penalty of perjury under the laws of the State of California, that if awarded a grant, it shall act in good faith as lead coordinator to provide opportunities for all sharps and u-waste issue stakeholders in the county-wide area to participate in the in the performance of the Grant Agreement.

_____ - (Check the box and initial.) Applicant certifies, under penalty of perjury under the laws of the state of California, that if awarded a grant, it shall in the performance of the Grant Agreement conduct its 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 in accordance with the principles of Environmental Justice as defined in Government Code § 65040.12(e).

Signature of person as specified in the Resolution: _____ Date: _____

Type or print name and title:

INSTRUCTIONS FOR COORDINATION GRANT APPLICATION COVER SHEET

Applicant

This is name of the Applicant submitting the proposal (e.g. City of Anaheim, or Santa Clara County, etc.).

Department or Agency

List a specific department or agency (e.g., Department of Public Works Agency, Fire Department, or Environmental Management Department).

Regional Participants

List the jurisdictions participating in a regional application. Regional, Co-Operative, and/or Joint Powers Authority (JPA) participants must expressly authorize participation through the lead jurisdiction in one of three ways:

- 1) an authorization letter dated within the last 12 months and signed by an agency representative with program decision-making authority for the participating jurisdiction, who is authorized to execute such documents on behalf of the jurisdiction; OR
- 2) an approved resolution from the governing authority; OR
- 3) a Memorandum of Understanding (MOU).

Please note: These documents must specifically name the regional lead as applicant and grant administrator, and be specific to the HD16 Grant. Documents must be dated within the last 12 months. Blanket authorizations are not acceptable in any of these documents. See Application, Section III, Regional and Joint Powers Authority (JPA) Programs.

Primary Contact

This person is responsible for carrying out the day-to-day management and implementation of the grant. All CIWMB correspondence will be directed to this individual (e.g., Recycling Analyst, Environmental Technician, Solid Waste Engineer, etc.). **The Primary Contact must be a local government employee.** (Note: If the applicant is from a JPA, the Primary Contact must be an employee of the JPA involved in solid and/or hazardous waste management.)

Signature Authority

The Signature Authority is authorized and empowered, pursuant to the approved resolution, to execute in the name of the applicant all grant-related documents (e.g., application, Grant Agreement, Payment Requests, and amendments) to implement the Grant. The authorizing resolution should include the job title of the Signature Authority. **The Signature Authority must be a local government employee** (except if the Signature Authority is an employee of an applicant-JPA involved in solid waste and/or HHW management).

If expressly authorized in the resolution, a Signature Authority may designate, by job title, another person to sign on his/her behalf, upon submission of a letter to the CIWMB, signed by the Signature Authority. **Without this express approval, only the Signature Authority will be authorized to sign grant-related documents.**

Total Grant Request

The total number of dollars being requested from the CIWMB rounded to the nearest dollar. Do not include applicant contributions or in-kind services.

Work Plan and Budget

Include a three to five sentence summary of the proposed project. This summary may be distributed by the CIWMB to the public. The Project shall be consistent with the current **Household Hazardous Waste Element** (HHWE) as described in the jurisdiction's most current HHWE. Please see Title 14, California Code of Regulations, sections 18750 et seq.

Certification: Sign, date, check, and initial.