

**Georgia Department of Natural Resources  
Coastal Incentive Grant Program  
2020-2021 FY Cycle 23 Application Cover Sheet**

**Project Title:** \_\_\_\_\_  
\_\_\_\_\_

**Applicant Information (Subgrantee Organization)**

**Applicant** (Institution): \_\_\_\_\_  
Federal Employer ID #: \_\_\_\_\_

**Contact** (receives contract notices)

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Financial Contact** (invoicing and payment)

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

.....  
**Project Manager/Principal Investigator** (if different from Contact above)

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

.....

	<b>Year One</b>	<b>Year Two</b> (if multi-year project)
<b>Federal Funds Requested</b>	\$ _____	\$ _____
<b>Match Provided</b> (MUST be 1:1 for each year)	\$ _____	\$ _____
<b>Total Cost Per Year</b>	\$ _____	\$ _____

**Primary Funding Theme** (select one):

<input type="checkbox"/> Oceans and Wetlands	<input type="checkbox"/> Disaster Resiliency and Coastal Hazards	<input type="checkbox"/> Non-Point Source Pollution
<input type="checkbox"/> Sustainable Communities	<input type="checkbox"/> Public Access and Land Conservation	

Typed Name of Authorizing Official: \_\_\_\_\_

Title of Authorizing Official: \_\_\_\_\_

Signature of Authorizing Official: \_\_\_\_\_ Date: \_\_\_\_\_

### Budget (Year 1)

Budget Categories	CIG Funds Requested (Federal)	Match Funds Provided (Non-Federal)	Total (Federal + Non-Federal)
Personnel			
Fringe Benefits			
Equipment (Items > \$5,000)			
Travel			
Supplies (Items < \$5,000)			
Subcontract			
Construction			
Other			
Indirect			
<b>TOTAL</b>			

**Budget Year 2 (if applicable)**

<b>Budget Categories</b>	<b>CIG Funds Requested (Federal)</b>	<b>Match Funds Provided (Non-Federal)</b>	<b>Total (Federal + Non-Federal)</b>
Personnel			
Fringe Benefits			
Equipment (Items > \$5,000)			
Travel			
Supplies (Items < \$5,000)			
Subcontract			
Construction			
Other			
Indirect			
<b>TOTAL</b>			

**GEORGIA COASTAL INCENTIVE GRANT  
2020-2021 FY Cycle 23 CIG CERTIFICATIONS FORM**

On behalf of \_\_\_\_\_  
(Applicant)

and in support of \_\_\_\_\_  
(Project Name)

I certify that:

1. no person shall be discriminated against based on race, color, sex, religion, national origin, age, or physical or mental handicap for any program, activity, or facility sponsored, operated, or constructed under the grant project;
2. all project activities will be conducted in a manner that is consistent with the mission, goals, and policies of the Georgia Coastal Management Program;
3. any user fees charged to the public for use or participation in any program, activity, or facility sponsored, operated, or constructed under the grant project will not be so large as to be exclusionary;
4. any facility or on-going service or program included as a component of this proposed project will be maintained as part of the community's infrastructure for a reasonable length of time after grant money is no longer available;
5. no protected or endangered species or historic or cultural resource will be adversely impacted;
6. all necessary local, state, and federal permits will be obtained before commencing work;
7. Applicant will not hold the State of Georgia liable for any injuries or damage that may result from activities conducted under projects funded by Coastal Incentive Grants;
8. Applicant (governmental organization) will comply with 2 CFR 200 Uniform Guidance: *Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards*; and 48 CFR 31.2 (as applicable);
9. Applicant (educational institution) will comply with 2 CFR 200 Uniform Guidance: *Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards*; and 48 CFR 31.2 (as applicable);
10. Applicant will comply with any other provisions of statutory law that apply to receiving funds;
11. Applicant has reported all sources of funding for completing this project and certifies that completion is not dependent on future funding from another source;

12. All other sources for funding for the project have been disclosed, and that Applicant will notify the Georgia Coastal Management Program of any awards of additional funding from other sources during the duration of this project;
13. Applicant will adhere to the reporting requirements outlined in the RFP and will submit required status reports in a timely manner, to the Georgia Coastal Management Program. Failure to comply with the reporting requirements of the Coastal Incentive Grants Program may result in revocation of the Applicant's funding.

_____	_____
Typed Name	Title
_____	_____
Signature	Date

Subscribed and affirmed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

Notary Public

\_\_\_\_\_

My Commission expires: \_\_\_\_\_