

NEIGHBORHOOD TREE MATCHING MINI-GRANT



Applicant Name: _____
Project title: _____
Is the association or organization incorporated? Yes No If awarded, association president or individual authorized to sign contract: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone Number: _____

PROJECT DESCRIPTION

Please describe the proposed project. Funded projects must demonstrate a clear public benefit.

Why is the project needed? _____ _____ _____
What will be produced? _____ _____
What is your proposed location(s) of the project? (*Project location is subject to change pending visibility triangle and utility checks. Attach additional sheet as needed.) _____ _____
If applying for more than one Neighborhood Tree Matching Mini-Grant, identify the priority of this project. _____ _____

(Continued)

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PROJECT MAINTENANCE

Who will perform the maintenance and how often?

Maintenance schedule: Weekly Monthly Quarterly
Estimated total number of volunteers: _____
Estimated total number of volunteer hours: _____
How you will track volunteer hours: Sign-in list Create schedule/log
<i>Documentation of volunteer hours is required in the final report. You must provide signature verification of all match project participants; including total hours worked. The applicant will be contractually obligated to maintain the project as long as it continues to exist.</i>
How were potential stakeholders notified of the proposed grant proposal? (Attach documentation of notification - e.g. meeting minutes, social media or website posting, newsletters, etc) Neighborhood Association Business Association Property Owners Business Owners
How were they notified? Direct Mailing Surveys Newsletters Flyers Email Association Meeting
Support for proposed project or plan: Do the affected neighborhood and/or business associations support the project or plan? Yes (attach letters of support) No



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