

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY

Teresa Marks, Director

Solid Waste Management Division, Programs Branch SOLID WASTE AND RECYCLING GRANTS 2007 APPLICATION FORM

(STATE FISCAL YEAR 2008)

1.0	City of Blythev Name of Applicant (This may be		icipality, etc	.)	_		-	
1.1	Laura Hansen						_	
	Contact Person (This person mu	ıst be available to an	swer questi	ons regarding	this grant.)			
1.2	200 West Walnut	, Rm 204,	Blyth	eville	Missi	ssippi	X 2315	
	Address	City			County	Zip	-	
1.3	870-763-3212	870	-763-0	150 lb	ansen@mo	4.5	com	
	Area Code Telephone		Fax			E-mail		
2.0	Grant Category: Check One (Please select only one category per application.)							
	Administrative			Material	Recovery	Facility		
	Composting Equ	ipment		Recyclir	ng Equipme			
	X Specify type Chipper		أمسمأ	Specify typ	е			
	Education			Solid Wa	aste Planni	ng		
	Transfer Station	with Recyclin	g .					
2.1	Project Total Cost		Gran	t Amount	Requested	i		
	\$ <u>33,500.00</u>		\$ <u>33</u>	,500.00)	_		
3.0	Project Description – All grant applications, including administrative, must							
	include a detailed project description. At a minimum, answer the following: 3.1 The project's goals and how the project will be conducted (such as, how will materials be							
	collected and marketed, and how public awareness of the project will be increased).							
	3.2 What items are/will be recycled.3.3 Project location and population served by the proposed project (whom do you expect to							
	participate in the prog		a by the p	proposea pr	oject (whom o	do you exp	ect to	
	3.4 The days and hours of operation. (If funding equipment, how many days/hours will it							
	used for the project?)) See Atta	caka					
	A GUIDANCE DOCUMENT TO ASSIS	T IN COMPLETING	THE REC	YCLING GRA	NTS APPLICAT	ION IS		

AVAILABLE ON-LINE AT www.adeq.state.ar.us/solwaste/branch_recycling/grants.htm.

3.0 Grant funds will be used to purchase a Brush Chipper for the City of Blytheville. This equipment will allow the city curbside service to provide a recycling opportunity and divert material from the landfill as well as enhance beautification projects and availability to community as compost. Additionally, this equipment will aid the City and those others in our County in reducing costs and aid in clean ups from natural disasters.

Grant Number	
MC001-07	

Adm	ninistrative Requirements
4.1	Does the applicant hold current environmental permits required for this project?
	Yes No No, but have applied Not Applicable x
4.2	If existing equipment serves the project area, provide justification why this project is not a duplication of services.
4.3	Does the applicant have sufficient resources to effectively operate the project for the purpose(s) specified in the application? (Grant recipients must show that adequate revenues are being collected to support the long-term operation and maintenance of a grant-funded project. Items such as equipment maintenance and supplies, utilities, labor and transportation costs should be considered.) Yes No
4.4	Projected beginning date ASAP
4.5	Projected completion date Will be ongoing
4.6	Attach completed Budget, Appendix A
4.7	Attach signed Minimum Conditions of Grants, Appendix B
4.8	Attach proof of publication and public comments received regarding the grant request. (A description of the grant proposal must be inserted in a newspaper of general circulation in the area affected by the project a minimum of 30 days prior to the submission of the grant application. This must include a solicitation of written comments.

4.0

Ensure that Section 5.0 Signature and Certification is completed and accompanies each grant application.

from the public. For a sample public notice, see Appendix C)

Grant Number	
MC0 01-07	

5.0 Signature and certification

The authorized representative of the organization applying for the grant and the Regional Solid Waste Management Board Chairman both must sign the application. The authorized representative must have the authority to obligate the applicant's resources.

I certify that to the best of my knowledge, the information provided in this application and its attachments is correct and true. I understand and agree that if grant money is subsequently awarded as a result of this application, I will comply with all applicable statutory provisions and with applicable terms, conditions, and procedures of the ADEQ grant program. I certify that all proposed activities will be carried out and that all grant money received will be utilized solely for the purposes for which it is intended unless written authorization is provided by the Regional Solid Waste Management District and the Arkansas Department of Environmental Quality.

Laura Harrise		
Signature of Applicant's Author	orized Representative	
Secretary Title	870-763-3212 Telephone Number	7/27/07 Date
Signature of RSWMD Board		
County Judge, Steve	McGuire	3/24/87
Print name	Date	
THE ABOVE-REFERENCED GRAN	T IS HEREBY APPROVED.	
Hora Wia	10-09-2007	
Teresa Beentel (ADEQ Progra	Date	
Stive Mark	10/09/2007	
Steve Martin (ADEO Solid Wa	Date/	

APPENDIX A - PROJECT BUDGET

COSTS SHOULD BE BUDGETED FOR FIRST YEAR ONLY. REVENUE SHOULD BE PROJECTED FOR THREE YEARS.

Grant Number	
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(A) PROJECT BUDGET SUMMARY – Fill in all applicable spaces. Total ADEQ Grant Funds Requested and Total Project Costs must match the figures shown on page one (1) of the application. Be sure to total grant funds requested, matching resources, and total costs. Providing matching resources is not mandatory to be considered for a grant but is a measure of cost effectiveness of your application.

(A) Project Budget and Summary	Peguested Res	atching Total Costs
Personnel Services		0
2. Professional Services		0
3. Capital Outlay		0
4. Services and Supplies		0
5. Total ADEQ Grant Funds Requested (Transfer to Page 1)	0\$33,500.00	
6. Total Matching Resources Committed to the Project	0	
TOTAL PROJECT COST (Transfer to Page 1)		0 \$33,500.00

(B) REVENUE TO CONTINUE PROGRAM – List all revenue sources, present or future, to maintain the project beyond the grant. This section must be completed.

(B) Revenue to Continue Program:	* Year	4	Year/2	Year 3
Grant Funds (specify type of grant)				
	*** This	s is one	time grant	
Landfill Tipping Fees				
Local Sales Tax				
Mandatory User Fees				
Sale of Recycled Material				
Solid Waste Assessment				
Other (specify)				
TOTAL REVENUE	0		0	0

Advertising Receipt

Courier News

PO Box 1108 Blytheville, AR 72316 Phone: (870) 763-4461 Fax: (870) 763-6874

Miss Co Ark Financial Management 200 West Walnut Blytheville, AR 72316 Cust#:

a0100070-000

Ad#:

01529853

Phone:

(870)763-3212

Date:

05/30/07

Ad taker:

SH

Salesperson:

HOUSE, ROOM #204, BLYTHEVILLE, ARKANSAS 72315. FAXED BID QUOTES OR PHONED BIDS WILL NOT BE ACCEPTED. MISSISSIPPI COUNTY JUDGE'S OFFICE

Classification:

010

Description	Start	Stop	Ins.	Cost/Day	Surcharges	Total
01 Blytheville Courier News	06/01/07	06/01/07	1	27.47		27.47
legal daily charge						2.00
legal notary fee						4.50
Payment Reference:					Total:	33.97
					Tax:	0.00
BID NOTICE					Net:	33.97
MISSISSIPPI COUNTY REGIONAL SOLID ACCEPTING BIDS FOR A 130 HP CHIPPE				ED BY	Prepaid:	0.00
CALLING (870)763-3212. BIDS WILL BE AN ALL BIDS MUST BE MARKED AS SUCH OSUBMITTED TO THE OFFICE OF THE CO	CCEPTED UNT N THE OUTSID	IL 2:00 P.M., J DE OF THE EN	UNE 15, 2 VELOPE A	007. AND	Total Due	33.97

RESERVE THE RIGHT TO REJECT ANY OR ALL BIDS R A PORTION THEREOF.

STEVE McGUIRE
COUNTY JUDGE

PROOF OF PUBLICATION

STATE OF ARKANSAS	
County of Mississippi,	
David Tennyson	
states on oath that he is the publisher of the Blytheville Courier News,	
a newspaper published in the city of Blytheville, Mississippi County,	
Arkansas, that said paper has a bona-fide circulation in	
said county and state; that the annexed 1	
was published fortime(s) successively, as follows:	
First publication was in the issue of	
20, and the last publication was in the issue of	
, 20	
Publisher.	
Number squares Printers Fee \$_\$	
Received Payment	
Sworn to before me this day Jue, 20 0	
By Dele Ta	u
<i>(C)</i>	

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