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APPLICATION FOR SECTION 319 NONPOINT SOURCE MANAGEMENT PROGRAM GRANT

State Form 49367 (R5 / 2-16)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

INSTRUCTIONS: *1. **Read the application instructions** carefully before completing this form.*
2. Mail a completed, signed and dated original application by the deadline to:
IDEM-OWQ-Watershed Planning and Restoration Section
100 North Senate Avenue, MC 65-44 SHADELAND
Indianapolis, Indiana 46204-2251
3. Email an electronic copy of the completed application by the deadline to NPSGRANTS@idem.in.gov
4. Limit your response to the space within this form. Do not attach additional pages of narrative. Do not change the font size.

1. APPLICANT INFORMATION

Name of project

Name of sponsoring organization

Sponsor address *(number and street, city, state, and ZIP code)*

Sponsor organization type *(check one)*
- ☐ Municipality
- ☐ University
- ☐ Nonprofit 501(c)(3)
- ☐ County government
- ☐ State government
- ☐ Federal government

Sponsor taxpayer identification number

DUNS Number

SAM Registration Active? ☐ Yes ☐ No

2. PROJECT CONTACT INFORMATION

Primary contact		Project coordinator *(if different than primary contact)*	
Address and affiliation		Address and affiliation	
Telephone number ( )	FAX number ( )	Telephone number ( )	FAX number ( )
Email address		Email address	

3. PROJECT OVERVIEW

Is any part of the proposed project in a Municipal Separate Storm Sewer System (MS4) area (as defined in 327 IAC 15-13)?
☐ Yes ☐ I have read the application instructions regarding the use of Section 319 funds in these areas and will abide by the federal restrictions.
☐ No
List the names of the MS4 Communities.

Section 319 funds requested *(must be 60% of total project cost)*: $
Match funds *(cash/in-kind services – 40% of total project cost)*: $
Total project cost: $

Budget amounts must match the attached "Budget For Section 319 Application" sheet.

Proposed project start date (*month, day, year*)

Proposed project end date (*month, day, year*)

Nonpoint source activities addressed by project (*Check all that apply and provide additional information as requested*):

☐ **Developing a watershed management plan**
- ☐ Watershed has an approved TMDL
  Title of TMDL:
- ☐ Watershed includes waterbodies in Category 5A on the 303(d) List of Impaired Waterbodies

☐ **Implementing a watershed management plan that meets (or will soon meet) IDEM's WMP Checklist**
☐ 2009 Checklist ☐ 2003 Checklist
Title of watershed management plan:
Approval/anticipated approval date of plan:
Watershed has a approved TMDL
Title of TMDL:

Watershed name(s):

Watershed Hydrologic Unit Code(s):

Names of major water bodies within the project watershed:

Counties and states within the project watershed:

4. WATER QUALITY PROBLEM(S)

4A. *List Assessment Unit ID(s), Assessment Unit Name, and Cause of Impairment for waterbodies within the project watershed as listed on the 303(d) List of Impaired Waterbodies, Category 4A and Category 5A:*

4B. *Describe the water quality problem(s) that you will address with this project, including the nonpoint source water pollution parameters and possible sources of the water quality problem. Include a description of the land use, human activities, ecosystem characteristics, or other appropriate information that will help explain the problem(s). Also include references to any reports, water quality studies or data that support your assessment of the water quality problem.*

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4. WATER QUALITY PROBLEM(S) *(continued)*

4B. *(continued)*

5. PROJECT APPROACH TO SOLVING THE PROBLEM

5A. APPROACH: *Provide a general overview of the proposed project. Your overview should include a description of the goals of the project (what you hope to achieve), and how the project will result in improved water quality. Discuss who will be included in planning and decision making. If this project is implementing a Watershed Management Plan (WMP), identify the critical areas where the best management practices (BMPs) will be implemented, and provide an estimate of the pollutant load reductions expected. If this project is to continue implementing a WMP, describe the progress made so far toward meeting the goals of the WMP.*

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5. PROJECT APPROACH TO SOLVING THE PROBLEM *(continued)*

5A. APPROACH: (*continued):*

5. PROJECT APPROACH TO SOLVING THE PROBLEM *(continued)*

5B. TASKS: *List and describe in detail all the tasks that will be completed by this project. Include quantified products/deliverables produced by each task. List tasks by letter and correlate them to the budget. See application instructions for more information on drafting tasks.*

C. PARTNERS: *List partners that have provided a written commitment to the project and describe how or what they will contribute. Submit electronic letters of commitment from these partners that describe their commitment of time, money, activities, or other specified resources for the project.*

Name of partner	Type(s) of commitment to project success

D. OUTCOMES AND MEASURES OF SUCCESS: *List the specific outcome(s) of your project and how you will measure success through administrative achievements, environmental/water quality benefits, and/or social or behavioral changes. Measures may include identifying changes in land use, calculating pollutant load reductions, measuring success of outreach efforts, monitoring water quality improvements, and assessing habitat improvement (see instructions).*

I. Project outcome:

Measure of success:

II. Project outcome:

Measure of success:

III. Project outcome:

Measure of success:

IV. Project outcome:

Measure of success:

E. FUTURE ACTIVITIES: *List future activities planned or anticipated after the completion of this project. Discuss the group's plans to continue efforts to reduce nonpoint source pollution in the watershed and how they will work toward establishing sustainable sources of funding to support future watershed activities.*

6. PROJECT SCHEDULE	
Time period	**List all Anticipated Activities/Milestones from the Tasks (Section 5.B.) in the Appropriate Quarters**
First quarter	
Second quarter	
Third quarter	
Fourth quarter	
Fifth quarter	
Sixth quarter	
Seventh quarter	
Eighth quarter	
Ninth quarter	
Tenth quarter	
Eleventh quarter	
Twelfth quarter	
Thirteenth quarter	
Fourteenth quarter	
Fifteenth quarter	
Sixteenth quarter	

7. PROJECT AUTHORIZATION

I authorize that to the best of my knowledge the contents of this application are true and accurate. I understand that, if funded, the contents of this application will be used to draft a grant agreement between the Indiana Department of Environmental Management and the Sponsoring Organization as a mechanism for executing the grant project.

_____

Signature of Sponsoring Organization's Authorized Representative Date *(month, day, year)*

Typed Name of the Representative:

Title of the Representative:

Email address of the Representative:

BUDGET FOR SECTION 319 APPLICATION

	Grant-Funded Expenses									Non-Federal match		
TASKS	**Personnel/ Fringe**	**Admin. ***	**Travel**	**Equipment**	**Supplies**	**Contractual**	**Cost-Share**	**Other**	**TOTAL 319 ****	**Cash**	**In-kind**	**TOTAL MATCH ****
Task A									$ 0			$ 0
Task B									$ 0			$ 0
Task C									$ 0			$ 0
Task D									$ 0			$ 0
Task E									$ 0			$ 0
Task F									$ 0			$ 0
Task G									$ 0			$ 0
TOTAL	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	0	0	$ 0

*Administrative expenses are limited to 5% of the total 319 funds.

**Total 319 Expenses and Total Match must match the funds requested on Page1 of the application form.

ITEMIZED EXPENSES – *(Describe the items, services, or expenses associated with each line item for EACH TASK.)*

Personnel/Fringe:
Admin:
Travel:
Equipment:
Supplies:
Contractual:
Other:
Sources of Cash Match:
Sources of In-Kind Match and estimated amount: