**Cowlitz Restoration and Recovery (CRR) Program**

**Hatchery-Associated Production (HAP) Projects**

**Project Application**

Refer to the Appendix to the CRR Program 2024 Application Manual for HAP Projects when completing this form.Respond to each question individually, expand response sections as needed. Do not summarize answers collectively in essay format in a separate document. The reviewers will use this information to evaluate your project.

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| **Project Name** |
|  |
| **Proponent Name, Organization, and Contact Information** |
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| **Proponent Organization Type (check one)** |
| [ ] Conservation group registered as a non-profit [ ] Native American Tribe[ ] Regional fisheries enhancement group [ ] Conservation District[ ] Local and state governmental entity [ ] Federal agency[ ] Other (describe) |
| **Partner Organization(s) and Type (if any)** |
|  |
| **Project Purpose** |
|  |
| **Project Overview**  |
|  |
| **Project Team** |
|  |
| **Detailed Project Description** |
|  |
| **Estimated Cost***Note the completed spreadsheet-based budget tool also is required with this application*.  |
| Total cost:Total grant request:Other funding sources and status (describe): |
| **Evaluation Questions, Benefits to Fish*** What are the benefits to fish species/populations of interest?
* Does this project have detrimental impacts for any native species in the basin?
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| **Evaluation Questions, Certainty of Success*** Is the scope and approach of the project reasonable and achievable? Describe how.
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| **Evaluation Questions, Cost*** Is cost appropriate for/in alignment with the approach? Describe how, including how the cost is reasonable relative to the amount and type of work proposed.
* Are the benefits to recovery appropriate for the cost? Describe how.
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| **Evaluation Questions, CRR Program Priorities*** How well does the project align with the management approaches and policy described in basin documents (e.g., CRR Implementation Plan and Strategy, FHMP and FHMP Transition Plan, HGMP, AOP, Monitoring Plan)? You can find these documents, or links to them, at [MyTPU.org/CRR](https://www.mytpu.org/community-environment/fish-wildlife-environment/cowlitz-river-project/cowlitz-restoration-recovery-project/). Describe how.
* Does the project occur in, or have meaningful benefit for, the proper geographic area? Describe how.
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|  |
| **If not addressed above, describe how your project aligns with required HAP Project Guiding Principles (manual p. 4)** |
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| **If not addressed above, describe how your project aligns with recommended HAP Project Guiding Principles (manual p.4)** |
|  |

**SIGNATURE PAGE (complete, print, sign, and scan to include in application)**

Tacoma Power is hereby requested to review and consider this application for grant funding for the project described in this application and named below. This application follows the guidelines supplied by Tacoma Power. I/we certify that to the best of my/our knowledge, the information herein is true and correct. Should this proposal be funded, I/we agree to furnish any additional information necessary to execute a Project Agreement upon request by Tacoma Power. I/we are aware the aforementioned project, if funded, is paid on a reimbursement basis. I/we agree that any additional resources required to complete the project herein is my/our responsibility and agree that the project will be completed as described. Tacoma Power has authorization to take photos of the project and use them in any non-commercial fashion. By signing this document the applicant agrees that decisions by Tacoma Power, including, but not limited to its compliance with the requirements of this program, are solely at the discretion of Tacoma Power, and a decision concerning the content of an application and the granting or denial of a grant is deemed conclusive.

Organization name:

Address:

City/Town: State: Zip:

**Authorized Representative**

**Name (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NON-PROFIT ORGANIZATION DOCUMENTATION (non-profits only)**

Enter the name of the organization as shown on IRS documents.

Attach a copy of the Internal Revenue Service letter granting non-profit status as a 501 (c) (3) or a 501 (c) (4) organization.

Attach a copy of the Mission Statement or equivalent showing the organization’s primary mission as a conservation group.

Provide a list of current board of directors.