Attachment 4

BUDGET ITEMIZATION

Used Oil Opportunity Grant (8th Cycle)

(Directions/Sample Format)

Applicant _____

Category	Amount
Permanent Collection Facility: o Non-Personnel Costs: (Include detail for all individual costs relating to the Permanent Collection Facility Budget category and indicate corresponding Work Plan Objective o e.g. Storage unit for drums* , safety equipment* – Objective #1) o Personnel: (Include all individual staffing costs related to the Permanent Collection Facility Budget category – both internal and/or external o e.g. Recycling Coordinator # hours X $ rate - Objective #1)	(include amounts) _____ (include category total)
Temporary or Mobile Collection: o Non-Personnel Costs: (Include detail for all individual costs relating to the Temporary or Mobil Collection Budget category and indicate corresponding Work Plan Objective) o Personnel: (Include all individual staffing costs related to the Temporary Mobile Collection Budget category – both internal and/or external)	(include amounts) _____ (include category total)
Residential Collection: o Non-Personnel Costs: (Include detail for all individual costs relating to the Residential Collection Budget category and indicate corresponding Work Plan Objective) o Personnel: (Include all individual staffing costs related to the Residential Collection Budget category – both internal and/or external)	(include amounts) _____ (include category total)
Publicity & Education: o Non-Personnel Costs: (Include detail for all individual costs relating to the Publicity & Education Budget category and indicate corresponding Work Plan Objective) o Personnel: (Include all individual staffing costs related to the Publicity & Education Budget category – both internal and/or external)	(include amounts) _____ (include category total)
Personnel: (Program Planning, Management, and Administration) (Include detail of individual staff costs that relate only to program planning, management, and administration e.g. Recycling Coordinator # hours X $ rate for grant administration)	(include amounts) _____ (include category total)
Other: (Include any costs not directly attributed to above categories - e.g. travel, etc.)	(include amounts) _____ (include category total)
Indirect Costs: (Not to exceed 10% of OG8 total)	(include amounts) _____ (include category total)
Budget Total	(include Budget total) _____

*Copies of bids/estimates attached.

Round Budget line items to the nearest whole dollar amount.