

MAINE OUTDOOR HERITAGE FUND SUMMARY APPLICATION FORM

Date:	Funding Category (1, 2, 3 or 4): (choose 1)		Sponsoring Agency:		
Project Title:					
Project Description: (Brief 1-2 line description of the project's purpose to be used for reporting in public announcements)					
Resubmittal (Y/N):	submittal (Y/N): Followup (Y/N): (If Y, include Project Number & Title)				
Location:			Start Date:	End Date:	
Project Coordinator: (designate only 1 project coordinator per project)					
Name:		Organization:			
Phone:	Email:	Address: (city, state, zip)			
Applicant Signature: Applicant has reviewed grant application requirements and checklist as listed on MOHF website: www.maine.gov/ifw/MOHF.html					
Partner(s): (Partners help to plan or implement the project, letters of understanding between partnering organizations MUST be included with full proposal) NOTE: These letters are NOT letters of support. They MUST clearly state the role of the partner in the project.					
Organization & Role of Partne	ership:			Partner Letter Included: (required with full application)	
Organization & Role of Partnership:				Partner Letter Included:	
Organization & Role of Partnership:			(required with full application Partner Letter Included:		
organization a note of farthership.			(required with full application		
Project Summary: (Provide a <u>brief</u> summary, what work the project involves) Further detail may be provided with full proposal					
Project Objectives: (Provide <u>brief</u> description of objectives, what the project will accomplish). Further detail may be provided with full proposal)					
Budget Section: (The data below MUST match the data on the budget form section of the grant proposal)					
Cash Match In Hand:	sh Match In Hand: (List on Budget Form Sources and Amounts)				
Cash Match Pending: (List on Budget Form Sources, Amounts and Committal Dates)				ntes)	
MOHF Request:	(Includes Administrative Fees if Applicable)				
n-Kind Services: (Examples include: volunteer time, mileage, donated equipme			uipment & supplies)		
Total Budget:	otal Budget: (Cash Match In Hand + Cash Match Pending + In-Kind Services + MOHF Request= Total Budget)				
To Be Completed by Sponsoring Agency: (Check 1, 2, OR 3 and indicate if agency does NOT endorse project)					
 Agency Project (funding will be directed to Agency) Pass Thru Project (funding will be processed with a special services contract initiated by MOHF Secretariat) Pass Thru Project – Agency Partner – (same as #2 AND agency is involved with planning or implementation of the project) Agency does NOT endorse project (check if agency does NOT endorse - meets MOHF guidelines; however agency doesn't endorse it) 					

Signature of Commissioner or Director of Applying Natural Resource Agency

Date