



County of Hawai'i
Department of Finance
Property Management Division
25 Aupuni Street, Suite 1101, Hilo, HI 96720
Telephone: (808) 961-8069

OFFICIAL USE ONLY:
STU. 22- _____
Rev'd:

Revised: 7/30/2021

DEADLINE TO FILE IS AUGUST 31, 2021, BY 4:30 PM

STEWARDSHIP GRANT APPLICATION

A. NAME AND ADDRESS OF ORGANIZATION:

Name

Address City State Zip Code

B. PERSON TO CONTACT: _____

Phone No: _____ Mobile: _____

Email Address: _____

Are you available to attend a ZOOM interview on Sept. 13, 2021, between 9:00 am to 3:00 pm? Yes _____ No _____

If yes, a zoom link will be sent to your email address with instructions.
If no, please assign someone from your organization to attend with knowledge of the proposed projects, and budget costs and provide email address above.

C. PROJECT PERIOD: _____ to _____

D. PROJECT NAME: _____

E. PROJECT LOCATION (TMKS): _____

F. PROJECT NAME: _____

G. PROJECT COST:

Amount requested: \$ _____

Applicant share: \$ _____

Other resources: \$ _____

Total Project Cost: \$ _____

H. REQUIRED DOCUMENTS:

_____ Non-profit (501(c)(3), IRS letter of determination

_____ Copy of organization bylaws and mission statement

_____ DCCA Certificate of Vendor Compliance

_____ Letter of Authorized Signer for Organization

I. CERTIFICATION:

The applicant certifies that the information contained in this application is true and correct to the best of his/her knowledge.

NAME OF AUTHORIZED OFFICIAL: _____

TITLE OF AUTHORIZED OFFICIAL: _____

SIGNED: _____ **DATE:** _____

NOTES:

1. Provide various maps illustrating your projects, especially for multiple parcels.
2. Provide a calendar of proposed projects (start date, completion, etc.)
3. Refer to H.C.C. Article 10, Section 10-16 (g); HRS 343; and other State and Local Laws that may affect your proposed projects.
4. Review your request for completeness.
5. Attachments are acceptable

Should you have any questions, please contact: Maxine Cutler at Phone: (808) 961-8069 or Email: Maxine.Cutler@hawaiicounty.gov

BUSINESS PLAN

J. PROPOSAL: *(Detailed plan can be attached to application):*

K. PROJECT DESCRIPTION: *(You may need to submit attachments for different types of projects. Make sure to include A to D in your attachments)*

A. Location of Project: _____

B. Project TMK: _____

C. Number of Persons Who Will Benefit: _____

D. Project Description *(Give a brief description of the work that will be done (i.e., removal of invasive plants, planting, signage, etc. and list individual costs in budget details) with the funds requested, including a timeframe and activities to accomplish stated purpose. Additional pages may be attached):*

L. PERMITS/APPROVALS REQUIRED:

1. Environmental Assessments (EA's): _____
If yes, explain why? If not needed, explain why?

2. **Special Management Area (SMA) Permit:** _____
If yes, explain why? If not needed, explain why?

3. **Other:** _____

M. MANAGEMENT/PRESERVATION PLANS REVIEWED: *(Provide list of Archaeological, Burial Treatment, Resource Management, Preservation, and other such Plans. Give an explanation how each is incorporated in your projects. Additional pages may be attached.)*

N. Budget Details:

PROJECT Description	Amount Requested	Applicant Share	Other Resources	TOTAL
(Invasive Plants Removal Project)	Enter	Enter	Enter	\$ Example
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
Total	\$	\$	\$	\$

O. APPLICANT INFORMATION:

1. **Brief history of the applicant organization. Include the date of incorporation as a non-profit organization** *(use attachments where appropriate)*.

2. **Main source(s) of financial support:**

3. **Please at list at least three (3) prior projects successfully completed:** *(Include location and sponsoring agent)*

a. _____

b. _____

c. _____

4. **Please initial below that the applicant understands the following documents shall be required if awarded stewardship grant funds:**

_____ Certificate of insurance shall be required with County of Hawai'i named as additional insured. Provide proof.

_____ Organization shall provide the semi and annual report(s) which shall include accomplishments, financial statements explaining expenditures, projects in progress, community involvement, and status of overall project.

_____ Organization shall immediately contact the Department of Finance, Property Management Division upon dissolution of the organization or changes in the organization that may affect the Stewardship Grant Agreements.

_____ Organization maybe required to provide other documents as requested with the County of Hawai'i Department of Finance.