

**State of California – Natural Resources Agency
Department of Parks and Recreation
Land and Water Conservation Fund
Application Form – Local Agency Competitive Program**

PROJECT NAME	Total Project Cost \$_____	
	Maximum Grant Request \$_____	
	Minimum Grant Request \$_____	
PROJECT ADDRESS(current/future entrance w/ zip code)	(Match will be the difference between the approved grant amount and the above total project cost.)	
	Nearest Cross Street	County of Project
GRANT APPLICANT (entity applying for the Grant)	Grant Applicant's Mailing Address	
Project Address Latitude and Longitude	Degrees: Minutes: Seconds:	
AUTHORIZED REPRESENTATIVE AS SHOWN IN RESOLUTION		
_____ Name (<i>typed or printed</i>) and Title	_____ Email address	_____ Phone
DAY-TO-DAY CONTACT for ADMINISTRATION of the GRANT (<i>if different from AUTHORIZED REPRESENTATIVE</i>)		
_____ Name (<i>typed or printed</i>) and Title	_____ Email address	_____ Phone
For Acquisition: Total land acquired will be _____ acres. Total acreage to be placed under LWCF Protection shown on the Boundary Map will be _____ acres:	For Development: Total acreage to be placed under LWCF Protection shown on the Boundary Map will be _____ acres:	
GRANT SCOPE: I represent and warrant that this Application Packet describes the intended use of the requested Grant to complete the Recreation Features and Major Support Amenities listed in the attached Grant Scope/Cost Estimate Form. I agree with the Application and procedural requirements described in the Application 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 Authorized Representative as shown in Resolution		_____ Date
Print Name:_____		
Title: _____		