

**CALIFORNIA WILDLIFE PROTECTION ACT OF 1990
HABITAT CONSERVATION FUND GRANT PROGRAM
PROJECT APPLICATION FORM**

**RARE, ENDANGERED, THREATENED, OR
FULLY-PROTECTED HABITAT CATEGORY**

PROJECT NAME	Grant Request Amount \$ _____		
	Required Match Amount \$ _____		
	TOTAL PROJECT COST \$ _____		
GRANT APPLICANT (agency and address, include zip code)	COUNTY		
	PROJECT ADDRESS (OR NEAREST CITY)		
	NEAREST CROSS STREET		
APPLICATION CONTACT PERSON			
Name (typed or printed) and Title _____ Email Address _____ Phone _____ Fax _____			
PERSON WITH DAY-TO-DAY RESPONSIBILITIES FOR PROJECT IF DIFFERENT FROM AUTHORIZED REPRESENTATIVE			
Name (typed or printed) and Title _____ Email Address _____ Phone _____ Fax _____			
GRANT APPLICANT'S REPRESENTATIVE AUTHORIZED IN RESOLUTION			
Name (typed or printed) and Title _____ Email Address _____ Phone _____ Fax _____			
PROJECT land will be:			
_____ acres to be acquired in fee simple by applicant.			
_____ acres to be acquired as permanent easement			
Easement explanation:			

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 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.			
SIGNED			DATE
	Grant Applicant's Authorized Representative as shown in Resolution		
NAME			