



Florida Fish and Wildlife
Conservation Commission

MyFWC.com

Florida Boating Improvement Program Boater Education Grant Application

FOR OFFICE USE ONLY

Grant Application Number :

Date Received:

Fill in all sections that apply – Leave all other sections blank

I – APPLICANT INFORMATION

a. Applicant:

b. Federal Employer Id. No.:

c. Project Manager Name:

Project Manager Title:

d. Mailing Address:

City:

Zip Code:

e. Shipping Address:

City:

Zip Code:

f. Telephone:

Fax:

Email:

g. District Numbers:

State House:

State Senate:

County Commission:

II – PROJECT SUMMARY

a. Project Title:

b. Project Cost:

Total Cost: \$ _____

Grant Amount Requested: \$ _____

c. Project Type(s):

Classroom Education

Printed Materials (boater guides, brochures, pamphlets, etc.)

Kiosks / Signs

Portable Exhibits (tabletop display, trade show exhibit)

Interactive Displays

Broadcast Media (TV/radio PSA, billboard, etc.)

Print Media (magazines, newspapers)

Promotional Items (PFDs, key chains, whistles, etc.)

d. Project Summary:

III – PROJECT ELEMENTS

Describe all materials for distribution, educational programs, and displays. See instructions for the information required.

a. Materials for distribution:

b. Educational programs

c. Displays

IV – PROJECT NEED

a. List Primary Need for Project:

Safety

High Demand by Users

Environmental Needs of the Area

Recommended by FWC Staff

Other:

Lack of In-house Capability

b. Need Statement:

V – BOATER SAFETY

Explain how the project may affect boater safety.

VI - PERMITS

a. Does the project require a permit? Yes No

b. If Yes, what type: Local State Other, explain:

c. Status of Permit Application: Not yet applied for Applied for, pending Approved

VII – BUDGET

a. Has a detailed cost estimate been developed for this project? If yes, attach a copy to application.

Yes, Preliminary Yes, Final No

b. PROJECT COST: NON-CASH FUNDS

Cost Item	Applicant	Other Source (List in Section VIII below)	Do Not Use This Column	TOTAL
Administration	\$	\$		\$
In-Kind Project Management	\$	\$		\$
In-Kind Labor	\$	\$		\$
In-Kind Materials	\$	\$		\$
In-Kind Equipment	\$	\$		\$
Total Non-Cash Funds	\$	\$		\$

c. PROJECT COST: CASH FUNDS

Cost Item	Applicant	Other Source (List in Section VIII below)	Grant Request	TOTAL
Administration / Project management	\$	\$	\$	\$
Materials for distribution	\$	\$	\$	\$
Educational programs	\$	\$	\$	\$
Displays	\$	\$	\$	\$
Other:	\$	\$	\$	\$
Total Cash Funds	\$	\$	\$	\$

d. TOTAL FUNDS (Non-cash + Cash)	\$	\$	\$	\$
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VIII – OTHER SOURCE OF FUNDS (STATUS)

a. Federal State/Local Loan Agency: _____

b. Grant Name: _____ Amount \$ _____

c. Approval Status: Approved Pending Intend to Apply, Date: _____

a. Federal State/Local Loan Agency: _____

b. Grant Name: _____ Amount \$ _____

c. Approval Status: Approved Pending Intend to Apply, Date: _____

a. Federal State/Local Loan Agency: _____

b. Grant Name: _____ Amount \$ _____

c. Approval Status: Approved Pending Intend to Apply, Date: _____

IV – APPLICATION ATTACHMENTS CHECKLIST

Include an electronic copy on CD or floppy disk and seven (7) photocopies of the application with attachments.

Inc.	--- Required Attachments ---
<input type="checkbox"/>	a. Cover Letter: application transmittal cover letter (Identify priority rank with multiple applications).
<input type="checkbox"/>	b. Application: One (1) application with original signature from authorized individual.
<input type="checkbox"/>	c. Project Proposal: a detailed description of project as outlined in the application instructions.
<input type="checkbox"/>	d. Resolution: An adopted resolution, by the Governing Body, authorizing that the Project Manager has the authority to apply for and administer the grant on behalf of the applicant. If the Applicant is applying on behalf of another public entity, then a Memorandum of Understanding between the Applicant and the public entity must also be submitted.
--- Optional Attachments ---	
<input type="checkbox"/>	e. Permits: Photocopies of necessary project permit(s) or permit application(s). If exempt, provide notification of exemption from permitting agency.
<input type="checkbox"/>	f. Detailed Cost Estimate: Cost estimate in the form of a formal bid, written quote from proposed vendor or an engineer's cost estimate.
<input type="checkbox"/>	g. Plans: preliminary design/engineering plans (if completed).

APPLICANT SIGNATURE

Application is hereby made for the activities described herein. I certify that I am familiar with the information contained in the application, and, to the best of my knowledge and belief, this information is true, complete, and accurate. I further certify that I possess the authority including the necessary requisite property interests to undertake the proposed activities.

I also certify that the Applicant's governing body is aware of and has authorized the Project Manager as the official representative of the Applicant to act in connection with this application and subsequent project as well as to provide additional information as may be required. By signature below, the Applicant agrees to comply with all applicable federal, state, and local laws in conjunction with this proposal and resulting project so approved.

Print/Type Name

Title

Applicant Signature

Date

STATE OF FLORIDA, COUNTY OF (_____)

Personally appeared before me this _____ day of _____, 200__, _____, who subscribed and swore to the above instrument in my presence.

Notary Public Name: _____

My commission expires: _____

NOTE: Instruction and further information regarding this application and the Florida Boating Improvement Program can be found in the Florida Boating Improvement Program Procedure Guide or you may contact the Program Administrator at: Florida Fish and Wildlife Conservation Commission, Florida Boating Improvement Program, 620 South Meridian Street, Tallahassee, FL 32399-1600; or call (850) 488-5600; or email fbip@MyFWC.com.

**FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION
FLORIDA BOATING IMPROVEMENT PROGRAM**

Instructions for Completing the Boater Education Grant Application

GENERAL INSTRUCTIONS

- Submit one (1) original and seven (7) photocopies of the application with attachments.
- Submit an electronic copy of application on CD or floppy disk.
- Staple application in upper left-hand corner, or clip with one binder clip. **Do not place in a spiral binder, three-ring binder, or report cover.**
- Please place a tabbed divider between each attachment.
- Please make all photocopies of attachments on paper no larger than 11” x 17”.

I – APPLICANT INFORMATION	
a. Applicant:	Enter the name of the county, municipality, or other governmental entity applying for the grant.
b. Federal Employer Id. No.:	Enter the applicant’s Federal Employer Identification (FEID) Number. Payment will be sent to the address associated with this FEID number.
c. Project Manager Name: Title:	Enter the name and title of the person in charge of the project. All correspondence will be sent to this person.
d. Mailing Address: City: Zip Code:	Enter the mailing address for the Project Manager. All correspondence will be sent to this address.
e. Shipping Address: City: Zip Code:	Enter the physical address for the Project Manager (no post office boxes) for delivery of overnight packages.
f. Telephone No.: Fax No.: E-mail:	Enter the telephone number, fax number, and email address where the Project Manager may be contacted during regular business hours.
g. District Numbers:	Enter the District numbers for the State House, State Senate and the County Commission.

II – PROJECT SUMMARY	
a. Project Title:	Provide a brief title for the project.
b. Project Cost:	Enter total amount of project cost, including only the eligible project elements where grant funds will be used. Enter the amount of funds requested from FBIP.
c. Type of Application:	Check all that apply.
d. Project Summary:	Provide a brief description of the goal of the project, the work to be done and the expected outcome or final product.

III – PROJECT ELEMENTS	
a. Materials for distribution	Describe all materials for distribution including type, quantity,
b. Educational programs	Describe all educational programs including
c. Displays	Describe all displays including size of display, material, and how the display will be displayed.

IV - PROJECT NEED	
a. List Primary Need for Project:	Check the category that is most applicable.
b. Need Statement:	Briefly describe why this project is needed. Explain any existing problems and how this project will correct the problem, or describe how this project will enhance recreational boating in the local community.

V – BOATER SAFETY	
a. Explain how the project may affect boater safety whether positively or negatively.	Provide explanation of how the project may improve boater safety (i.e. increased education, increased law enforcement, etc.) or, explain any potential boater safety hazards and how they will be corrected. Also, please indicate if the project will have no effect on boater safety.

VI – PERMITS	
a. Florida Department of Environmental Protection	Check status of all permit applications. If project does not require permits, or project is exempt from permitting requirements, check “N/A”. If available, attach a photocopy of all permits or permit applications. If project is exempt, attach a copy of exemption notification.
b. Florida Fish and Wildlife Conservation Commission	
c. U.S. Army Corps of Engineers	
d. Local and Others (If needed)	

VII – BUDGET	
a. Has a detailed cost estimate been developed for this project?	Indicate whether a preliminary or final cost estimate has been developed. If yes, attach a copy of the estimate to the application.
b. PROJECT COST - NON-CASH FUNDS*	Enter amount of in-kind matching funds for each cost item. Amounts in “Other” column should include in-kind funds from any third-party agreements (provided by someone other than the applicant). *Please note: All applications must include some form of non-cash matching funds.
c. PROJECT COST - CASH FUNDS	Enter amount of funding to be provided by the applicant and other sources. Enter the amount of funding requested in the column labeled “FBIP.”
d. TOTAL FUNDS	Sum of non-cash funds and cash funds for each column.

VIII – OTHER SOURCE OF FUNDS (Partnerships)	
Include information on funding from sources other than FBIP or applicant. Enter information for each funding source.	
a. Funding Source:	Check source of funds: Federal grant, State/Local grant, or loan.
b. Grant Name:	Enter name of grant program.
c. Approval Status:	Enter status of grant/loan application. If “Intending to Apply”, enter date of application deadline.

VIII – APPLICATION ATTACHMENTS CHECKLIST
Indicate which attachments have been included with the application. Required attachments must be included or application will be deemed incomplete. Optional attachments may be omitted, but applications with optional attachments included will receive a higher score during evaluation.
Please place a tabbed divider between each attachment. Submit one original (with original signature) and seven (7) photocopies of the entire application with attachments.
Completed applications should be in the following order: Cover Letter, Application Form, Project Proposal, Resolution, Permits/Permit Applications (if included), Detailed Cost Estimate (if included), Plans (if included).

PROJECT PROPOSAL

The Project Proposal should be a detailed description of the project and should include the following elements:

- a. **Project Description:** A detailed description of the project including what the project will produce or accomplish, the audience the project will target, and how the project will serve the needs of boaters in your area.
- b. **Specific Tasks:** Describe the work that will be done in order to complete the project.
(For example: Task: Print and distribute 10,000 boater education guides, or Task: Conduct bi-weekly boater education classes)
- c. **Timetable:** Include a proposed schedule for when tasks are to begin and when they will be completed.