



BUCKS COUNTY CONSERVATION DISTRICT

1456 FERRY ROAD, SUITE 704
DOYLESTOWN, PA 18901-5550

Over 60 years In Pursuit of Environmental Excellence

Water Quality Fund Mini-Grant Application

This assistance program is a cost share program which provides reimbursements; it does not provide advance payments. If this application is approved, all expenses, including landowner cost share, must be documented and submitted to the Conservation District Natural Resource Committee to be eligible for reimbursement.

Date of Application Submittal: _____

Project Landowner / Applicant

Name of Project Landowner or Unit Owner: _____

Tax Map Parcel Number: _____

Landowner Address: _____

Landowner Phone: _____ Landowner Email: _____

Landowner Signature: _____

Have rights been secured in writing*? Yes _____ No _____ N/A _____

*see attached Landowner Consent Form

Project Location/ Watershed

Project Location: _____

Is project Applicant different than Landowner? Yes _____ No _____

If Yes, Applicant Name _____ Organization: _____

Email: _____ Phone: _____

Watershed: _____ Receiving Stream Name: _____

[Map Viewer \(ArcGIS\)](#)

Stream Classification (Per PA Title 25 Chapter 93): _____

[PA DEP Mapping \(Checkbox layers for Regulated /Streams / Water Quality\)](#)

Project Narrative (attach separate page)

Project Narrative: Please describe the project in detail, limiting it to one typewritten page and one photo page. Be sure to address how the project conserves soil and water resources, increases public awareness, and/or builds the conservation community. Specify the need and scope of any specialized contractor services.



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Project Description

Project type:

- ☐ Stormwater Management / SCM ☐ Community Science
☐ Stream stabilization/restoration ☐ Other _____
☐ Education – Outreach

Have permits been obtained for this project? Yes _____ No _____ N/A _____

Permits required/obtained: _____

Approximate Start/End Dates for Project:

Start Date: _____ End Date: _____

Project Budget If additional space is needed, please attach separate page.

Item	Description	Cost/unit	Quantity	Grant Amount	Match Amount
Materials/ Supplies					
Equipment					
Labor (hours)					
Contract / Consult					
Total					

Total Estimated Cost of Project: \$_____

- Total Other Public Funds Committed to the Project: \$_____
- Total Landowner Funding Committed to Project: \$_____
- Total Funding Requested: \$_____