California Natural Resources Agency Department of Parks and Recreation

Land and Water Conservation Fund Application Form

Project Name:	County:	
Total Project Cost:	Minimum Grant Request:	
Total Pre-Award Planning Costs:	Maximum Grant Request:	
Project Site Address:		
Project Site Latitude and Longitude:	Neares	t Cross Streets:
Grant Applicant (Entity):		
Grant Applicant Mailing Address:		
Authorized Representative (as shown in the Resolution)		
Name:	Title:	
Email:	Phone:	
Day-to-Day Contact (if different from the Authorized Representative)		
Name:	Title:	
Email:	Phone:	
Type of Project:	Acres to be Acquired:	
	otal Acreage to be Placed Inder LWCF Protection:	
GRANT SCOPE : I represent and warrant that this APPLICATION describes the intended use of the requested GRANT to complete the RECREATION FEATURES and MAJOR SUPPORT AMENITIES proposed through the PROJECT. I agree with the APPLICATION and procedural requirements described in the Application Guide and GRANT ADMINISTRATION GUIDE. I declare under penalty of perjury, under the laws of the State of California, that the information contained in this APPLICATION PACKET, including required attachments, is accurate.		
Signature of the Authorized Representative (as shown in the Resolution) Date		
Print Name	Title	