

ENVIRONMENTAL MANAGEMENT SYSTEM Project Financial Assistance Form

Project Title:			
EMS:	C	ontact Person:	
Email:	Phone:		Phone:
Assistance Request: _\$ Ma	atching Cash:	\$	Total Project: \$
A. EMS Objective Association			
Check the box that best describes your grant pr	roposal.		
The grant project proposal and EMS objective are one in the same with the same target and action plan.			
☐ The grant project proposal is one or more action steps for a new EMS objective.			
☐ The grant project proposal is one or more action steps for an existing EMS objective.			
Other, please explain:			
Primary objective:			
Component area:			
Target*:			
Metric:			
Baseline*:			
Dropbox link for Action Plan:			
*Include time periods for target and baseline.			
B. Project Proposal (30 points)			
1. Concisely summarize the proposed project	and its expect	ed outcome.	

2. Outline tentative tasks or activities for the project proposal in the following table. Include project related items that

have been completed such as estimates, audits, feasibility studies, plan adoptions, board approvals, etc.

Milestone Task or Activity	Start Date	End Date	Associates - partners, contractors, vendors, etc.

01/2021 cmc DNR Form 542-0650

ENVIRONMENTAL MANAGEMENT SYSTEM

	Project Financial Assistance Form
3.	Provide a more detailed narrative of the project proposal and how it will contribute to continuous improvement (as either an EMS objective or as one or more action steps within an EMS objective). In the narrative, identify the need or problem the proposal will address, elaborate on the milestones in the table above and describe strategies for project implementation.
C. F	Project Impact & Monitoring (40 points)
4.	Explain the expected environmental impact of completing the grant project and achieving its associated EMS objective/target. Identify the geographic region in which the environmental impact is expected to be realized, such as a facility fenceline, municipality, service area, etc. Also, describe the methodology to be used for measuring environmental impact.
4.	objective/target. Identify the geographic region in which the environmental impact is expected to be realized, such as a facility fenceline, municipality, service area, etc. Also, describe the methodology to be used for measuring
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D. Project Budget & Economic Sustainability (30 Points)

7. Enter budget information in the table below. A minimum cash match of 25% is required for items in which financial assistance is requested.

	Budget Item	Assistance Request \$	Local Share – Cash	Total
TO	TALS:			
8.	Are three quotes or estimates for each budget item attached? If not, provide the reason(s). Note: Project proposals may be reject budget items.	☐ Yes ☐ No ted for not includ	ling three quotes c	or estimates for
9.	Provide a detailed budget narrative related to this project and spe	ecify how grant fu	nds will be used.	

10. Identify how the project will be financially sustained once project funds are expended. Include an explanation for the continuance of such items as labor, equipment maintenance, service contracts, etc.

01/2021 cmc 3 DNR Form 542-0650

ENVIRONMENTAL MANAGEMENT SYSTEM

Project Financial Assistance Form

11.	Describe any expected economic benefits, resulting from the completion of the associated EMS objective, such as
	cost avoidance or revenue generation. As applicable, estimate the payback period for the project cost and explain
	how it was calculated.

12. As applicable, describe how economic benefits, either immediate or after a payback period, will in turn, benefit members of your service area.

Please Note ineligible costs: Financial assistance shall not be provided or used for costs including, but not limited to, the following:

- 1. Taxes, legal costs, or contingency funds.
- 2. Passenger vehicles, vehicle registrations, or vehicle/equipment leases.
- 3. Proposal preparation or contractual project administration.
- 4. Land acquisition or real estate leases.
- 5. Office furniture, office equipment, or software.
- 6. Costs for which payment has been or will be received under another federal, state, or private financial assistance program.
- 7. Costs incurred before a written agreement between the applicant and the department has been executed.

E. Signature

I affirm the information provided on this Application is true, and that I will provide all other information requested for further substantiation. I agree that if awarded financial assistance for a project(s), I will execute the contract the DNR provides for conveying those funds, which contract will include but not be limited to conditions for expending those funds, and for making reasonable accounting of those expenditures and matching funds or in-kind expenses.

In order to determine funding eligibility, the Department reserves the right to verify any information presented in the application and to determine the applicant's compliance status with applicable Local, State and Federal statutes and regulations. If an applicant is selected to receive financial assistance, an offer of financial assistance may be rescinded if the applicant is determined to be out of compliance with applicable Local, State and Federal regulations.

Signature, Title	Date

F. Forms

Include signed copies of required forms with your application. Forms may be found on the EMS website: http://www.iowadnr.gov/Environmental-Protection/Land-Quality/Waste-Planning-Recycling/Solid-Waste-EMS/EMS-Participants

Minority Impact Statement