Please download this <u>fillable</u> PDF document to your computer before you complete the form.

Rhode 1		& Communit APPLICATION	•	stry Program	
Applicant (Organization) Nan	ne:				
<b>Project Location (City):</b>		(County	7):		
Address:					
City:		State:	RI	Zip Code:	
<b>Primary</b> Contact Person and	Γitle:				
Contact Phone:		E-mail:			
Employer Identification Numl	ber (EIN):	DUNS #	ŧ:		
Brief Description of Project:					
Grant Funds Requested (50%)	) \$		Project Typ	pe (check the one that best ap	plies):
Match (50%): Cash Match	\$		U&CF Prog	gram Development	
In-Kind Match	\$		<b>Education</b>	& Information/Training	
<b>Total Amount of Project</b>	\$		Tree Planti	ing	
Complete ALL fields on this a	pplication form and a	ttach:			
your community.	1 0 0	neets the goals of building		7-8: able, comprehensive tree prog	gram in
BUDGET – MUST use the supplies –	he form provided: - labor – equipment – s	source of match			
PROJECT SCHEDULE		-			
1. What will be done -	- who will do it – when	it will be started and co	ompleted – r	relevant documentation	
Has this community or organi Is the community a Tree City		oan forestry grant in the	past? Yes	s No	
I HEREBY CERTIFY THAT REGULATIONS, GUIDELIN QUALIFY TO APPLY FOR T	ES AND DEADLINE				WE

Printed Name of Authorized Representative	Title/Position		
Signature of Authorized Representative	Date		
Signature of Authorized Representative	Date		