Appendix A: Final Application Content & Forms

Your completed application should include the following:

REQUIRED:

FORM A: Climate Resilience Fund Application

FORM B: Budget Detail

Statement of Match (see instructions on Form B)

Site/Location Map (ex. Google Maps)

Projects for which Applicant is not Site Owner – Letters of Permission from Property Owner(s)

Projects Charging Indirect – A copy of your agreement noting your approved Indirect Rate

SUPPLEMENTAL MATERIALS:

Additional Site Maps & Photos

Existing Project Documents (Studies, Plans, Designs)

Letters of Support

FORM B: BUDGET DETAIL

TABLE A: Project Tasks, Deliverables, Estimated Completion and Estimated Cost 1,2

| Task # | Project Task Description | Deliverables | Responsible Party | Estimated Completion | Grant | Match | Total Task Cost |
|---------|--------------------------|--------------|----------------------|----------------------|-----------|----------|--------------------|
| Task 1 | Grant | | | Month 2 | \$0 | \$5,000 | \$5,000 |
| | Agreement | | | | | | |
| | Execution | | | | | | |
| Task 2 | Engineering | | | Month 6 | \$40,000 | \$15,000 | \$55,000 |
| | Design, | | | | | | |
| | Permitting & | | | | | | |
| | Procurement | | | | | | |
| Task 3 | Conduct | | | Month 7 | \$30,000 | \$7,500 | \$37,500 |
| | Invasive | | | | | | |
| | Management | | | | | | |
| Subtask | Hydraulic | | | | | | |
| 3.1 | Conveyance | | | | | | |
| | System | | | | | | |
| | Installation | | | | | | |
| Task 4 | Install | | | Month 8 | \$255,000 | \$20,000 | \$275,000 |
| | Roadway | | | | | | |
| | Culvert | | | | | | |
| | Structure | | | | | | |
| Task 5 | Clear Pond | | | Month 9 | \$12,500 | \$7,500 | \$20,000 |
| | Equalization | | | | | | |
| | Pipes | | | | | | |
| Task 6 | Install | | | Month 10 | \$0 | \$0 | \$0 |
| | Secondary | | | | | | |
| | Flood | | | | | | |
| | Mitigation | | | | | | |
| | Conduit | | | | | | |
| Task 7 | Town GSI | | | Month 12 | \$0 | \$30,000 | \$30,000 |
| | Improvement | | | | | | |
| | Coordination | | | | | | |
| Task 8 | Monitoring | | | Month 12 | \$12,500 | \$2,500 | \$15,000 |
| | and | | | | | | |
| | Operations & | | | | | | |
| | Management | | | | | | |
| | | | | Totals | \$350,000 | \$87,500 | \$437,500 |

^{1.} Please add additional rows for Tasks/Subtasks as necessary.

Table B: Projects Costs By Budget Category¹

^{2.} If you have submitted a 2024 MRP Action Grant application for your project, your MRP Scope and Budget Template (Attachment B, Scope and Budget tab) fulfills the Table A requirement.

| Budget Category | y^2 | Requested Grant Amount | Match Amount | Total Cost of Category | | | | |
|--------------------|---------------------|------------------------------|---------------------------------|-------------------------------|----------------------|--------------|-------------|--------------|
| 1. Salary and Frin | nge | | | | | | • | |
| Name | Title | Salary | Percent Time Charged to Project | Fringe (as percent of salary) | Total Salary Cost | | | |
| Carol O'Donnell | Board Chair | \$31.80/hr | 80 | | \$2,544.00 | \$0.00 | \$2,544.00 | \$2,544.00 |
| Mark Gollooly | District Manager | \$31.80 | 160 | | \$5,088.00 | \$0.00 | \$5,088.00 | \$5,088.00 |
| Board Members | Board Members | \$31.80 | 280 | | \$8,904.00 | \$0.00 | \$8,904.00 | \$8,904.00 |
| 2. Indirect Costs | | | | | | | | |
| | | | | | | | | \$0.00 |
| 3. Supplies | | | | | | | | |
| | | | | | | | | \$0.00 |
| 4. Equipment | | | | | | | | |
| | | | | | | | | \$0.00 |
| 5. Travel and Tra | ining | | | | | | | |
| 6.0 1 | | | | | | | | |
| 6. Contractual | | | | | | \$56,000.00 | \$35,714.00 | \$91,714 |
| 7. Construction | | | | | | | | |
| | | | | | | \$294,000.00 | \$35,250 | \$329,250.00 |
| 8. Other | | | | | | | | \$0.00 |
| | | | | | Totals | \$350,000 | \$87,500 | \$437,500 |

- 1. If you have submitted a 2024 MRP Action Grant application for your project, your MRP Scope and Budget Template (Attachment B, Budget Summary and Personnel tab) fulfills the Table B requirement.
- 2. Budget Category Instructions:
 - a. **Salary and Fringe:** Include salaries and fringe benefits paid for work performed on the project. "Salary" should include the rate per hour by position. "Fringe benefits" are employment benefits given in addition to wages or salary, such as health, retirement, etc. Grant funds are typically not used to pay municipal employee's salaries; these expenses should be used as match where possible.
 - b. **Indirect Costs:** Indirect can only be charged by those entities that have an approved rate.
 - **c. Supplies:** Includes expendable items, such as office, field and lab supplies, film, postage, equipment costing less than \$1,000, books, etc.
 - d. **Equipment:** Includes any items of equipment costing more than \$1,000.
 - e. **Travel & Training:** Includes transportation costs incurred during work, such as tolls, costs of using vehicle (vehicle costs = number of miles x mileage rate).
 - f. **Contractual:** Includes procured services, such as consultants, engineering and design services, etc. If contractual work has not yet been bid, provide estimated costs.

- g. Construction: Includes costs associated with construction, including permit fees.
- h. Other: Includes costs not described by previous categories.

REMINDER – ATTACH STATEMENT OF MATCH

Applicants must include a signed statement from your organization's authorized signatory acknowledging and accepting the following:

- The organization commits to matching 25% of the total grant request using cash contributions.
- All matching funds provided by the Applicant or direct project partners have been approved and/or appropriated. (*Please denote sources of match and any match contributions that are pending.*)

BSFD/LT committes to matching 25% of the total grant request using cash/inkind contributions. (see budget page for how appropriated)

Tarol O'Donnell

HOW TO SUBMIT YOUR APPLICATION – Deadline is Friday, July 26th at 12PM

Submit the completed and signed application, along with all attachements, by email to:

Kimberly Korioth kimberly.korioth@dem.ri.gov

Please look for an email confirming receipt of your application within 24 hours of submittal. If you do not receive a confirmation email, your application has not been received. In this instance, please reach out by phone the next business day for assistance to ensure we receive your submittal.

If you have any questions on this application, RIDEM staff are available to assist you. Please contact Kimberly Korioth at kimberly.korioth@dem.ri.gov or 401-633-4578.