



Coon Creek Watershed District
13632 Van Buren St NE
Ham Lake, MN 55304
763.755.0975

CCWD Water Quality Cost Share Program Grant Application- Water Quality Improvement Planning Category

Applicant Information	
Name, Title	
Organization	
Address	
Email	
Phone	

Project Information- <i>Be clear & concise; attach additional pages if necessary</i>	
Title	
Brief Description of proposed project planning activity <i>What are you proposing and why?</i>	
Water Quality Outcomes <i>Describe how the proposed work enables you to pursue water quality benefits above and beyond your normal operations and any permitting requirements</i>	

<p>Notes (optional)</p> <p><i>Please include any other relevant information</i></p>	
<p>Total Estimated Project Cost</p>	<p>\$</p>
<p>Total Cost Share Amount Requested (cannot exceed 50% of total cost)</p>	<p>\$</p>

<p>Signature</p>	
<p>Date</p>	

Note: Application is considered incomplete without signature. Please attach related documents as needed

Fill out budget form below or attach any quotes/estimates
(only include line items related to stated water quality objectives)

Item	Unit	Quantity	Unit Cost	Total
Total				\$