



# FISCAL YEAR 2022-2023 PRIVATE STORMWATER IMPROVEMENT GRANT APPLICATION

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Complete this application in its entirety with appropriate statements and requested documentation. Applications can be mailed to the attention of David Brown, Town of Jupiter Utilities, 210 Military Trail, Jupiter, FL 33458 or submitted by e-mail to [davidb@jupiter.fl.us](mailto:davidb@jupiter.fl.us). Emails should be delivered with a Read Receipt requested to confirm successful delivery to the Town and include "FY22-23 Private SW Improvement Grant Application" in the subject heading. **Applications are due by 5:00PM on March 11, 2022.**

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## APPLICANT INFORMATION

FIRST NAME:

LAST NAME:

STREET ADDRESS:

CITY:

STATE:

ZIP CODE:

PHONE NUMBER:

\*EMAIL ADDRESS:

## PROJECT CONTACT INFORMATION

List the contact information for the individual managing the project.

FIRST NAME:

LAST NAME:

TITLE:

PHONE NUMBER:

\*EMAIL ADDRESS:

## PROJECT ENGINEER CONTACT INFORMATION

List the contact information for the project engineer.

FIRST NAME:

LAST NAME:

PHONE NUMBER:

\*EMAIL ADDRESS:

## PROJECT DETAILS

PROVIDE A BRIEF DESCRIPTION OF THE PROJECT:

WHAT TYPE OF BENEFIT DOES THIS PROJECT PROVIDE?:

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## PROJECT FUNDING INFORMATION

FUNDING AMOUNT REQUESTED:

**NOTE:** Amount requested may not exceed 50% of total project cost

TOTAL PROJECT COST:

APPLICANT'S MATCH:

SOURCE OF OTHER FUNDS:

DOES THE APPLICANT HAVE FUNDS AVAILABLE AND BUDGETED TO PAY FOR THE APPLICANT'S SHARE OF THE PROJECT COST?

WHAT TYPE OF BENEFIT DOES THIS PROJECT PROVIDE?:

LIST PERMITS REQUIRED FOR PROJECT. IF APPLIED FOR, PROVIDE APPLICATION DATE(S) AND STATUS. IF PERMITS HAVE BEEN RECEIVED, ATTACH COPIES WITH YOUR APPLICATION:

IS THIS PROJECT BEING TAKEN IN RESPONSE TO PERMIT CONDITIONS ISSUED OR ENFORCEMENT ACTIONS TAKEN AGAINST THE APPLICANT BY THE TOWN OR ANY OTHER AGENCY?

IF YES, PLEASE EXPLAIN:

HAS THE APPLICANT RECEIVED FUNDING FROM THE TOWN FOR ANOTHER PROJECT WITHIN THE PAST FIVE (5) YEARS?

CAN THE PROJECT BE COMPLETED AND OPERATIONAL WITHIN ONE YEAR OF POTENTIAL GRANT AWARD?

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I CERTIFY AND AGREE THAT THE STATEMENTS AND INFORMATION CONTAINED IN THIS APPLICATION ARE TRUE, ACCURATE, AND COMPLETE.

APPLICANT:

DATE:

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\*Florida has a very broad public records law. Under Florida law, e-mail addresses are public records. The Town makes every effort to protect individual privacy, but may be compelled to provide e-mail addresses in some circumstances under Florida law. If you do not wish to provide your e-mail when applying for this grant, please call Gennifer Wofford at 561-741-2705