



GEORGIA DEPARTMENT OF NATURAL RESOURCES  
 WILDLIFE RESOURCES DIVISION  
 &  
 UNITED STATES FISH & WILDLIFE SERVICE



## CLEAN VESSEL ACT GRANT APPLICATION

<b>I - GRANTING AGENCY INFORMATION</b>		
Mailing Address: Georgia Department of Natural Resources Wildlife Resources Division 2067 US Hwy 278 SE	Telephone Number: (706) 557-3305	Fax Number: (706) 557-3030
	City, State: Social Circle, Georgia	Zip Code: 30025-4743
Contact Person: Clint Peacock	E-mail: clint.peacock@dnr.ga.gov	

<b>II - APPLICANT INFORMATION</b>		
Cooperating Agency Name:	Telephone Number:	Fax Number:
Mailing Address:	City:	Zip Code:
Contact Person:	Telephone Number:	E-mail:

<b>III - PROJECT LOCATION</b>		
Facility Name:	County:	Body of Water:

**IV – GRANT AMOUNT/PROJECT COST**

**TOTAL ESTIMATED COST OF PROJECTS (FROM “GRAND TOTAL” BELOW):** \$ \_\_\_\_\_

**V - PROJECT DESCRIPTION**

Summary of scope of work to be performed: (\*\*Please include type of connection: i.e. Direct tie to sewer, holding tank, septic etc)

If project is a replacement, what is the age of the existing unit? \_\_\_\_\_

<b>PROPOSED PROJECT COMPONENTS</b>	<b>Replacement</b>	<b>New Construction</b>	<b>Estimated Cost</b>
PUMPOUT			
DUMP STATION			
PORTABLE PUMPOUT			
SEWAGE HOOK-UP			
TRENCHING/DIGGING			
STORAGE TANK, SIZE _____			
LIFT PUMP			
PUMPOUT DOCK			
OTHER:			
OTHER:			
OTHER:			
Include cost estimates from contractors and vendors. If doing work yourself provide breakdown of each component of the project.	<b>GRAND TOTAL</b>		
	<b>Total Funds Requested (75%)</b>		
	<b>Total Applicant In-Kind or Cash Match (25%)</b>		

**Match Requirements:** Will the 25% match requirement be met by cash only, in-kind services only or a combination of both? Please describe below:

**VI - PROJECT INFORMATION**

WILL THE PROJECT BE OPEN TO THE GENERAL PUBLIC INCLUDING MINORITIES, ELDERLY, AND PHYSICALLY CHALLENGED? YES \_\_\_\_ NO \_\_\_\_

NAMES OF ADJACENT MARINAS WITH PUMPOUT AND/OR DUMP STATION FACILITIES.

Name	Distance by boat (miles)
1.	
2.	
3.	
4.	

**VII - PROJECT JUSTIFICATION**

NARRATIVE: Please answer the following questions. 1. What specific needs are there for additional or improved pumpout/dump stations in your area? 2. Why is the project necessary for your marina? 3. How many docks are provided in your marina/facility? (Include all seasonal docks, transient docks, and dry rack storage.) 4. Of the boats docked at your facility, how many have a Type III MSD holding tank? 5. How many have portable toilets on board?

(Attach additional sheets titled "PROJECT JUSTIFICATION" and respond to the questions above.)

Empty space for project justification narrative.

**VIII – REQUIRED ATTACHMENTS**

	1. AREA MAP (General area of Georgia showing where your marina is located.)
	2. SITE MAP (County or City map showing where your marina is located.)
	3. SITE VICINITY MAP (Map illustrating the exact location of the proposed project.)
	4. <b>MOST IMPORTANT - SCHEMATIC SITE PLAN</b> showing the layout of the marina, location of where project components will be developed. All project components should be clearly labeled on the plan as appropriate as existing, proposed, sewage connection and trenching lines, holding tank location, etc. (Sketches and/or drawing are acceptable)
	5. DIRECTIONS to the site.
	6. COPIES OF SUPPLIER OR CONTRACTOR ESTIMATES showing the cost of each component of the project. If doing work yourself, include a breakdown of materials and labor costs on separate sheet of paper.
	7. PHOTOGRAPH OF THE SITE WHERE PUMP OUT WILL BE LOCATED. Photo is necessary to evaluate the location for ADA accessibility. (Digital photo is acceptable; email it as an attachment to email address below.)

**APPLICANT SIGNATURE**

Application is hereby made for the activities described herein. I certify that I am familiar with the information contained in the application, and, to the best of my knowledge and belief, this information is true, complete, and accurate.

\_\_\_\_\_

Print/Type Name

\_\_\_\_\_

Marina/Facility

\_\_\_\_\_

Applicant Signature

Date

\_\_\_\_\_

Title

**RETURN TWO COPIES OF APPLICATION WITH ORIGINAL SIGNATURES AND ATTACHMENTS TO:**

Georgia Department of Natural Resources  
Wildlife Resources Division  
2067 US Hwy 278 SE  
Social Circle, GA 30025-4743  
ATTN: Clint Peacock  
Email: [clint.peacock@dnr.ga.gov](mailto:clint.peacock@dnr.ga.gov)