

Safe, Clean Water and Natural Flood Protection Program



Date of Application Submission:		Name of Organization or Individual Responsible for Taxes and Insurance:							
			Address:			City:			Zip Code:
Name of Contact:			Telephone:		one:	Email:		I	
Project Name	?:			I	Project S	tart State	2:	Proje	ect End Date:
Project Location:				Requested Grant Amount (not to exceed \$5,000):				netary or In-Kind Match ount:	
				Sco	Dring Crite	ria			
0 = No 3 = Yes, ad					4 = Yes, w	equate info provided with good details			
		ittle infoi	rmation pro			5 =	Yes, clearl	y deta	ails information
Yes	No	Criteria			a ra a film?		Score (0-5)		
		Does project achieve one or more of the A2 benefits? Is applicant an eligible entity to apply for grant?							
		Is applicant able to identify responsible person/entity to sign agreement and take responsibility for tax and insurance, if necessary?							
		Did applicant attach a writte included: Proposed activities Expenditure Plan Schedule			en project scope that		for t	juires a "Yes" response hese questions in order e eligible for mini-grant	
		Did applicant provide explanation of 25% match funding?				tch			
		Is the project located in Santa Clara County?							
		 Does the project provide one or more of the A2 benefits: Help identify potential water reduction technologies and methods Research studies that determine potential cost- effectiveness of water conservation research projects 							
		Does the project include educational and/or outreach opportunities related to the Priority A2 goals?				outreach			
		Will there be opportunities for t participate in outreach and/o			or the Board of Directors to				N/A
		Does the project have measurable			asurable o	utcomes	?		

	Are outcome measurements included as part of the project's proposed activities?	
	TOTAL POINTS (20 max)	

Application Reviewed By:

Safe, Clean Water Grant Program Staff						
Program Administrator	Signature	Date	Comments			
Manager	Signature	Date	Comments			
		Technical Sta	Iff Unit Name:			
Staff Name	Signature	Date	Comments			
Manager Name	Signature	Date	Comments			

Funding Recommendation:			
Staff recommends the following action:	🗌 Do Not Fund	Fund \$	
Reason for recommendation:			

Approved By:

Rick L. Callender Chief of External Affairs

Date