



MAINE OUTDOOR HERITAGE FUND SUMMARY APPLICATION FORM

Date:		Funding Category (1, 2, 3 or 4): (choose 1)		Sponsoring Agency:	
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Project Title:	
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Project Description: (Brief 1-2 line description of the project's purpose to be used for reporting in public announcements)

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Resubmittal (Y/N):		Followup (Y/N): (If Y, include Project Number & Title)	
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Location:		Start Date:		End Date:	
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Project Coordinator: (designate only 1 project coordinator per project)

Name:		Organization:	
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Phone:		Email:		Address: (city, state, zip)	
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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 Partnership:		Partner Letter Included: (required with full application)	<input type="checkbox"/>
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Organization & Role of Partnership:		Partner Letter Included: (required with full application)	<input type="checkbox"/>
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Organization & Role of Partnership:		Partner Letter Included: (required with full application)	<input type="checkbox"/>
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Project Summary: (Provide a brief summary, what work the project involves) Further detail may be provided with full proposal

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Project Objectives: (Provide brief description of objectives, what the project will accomplish). Further detail may be provided with full proposal)

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Budget Section: (The data below MUST match the data on the budget form section of the grant proposal)

Cash Match In Hand:		(List on Budget Form Sources and Amounts)
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Cash Match Pending:		(List on Budget Form Sources, Amounts and Committal Dates)
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MOHF Request:		(Includes Administrative Fees if Applicable)
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In-Kind Services:		(Examples include: volunteer time, mileage, donated equipment & supplies)
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Total Budget:		(Cash Match In Hand + Cash Match Pending + In-Kind Services + MOHF Request= Total Budget)
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To Be Completed by Sponsoring Agency: (Check 1, 2, OR 3 and indicate if agency does NOT endorse project)

1. Agency Project (funding will be directed to Agency)
 2. Pass Thru Project (funding will be processed with a special services contract initiated by MOHF Secretariat)
 3. 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 _____