

37-14

GRANT BRIEFING DOCUMENT

rev. 2/13/13

From:

Name: Cynthia Gudenius Dept: Planning & Zoning Phone: 410-263-7961

This is a request to

- review, approve, and/or sign a grant agreement/award
other

Grant title: State of Maryland Department of Natural Resources Critical Area Commission for the Chesapeake and Atlantic Coastal Bays Grant-in-Aid Program

Grantor: State of Maryland, DNR, Critical Area Commission Amount: \$ 6,000.00

Attestation:

- Match is not required.
Match is required. Match will be met in the form of

I attest that this asset has been approved/appropriated in

Department Director signature Planning and Zoning Dept 5/1/14 Date

Routing table with columns: Routing, Initials, Date In, Date Out, Comments. Rows include: originating Dept Director, Grants Coordinator, Finance Director, City Attorney, City Manager, Mayor, City Clerk, Finance Committee, Finance Dept.



Return to Originating Department



Grant Title State of MD Dept of Natl Res Critical Area Comm. for the Chesapeake and Atlantic Coastal Bays Grant-in-Aid Program

Grant Award (\$) 6,000.00      Originating Department(s): Planning and Zoning

Dept Contact (Name/Phone): Cynthia Gudenius

Expenditure Account	Revenue Source				Total per Expend. Type	Comments
	Federal	State	Local (Matching)	Other		
Salaries					0.00	
Benefits					0.00	
Overtime					0.00	
Supplies					0.00	
Telephone					0.00	
Electricity					0.00	
Fuel and Oil					0.00	
Training & Education					0.00	
R & M - Equipment					0.00	
Special Programs					0.00	
Contract Services					0.00	
Capital Outlay					0.00	
Implementation of Program		6,000.00			6,000.00	
other (fill-in)					0.00	
other (fill-in)					0.00	
other (fill-in)					0.00	
other (fill-in)					0.00	
other (fill-in)					0.00	
<b>Total</b>	<b>0.00</b>	<b>6,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>6,000.00</b>	

TOTAL EXPENDITURES\*: 6,000.00

\* May be different from Grant Award \$ if there is a match requirement.

Match is not required.

Ann. Tol. 5/1/2014  
Department Director Signature/Date

Planning and Zoning  
Department

Match is required. Match will be met in the form of <sup>(1)</sup> \_\_\_\_\_

I attest that this asset has been approved/appropriated in <sup>(2)</sup> \_\_\_\_\_

\_\_\_\_\_  
Department Director Signature/Date

\_\_\_\_\_  
Department

COMMENTS: This is an annual grant for the FY2015 fiscal year from the State of Maryland for implementation of the City's local Critical Area Program.

(1) Examples (include dollar amounts if applicable): Cash match, equipment loan, staff salaries, volunteer time, contribution from non-City agency.

(2) Examples: FY \_\_ operating budget, a memorandum of understanding, City Council resolution/ordinance.

**GRANT Briefing Document, continued**

*Provide a short narrative. Include:*

-program description	- purpose of funds	- due dates
-grant period	-amount of request or award	
-special features, e.g., environmental impact implications, notarization required		

Two (2) copies of the grant must be signed and returned to the Critical Area Commission no later than May 16, 2014.

The Grant Agreement becomes effective upon the date of execution by the Commission and expires 6/30/2015. The total grant amount is \$6,000 for the fiscal year.

The grant is a benefit to the City of Annapolis as it helps to offset the salaries and expenses incurred for the implementation of the various tasks of the local Critical Area Program and compliance with State regulations.

No matching funds are required.

<sup>1</sup> Examples: cash match, equipment loan, staff salaries, volunteer time, contribution from non-City agency.

<sup>2</sup> Examples: FY\_\_ Operating Budget, a memorandum of understanding, City Council resolution/ordinance.