



**LOCAL GOVERNMENT GRANT PROGRAM**

***APPLICATION***

Local Government \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Telephone \_\_\_\_\_ E-Mail \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_

Estimated Population as Reported by the U.S. Census (<https://www.census.gov/en.html>) :

\_\_\_\_\_

Estimated Total Project Cost: \$ \_\_\_\_\_

Total Requested Grant Funds: \$ \_\_\_\_\_

Other Funding Sources (If any): \_\_\_\_\_

OBJECT (i.e. personnel, equipment, printing, etc.)	GRANT FUNDS	MATCHING FUNDS	TOTAL COST

**Project Time Frame:** Please complete the following project timetable to include any project/program milestones and anticipated start and end dates.

MILESTONE	START DATE	END DATE
Process material for grinding		
Receive award notification from the Deep South Authority		