

Albemarle RC&D Council
730 N Granville St Suite B
Edenton NC 27932
Phone: 252.482.7437 Ext. 4 Fax: 252.482.3428

Project Proposal Application

(Applications Accepted Quarterly: Jan. 1, April 1, July 1, Oct. 1)

Date: _____

Sponsor Data

Sponsor Name: _____ Contact Person: _____

Address: _____ Telephone: _____

City: _____ State: _____ Zip: _____

Project Data

Project Name: _____

Assistance Type Requested: (check one or more)

Technical Assistance

Planning Assistance

Info/Ed Activities

Grant Writing

Organizational

Support Other

Problem Statement

(Describe the problem and its effects on the local community or area.)

Objective

(State the objective of the proposed project.)

(over)

Benefits

(State the effects that the completed project will have on the economic, social & environmental conditions of the area.)

Implementation Strategy

(List names of individuals, agencies, organizations, etc., that could assist or partner on this project.)

List estimated cost(s) for the proposed project.

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****For Council Use Only****

This measure addresses Goal _____, Objective # _____ of the Albemarle RC&D Council Area Plan.

Reviewed by the Albemarle RC&D Council Board on _____(date).

Action Taken:

- _____ Approved
- _____ Disapproved
- _____ Additional Data Needed

Assigned Project Number #: _____

Signed: _____ Date: _____
Council Chairman