

Applicant Organization:

Geauga-Trumbull Solid Waste Management District

Application for 2024-2025 Drop-off Improvement Grant (DIG)

May attach additional sheets if necessary

1) Organization, Agency, or Business Information

who will have access to the project and/or equipment.

Phone:	
Fax:	
Authorizing Official Name & Title:	
Authorizing Official Email:	
Reporting: Please indicate who grant funds, and providing a clo	will be responsible for signing the grant agreement, overseeing oseout report.
Name	
Name	

4) Project Narrative: Provide a brief description of your project, the need for the project, and what the goal of the project will be. Please include how the project will initiate or expand upon a recycling program, promote recycling efforts and/or waste reduction within Geauga or Trumbull Counties, or utilize recycled content materials for community purposes. Also include the timeline of the project and how it will be accomplished. (Project must be completed and reimbursement requested by June 30, 2025.)

5)	Camera funding requests: If you are requesting funding to purchase security cameras, you are REQUIRED to attach a letter of support from the law enforcement entity for your community stating they support the project and will work with you to prosecute/follow-up on complaints. District access to camera feeds is recommended, to allow us to monitor site servicing volume information.
	Our funding request is for cameras.
	Support letter(s) attached.
6)	Recognition: As a condition of reimbursement, all grantees will be required to show acknowledgement of District grant funding for their project. Details regarding requirements for this acknowledgement are available in the Go Green Grant Information packet.
<u>Pl</u>	ease acknowledge this requirement by initialing here:
7)	Products/Services Needed: Provide a list of products and/or services to be purchased. Give a bri

7) Products/Services Needed: Provide a list of products and/or services to be purchased. Give a brief description of the item including % recycled content (if purchasing recycled benches, tables, etc.). Recycled content items must have a minimum of 50%-recycled materials. Attach quotes if you have them. *If applicable, please include vendor quotes with proof of % recycled content and type for items listed above.

Product/Service	Vendor *if already chosen	Description	Recycled Content % *if purchasing benches, etc.

8) Financial Information: Please complete a detailed summary of project costs that will equal the grant request. If project costs exceed the grant amount requested, please state how the overage will be funded. *If there is no remaining cost please mark N/A in this section.

Product/Service	Unit Cost \$	Quantity	Total Cost \$	Grant Funds Requested \$	Grantee Remaining Cost* \$
			Total Project Cost	Total Grant Request *max \$15,000	Total Remaining Cost *min 10% of grant funds requested

9) Additional documents (optional): Attach additional documents (equipment quotes, add'l background info, site pictures, etc.)

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10) Signature		
Signature of Authorizing Official	Date	

By signing above, I hereby certify that the information provided in this application is true and accurate. I further certify that I possess the authority to apply for this grant on behalf of the applicant.

If there are any questions regarding this application, please feel free to contact the Geauga-Trumbull Solid Waste Management District for assistance. Applications can be completed online or emailed, faxed, or mailed to:

Geauga-Trumbull Solid Waste Management District 5138 Enterprise Dr. Warren, OH 44481 Phone: (330) 675-7967

Fax: (330) 675-2672

Email: jenn@startrecycling.com

APPLICATION DEADLINE: FRIDAY, FEBRUARY 2, 2024