| GRANT Application Form - Marine Oil Spill Prevention & Response Program **FY21 COMMBUYS: BD-21-1045-BWSC0-BWSC1-xxxxx** | | | | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Applicant Information | | | | | | | | | | | | | | |
| 1. **MOSPRA Funds Requested: $** | | | | | | | | 1. **Name of Entity:** | | | | | | |
| 1. Applicant’s Contact: | | | | | | | 1. Position: | | | | | | | |
| 1. Address: | | | | | | | | | | | 1. Zip Code: | | | |
| 1. Type of organization: | | | | | | | | | | |  | | | |
| 1. Phone Number: | | | | 1. Email: | | | | | | | | | | |
| 1. Project Lead: | | | | 1. Project Lead Phone/Email: | | | | | | | | | | |
| 1. Applicant Signatory Name: | | | | 1. Applicant Signatory Title: | | | | | | | | | | |
| PROJECT abstract *(Brief description of project)* | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| PROJECT Information | | | | | | | | | | | | | | |
| 1. Project Name: | | 1. Location: | | | | | | | | | | | | |
| 1. How would you categorize this project with regards to marine oil spill prevention or response? | | |  | | | | | | |  | | | | |
| 1. Is this a new project?   If no, please explain: | | | | | | | | | | | |  | |  |
| 1. Is there any regulation, consent order, etc. that obligates the applicant to do the proposed work? | | | | | | | | | | | |  | |  |
| Community Information | | | | | | | | | | | | | | |
| 1. If applicable, is the project on town/city land? | | | | | | | | | | | |  | |  |
| ii. What is the expected benefit to the community/public? | | | | | | | | | | | | | | |
| iii. Does this project benefit an Environmental Justice community?  <https://www.mass.gov/info-details/environmental-justice-populations-in-massachusetts> | | | | | | | | | | | |  | |  |
| project descriptionPlease use as much space as needed. The boxes will expand as you fill them. | | | | | | | | | | | | | | |
| i. **Project Description:** Applicants should provide a detailed description of the proposed project and explain the connection to marine oil spill prevention and/or response. Applicants should also describe how the project fits in with their organization’s goals and mission. | | | | | | | | | | | | | | |
| ii. **Project Approach & Management:** Applicant should provide a detailed description of the approach to implementing the project and how it will be managed. Please describe any permits or approvals that may be required. If equipment is part of the project, please address how it will be maintained in the future and how will be used to support the goals of MOSPRA. | | | | | | | | | | | | | | |
| iii. **Project Cost:** Applicants must complete the table below, which incorporates project cost and funding needs by project activity. Applicants can decide how to best break up their projects into tasks (please label in table). If a Table column is Not Applicable to the proposed project, Applicants should indicate “NA” in that column. In the box at the bottom, Applicants must provide a short but descriptive budget narrative. Refer to *RFR Attachment A Detailed Application Requirements* for additional guidance. | | | | | | | | | | | | | | |
| **Project Phase** | **Funding Requested from MOSPRA Program** | | | | **Other Contributions Cash or In-Kind (Committed)** | | | | **Other Contributions Cash or In-Kind (Not-Committed)** | | | | **Total Cost Estimate** | |
| Task 1 – |  | | | |  | | | |  | | | |  | |
| 1. Labor |  | | | |  | | | |  | | | |  | |
| 1. Materials, Equipment and Supplies |  | | | |  | | | |  | | | |  | |
| 1. Contracted Services |  | | | |  | | | |  | | | |  | |
| 1. Other |  | | | |  | | | |  | | | |  | |
| Task 2 - |  | | | |  | | | |  | | | |  | |
| 1. Labor |  | | | |  | | | |  | | | |  | |
| 1. Materials, Equipment and Supplies |  | | | |  | | | |  | | | |  | |
| 1. Contracted Services |  | | | |  | | | |  | | | |  | |
| 1. Other |  | | | |  | | | |  | | | |  | |
| Task 3 - |  | | | |  | | | |  | | | |  | |
| 1. Labor |  | | | |  | | | |  | | | |  | |
| 1. Materials, Equipment and Supplies |  | | | |  | | | |  | | | |  | |
| 1. Other |  | | | |  | | | |  | | | |  | |
| Task 4 - |  | | | |  | | | |  | | | |  | |
| 1. Labor |  | | | |  | | | |  | | | |  | |
| 1. Materials, Equipment and Supplies |  | | | |  | | | |  | | | |  | |
| 1. Other |  | | | |  | | | |  | | | |  | |
| Totals |  | | | |  | | | |  | | | |  | |
| **Cost Narrative:** Applicants must briefly explain how cost estimates were determined and describe how MOSPRA funds will be used. Where possible, Applicants should provide supporting documentation. Applicants must describe any other anticipated or secured funding sources such as municipal funds, private funds, or grant funds that will support any portion of this project. | | | | | | | | | | | | | | |
| *Please check if Supporting Documentation is attached (e.g., budget details, etc.)* | | | | | | | | | | | | | | |
| iv. **Project Timeline:** Applicants must describe the estimated timeline for the overall project *and* the timeline for proposed work to be covered by this funding. The schedule presented can include actual dates (e. g., task/deliverable completion by June 30, 2022) or list estimated project phase time duration (e.g., 5 weeks after completion of Task 2). The schedule can be presented in a text, table or graphic form. | | | | | | | | | | | | | | |
| v. **Project Partner(s)/Subcontractor(s) (if applicable):** Applicants must provide the name(s) of the organization(s) and/or firm(s) which will play a role in connection with the proposed project. Applicants must describe the role that any project partner(s)/subcontractor(s) will play, and in-kind services and expertise that they will bring to the project. | | | | | | | | | | | | | | |
| 1. **Signatures** | | | | | | | | | | | | | | |
| I hereby declare that the above information is true to the best of my knowledge and belief. By signing this Application, i confirm my intent AND COMMITMENT TO PERFORMANCE OF THE PROPOSED PROJECT IF SELECTED FOR THE nrd pROGRAM gRANT AWARD. | | | | | | | | | | | | | | |
| **Applicant Signature:** | | | | | | Position: | | | | | | | Date: | |
| Please check if supporting documentation is provided with this application. | | | | | | | | | | | | | | |