

**319(h) Pre-Application**

Primary Contact Person:

Project Title:

Lead Agency Organization:

|  |
| --- |
| Contact Person’s Email Address:       |
| Contact Person’s Mailing Address:       |
| City |       |
| State |       |
| Zip |       |
| Contact Person’s Phone: |
| Land Line |       |
| Mobile |       |
| Fax |       |

 Applicant is one of the following:

 [ ]  State, local, tribal Government

 [ ]  Interstate, Intrastate public agency

 [ ]  Public nonprofit organization

 [ ]  Private nonprofit organization

 [ ]  Educational Institution

Project Type

Project Location (General Physical Location):

901 S. Stewart Street • Suite 4001, Carson City, NV 89701 • 775.687.9444 • www.ndep.nv.gov

Nevada 8-Digit Hydrologic Unit Code(s) & Catalog Name(s)1:

 Additional HUCs

[ ]  HUC(s) Unknown

1. If more than one HUC applicable, input under “Additional HUCs.” HUCs information may be found at http://water.usgs.gov/GIS/huc.html.

Project Summary (150 word limit):

Fiscal Summary:

 319(h) funds requested $

 Total amount of non-federal match2 funds $

 Total Project Cost $

2. Cash + Inkind: Must be at least 50% of Total Project Cost

Anticipated Project Start Date: Click or tap to enter a date.

Anticipated Project Completion Date: Click here to enter a date.

Name of applicable Watershed Plan and/or TMDL:

Note: A “No” response may result in an Initial Determination of Ineligibility.

Is the State’s Standard Contract Language acceptable to applicant?

[ ]  Yes [ ]  No [ ] N/A

Is the applicant able to pay for costs up front, and be subsequently reimbursed by the State (No grant advances are provided)?

[ ]  Yes [ ]  No [ ] N/A

Does the project budget include at least 50 percent3 non-federal match?

3. Local match must be at least 50% of total project cost. 319(h) funds cannot exceed 50% of total project cost.

[ ]  Yes [ ]  No [ ] N/A

Does the project include plans for monitoring and maintenance?

[ ]  Yes [ ]  No [ ] N/A

Will timelines for required permits be included in the Project’s Schedule?

[ ]  Yes [ ]  No [ ] N/A

Is the project identified or otherwise covered under an approved Watershed Based Plan or TMDL?

[ ]  Yes [ ]  No [ ] N/A

N/A Explanations:

*For Agency Use Only:*

 Related Proposal No. 319-2020-1

 Received by: Reviewed by:

 Date Received: Click or tap to enter a date.

 Initial Determination of Eligibility:

 [ ]  Eligible

 [ ]  Ineligible

 Additional information required to make determination:

 [ ] Yes

[ ] No

 Request for Additional Information, Date: Click or tap to enter a date.

 Notice of Determination, Date: Click or tap to enter a date.