

**State of California – The Resources Agency  
 Department of Parks and Recreation  
 Land and Water Conservation Fund  
 Application Form – State Agency Pro Rata Competitive Program**

PROJECT NAME	Total Project Cost                    \$ _____	
	Grant Request                                \$ _____ (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: _____		