

Project Title: _____

FY 2024 Funding Request: \$_____

APPLICANT:	PROJECT PHOTO
 Applicant's name, address, telephone number, and email address Federal Tax ID (if applicable) of applicant Grant Recipient name, address, telephone number, and email address (if different from applicant identified above) 	Insert photo of the project here or include as attachment.

Is the request a one-time project or is additional State funding expected to be requested in the future? _____

BRIEF PROJECT DESCRIPTION:

FUNDING PLAN

State the total project cost: \$_____

State funding already secured: \$_____

State the amount of the State funding request for this fiscal year: \$______

State the amount of funding available from other sources with an explanation where appropriate: \$_____

DETAILED PROJECT CRITERIA:

Describe how the project meets one or all of these criteria:

- Projects that have already started and need to be finished
 Projects that create jobs
- Projects that create jobs
- Life, safety, health improvement projects 3.

PROJECT DESCRIPTION AND JUSTIFICATION:

These are suggested areas of focus based on prior funding cycles, which may be helpful in providing a summary of your project. Feel free to add or remove attributes as they apply to your project.

Deferred Maintenance: If the project addresses a key facility for which maintenance has been deferred, describe the nature of the deferred maintenance. If not, delete this subsection.

Transportation: If the project addresses important transportation needs of the community, describe how it does so. If not, delete this subsection.

Infrastructure: If the project addresses public infrastructure, provide details. If not, delete this subsection.

Public Safety: If the project addresses public safety, provide details. If not, delete this subsection.

<u>Private Sector Tools</u>: If the project provides tools to support private-sector growth and development, explain how it will accomplish that end. If not, delete this subsection.

Investment in Future: If the project is an investment in the future of the greater community of Ketchikan, provide details. If not, delete this subsection.

Support for Essential Services: If the project will aid in the delivery of essential public services, please describe how it will do so. If not, delete this subsection.

<u>**Culture and Recreation:**</u> If the project relates to public recreation or serves as a cultural facility, describe how it does so. If not, delete this subsection.

<u>Underserved Community</u>. If the project provides a service to a portion of the community that has been underserved, describe how it does so. If not, delete this section.

PROJECT TIMELINE

Briefly describe project timeline and expected completion date.

ONGOING OPERATION AND MAINTENANCE:

Insert the name of the entity responsible for the ongoing operation and maintenance of this project