

Minnesota Department of Natural Resources

Monitoring of Starry Stonewort Control Projects

2018 Grant Application Form

Purpose

These grants are intended to help fund required and additional proposed monitoring done under an Invasive Aquatic Plant Management (IAPM) or public waters permit to control starry stonewort. In order to receive funding under this grant program, 1) you must be awarded a grant and 2) you must obtain a permit for the work. You must apply for a starry stonewort control permit either before or when you submit this grant application —not after.

Deadlines - please submit your grant application as soon as possible

In order to provide grants in a timely manner, grant applications will be reviewed and grants written on a first-come first-served basis. Because of this, the grant program may run out of funds and close before the application deadline. **The final application deadline is October 31, 2018**

Please note that the day after the grant application is received the name and address of the applicant, and the amount requested become public. All other data is nonpublic until the negotiation of the grant agreement with the grantee is completed. After the final application deadline and application review process is completed, all data (except trade secret data) becomes public.

Application Instructions - electronic submissions are encouraged

1. Apply for an IAPM or public waters permit through the online Minnesota DNR Permitting and Reporting System (MPARS).
2. Fill out this application form.
3. Return this application form to:

Wendy Crowell
Minnesota Department of Natural Resources
Ecological and Water Resources, Box 25
500 Lafayette Rd St. Paul, MN 55155
Fax: 651-296-1811
E-mail: wendy.crowell@state.mn.us

Applications must be received on or before the application deadline. You may also hand deliver your application on or before the deadline during normal business hours (8:00 a.m. - 4:30 p.m., Monday - Friday).

You will be notified when your application is received. If you do not receive a notification by the next business day after you submit it, please contact Wendy Crowell (651-259-5085).

Applicant Information

Organization:

Name:

Address:

E- Mail:

Phone(s):

Required: Federal Tax Id Number (EIN) or State of MN Vendor ID Number: _____

Second Contact Information (Optional)

Name:

E- Mail:

Phone(s):

Project Information

Permit Contact Person:

Lake Name:

County:

Nearest Town:

DOW# (if known):

Grant Request (check all that apply)

_____ \$2,000 for basic required monitoring of a pesticide control project

_____ \$1,000 for additional monitoring of pesticide control project
(attach a description of proposed additional monitoring)

_____ \$2,000 for basic required monitoring of a mechanical or physical removal control project

_____ \$1,000 for additional monitoring of mechanical or physical removal control project
(attach a description of proposed additional monitoring)

The maximum grant amount any organization can receive is \$6,000.

Total Grant Request: \$_____