NEIGHBORHOOD GREENING GRANT APPLICATION

DUE: JUNE 30, 2015

Please submit the original application with applicant signature to the Project Coordinator. Contact the Forest Spokane Project Coordinator at (509) 625-6780 if you have any questions. Mail or deliver application to:

Office of Neighborhood Services Attn: Alicia Powell 808 W. Spokane Falls Blvd. Spokane WA 99201

A.	ORGANIZATION INFORMATION			
1.	Neighborhood Council Name:			
2.	Neighborhood President/Chairperson's Name:			
3.	Applicants Name:			
Addres	ss:			
	p Code:			
Phone	·			
	address:			
3.	Additional Contact Person Name & Title:			
Addres	SS:			
	p Code:			
	·			
E-mail address:				
4.	Please provide a brief description of the project location/boundaries:			
B.	PROPOSED PROJECT DESCRIPTION			
1.	Brief description of the current state of the planting location:			

(Inventory of current trees or description of other vegetation in the area)					
				·	
2.	Project Type:	Trees only	Vegetation o	only Combination of both	
For com	bination plantings	s fill out both the Tre	ee Project Description an	nd Vegetation Project Description for your project.	
Tree Project Description: Indicate the number of trees you are applying for, include names and addresses if necessary. Keep in mind each street trees cost approximately \$350 each. A \$5,000 grant application will pay for a maximum of 14 trees total. It is encouraged that other funding sources are sought in order to maximize your project. See Greening Neighborhoods Grant Guidelines, section title Eligibility for more details. All tree species and quantities are determined by the Cities Certified Arborist prior to approval.					
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C. Veget	•	-	•	nes and quantities you are applying for, see section ist on the Forest Spokane Initiative web page unde	
Please a	ttach additional ir	nformation to the er	nd of the application if n	needed.	
3.	Competitive Gran	it Criteria: On quest	t ion 2 If you selected Proje	ect Type – Vegetation only proceed to question 4.	
Number	of trees propose	d, paid for with Gre	eening Grant funding on	nly (14 trees max.):	
Will you	ı contribute other	funding to your tre	ee planting project?	Yes No	
Total ad	Iditional funding o	contributed to my p	project from other sourc	ces \$	
Funding	contribution per	source(s): Include	name & total funding po	per source	
l.					_

	ded on the list. es Name: Quantity:
Spoka	e include all species and the quantities you are applying for. See the Suggested Vegetation list on the Forest and Initiative page for suggested species. Contact the Project Coordinator for approval of additional species not
C.	VEGETATION PROJECT – SPECIES FORM
	Adjacent resident Neighborhood Council Other:
	will maintain by means of watering the trees and/or vegetation planted:
Liabil	Water Source: A water source for new plantings must be available. Provide name(s) of residents or organizations to provide water to trees and vegetation. The Maintenance Agreement & Waiver & Release of ity must be signed by all parties who agree to maintain the site through watering and weeding in order to
4.	Maintenance Plan: Describe your maintenance plan.
List th	ne name of any other organizations that will be involved in helping at your volunteer planting event:
Will y	you be coordinating a volunteer planting event? Yes No
Total	number of trees:
Pleas	e attach additional information to the end of the application if needed.
IV.	
III.	

Please attach additional information to the end of the application if needed.				
D. CERTIFICATION & APPLICATION SUBMISSION				
I, hereby certify that the above information is correct and represents the				
consensus of the residents in the area described. I further certify that I have read the requirements and instructions in				
this application package and understand and agree to them.				
Name: Date:				

The deadline for the Greening Neighborhood's grant <u>application is due by June 30, 2015.</u> If you need additional space, feel free to attach subsequent pages to the application.