

Clermont County Park District 2024 Community Parks Improvement Program Checklist

Application Guidelines

1. _____ There will not be an informational meeting this year for the grant program. If you have questions concerning the grant application or process please contact Chris Clingman at 513-260-6562 or cclingman@clermontcountyohio.gov
2. _____ Complete Grant Application form and Project Cost Estimate worksheet (example enclosed). One (1) project per form; maximum of two (2) project applications per grant cycle. Number your applications in order of priority, #1 being the highest priority. **For projects more than \$2,000-Attach at least two estimates or a stamped engineer or architect estimate or your application will not be reviewed.**
3. _____ Include a Resolution of Support from the governing body – Village or City Council, Township Trustees – supporting the grant application (example enclosed).
4. _____ Include a Statement of Responsibility from the governing body – Village or City Council, Township Trustees – supporting the proposed project (form enclosed).
5. _____ Deadline for returning completed applications is: 4:00 PM **Friday, April 5, 2024**
6. _____ Address how the project(s) will be a benefit to 1) ***health and wellness and/or 2) safety issues*** of the community and the park area.
7. _____ Please include a photograph of the project site area and/or recreational equipment that may be affected.
Return your application to:
**Grant Award Committee
Clermont County Park District
2156 US HWY 50 (new address)
Batavia, OH 45103**

Award Rules

In order to exercise prudent management of funds voted by Clermont County taxpayers, Clermont County Park District requires the following information before distributing grant funds awarded through our Community Parks Improvement Program:

1. _____ Copies of all paid receipts, canceled checks and/or other documents proving expenditures covered by the grant award.
2. _____ Pictures of completed project with proper Park District Grant signage in place.
3. _____ The appropriate village/city/township authority ***must*** provide Clermont County Park District with a letter stating the date the project has been completed and ask for reimbursement.
4. _____ If actual expenditures are less than the amount awarded, the actual amount will be reimbursed.
5. _____ All approved projects must be complete and final paperwork ***must*** be submitted within one year of the award date in order to be reimbursed.

Clermont County Park District

2024 Community Parks Improvement Program

Grant Application

Political Subdivision: _____

Community Park: _____

Park Address or Location: _____

Contact Person/Title: _____

Mailing Address: _____

Telephone: **Daytime** _____ **Evening** _____

Email Address: _____ **Project Priority #** _____

Brief Description of Project: _____

Project Cost Estimate Instructions

On the reverse side of this form you will find a worksheet which should simplify your project cost planning and assist the review committee in considering your request.

1. Provide a brief description of each component of your project in the left column. This should be detailed enough to allow the review committee to understand what the item is and the volume or quantity being planned. Copies of catalog pages work well for equipment descriptions if not provided on estimates.
2. Provide an estimated cost for each component. Attach copies of written estimates for each component. If your project is over \$2000.00 at least 2 estimates should be obtained for both equipment and services or provide a stamped engineer and architect estimate. Park District can provide assistance in locating vendors. The Committee prefers you use local vendors if possible. Fill out the application for the best estimates. Do not fill out an application for each estimate. Playground Equipment must be IPEMA Certified.
3. Provide a brief description of donated goods and services including supplier/group name and estimated value.
4. Maximum request is \$20,000. If requesting over \$10,000, you must provide 25% cash match.

Estimated completion date for the project: _____

**Clermont County Park District
2024 Community Parks Improvement Grant Program**

COUNCIL RESOLUTION

WHEREAS, the Village/City/Township of _____ desires to see its residents enjoy the benefits of a community park;

BE IT RESOLVED: that the Village/City/Township of _____ expresses its support for a Community Park Improvement Grant application to be submitted to Clermont County Park District, which application will reimburse expenses for the improvements listed on said application to the community park of the Village/City/Township known as the _____ Park.

BE IT RESOLVED: that the Village/City/Township understands that reimbursement of approved expenses will only take place if and when all deadlines are met and requested documentation is submitted.

Approved this _____ day of _____, 2024.

Signed:

2024 Community Parks Improvement Grant Program

STATEMENT OF RESPONSIBILITY

The Village/City/Township of _____ hereby states that it will be responsible for the expenditure of \$ _____ awarded by Clermont County Park District through the Community Parks Improvement Program for the purpose of _____
_____ (description of project).

It is understood that the funded project must be completed and required completion paperwork submitted by one year from award date for awarded funds to be disbursed. It is further understood that the Grant Program Sign provided by Clermont County Park District must be placed at the project site. The Village/City/Township also states that it will take appropriate measures to assure that the project described above is adequately maintained for the present and future benefit of citizens of the community.

Signed _____
(Appropriate village/city authority)

Title _____

**Clermont County Park District
2019 Community Parks Improvement Program**

Grant Application **Example**

Political Subdivision: Village of Union City, OH

Community Park: Railroad Park

Park Address or Location: Located at the southwest corner of Fourth and Main Street

Contact Person/Title: John Doe, Park Board President

Mailing Address: P.O.Box 123, Union City, OH 45678

Telephone: **Daytime** (513) 000-0000 **Evening** (513) 000-0000

Email: unioncityadmin@unioncity.gov **Project Priority #** 1

Brief Description of Project: Installation of a new playground gym which will increase the safety of the children using the park. This new playground set will allow a safe avenue for more children to play in the park. Because of the age and condition of the previous playground equipment liability from injury will be reduced as well. Union City will contract with XYZ Excavating to prepare the playground base, purchase sand from XYZ Sand and Gravel and utilize man power from the Community Service Program to install and compact sand. Signs will be designed by a volunteer, fabricated by Acme Signs and installed by the volunteers. Park District signs will be mounted in accordance with requirements.

On the reverse side of this form you will find a worksheet which should simplify your project cost planning and assist the review committee in considering your request.

1. Provide a brief description of each component of your project in the left column. This should be detailed enough to allow the review committee to understand what the item is and the volume or quantity being planned. Copies of catalog pages work well for equipment descriptions if not provided on estimates.
2. Provide an estimated cost for each component. Attach copies of written estimates for each component. At least 2 estimates should be obtained for both equipment and services if your project is over \$2,000. Park District can provide assistance in locating vendors. Fill out the application for the best estimates. Do not fill out an application for each estimate.
3. Provide a brief description of donated goods and services including supplier/group name and estimated value.
4. If requesting over \$10,000, you must provide 25% cash match.

Estimated completion date for the project: 04/01/19

PROJECT COST ESTIMATE WORKSHEET

Materials/Equipment-Please do not record donated materials and equipment in this section

Description	Cost Estimate
<u>1 Giant Tumble Gym (3 estimates attached)</u>	<u>\$ 4385.00</u>
<u>_____</u>	<u>\$ _____</u>
<u>_____</u>	<u>\$ _____</u>

