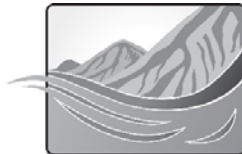


COUNTY OF MAUI
DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
RECYCLING GRANT (DEMGR)
FY 2020 (July 1, 2019 – June 30, 2020)

Grant Application Packet

- I. General Information & Instructions**
- II. Grant Summary Application**
- III. Grant Application**
- IV. Budget Forms**
- V. Sample Forms**



COUNTY OF MAUI
Environmental
Protection &
Sustainability
Division

DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
Environmental Protection & Sustainability Division, Recycling Section
Recycling Hotline (808) 270-7880

COUNTY OF MAUI
DEPARTMENT OF ENVIRONMENTAL MANAGEMENT RECYCLING GRANT
FY 2020 (July 2019 – June 2020)

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**DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
RECYCLING GRANT (DEMGR) FY20 TIMELINE**

POSTED ON WEB:	Wed., Jan. 2, 2019
GRANT SUMMARY & FULL APPLICATION:	On line: www.mauicounty.gov/recycle (Located under "Grant Information") Pick-up/Drop-off: Environmental Protection & Sustainability Division (EP&S), Wells Street Professional Building, 2145 Wells Street, Suite 103, Wailuku, HI. 96793 Mailing Address: County of Maui, Environmental Protection & Sustainability Division, 200 South High Street, Wailuku, HI 96793 Grants Manager: 808-270-7847 or hana.steel@mauicounty.gov
FY 2020 GRANT APPLICANT INFORMATION SESSION:	Fri., Jan. 11, 3:00 p.m. – 4:00 p.m. – At the EP&S address above. Applicants from Lanai and Molokai may set up conference calls with the Recycling Grants Manager no later than Fri., Jan. 11, 2019.
GRANT SUMMARY DUE:	Wed., Jan. 16, on or before 4:00 p.m. Mail to or drop off at the address above or email completed signed Summary and one page budget to: hana.steel@mauicounty.gov
GRANTS REVIEW COMMITTEE:	Wed., Jan. 23, 3:00 p.m. – Summary Review
NOTIFICATION OF GRANT SUMMARY APPLICANTS:	Wed., Jan 23 – Acceptance/Rejection of Grant Summary. If approved, applicant will be asked to submit a complete, full application. The Grants Manager requests all approved applicants make an appointment to review their application documents.
FULL GRANT APPLICATION DEADLINE:	Postmarked by Wed., Feb. 3, at 4:00 p.m. , delivered or mailed to the addresses above. The full application and all required documents MUST ALSO BE SCANNED AND EMAILED to: hana.steel@mauicounty.gov
GRANTS REVIEW COMMITTEE:	Tues, Feb. 19, 3 p.m. – Full Grant Application Review
RECOMMENDATIONS TO DEM DIRECTOR:	Wed., Feb. 20 - Recommendations sent to Director, then grants forwarded to Corporation Counsel to draft grant agreement
APPROVAL BY MAYOR:	April – Mayor’s signature on Grant Agreement
COUNTY BUDGET:	May – Final Reading June – Mayor signs/vetoes budget
NOTIFICATION & AWARDS:	June – Grantees notified of awards (based upon funding)
GRANTS START:	July 1, 2019

THIS SCHEDULE IS SUBJECT TO CHANGE

NOTICE OF GRANT FUNDS

Notice is hereby given that the County of Maui, Department of Environmental Management (DEM) is soliciting grant applications/proposals from the public for the use of available funds from the:

DEPARTMENT OF ENVIRONMENTAL MANAGEMENT RECYCLING GRANTS, FISCAL YEAR 2020

Estimated Funds Available - \$239,500 (Subject to County Council appropriations)

Applications are available beginning **Tuesday, January 2, 2019**. Applications may be obtained online at www.mauicounty.gov/recycle or can be picked up between the hours of 8 am and 4 pm at the Environmental Protection & Sustainability Division (EP&S), Wells Street Professional Building, 2145 Wells Street, Suite 103, Wailuku. Submittal of the Grant Summary Application or the completed Grant Application does not guarantee funding.

A recommended grant information session will be held **Friday, January 11, 2019, at 3:00 pm** at the EP&S office listed above. If the applicant cannot attend the session, but wants to discuss the grant process, please call the Grants Manager at 270-7847.

The **Grant Application Summary** must be **postmarked by 4 p.m., Wednesday, January 16, 2019**, and mailed to: County of Maui, Environmental Protection & Sustainability Division, 200 South High Street, Wailuku, HI 96793 **or delivered to:** EP&S, 2145 Wells St., Suite 103, Wailuku, HI 96793 by the same date and time. Grant Summaries will be reviewed and applicants will be notified if selected to submit a full Recycling Grant Application.

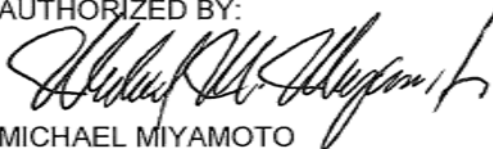
PLEASE DO NOT SUBMIT A FULL GRANT APPLICATION UNLESS REQUESTED TO DO SO.

Full DEM Recycling Grant Applications must be postmarked **Wednesday, February 14, 2019, 4 p.m., and mailed to:** County of Maui, Environmental Protection & Sustainability Division, 200 South High Street, Wailuku, HI 96793 **or delivered to:** EP&S, 2145 Wells St., Suite 103, Wailuku, HI 96793 by the same time. Applicants are responsible to ensure that all required documents are included with the application.

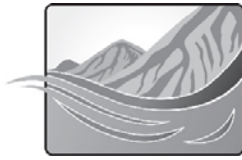
After the first round of grant applications are funded, there may be additional grant applications accepted in fiscal year 2020. Contact the Recycling Section after July 1, 2019 to find out if additional grant funds may be available. Grant funds are subject to annual Council approval. For more information, call the Recycling Section Hotline at 270-7880. For those calling from Lanai, call 1-800-272-0125 x7880, and from Molokai, call 1- 800-272-0117 x7880.

Projects must be consistent with the goals of the Department of Environmental Management, Environmental Protection & Sustainability Division and focus on landfill diversion. Potential projects may include but are not limited to: recycling education, equipment upgrades, program expansion, and the collection or processing of materials.

AUTHORIZED BY:



MICHAEL MIYAMOTO
DIRECTOR OF ENVIRONMENTAL MANAGEMENT



COUNTY OF MAUI
Environmental
Protection &
Sustainability
Division

RECYCLING GRANTS Fiscal Year 2020 (July 2019 - June 2020)
General Information, Application and Instructions
COUNTY OF MAUI, DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
ENVIRONMENTAL PROTECTION & SUSTAINABILITY DIVISION

POSTED ON WEB: Wed., Jan. 2, 2019

GRANT SUMMARY & FULL APPLICATION: www.mauicounty.gov/recycle
(Located under "Grant Information")

Pick-up/Drop-off: Environmental Protection & Sustainability Division
Wells Street Professional Building, 2145 Wells Street, Suite 103
Wailuku, HI 96793

Mailing Address: County of Maui, Environmental Protection & Sustainability Division
200 South High Street
Wailuku, HI 96793

Grants Manager: 808-270-7847 - hana.steel@mauicounty.gov

1. **Complete the Grant Application Summary and return it by mail, email, or drop it off by Wednesday, January 16, before 4:00 p.m.** *You will be notified if you are approved to submit a full grant application. If notified, please follow the instructions outlined below.*
2. **Full Application** and **ALL** required supporting documents must be received by the Environmental Protection & Sustainability Division by the deadline below. Mail or deliver to the above addresses.

FULL GRANT APPLICATION DEADLINE:
WEDNESDAY, FEBRUARY 13 at 4:00 p.m.

Mailed applications and all required supporting documents must be post marked **No Later Than 4:00 p.m. February 13.** All applicants should complete the application in time for submission by the deadline date. **NO EXCEPTIONS.**

3. Incomplete applications or applications with missing documents may be rejected.
4. **The Original** grant application must be **signed and dated.**
5. Early submittal of completed applications and required supporting documents is encouraged.

The Grants Manager is available during the application preparation period to answer questions and provide technical assistance with the application process. Please call 808-270-7847 if you need assistance or more information about the preparation and submission of this grant application and the required supporting documents.

You may call the Recycling Hotline:
Maui- 808-270-7880, Lanai- 800-272-0125 x7880, Molokai- 800-272-0117 x7880

**SUMMARY APPLICATION
RECYCLING GRANT FISCAL YEAR 2020**

COUNTY OF MAUI, DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
ENVIRONMENTAL PROTECTION & SUSTAINABILITY DIVISION

Please submit 6 copies of the completed Summary Application including the one-page budget. Summary Application must be scanned and emailed to Grants Manager and 6 copies of the application must also be mailed, hand delivered, or faxed.

Must be received or post-marked by WED., JAN 16, 2019, 4:00 p.m.

Email: hana.steel@mauicounty.gov

Phone: 808-270-7847

Fax: 808-876-4601

Mailing Address	Hand Deliver
County of Maui Environmental Protection & Sustainability Division 200 South High Street Wailuku, HI 96793	County of Maui Environmental Protection & Sustainability Division 2145 Wells Street, Suite 103 Wailuku, HI 96793

Project Name: _____

Legal Name of Organization: _____

Mailing Address: _____

Fax: _____ Website: _____

Project Manager: _____

Signature: _____

Phone: _____ E-mail: _____

Estimated FY 2020 Grant Amount Request: \$ _____

Please describe the purpose of this grant and how this project relates to the organization's mission in 100 words maximum. _____

What percentage of this grant request is for:

_____ % education

_____ % collection (include equipment)

_____ % marketing/promotion

_____ % processing (include equipment)

_____ % diversion

_____ % other

1. What percentage of the annual operating budget for this project does this grant request represent? _____ %
2. If the grant request is for education, explain how the effectiveness of the education program will be measured. _____

3. If the grant request is for marketing and/or promotion, explain how the effectiveness of the marketing campaign will be measured. _____

4. If the grant request is for landfill diversion, how many estimated tons will be diverted annually? If more than one material is to be diverted, include the estimated quantity of each.

5. If the grant request is for equipment (for collection or processing), how many estimated tons will be collected or processed annually? If more than one material, include the quantity of each.

6. Describe how this grant will increase the organization's productivity. How will this grant assist the organization to become self-sustainable, and when? _____

7. What percentage of the grant will be for:
_____ % salaries, benefits, payroll taxes,
_____ workers' comp. insurance _____ % sub-contractor(s)
_____ % liability insurance _____ % location overhead
_____ % equipment _____ % other:
8. Attach a one page estimated budget based on total grant funds requested.
Give an estimated value of in-kind services.

**APPLICATION INSTRUCTIONS
RECYCLING GRANT FISCAL YEAR 2020**

COUNTY OF MAUI, DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
ENVIRONMENTAL PROTECTION & SUSTAINABILITY DIVISION

FULL GRANT APPLICATION INSTRUCTIONS

Policies

1. ***Complete this form only if you have already submitted a Summary Application and have been notified by the Grants Manager to submit a full grant application.***
2. Only **one (1)** application will be accepted per agency/organization: All projects must be incorporated into a single grant application. Multiple applications from a single agency **will not be accepted.**
3. ***Umbrella Application:***
An Umbrella application is defined as a request for funding submitted by current and viable 501(c)(3) or (4) nonprofit organization on behalf of another group or entity, the purpose for which is to provide the group or entity with endorsement, viability and/or fiscal, administrative or program oversight.

Preparation

1. Use **only the current year FY 20** grant application and budget forms. The application is provided as a fillable form. The budget forms are available in MS Excel upon request. Narrative answers must not exceed **three (3) pages total** including the Executive Summary pages (*Not including attachments*). Answer questions in the order in which they appear. Type the question then provide the response.
2. **12-point** font is required for narrative. For all tables, 8-point font/type face is allowed.
3. Attachments – Include **ONLY REQUIRED** attachments. Place attachments in sequential order. Indicate clearly the corresponding section on each attachment.
4. **Do not** enclose or attach brochures, flyers, photos, maps, letters of support, client testimonies, maps, evaluation tools, graphs/tables/charts, etc.
5. **Do not** place the completed application in a folder of any kind. Securely fasten the proposal with paper clips.

Submission Format

Please submit proposal documents in the following order:

- | | |
|--------------------------|-------------------------|
| a. Application | d. Budget tables |
| b. Narrative responses | e. Budget attachments |
| c. Narrative attachments | f. Supporting documents |

APPLICATION FORM
RECYCLING GRANT FISCAL YEAR 2020

COUNTY OF MAUI, DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
ENVIRONMENTAL PROTECTION & SUSTAINABILITY DIVISION

Complete only if requested by Grants Manager

This form is fillable. Please remember to SAVE AND PRINT BEFORE CLOSING!
Software will not save your input.

FISCAL YEAR ENDING: JUNE 30, 2020

Date: _____

Grant Application for: _____
Project Name

Legal Name of the Organization: _____

Mailing Address: _____

Fax: _____ Website: _____

Project Manager: _____

Phone: _____ E-mail: _____

Contact Person (Grant writer): _____

Phone: _____ E-mail: _____

Amount of Request for County Grant Funds: \$ _____

Total annual budget of Organization: \$ _____

Has the applicant applied for other funds from the County for this fiscal year? ____ YES ____ NO

If yes, source/department: _____

In one (1) sentence, for each program or project, DESCRIBE THE PROGRAM OR PROJECT
for which funding is being requested:

 **REMEMBER:** *Submit a copy of this Application page with each of the five copies of the Narrative and Budget Sections.*

NARRATIVE GUIDELINES

INSTRUCTIONS

1. Provide narrative responses in each of the topical categories listed below on a separate sheet.
2. Place name of agency and program on the first page of the narrative (Executive Summary).
3. Answer the questions in the order in which they appear.

PROGRAM / SERVICE DESCRIPTION

A. Executive Summary:

Provide a comprehensive overview of the proposed program(s) or service(s) to be delivered. Please limit executive summary to one or two paragraphs for a maximum of 150 words.

B. Need:

What is the problem/need the proposed program is designed to meet?

C. Goal(s) and Objectives:

Clearly state the goal(s) of the program and the specific objectives to be achieved. Goals must be specific and have measurable results (i.e. outputs and/or outcomes).

D. Delivery Plans:

Please provide a clear and specific description of the proposed delivery of service. Detail the strategies, activities, and timeline in such a way that a clear linkage is shown with program goals and objectives.



E. Evaluation:

Describe how you will evaluate the program to ensure that goals and objectives are met and that the desired outcome will be provided.

F. Budget:

Describe how the requested funds will be utilized to achieve the proposed goals and objectives. Explain any deviations from prior year grant budget. This narrative section should dovetail with the budget tables.

REMEMBER:

-  Original signature(s) must be affixed on the application form (pp. 3-7).
-  Attach the first page of grant application to the narrative and budget pages and submit five (5) copies with the original (See: Supporting Documents Checklist.)

**COUNTY OF MAUI – DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
RECYCLING GRANT (FY 2020)**

I. QUALIFYING STANDARDS FOR APPLICANTS

Applicants must meet ALL of the following standards. ***(Please check off, as applicable):***

- Be a profit organization incorporated under the laws of the State of Hawaii, or a nonprofit organization determined to be exempt from federal income tax by the Internal Revenue Service
- In the case of a nonprofit organization, have a governing board whose members have no material conflict of interest and serve without compensation
- Have bylaws or policies which describe the manner in which business is conducted. Such bylaws or policies shall include provisions relating to nepotism and management of potential conflict of interest situations
- Be licensed and accredited in accordance with applicable requirements of federal, state and county governments, as necessary

II. GRANT CONDITIONS

The applicant agrees to accept the following terms and conditions prior to receiving a grant award. ***(Please check off, as applicable):***

- Be current in all state, federal and local tax payments.
- Have written policy statements, **signed and dated**, describing the applicant's policies complying with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, disability or physical handicap, marital status, parental status, arrest and court record, National Guard participation, or AIDS/HIV infection.
- Have written policies establishing non-discrimination in hiring and client services, sexual harassment, financial audit requirements and fiscal procedure and the applicant's program compliance standards for maintaining an alcohol, tobacco and drug free workplace environment.
- Comply with all grant budget revision conditions as specified in DEM/EPS/Recycling budget revision implementation and reporting policies and procedures.
- Applicants based outside of Maui County that propose program services within Maui County must establish a local advisory committee to meet regularly to provide planning and operational input to the County funded program. A designated representative of that committee must also meet regularly with and report directly to the applicant's board of directors.
- Meet applicable insurance requirements. Submit a Certificate of Liability Insurance from a Carrier rated no less than "A-" as established by "AM Best" or "Standard & Poor ratings," with the County of Maui named as "Additional Insured, providing the following minimum coverage of:
 - No less than a Combined Single Limit ("CSL") of liability coverage of \$1,000,000.
 - No erosion of limit by payment of defense costs, and
 - Minimum annual aggregate limit of \$2,000,000.
 - Notification to County 30 days before cancellation prior to scheduled expiration date.

Note: Please have Insurance Carrier use the attached sample, with specific attention to the "Description of Operations."

- Employ/contract persons qualified to engage in the activity to be funded in whole or in part by the County;
- Agree not to use County funds for purposes of entertainment perquisites (including food), or any other expenditure not directly related to the approved objectives of the project; and
- Allow DEM/EP&S/Recycling staff and/or County auditors full access to records, reports, files and other related documents to ensure that the program, management, administrative and fiscal practices of the recipient may be monitored and evaluated for the proper and effective expenditure of public funds. Records must be kept for five years.

III. **CONTRACTS**

Upon successful execution of a Grant Agreement of County Funds contract by all parties – incorporating the terms of this grant application, signatures, certification of funds, notarizations, and the inclusion of corporate and County seals – contracts will be awarded and grant funds disbursed only by the County Director of Finance.

Each grant agreement shall expressly state that the recipient or provider is not an employee of the County, but rather an independent contractor that will indemnify and hold harmless the County, the appropriate contracting applicant, involved officers, employees and agents from and against all claims, damages, or costs arising from, or in connection with, acts or omissions of the recipient or provider.

IV. **RECORDS AND REPORTS**

If applicable, applicant will provide DEM/EP&S/Recycling Section with a copy of the most recent management letter from the organization’s CPAs; if none was issued, explanatory documentation must be provided. The applicant must keep separate financial records and prepare reports – according to generally accepted accounting principles and as otherwise prescribed by law – detailing the use of County grant funds so that the status of these funds may be quickly determined at any time.

Reporting Requirements: At the end of each quarter of the fiscal year, each recipient of County funds must submit Quarterly Reports (unless otherwise indicated) WITHIN TWO (2) WEEKS OF THE CLOSE OF THE QUARTER to the EP&S/Recycling Section, according to the provisions specified below, and containing the following information:

- **Quarterly Allotment Request Report (QAR):** request for payment form
- **Quarterly Financial Report (QFR):** financial report pertaining to County funds received and expended or encumbered to date
- **Quarterly Narrative Reports (QNR):** program activities, staffing and overall program status;
- **Any other information,** statistics or documentation as may be specified in the Grant Agreement of County Funds or as requested or required by the DEM/EP&S/Recycling Section for the purposes of grant management and/or program performance evaluation.

V. **QUARTERLY ALLOCATION OF FUNDS**

Grant funds will be disbursed to Grantees through a quarterly allocation process (unless otherwise indicated) which must include documentation as specified in “Quarterly Reports” (above). Allowable expenses include those itemized in the grant application budget and expenses approved by the Grants Manager. The fund’s disbursement schedule is based on the conditions for payment as specified in the Grant Agreement of County Funds.

VI. RECOGNITION

The grant recipient shall ensure that the County receives appropriate recognition in all publicity and/or advertising materials, for activities and/or events funded in full or in part by the County.

VII. GRIEVANCE PROCEDURE

The applicant will adopt and maintain a grievance procedure to assure proper accounting for any concerns and complaints about its programs or services that may arise from its members, employees, clients or members of the public.

VIII. DISCLOSURE OF INFORMATION

All information, data, and/or any other material provided to the County by virtue of this application, shall be subject to the Uniform Information Practices Act (UIPA), Chapter 92F, Hawaii Revised Statutes. All such material is deemed government record, open to the public, and may be provided to other public and/or private funding sources.

IX. CONTINUED ELIGIBILITY

Any applicant or recipient who withholds or omits any material facts or deliberately misrepresents such facts to the County of Maui shall: 1) immediately be disqualified from consideration for DEM/EP&S/Recycling Grant funding; or 2) be in violation of the terms of the Grant Agreement of County Funds. In either case a grant agreement may be terminated by the County and the recipient or provider may be liable to reimburse all or a portion of any funds received from the grant.

Such recipient or provider shall be prohibited from receiving any grant, subsidy or purchase of service agreement from the County of Maui for a period of up to five years.

X. ACKNOWLEDGMENT

(Legal Name of Organization)

Here by agrees to administer the _____
(Program Title)

In accordance with the regulations, policies and procedures prescribed by the DEM/EP&S. Distribution of DEM Recycling grant funds is limited solely to grantees in full compliance with DEM/EP&S/Recycling regulations, policies and procedures. DEM/EP&S/Recycling Section reserves the right to withhold grant distributions at any time the grantee is deemed not to be in compliance.

XI. AMENDMENTS TO THE APPLICATION/EVALUATION

Prior to the execution of any changes, additions, amendments or deletions to any portion(s) of the grant application or duly executed Grant Agreement of County Funds, the applicant must submit a written request and justification for those changes to the DEM/EP&S/Recycling Section for prior review and approval by the Grants Manager.

The applicant must cooperate and assist the DEM/EP&S/Recycling Section in any effort to evaluate, inspect or otherwise monitor any and all practices, policies, procedures or activities pursuant to this application or any grant designation or allocation received as a result of this application.

XII. AUTHORITY AND CAPACITY OF APPLICANT

The undersigned hereby certify that the applicant has read and understands all terms, conditions and specifications subject to this application for Recycling Grant funding and that it has the authority and capacity to develop and submit this application, and to fully administer the program(s) pursuant to this application.

Print Name of Board President/Chairperson

Signature of Board President/Chairperson

Date_____

Print Name of Executive Director/Manager

Signature of Executive Director/Manager

Date_____

UNSIGNED APPLICATIONS WILL NOT BE ACCEPTED.

**COUNTY OF MAUI
DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
RECYCLING GRANT (FY 2020)**

SUPPORTING DOCUMENTS CHECKLIST

*Please Note: This form is fillable on the computer. However, PRINT AND SAVE BEFORE CLOSING!
Software may not save your input.*

Please submit the following documents or items **in the order listed below**:

- One (1) complete ORIGINAL Grant application**, signed and dated, with **all** supporting documents.
- Five (5) copies of ONLY: The first page of the application form and the completed narrative and budget sections.**

I. ONE (1) EACH OF THE FOLLOWING DOCUMENTS:

 Attach to only the **ORIGINAL** grant application document.

- ORGANIZATION FLOWCHART** – show placement of proposed program within the organization.
- LIST OF CURRENT BOARD OF DIRECTORS** and Officers to include:
 - ✧ Dates of expiration of terms of office,
 - ✧ Addresses and phone numbers of board members,
 - ✧ Board of Directors meeting schedule for FY 2019 - 2020.
- ANNUAL FINANCIAL STATEMENTS** - Applicant's past two (2) years' annual financial statements:
 - ✧ Prepared by a qualified accountant and approved/signed by the Executive Director; **OR**
 - ✧ Prepared and signed by a Certified Public Accountant (CPA).
- CURRENT AUDIT** - All nonprofit and profit organizations **must** have an audit prepared by an independent CPA at least every **three (3)** years.
- IRS FORM 990** - Most current document for fiscal or calendar year.
- CERTIFICATE OF LIABILITY INSURANCE** – From an authorized Insurance Carrier with County of Maui as Additional Insured meeting County minimum requirements.
- SUPPORTING DOCUMENTS AFFIDAVIT** - **Signed** by the Executive Director and Board Chairperson. (*See: Instructions to determine if this document applies to your application*).

II. IF YOU ARE A NEW AGENCY OR IF YOU HAVE NOT SUBMITTED A RECYCLING GRANT APPLICATION WITHIN THE PAST THREE (3) YEARS, YOU MUST SUBMIT ALL OF THE ABOVE DOCUMENTS AND ALSO SUBMIT THE FOLLOWING:

- INTERNAL REVENUE SERVICE (IRS) LETTER** - Verification of agency's nonprofit tax-exempt status; **OR**, verification of current tax status for profit organizations (whichever applies).
- ARTICLES OF INCORPORATION** - Must be **signed and dated**.
- BYLAWS** - Must contain specific clauses regarding nepotism and conflict of interest and must be **signed and dated**.

**COUNTY OF MAUI
DEPARTMENT OF ENVIRONMENTAL
MANAGEMENT RECYCLING GRANT (FY 2020)**

SUPPORTING DOCUMENTS AFFIDAVIT

Form is fillable on the computer. However, PRINT COMPLETED FORM BEFORE CLOSING as software may not save input.

SUBMIT this form if:

- **Applicant is currently receiving a Recycling Grant for FY2019** or Line Item funding and the Applicant agency's contract is currently administered by the DEM/EP&S Recycling Section; and,
- **There have been NO changes** within the past year in the Applicant agency's Bylaws, Articles of Incorporation or Nonprofit 501(c)(3) or (4) status and an agency audit or financial statements have been submitted and accepted in accordance with the requirements specified in the Supporting Documents Checklist.

Do NOT use this form if:

- **Applicant agency is submitting a DEM Recycling Grant Application for the first time.** If you are applying for a DEM Recycling grant for the first time, you must submit all of the documents specified in the Supporting Documents Checklist.

Please check all that apply

- Applicant agency is currently a valid 501(c) (3) or (4) organization. There has been no change in the non-profit status of this agency within the past year.
- There have been no changes, additions, deletions or amendments to the existing and lawfully executed Bylaws of the Applicant agency within the past year.
- There have been no changes, additions, deletions or amendments to the existing and lawfully executed Articles of Incorporation of the Applicant agency within the past year.
- This agency has submitted and received approval of a valid Audit and/or Financial Statement(s) in accordance with the requirements specified in the Supporting Documents Checklist.

I hereby certify that the information provided above is true and correct to the best of my knowledge.

Name of Agency

Address

Executive Director-Signature

Date

Board President/Chair-Signature

Date

COUNTY OF MAUI - FY 2020
DEPARTMENT OF ENVIRONMENTAL MANAGEMENT RECYCLING GRANT
PROGRAM BUDGET SUMMARY

This form is fillable. Please remember to SAVE AND PRINT BEFORE CLOSING!
Software will not save your input.

Organization Name: _____ **Original Date:** _____
Program: _____ **Revision No.:** _____
Budget Period: _____

EXPENSE CATEGORY	AMOUNT REQUESTED	OTHER* RESOURCES	TOTAL BUDGET
A. Personnel (Salaries, Taxes & Benefits)			\$ -
B. Occupancy			\$ -
C. Equipment			\$ -
D. Supplies			\$ -
E. Promotion, Printing			\$ -
F. Insurance			\$ -
G. Shipping, Freight			\$ -
H. Travel/Auto Expense (staff travel, gas)			\$ -
I. Other			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
TOTAL GRANT REQUEST:	\$ -	\$ -	\$ -

*Breakdown of Other Resources	
SOURCE	AMOUNT
TOTAL:	\$ -

**RECYCLING GRANT FY 2020
BUDGET SCHEDULES**

Organization Name: _____
 Program: _____
 Budget Period: _____

Original Date: _____
 Revision No.: _____

A. PERSONNEL

SCHEDULE OF PERSONNEL (include % of 40 hr. week)	AMOUNT REQUESTED	OTHER RESOURCES	TOTAL BUDGET
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
TOTAL PERSONNEL COST	\$ -	\$ -	\$ -
Justification:			

B. OCCUPANCY

SCHEDULE OF OCCUPANCY	AMOUNT REQUESTED	OTHER RESOURCES	TOTAL BUDGET
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
TOTAL OCCUPANCY COST	\$ -	\$ -	\$ -
Justification:			

**RECYCLING GRANT FY 2020
BUDGET SCHEDULES**

Organization Name: _____
 Program: _____
 Budget Period: _____

Original Date: _____
 Revision No.: _____

C. EQUIPMENT

SCHEDULE OF EQUIPMENT	AMOUNT REQUESTED	OTHER RESOURCES	TOTAL BUDGET
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
TOTAL EQUIPMENT COST	\$ -	\$ -	\$ -
Justification:			

D. SUPPLIES

SCHEDULE OF	AMOUNT REQUESTED	OTHER RESOURCES	TOTAL BUDGET
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
TOTAL SUPPLIES	\$ -	\$ -	\$ -
Justification:			

**RECYCLING GRANT FY 2020
BUDGET SCHEDULES**

Organization Name: _____
 Program: _____
 Budget Period: _____

Original Date: _____
 Revision No.: _____

E. PROMOTION, PRINTING

SCHEDULE OF PROMOTION, PRINTING	AMOUNT REQUESTED	OTHER RESOURCES	TOTAL BUDGET
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
TOTAL PROMOTION, PRINTING COST	\$ -	\$ -	\$ -
Justification:			

F. INSURANCE

SCHEDULE OF INSURANCE	AMOUNT REQUESTED	OTHER RESOURCES	TOTAL BUDGET
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
TOTAL INSURANCE COST	\$ -	\$ -	\$ -
Justification:			

**RECYCLING GRANT FY 2020
BUDGET SCHEDULES**

Organization Name: _____
 Program: _____
 Budget Period: _____

Original Date: _____
 Revision No.: _____

G. SHIPPING, FREIGHT

SCHEDULE OF SHIPPING, FREIGHT	AMOUNT REQUESTED	OTHER RESOURCES	TOTAL BUDGET
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
TOTAL SHIPPING, FREIGHT COST	\$ -	\$ -	\$ -
Justification:			

H. TRAVEL, AUTO EXPENSE

SCHEDULE OF TRAVEL, AUTO EXPENSE	AMOUNT REQUESTED	OTHER RESOURCES	TOTAL BUDGET
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
TOTAL TRAVEL, AUTO COST	\$ -	\$ -	\$ -
Justification:			

QUARTERLY ALLOTMENT REQUEST (QAR)
 COUNTY OF MAUI, DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
 SOLID WASTE DIVISION - RECYCLING SECTION
 Fiscal Year 2020 (July 1, 2019 to June 30, 2020)

Grant No.:	Date of Request:	FOR OFFICE USE ONLY
Organization Name and Address:		Index Code(s):
		Vendor No.
Program:		

(a) Grant Amount	(b) Previous Payment(s)	(c) This Request	(d) Year-to-Date (b+c)	(e) Grant Balance (a-d)
	\$ -		\$ -	\$ -

I certify that work for which payment is being requested was performed in accordance with the terms of the current fiscal year grant agreement of county funds.

Name/Title (Please type or print)	Signature	Date
-----------------------------------	-----------	------

Approved by:				FOR OFFICE USE ONLY			
RECYCLING COORDINATOR		Date		EP&S GRANTS MANAGER		Date	

TO BE COMPLETED BY ORGANIZATION:

	Quarter	Pmt No.	Description	Amount Requested	Cumulative Amt Received	For Office Use Only
√	0	1	25% advance payment*			
	1st	2	25% or cumulative payments not to exceed 50% of grant*		\$ -	
	2nd	3	25% or cumulative payments not to exceed 75% of grant*		\$ -	
	3rd	4	15% or cumulative payments not to exceed 90% of grant*		\$ -	
	4th	5	10% or cumulative payments not to exceed 100% of grant*		\$ -	

*The amount or percentage of a recipient's quarterly allotment payments may vary in accordance with expenditures reported in the QAR. The Recycling Coordinator may make adjustments to the amount paid in advance and/or quarterly payments pursuant to the conditions for payment specified in the Grant Agreement of County funds.

Comments:	FOR OFFICE USE ONLY	
	1. Grant Amount	
	2. Year-to-Date Expenditures (Total on column "C", pg. 2)	
	3. Previous Payments Received (Should equal to Previous Payments; see above)	
	4. Difference (Line 2 minus line 3, if amount is negative, reflect as "0")	
	5. 10% of Line 1	
	6. Allotment Payment (Line 4 or line 5; whichever is less)	
	7. Amount of funds to be lapsed	

QUARTERLY FINANCIAL REPORT
COUNTY OF MAUI, DEM/SWD/RECYCLING GRANT
Fiscal Year 2020 (July 1, 2019 to June 30, 2020)

Organization: _____ Advance Payment-#1 _____ July - September (#2)
Program: _____ Oct.-Dec.- (#3) _____ Jan. - March (#4)
Grant No.: _____ April - June Final Payment (#5) Attach Tax Clearance Certificate

Category		THIS COUNTY GRANT ONLY				
		Grant Amount	Expenditures Previously Reported	Current Quarter Expenditures	Y-T-D Expenditures (columns b+c)	Y-T-D balance
OPERATING EXPENSES		(a)	(b)	(c)	(d)	(e)
A	Personnel - Salaries					\$ -
	Payroll Taxes				\$ -	\$ -
	Personnel Benefits				\$ -	\$ -
B	Occupancy				\$ -	\$ -
C	Equipment				\$ -	\$ -
D	Supplies				\$ -	\$ -
E	Promotion, Printing				\$ -	\$ -
F	Insurance				\$ -	\$ -
G	Shipping, Freight				\$ -	\$ -
H	Travel/Auto Expense				\$ -	\$ -
I	Other (Specify)				\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
					\$ -	\$ -
TOTAL OPERATING EXPENSES		\$ -	\$ -	\$ -	\$ -	\$ -

The County of Maui reserves the right to request any documentation and/or verification of expenses stated.

Prepared by: Name and Title (print or type) _____ Signature _____ Date _____

Narrative Section (If there are any deviations, please answer the following questions on a separate sheet of paper)

1. Explain any deviations (+/-15%) in year-to-date expenditures from the commensurate year-to-date quarterly proration, i.e. if 3rd. Quarter "y-t-d" expense amount to only 50%, explain -25% deviation in expenditure.
2. How will the deviation in expenditure rate be adjusted in subsequent quarter(s)?
3. Explain any other significant fiscal or budgetary matters; impacts to overall agency operations and/or delivery of services

QUARTERLY ALLOTMENT NARRATIVE REPORT
 DEPARTMENT OF ENVIRONMENTAL MANAGEMENT,
 ENVIRONMENTAL PROTECTION & SUSTAINABILITY DIVISION, RECYCLING SECTION
 COUNTY OF MAUI – RECYCLING GRANT
 FY 2020: JULY 1, 2019– JUNE 30, 2020

Organization: _____				Grant No.: G _____	
Program Name: _____					
___ July to September	___ October to December	___ January to March	___ April to June	___ Final	

INSTRUCTIONS

- ☞ Provide a narrative response to each question below.
 (Please refer to your current grant proposal as a guide in preparing your responses.)
- ☞ Respond to each question below in the order they appear.
- ☞ Limit your responses to no more than four (4) pages in total.

I. Program Status Summary

1. List each program goal/benchmark for this program year.
2. What objectives/action steps were completed this quarter for each goal?
3. What measurable outcomes were achieved this quarter?
4. What objectives/actions steps will be accomplished during the next quarter (except if this is for the last quarter)?

II. Narrative Report

1. What program challenges occurred this quarter and how were they addressed and/or resolved?
2. What staffing changes occurred this quarter? Report any increase in salaries, etc.
 What staffing changes are pending?

Narrative Report Prepared by:

Print Name/Title

Signature

Date

Narrative Report Reviewed/Approved by:			Office Use ONLY
_____	_____	_____	
<i>Print Name/ Title</i>	<i>Signature</i>	<i>Date</i>	

