



MISSOURI DEPARTMENT OF NATURAL RESOURCES
 SOLID WASTE MANAGEMENT PROGRAM
**DISASTER RECOVERY SCRAP TIRE SURFACE MATERIAL GRANT
 APPLICATION FORM**

LEGAL NAME OF ORGANIZATION	ADDRESS	CITY/STATE/ZIP CODE
TELEPHONE WITH AREA CODE	FAX WITH AREA CODE	FEDERAL TAX ID NUMBER

APPLICANT PROFILE

Type of Applicant (Check one)
 Public Entity or Institution (Public School District) Non-Profit Entity (Attach legal status documentation) Private School
 Government Organization Park or Park District Other (Detail)

NAME OF AUTHORIZED OFFICIAL	OFFICIAL TITLE	MAILING ADDRESS WITH CITY/STATE/ZIP CODE
TELEPHONE NUMBER WITH AREA CODE	FAX NUMBER WITH AREA CODE	E-MAIL ADDRESS
PROJECT MANAGER	TITLE	MAILING ADDRESS WITH CITY/STATE/ZIP CODE
TELEPHONE NUMBER WITH AREA CODE	FAX NUMBER WITH AREA CODE	E-MAIL ADDRESS

LOCATION PROFILE

Location of the project site(s) and status of properties (i.e. owned, leased, being purchased; attach proof of ownership or written permission from property owner.) If more than one project, list each separately.	COUNTY
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All applicants are to answer the following questions or provide an explanation as to why the items are not applicable to the proposed project. If additional space is needed to complete question responses, please attach additional pages as needed. Provide as much information as you can to ensure the evaluators have a full understanding of the project.

PROJECT DESCRIPTION, PRELIMINARY DESIGN AND SUPPORTING DOCUMENTATION

If the applicant is requesting funding for more than one project site, please describe each project site individually. Describe the number of people to be served by each project. Describe the current condition of the proposed site. Provide a diagram of the area where the scrap tire surface material will be used. Include dimensions of the area and type of surface material to be utilized. Provide information on both the surface material (mats, tiles, pour-in-place) and support material (concrete, asphalt, other) to be used.

MATERIAL SUMMARY

Provide written documentation (scrap tire material vendor quotes) regarding the quality, quantity, cost and availability of your source of scrap tire material. Documentation should include the quantity required for each of your project(s), an estimated cost for the material for each of your project(s), an estimate of the cost of material delivery and the percentage of Missouri generated tires used in the material.

MEDIA EXPOSURE

Provide confirmation that a press release will be issued upon completion of the project.

BUDGET (provide a separate budget page for each proposed project seeking grant funds)

Complete the budget below showing the total cost of the proposed scrap tire surface material project. Grant funds are eligible for surface material and delivery costs only. **Site preparation, material containment/support, labor, etc. are costs NOT eligible for grant funds.**

Provide a copy of scrap tire material vendor quotes supporting the budget figures included below. Fifteen scoring points are awarded if 3 or more quotes are provided.

Playground applications are eligible to receive up to \$100,000 in grant funds while walking trail applications are eligible to receive up to \$200,000 in grant funds.

Scrap tire surface material grant funds may not be used to supplant or replace insurance payments or FEMA provided funds.

Note: The budget summary will be used as the basis for the grant agreement and reflects the maximum amount for which the recipient may be eligible for reimbursement. If an applicant receives a grant award based upon additional scoring of points due to the recipient's intent to purchase additional surface material, the recipient will only be eligible to receive reimbursement based on the percentage of the actual project cost.

	Project 1			Project 2			Project 3		
BUDGET SUMMARY	TOTAL PROJECT COST	OTHER FUNDS (FEMA, INSURANCE, DONATIONS)	GRANT FUNDS REQUESTED	TOTAL PROJECT COST	OTHER FUNDS (FEMA, INSURANCE, DONATIONS)	GRANT FUNDS REQUESTED	TOTAL PROJECT COST	OTHER FUNDS (FEMA, INSURANCE, DONATIONS)	GRANT FUNDS REQUESTED
Surface material									
Delivery									
TOTAL									
	Project 4			Project 5			Project 6		
BUDGET SUMMARY	TOTAL PROJECT COST	OTHER FUNDS (FEMA, INSURANCE, DONATIONS)	GRANT FUNDS REQUESTED	TOTAL PROJECT COST	OTHER FUNDS (FEMA, INSURANCE, DONATIONS)	GRANT FUNDS REQUESTED	TOTAL PROJECT COST	OTHER FUNDS (FEMA, INSURANCE, DONATIONS)	GRANT FUNDS REQUESTED
Surface material									
Delivery									
TOTAL									
	Project 7			Project 8			Project 9		
BUDGET SUMMARY	TOTAL PROJECT COST	OTHER FUNDS (FEMA, INSURANCE, DONATIONS)	GRANT FUNDS REQUESTED	TOTAL PROJECT COST	OTHER FUNDS (FEMA, INSURANCE, DONATIONS)	GRANT FUNDS REQUESTED	TOTAL PROJECT COST	OTHER FUNDS (FEMA, INSURANCE, DONATIONS)	GRANT FUNDS REQUESTED
Surface material									
Delivery									
TOTAL									

APPLICATION CHECKLIST

Before submitting your application, please complete this checklist. Only if the applicant can answer Yes to all questions on this form should the application be submitted. **Evidence substantiating each “Yes” answer in the checklist must be included in the application and be referenced on the checklist.**

Yes

**Where Documented
(Page Numbers)**

Department’s Compliance Test (Department use only.)

Criteria

1. Is the certification statement above signed and dated by the authorized official?			
2. Has an original and two copies of the application been submitted?			
3. Is the project(s) located in the May 22, 2011 disaster affected area?			
4. Is the applicant profile complete?			
5. Is the location profile(s) complete?			
6. Is the project(s) description, preliminary design, and supporting documentation complete?			
7. Is the material summary complete?			
8. Is the media exposure complete?			
9. Are the work plans and timelines complete?			
10. Are the budgets complete?			
11. Is the grant funds requested \$100,000 or less for playground(s) or \$200,000 or less for walking trails/running tracks?			