# Northwest Missouri Regional Solid Waste Management District, Region A Grant Application

## Fiscal Year 2026 Grant Call Checklist

Before submitting a District Grant application you MUST complete this form and attach to your proposal. Refer to the Application Process in the <u>Guidance Document</u>. Only if you can answer **YES** to all questions on this form should you submit your proposal to the District office. Incomplete applications will not be reviewed.

# Completed FormsYESPage NumberApplicant Profile (Signed & Dated)Executive SummaryImage: Security SummaryExecutive SummaryExecutive SummaryImage: Security Secur

Other Supporting Documentation

The District accepts projects up to \$19,500, but reserves the right to approve larger projects by a two-thirds vote of the District Executive Board.

Signature of Authorizing Official

# Northwest Missouri Regional Solid Waste Management District, Region A Applicant Profile Form

# Name of Project

Type of Project

	Waste Reduction	Composting	Recycling	Education	Market Development			
Choose 1								
Name of Applicant								
Street Address		City	,	Zip	County			
Phone Number Fax Number Federal Employer ID Number or SSN								
Type of Entity (Non-profit, public entity, individual, business)								
Specific Waste (electronics, organic waste, plastics, etc.)Annual Estimated Tons of Waste Diverted								
Specific waste	(electronics, org	anic waste, plasti	cs, etc.)					
	e (electronics, org		Nu	Waste Diverted	d			
Number of Full	- <b>Time Jobs Cre</b> a	ated	Nu Joi Nu	Waste Diverted	d me			

# Applicant Profile Form (continued)

**Brief Project Description** (include associated tasks)

List any District Grant funding received in the past, including project number and amount awarded.

### Name of Project

Amount Requested from District	Amount of Cash or In-Kind Match	Total Project Cost
Name of Authorizing Offical	Name of Project Manag	er
Title	Title	
Phone	Phone	
E-mail	E-mail	
Signature of Authorizing Official	Signature of Authorizing	g Official
Date	Date	

# **Executive Summary**

Write a short description of the grant project. Please explain if any zoning ordinances will apply; or if permits, approvals, licenses or waivers are needed for the project.

# Northwest Missouri Regional Solid Waste Management District, Region A Location and Work Plan

# Location of Project

Task 1		
Task 2		
Task 3		
Task 4		
Task 5		
Task 6		
Task 7		
Task 8		
Task 9		
Task 10		

# Northwest Missouri Regional Solid Waste Management District, Region A Key Personnel, Qualifications and Time Table

Key Personnel and Qualifications

# Time Table

*Please indicate with an X the time required for each task listed on the Task List.* 

Task	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
Quarterly Reports			Х			Х			Х			Х

# **Budget Form**

	Solid Waste District	*Subg						
Budget Category	Requested Funds	Cash Match	In-Kind Match	Total Cost				
Personnel – List each employee paid with District grant funds								
<b>^</b>								
Fringe Benefits								
<b>Contractual Services – List</b>	each professional se	ervice being paid wi	th District grant fur	lds				
		01						
Equipment – List equipment	nt to be purchased v	vith District grant f	inds and provide do	cumentation				
for any item costing \$10,00			<b>- -</b>					
Supplies – List supplies to I	be purchased with D	istrict funds	L	I				
Travel – Max reimburseme	ent \$.37/mile (may cl	nange according to s	state mileage rate sta	andard)				
In-State: Miles \$								
Transportation								
Meals								
Lodging								
Incidentals								
Out-of-State: Miles \$								
Transportation								
Meals								
Lodging								
Incidentals								
Other – List all other items to be paid with District grant funds								
		0						
Total Direct Charges								
Total Indirect Charges								
Total Project Budget			L					
<b>v</b>								

\* Match can be in the form of cash match or in-kind match. Please include an explanation of these costs in your budget notes. You must include documentation for any grant-funded purchase or service costing over \$10,000. This budget may be amended by the NWMRSWMD, with the agreement of the applicant for budgetary or other purposes.

# Permits, Licenses and Local Zoning Laws

Verify that all permits, approvals, licenses, waivers, security interest (i..e. UCC-1 certificate of title, deed of trust, or other security instrument) or title have been or will be obtained prior to award if applicable. If obtained, please attach.

Demonstrate compliance with local zoning laws if applicable.

# **Evaluation Procedures, Match Commitment and Other Documentation**

**Evaluation Procedures -** Describe both quantitatively and qualitatively how the success or benefit of the project will be measured.

### Match Commitment:

Attach letters from all persons supplying cash or in-kind match commitments to the project. Attach all cooperative agreements and/or contracts (tentative and signed), purchase agreements, bids for equipment or service and other documents to indicate the stability of markets, sources of supply for material, and demand for service or product.

### Authorization for use of pictures/images/publications:

Northwest Missouri Regional Solid Waste Management District and the Northwest Missouri Regional Council of Governments is hereby granted permission to use all images provided to them by the Project Manager. Such images may be utilized via web site distribution, monthly newsletters, Annual Reports, and social media outlets. The Project Manager will assume responsibility for obtaining the permissions required for students and such use. This consent will be valid until revoked by written request to the Solid Waste Planner.

### **Other Supporting Documentation**

Attach other documentation, if necessary, for review of project.