

10. Is the project/plan regional or local in nature? If regional, please identify the entities within the partnership. Regional is defined as two or more entities working in partnership i.e. a port and city, port and county, county and city, chambers of commerce, etc.

11. Project or Plan Lead Contact (If different on Page 1): _____
 Email and Phone Number: _____

12. Project/Plan Start Date: _____ Completion date: _____
 Phase 1 Start Date: _____ Phase 1 Completion Date: _____
 Phase 2 Start Date: _____ Phase 2 Completion Date: _____
 Phase 3 Start Date: _____ Phase 3 Completion Date: _____

13. Project or plan cost (If estimate, please indicate. If project or plan is to be completed beyond a five-year period, please identify phases. If unknown, please indicate with a UK).
 Overall Cost for submittal: _____
 Phase 1 Cost: _____
 Phase 2 Cost: _____
 Phase 3 Cost: _____

14. Are there matching funds available for the submittal? Yes No

If yes, Please indicate matching funds available below (Please indicate whether state or federal funding)

Funding Source	Type	Secured	Applied for (Notification Date/Submission Date)
	<input type="checkbox"/> Grant <input type="checkbox"/> Loan <input type="checkbox"/> Cash <input type="checkbox"/> In-kind <input type="checkbox"/> Other: _____		
	<input type="checkbox"/> Grant <input type="checkbox"/> Loan <input type="checkbox"/> Cash <input type="checkbox"/> In-kind <input type="checkbox"/> Other: _____		
	<input type="checkbox"/> Grant <input type="checkbox"/> Loan <input type="checkbox"/> Cash <input type="checkbox"/> In-kind <input type="checkbox"/> Other: _____		
	<input type="checkbox"/> Grant <input type="checkbox"/> Loan <input type="checkbox"/> Cash <input type="checkbox"/> In-kind <input type="checkbox"/> Other: _____		
	<input type="checkbox"/> Grant <input type="checkbox"/> Loan <input type="checkbox"/> Cash <input type="checkbox"/> In-kind <input type="checkbox"/> Other: _____		
	<input type="checkbox"/> Grant <input type="checkbox"/> Loan <input type="checkbox"/> Cash <input type="checkbox"/> In-kind <input type="checkbox"/> Other: _____		
	<input type="checkbox"/> Grant <input type="checkbox"/> Loan <input type="checkbox"/> Cash <input type="checkbox"/> In-kind <input type="checkbox"/> Other: _____		

15. Please check all those that apply of the goal(s) and objective(s) the project/plan addresses to meet:

<input type="checkbox"/> Goal 1									
Objective	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
<input type="checkbox"/> Goal 2									
Objective	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3						
<input type="checkbox"/> Goal 3									
Objective	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5				
<input type="checkbox"/> Goal 4									
Objective	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
<input type="checkbox"/> Goal 5									
Objective	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7		
<input type="checkbox"/> Goal 6									
Objective	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
<input type="checkbox"/> Goal 7									
Objective	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4					
<input type="checkbox"/> Goal 8									
Objective	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6			

16. How does the project/plan meet the goal(s) and objective(s) identified above?

Thank you for your information. The CLEDD Board will be reviewing these over the next month and final approval will be at the June 30, 2010 board meeting. If you have any questions, please contact Jennifer Keene at jkeene@cwco.org or 360-577-3041.