

PALO VERDE IRRIGATION DISTRICT / METROPOLITAN WATER DISTRICT



“Accelerating the future of the Palo Verde Valley, now; building a collaborative and sustainable community with targeted investments.”

Community Enhancement Collaborative *Grant Application*

The Palo Verde Irrigation District (PVID) and the Metropolitan Water District of Southern California (MWD) have formed a new partnership to provide funds to generate short- and long-term economic impacts and social benefits within PVID’s service area.

Over \$8 million will be available for direct investment in the Palo Verde Valley. These grants will be awarded on a first come, first serve basis, so interested parties are encouraged to apply soon to ensure consideration.

Application Process

The following steps must be completed by each applicant to be eligible for program funding. Incomplete applications will be returned.

- Phase 1 – Grant Application: Proposed project information
- Phase 2 – Grant Application: Budget, financial disclosures/information and supplemental information specific to the project being reviewed.
- Phase 3 – Community Advisory Committee (CAC) Interview
- Phase 4 – Community Enhancement Collaborative (CEC) Review: CAC presents funding recommendation to the CEC for approval

Funded projects must agree to cooperate with reasonable program audits and/or evaluations to ensure funds are used in the manner initially requested.

Upon an applicant’s submission of a Phase 1 Grant Application, the CAC will perform an initial review of the application and contact the applicant with instructions for completing the Phase 2 Grant Application. Supplemental information may be requested as needed, based on project type. Projects recommended for funding by the CAC will be submitted for final review by the CEC, comprised of PVID and MWD Board Representatives.

If you have any questions or need assistance in completing your Phase 1 Grant Application, please feel free to call the Program Administrator, Bruce Wilson, at 760-922-0077 or email him at bkw@cif-blythe.com. Best of luck!

CEC Grant Application – Phase 1

Section 1: Project Information

Fill out one (1) application for each project proposal. If the areas provided below are insufficient for your application, feel free to attach additional documents.

Project Title _____

Name of Organization/Individual _____

Employer Identification Number (EIN) or Social Security Number: _____

Business Type (service, retail, manufacturing, etc.): _____

Type of Business Entity:

☐ Sole Proprietorship ☐ Partnership ☐ Corporation ☐ Nonprofit

☐ Other: _____

Funding Amount Requested: _____

Application Contact:

Name/Title _____

Telephone _____ Can this number receive text messages? _____

Email _____

A. Project Purpose: How will your project improve the quality of life in the Palo Verde Valley?

B. Community Need: Why does the Palo Verde Valley need your project?

C. Likelihood of Success: Please describe what experience you have that will make this project a success? For example, list any job experience, education and/or plans or arrangements you have made to prepare.

D. Additional Funds: Do you have additional sources of funds for this project such as other grants, personal funds or partnership opportunities? This is not a requirement for funding.

E. Project Timeline: If approved for funding, when do you anticipate work will begin on project implementation? Please provide any project milestones or phases with accompanying time required to complete them.

Section 2: Funding disclosures

Has this project or business received or applied for any other incentive or grant funding related to this project? Are there any outstanding loans associated with this project or business?

Section 3: Application statement

Initial each item to signify that you understand and agree with each statement. If you have questions on any of the statements, please contact Program Administrator, Bruce Wilson, at 760-922-0077, or email bkw@cif-blythe.com.

- _____ I have legal signing authority to receive grant funding on behalf of the entity or organization described in this application.
- _____ I understand that there will be conditions placed upon receiving a grant and agree to refund the grant (or a pro-rated portion) if it is found that at any time, I do not meet those conditions. I understand that I must document compliance with these conditions and submit reports.
- _____ I understand that an IRS Form 1099 will be issued to me for each source of funds received. I understand that it is my responsibility to determine the tax liability associated with participating in this CEC funding.
- _____ I understand that the CEC has the right to conduct unannounced inspections during project development and implementation to ensure everything is fully operational and at the activity level committed to in the grant agreement.

_____ I certify to the best of my knowledge that the information contained in this application is true and accurate.

Applicant(s):

Printed Name(s): _____

Signature(s): _____

Date: _____

Completed Applications: Please submit all completed applications to Program Administrator, Bruce Wilson, via email bkw@cif-blythe.com, or hand deliver your application to the CIF Office located at 203 E. Hobsonway, Blythe, CA 92225.