

Lawrence Walbridge Reuse Fund Grant Application



Central Vermont Solid Waste Management District ❖ 137 Barre Street ❖ Montpelier, VT 05602
802/229-9383 ❖ 800/730-9475 ❖ schoolcompost@cvswwmd.org

Before completing this application, please consult the *Grant Guidelines*. Please print or type so that the application is readable. After an application is received, no additions or changes can be made to it, unless requested by the Grant Review Committee. Incomplete applications, as well as those transmitted by facsimile machine will not be accepted.

Applicant/Organization Name _____ **SSN/VT Tax ID#** _____
(Business, Organization or Individual Applying)

Grant Amount Requested: \$ _____

Contact Person _____

applying as: (check one)

Mailing Address _____

- Individual
- Community Group
- Non-Profit
- Business

City/Town _____ **Zip** _____

Telephone _____

E-mail _____

Website Address _____

APPLICATION MATERIALS REQUIRED: Please complete the application and sign below.

- **Proposed Project Description.** Please tell us why you are asking for funding and what you intend to do with it. Be as specific as possible about anticipated benefits. Identify realistic benchmark(s) by which the success of your proposed project will be measured.
- **Budget:** Please attach a budget in the manner advised in the *Grant Guidelines*. The attached Budget Worksheet may be used as a template.

How did you find out about the LWRF Grant Program?

- District Mailing
- Friend/Colleague
- District Web Page
- Previous Program Participation

- Town Official: _____
- Advertisement in: _____
- Business Assistance/Loan Organization: _____
- Other: _____

In signing below, I attest that all information provided in this application is true and accurate to the best of my knowledge.

Applicant's Signature

Date

ORGANIZATIONAL BACKGROUND

For Individuals applying, enter N/A where questions do not apply.

Owner(s): State name(s), and the form and percentage of ownership in the case of a partnership or other shared ownership plan.

Type of Business/Organization: State the nature of the organization.

Goals/Mission Statement:

Location: (if different from address on cover)

Current Personnel:

- # Of full-time employees -
- # Of part-time employees -
- # Of volunteers -

Products & Customer Base:

Describe the products or services you/your organization offer(s) customers or the community and the characteristics of the customer base targeted by your organization's products/services. (Age groups, interests, needs, wholesale vs. retail, etc.)