**Water Conservation and Quality Improvement Grant Program**

**Application Form**

**Please carefully complete and review this form before submitting. If you are unclear on any of the sections, please consult the guide to the application on our website, or contact the Operations and Grants Manager at 250-469-6270 or** [**grants@obwb.ca**](mailto:grants@obwb.ca)**.**

REQUIRED LETTER OF SUPPORT

**All applications MUST include a letter of support from the local government in the area where the project will occur. This requirement is detailed in section 3.5 of the Program Guide. Contact your local government well in advance (4 weeks) of the application deadline.**

SCORING APPLICATIONS

**The WCQI program is a competitive grant program, which is usually over-subscribed. Applications are assessed out of a total score of 100, with the possibility to gain up to 10% bonus points based on the board-approved annual themes (available on our website). Some headings on this application form include the percentage value that your answer is worth, for 70% of the total. The quality of this application will count for 10% of the scoring, and 20% is allocated based on how well the project complements current OBWB activities.**

**Please limit your responses to answering the questions on this form, focussing on accuracy, brevity and clarity. Background material and letters of support may be submitted as necessary, or may be requested by OBWB to supplement you application.**

**Enter Grant Application Year: 2019**

A. PROJECT SUMMARY

**Organization**: Click here to enter text.

**Project Title**: Click here to enter text.

**Supporting Local Government**: Choose an item.

**Total Project Budget: $**Click here to enter text. **Grant Requested: $**Click here to enter text.

**Project Category:** Choose an item.

B. PROJECT CONTACT

**Name**: Click here to enter text.

**Title**: Click here to enter text.

**Phone**: Click here to enter text.

**Email**: Click here to enter text.

**Address:** Click here to enter text.

C. GOALS

**What are you trying to achieve with this project?**

Click here to enter text.

D. DELIVERABLES

**What are the expected deliverables of the project?**

Click here to enter text.

E. MEASURABLE OUTCOMES

**How will you know you have achieved your goals?**

Click here to enter text.

F. METHODS

**Briefly describe how your organization will meet its goal.**

Click here to enter text.

G. TIMELINE

**Project Start Date:** Click here to enter a date. **Projected Completion Date:** Click here to enter a date.

**Please list all anticipated phases/activities with dates of completion in the space below. If project is multi-phase, indicate which phase will be funded through this grant.**

Click here to enter text.

H. VALLEY-WIDE BENEFIT (20%)

**Recognizing that the Okanagan is one valley with one water, how does this project benefit the valley as a whole? Describe how the outcomes of the project can benefit others in the Okanagan.**

Click here to enter text.

I. FOCUS ON ACTION (15%)

**Summarize how the project focusses on action for improving water quality or conserving water.**

Click here to enter text.

J. PROMOTION OF BEST PRACTICES (15%)

**What are the best practices that will be used or promoted during this project? What is the source for these practices, i.e. professional organizations, academic literature, government regulation?**

Click here to enter text.

K. COLLABORATION (10%)

**How does this project illustrate collaboration with other agencies? With other jurisdictions?**

Click here to enter text.

**Please list anticipated project partners; name and organization of contact.**

Click here to enter text.

L. INNOVATION (10%)

**What is innovative about this project? Will this project present a new and/or innovative approach or address a previously identified issue?**

Click here to enter text.

M. PROJECT FUNDING

**Total Project Funding:** Click here to enter text.

**Please list below all sources of funding and indicate whether each is direct or in-kind, confirmed or unconfirmed.**

Click here to enter text.

N. PROJECT EXPENSES

**Total Project Budget**: $Click here to enter text.

**Project Management**: $Click here to enter text.

**Equipment**: $Click here to enter text.

**Supplies/Consumables:** $Click here to enter text.

**Printing/Media**: $Click here to enter text.

**Consultant/Contractor**: $Click here to enter text.

**Travel**: $Click here to enter text.

**Wages**: $Click here to enter text.

**Other**: $Click here to enter text.

O. STRATEGIC GOALS

Describe how the project addresses the OBWB Stategic Goals. The Strategic Goals can be found on our website at:

<http://www.obwb.ca/newsite/wp-content/uploads/obwb_strategic_plan.pdf>

Click here to enter text.

SUBMITTING THIS APPLICATION

**Please ensure you have reviewed the Terms of Reference and the guide to the application. Once your application is complete, please submit a copy along with the required supporting resolution from local government and any other supporting documents to:**

**Okanagan Basin Water Board**

**WCQI Grant Program**

**1450 KLO Rd**

**Kelowna, B.C. V1W 3Z4**

**Or electronically to:**

[**grants@obwb.ca**](mailto:grants@obwb.ca)

**Applications must be received by 4:00 p.m. on the deadline date found on our website. Late or incomplete applications will not be accepted. Please save and print a copy of the application for your records.**