

Lee County Natural Resources Division / WCIND Waterway Development Program  
Proposal Form for Sub-grantees

1. Applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
Project Manager: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
FEID#: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

2. Project Title: \_\_\_\_\_

3. Category:    Navigation Improvement \_\_\_\_\_ Environmental Education \_\_\_\_\_  
(check one)        Boating Safety \_\_\_\_\_ Recreation \_\_\_\_\_ Law Enforcement \_\_\_\_\_

4. Description & Public Benefits (attach sheets if necessary): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Permits Required and Status: \_\_\_\_\_  
\_\_\_\_\_

6. Estimated Start Date: \_\_\_\_\_ Estimated Completion Date: \_\_\_\_\_  
(May not be prior to October 1)

7. Estimated Total Project Cost: \_\_\_\_\_ Grant Funds Requested: \_\_\_\_\_  
Identify Matching Funds, if Applicable: \_\_\_\_\_  
\_\_\_\_\_

Complete Estimated Budget Summary on Reverse Side or Separate Attachment.

8. I hereby certify that the information provided herein is true and accurate.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed:

\_\_\_\_\_

Title:

\_\_\_\_\_

BUDGET ESTIMATE DETAIL	Grant Funds	Matching Funds <sup>1</sup>	Total
Construction Expenses			
(specify)			
Contractual Services			
(specify)			
Materials			
(specify)			
Equipment			
(specify)			
Salaries <sup>2</sup>			
Other			
(specify)			
GRAND TOTAL	\$	\$	\$

<sup>1</sup> Matching funds are **required** only for Boating Safety and Recreation projects, but are encouraged for all projects.

<sup>2</sup> Salaries are **only** eligible as a grant expense for Law Enforcement projects.