



MICHIGAN DEPARTMENT OF ENVIRONMENT, GREAT LAKES, AND ENERGY

Water Resources Division

Planning Cover Sheet

(Authorized by 1994 PA 451)

Completion of this form is required in order to receive grant consideration

Project Name: _____

Project Location (Primary County): _____

Water Body Name: _____ HUC: _____

Centroid Latitude: _____ Centroid Longitude: _____

Organization Name: _____

Organization Address: _____

City: _____ State: _____ Zip Code: _____

Organization UIE #: _____ Organization Federal ID #: _____

SIGMA VSS Vendor Code: _____ Address ID: _____

Contact Person: _____ Title: _____

Contact's E-Mail: _____ Phone: _____

Proposal for a new plan

Proposal to update existing plan

Amount Requested	+Local Match	= Project Total	Match %
\$ _____	\$ _____	\$ _____	_____

Senate District Number(s): _____

Representative District Number(s): _____

Person with Grant Acceptance Authority:

Name: _____ Title: _____

Signature: _____ Date: _____

May be signed manually, digitally, or typed.

This is page 1 of all proposals. Continue on the next page.

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