



**STATE OF CALIFORNIA – THE RESOURCES AGENCY – DEPARTMENT OF PARKS AND RECREATION  
PROJECT APPLICATION**

**2006 Bond Act (Proposition 84) - NATURE EDUCATION FACILITIES PROGRAM**

PROJECT NAME		Tier (Select one) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E
PROJECT PHYSICAL ADDRESS (including zip code)		Requested GRANT Amount    \$ _____
Nearest Cross Street	County of PROJECT Location	Total Other Fund Sources    \$ _____
		Est. Total PROJECT Cost    \$ _____

APPLICANT (CITY, COUNTY, DISTRICT, JPA, STATE AGENCY OR NON-PROFIT ORGANIZATION)

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Describe the PROJECT SITE LOCATION:  
 \_\_\_\_\_ Acres owned in fee simple by Applicant  
 \_\_\_\_\_ Acres available under \_\_\_\_\_ year proposed or existing land tenure agreement.  
 \_\_\_\_\_ Total Acreage of the PROJECT site

DIRECTOR/PRESIDENT/CEO

_____	_____
Name ( <i>typed or printed</i> ) and Title	Mailing Address
- -	_____
Phone	Email address

DAY-TO-DAY CONTACT for ADMINISTRATION of the GRANT (*if different from AUTHORIZED REPRESENTATIVE*)

_____	_____
Name ( <i>typed or printed</i> ) and Title	Mailing Address
- -	_____
Phone	Email address

**GRANT SCOPE:** I represent and warrant that this APPLICATION PACKET describes the intended use of the requested GRANT to complete the FEATURES and MAJOR SUPPORT AMENITIES listed in the attached GRANT SCOPE/Cost Estimate Form. I certify that the information contained in this APPLICATION PACKET, including required attachments, is accurate.

AUTHORIZED REPRESENTATIVE AS SHOWN IN RESOLUTION OR CERTIFICATION LETTER

_____	_____
Signature AUTHORIZED REPRESENTATIVE	Date
- -	_____
Name ( <i>typed or printed</i> ) and Title	Email address      Phone