## State of California – The 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	\$
	(Match will be the difference between the approved	
PROJECT ADDRESS (current/future entrance w/ zip code)	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 A	Address
Project Address Latitude and Longitude	Degrees:	
	Minutes:	
	Seconds:	
AUTHORIZED REPRESENTATIVE AS SHOWN IN RESOLUTION		
Name (transdor printed) and Title		Dhana
Name (typed or printed) and Title Email address Phone   DAY-TO-DAY CONTACT for ADMINISTRATION of the GRANT (if different from AUTHORIZED Phone		
REPRESENTATIVE)		
Name (typed or printed) and Title Ema	ail address	Phone
For Acquisition:	For Development:	
Total land acquired will be acres.	Total acreage to be placed under 6(f)(3) Protection	
Total acreage to be placed under 6(f)(3) Protection	shown on the Boundary Map will be acres:	
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 Res	olution	Date
Print Name:		
Title:		