

2 GRANT APPLICATION SUMMARY AND AUTHORIZATION FORMS

2.1 GRANT APPLICATION SUMMARY*

* This will be filled into the online application form.

Project Information

Applicant Name _____
(city, county, tribal government, district, other local or state government entity)

Project Title _____
(Describe the specific project. Example: Tramway Creek Mine Reclamation)

Brief Project Description _____
(For example: reclamation, brownfields, VCRA project, oil and gas well plugging, hazardous substances cleanup, etc.)

Project Type

Projects are evaluated either as a mineral development project **or** a crucial state need project. Please indicate which category this project falls into below and select all applicable subcategories:

Mineral Development Project

- ☐ This project repairs, reclaims or mitigates environmental damage to natural resources from non-renewable resource extraction or hazardous materials (check all applicable boxes).
 - ☐ Mining reclamation
 - ☐ Oil and gas well plugging and reclamation
 - ☐ Brownfields
 - ☐ Hazardous substances cleanup
 - ☐ Voluntary Cleanup and Redevelopment Act project
 - ☐ Superfund area
 - ☐ Other _____

OR

Crucial State Need Project

- ☐ This project is a crucial state need (For eligibility, projects must be able to check all boxes below).
 - ☐ Project protects Montana's environment
 - ☐ Project is of statewide or regional importance
 - ☐ Project prevents or eliminates severe damage to natural resources
 - ☐ Supporting documentation has been provided (see [Crucial State Need Documentation](#))

Project Location

Latitude (decimal degrees) _____ Longitude (decimal degrees) _____

Senate District _____ House District _____

County(s) _____

Nearest City/Town(s) _____

Project Schedule

Estimated project start date: _____ Estimated project end date: _____

Project Budget

DNRC RDG Request _____

Total Other Funding Sources _____

Total Project Cost _____

Applicant Contact Information

1. Authorized Person _____
(Person authorized to enter into a grant agreement with DNRC.)

Title _____

Mailing Address _____

City, State, Zip _____

Telephone _____ Email _____

2. Contact Person _____
(Person to contact about the proposed project. Must be knowledgeable about the project.)

Title _____

Mailing Address (if different from applicant) _____

City, State, Zip _____

Telephone _____ Email _____

3. Project Engineer/Consultant _____
(Person to contact with questions about the proposed project)

Company Name _____

Mailing Address (if different from applicant) _____

City, State, Zip _____

Telephone _____ Email _____

4. Additional Contact _____
(Person authorized to enter into a grant agreement with DNRC.)

Title _____

Mailing Address _____

City, State, Zip _____

Telephone _____ Email _____