# Oregon Department of Environmental Quality

# 2015 MATERIALS MANAGEMENT

# GRANT PROGRAM

# Materials Management Projects Grant

# INSTRUCTIONS and APPLICATION FORM

##### **APPLICATION DEADLINE: November 2, 2015**

DEQ Materials Management (formerly Solid Waste) grants support [*Materials Management in Oregon: 2050 Vision and Framework for Action*](http://www.oregon.gov/deq/LQ/Pages/SW/2050-Vision.aspx), Oregon’s 2050 vision for managing materials: taking action to reduce pollution and conserve resources across the full lifecycle of materials. This includes upstream design and production, consumption and use and end-of-life management.

2015 Grant Schedule

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| --- | --- |
| Application materials available | Tuesday, September 15, 2015 |
| Completed applications due to Marion County | E-mailed by Monday, November 2, 2015 (10:00 a.m. PST) to [GPuga@co.marion.or.us](mailto:GPuga@co.marion.or.us) |
| Mandatory Meeting | If you would like to partner with Marion County to apply for this DEQ grant,you will need to attend one mandatory meeting on **Tuesday, Oct. 6 at 12:00 p.m.** or **Thursday, Oct. 8 at 6:00 p.m**. The meetings will be held at Marion County Public Works Department, 5155 Silverton Rd NE, Salem, OR 97305. |
| Grant awards announced (estimated) | Friday, February 26, 2015 |
| Grant funds available | After grant contract is signed by all parties |

**Use this application packet for Materials Management Project Grants ONLY.**

(There are two other grant categories: **HHW/Solid Waste/Materials Management Planning** and

**HHW Facility**. Find more information on these programs here: [www.mcrecycles.net](http://www.mcrecycles.net) .)

###### Who can apply?

Local governments responsible for solid waste management are eligible to apply, including cities, counties, tribes, metropolitan service districts, regional parks districts, sanitary districts, county service districts, and regional air quality control authorities. Local governments may receive grant funds to develop their own project or may partner with community groups, private individuals, non-profit organizations, schools, or businesses, who will work under contract with the local government.

**What types of projects can be proposed in this grant category?**

Any project that reduces impacts of materials though their life cycle. This can include product redesign or production changes, marketing to reduce consumption, creating reuse infrastructure, and traditional recycling and composting collection and processing.

**What is a “Priority Area” Project?**

DEQ is encouraging grant proposals that further current priorities for implementing Oregon’s 2050 vision for materials management by awarding ***up to 10 points*** (out of a total of 100 possible points) for projects focused at least in part in one or more priority areas. See the Materials Management Project Grant priorities on the list below, along with example projects:

***Priority Areas and Examples:***

* **Food Waste Recovery:**

**Examples:**

* Programs to donate edible food to food banks from restaurants, grocery stores, institutions, etc.
  + Programs to use food residuals or be processed into commercial animal feed or pet food.
  + Educational programs to support the increase in recovery or reduction of contamination for food waste collected.
* **Plastics Recovery:**

**Examples**:

* + Programs to increase recovery of plastic through innovative collection, processing or marketing schemes or technologies.
  + Educational programs to increase recovery of or reduce contamination in plastic waste collected.
* **Multi-Tenant (commercial and residential) Recovery:**

**Examples:**

* + Programs to assess or address recovery barriers (e.g., lack of infrastructure for convenient recycling or composting, contamination, education and outreach challenges, updating building or zoning codes).
  + Programs to develop best practices to reduce contamination or increase participation.
  + Educational programs to help increase recovery of or reduce contamination from materials collected at multi-tenant facilities.
* **Waste Prevention and Reuse:**

**Examples:**

* A city or wasteshed-wide education and promotion program about the environmental benefits of and opportunities to reduce waste generation through waste prevention and reuse.
* A waste prevention campaign targeting residential, commercial or institutional generators of waste focused on sustainable purchasing practices.
* A waste prevention education program to promote reduced use of household hazardous products.

**(Note: “Waste prevention”** means to reduce the amount of solid waste generated without increasing toxicity in the design, manufacture, purchase, or use of products and packaging. **“Reuse”** means the return of a commodity into the economic stream for use in the same kind of application as before without changing its identity.**“Recovery”** means the process of obtaining useful material or energy from solid waste and includes energy recovery, composting and recycling.)

**Will a project not in a priority area have a lower chance of being funded?**

###### Not necessarily. Priority area projects may receive *up to* 10 points; they may receive fewer. In addition, strong proposals for projects not in priority areas may receive up to 90 points and could score higher than priority area projects.

###### What costs are eligible for funding?

Grant funds may be used for (but are not limited to):

* Administrative costs
* Salaries and benefits for project personnel and payments to consultants or contractors
* Publications and other printed materials
* Machinery, vehicles, equipment, signs, containers and project-related supplies

###### What costs are NOT covered?

* Costs incurred for activities outside the scope of the grant agreement unless approved by DEQ
* Costs for which payment has been or will be received under another financial assistance program
* Costs incurred before issuance of, or after the expiration date of, a signed grant contract with DEQ
* Ordinary operating expenses of local government that are not directly related to the project.
* DEQ permit fees or costs incurred for landfill closure

**Is there a limit on the amount that can be requested?**

There is no limit on the amount that can be requested for a project. Up to $500,000 may be awarded in this 2015 grant round for all materials management grants (including household hazardous waste and planning grants). In some cases, DEQ may offer an award for less than the amount requested. Historically, the average grant amount has been approximately $25,000, ranging from $1,500 to $148,550.

**Are matching funds required?**

There is no grant matching funds requirement. However, local support like cash matches factor in the evaluation of the proposal, thus it may be advantageous to show them in your response to the appropriate questions below. Matches must be cash from local governments, partners or other grants or sources. Cash matches will be subject to grant accounting procedures.

**Instructions for Filling out the Application Form:**

**General Information –**

The attached Application Form is designed to be filled-in from your computer. Use this Guide to help you answer the questions fully. Begin typing in the *grey rectangle* next to the questions. Many of these have a built-in format, such as dollars and cents or date. **Question 1** is set to a limit of **300 words**; **Questions 2 – 4** are not set to a limit, but please try to limit your responses to **one page for each question**.

**Cover Page –**

Be sure to fill out all applicable items on the page. (**For help with your Senate and House Districts, see:** [**http://bluebook.state.or.us/state/legis/legis.htm**](http://bluebook.state.or.us/state/legis/legis.htm)**)**

**Question 1. Project Overview**

**Provide a brief summary of your project.**

Concisely describe what the project will accomplish, the method(s) that will be used, who will benefit from the project and why it’s important. Limit your response to 300 words.

**Question 2. Project Description**

**a. What environmental or public health need does this project address?**

Describe the problem or need this project will address and its relevance to the impact of materials on the environment. How was the need determined, and who helped determine it?

**b. What are the goals of the project?**

Describe the goals of the project and how they will address the identified need.

For education/outreach projects:

* Identify the specific behaviors of your targeted audience(s) the project intends to change
* Discuss, if any, your plans to identify the barriers to changing behaviors of your target audience.

(You can find information on identifying barriers at <http://www.cbsm.com/pages/guide/step-2:-identifying-barriers-and-benefits/>)

**c. How will the project achieve those goals?**

Describe the work that will be accomplished, the methods that will be used, and the timeframe for that work**.**

If your project involves capital purchases of $5,000 or more, you *must* attach bid specificationsand quotes. You may *optionally* attach additional pages of photographs, diagrams, and relevant supporting documents.

**d. How will the project’s success in achieving the goals be measured?**

What performance measures will you use? How will you measure results and how often?

**Question 3. Project Resources and Commitment**

**a. Identify the key people who will be involved in developing and implementing the project and describe the roles they will play.**

Discuss relevant experiences, accomplishments, and qualifications of the project officer and key personnel. If you will use a subcontractor, include subcontractor personnel (You may additionally attach resumes of key personnel.)

Describe how the project will be managed.

**b. How will your project be cost-effective?**

Demonstrate how costs are reasonable for the proposed work. Also include information on any cost saving efforts and other project resources such as cash match from partners, use of existing materials, refurbished equipment, volunteer labor, etc. **(Note:** Cash match will be required to be listed in the **Project Budget** form.)

**c. What community support do you have for the project?**

Please detail the support. Attach letters of commitment from partners. Letters should indicate if there are **specific commitments of resources to the project** (Do not include general letters of support that simply state that the project is a good idea; **these will not be considered).**

**Question 4. Potential for Project Continuity/Ongoing Benefits**

**Describe any on-going benefits from this project after the grant period.**

* Describe how you will determine if this project will continue to achieve benefits beyond the grant period.
* If the project is planned to continue, describe the plans for how the project will be carried out and funded

(e.g., efforts to enlist community partners, methods of making the project self-funding, adjusting rates to provide

on-going funding)

* Discuss the potential for the project to serve as a model or to support other projects to reduce environmental

or public health impacts of materials.

**Project Budget –**

Be sure to fill out the form completely, including any cash match in the appropriate columns.

**Project Work Plan and Schedule –**

Include on the form all major activities planned and their expected dates of completion.

**Signatures –**

Authorized Signatures from each participating local governments are required. Please ensure enough time to secure them prior to the submittal deadline. A scanned copy of the completed Signature Page must be attached to the electronic submission.

**What happens if my grant is funded?**

If awarded a grant, the local government will enter into an agreement with DEQ and will administer the funds, oversee the project, and invoice DEQ for reimbursement. A grant agreement will not be issued unless the applicant and DEQ agree to the amount of money granted, how it will be spent, and what work will be performed before the grantee is paid. If a grantee uses a subcontractor, the grantee is responsible for monitoring the subcontractor’s work and ensuring that it meets the grantee’s obligations under the grant agreement with DEQ. The general terms of this agreement can be reviewed at [www.deq.state.or.us/lq/sw/grants/](http://www.deq.state.or.us/lq/sw/grants/).

**Mandatory Meeting**

If you would like to partner with Marion County to apply for this DEQ grant,you will need to attend one mandatory meeting on **Tuesday, Oct. 6 at 12:00 p.m.** or **Thursday, Oct. 8 at 6:00 p.m**. The meetings will be held at Marion County Public Works Department, 5155 Silverton Rd NE, Salem, OR 97305. If you need more help, please contact Griselda Puga, (503) 566-4159 or [GPuga@co.marion.or.us](mailto:GPuga@co.marion.or.us) .

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| Counties | TA Name and Address | How to Contact |
| Benton, Lincoln, Linn, Marion, Polk, and Yamhill | **Cathie Rhoades**  Oregon Dept. of Environmental Quality  750 Front St. NE, Suite 120  Salem, OR 97310 | (503) 378-5089  [Rhoades.Cathie@deq.state.or.u](mailto:Rhoades.Cathie@deq.state.or.us)[s](mailto:Rhoades.Cathie@deq.state.or.us)  Fax (503) 378-4196 |
| Marion County Public Works | **Griselda Puga**  Marion County Environmental Services  5155 Silverton Rd NE  Salem, OR 97305 | (503) 566-4159  [GPuga@co.marion.or.us](mailto:GPuga@co.marion.or.us) |

**How will proposals be evaluated?**

Applications will be reviewed and ranked competitively by a panel of DEQ staff based on selection criteria in OAR 340-083-0070. Grant applications must meet a minimum qualifying score. DEQ will fund the highest scoring projects. See the criteria and evaluation factors below:

| Selection Criteria and Examples of Evaluation Factors  An application must receive a minimum score of 50 points (100 possible) to be considered for a grant. | Possible Points  100 |
| --- | --- |
| * Project is within one or more priority areas. | **10** |
| **Project Overview**   * Project clearly and concisely summarized. | **5** |
| **Project Description**   * Project is clearly described * Project addresses an important problem or need related to environmental or public health impacts of materials * Project goals address the problem or need * Work described is likely to achieve project goals in timeframe provided * Project’s success (or failure) in meeting goals will be effectively measured | **50** |
| **Project Resources and Commitment**   * Project will be managed and implemented in a manner likely to achieve project goals * Project will have community involvement and support * Project Budget is complete and clearly described * Project costs are reasonable for the work to be completed and outcomes achieved * Project work plan and schedule are clearly described * Work plan and timeline demonstrate project will be completed in realistic and reasonable timeframe | **20** |
| **Potential for Project Continuity/Ongoing Benefits**   * Project is likely to continue or support other projects that will reduce impacts of materials. | **15** |

##### **Is your application complete?**

## Ensure that you have a complete application package, including:

Completed cover sheet

All applicable questions answered completely  
 Bids and spec sheets for any capital expenditures of $5,000 or more  
 Budget, including cash match  
 Project work-plan and schedule  
 Required signatures scanned and attached to electronic document

**Ready to submit?**

Attach the completed Application form saved in Microsoft Word or .pdf format to an email, and send to GPuga@co.marion.or.us. **Applications must be received by 10:00 am, November 2, 2015.**

** Oregon Department of Environmental Quality Materials Management Program**

**2015 Application for Materials Management Grant Funds**

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| --- | --- |
| **Name of local government applying:** | **Federal taxpayer ID #:** |
| **Address:** | **State Legislative Districts:**  **House:**       **Senate:** |
| **Contact person:** | **Title:** |
| **Telephone:** | **E-mail:** |
| **Name of project:** | |
| **Amount requested from DEQ:** | **Total cost of project:** |
| **Matching funds Yes**   **No**   **Amount:** | **Is this a Priority Area proposal? If so, indicate type(s)**  (See Application Instructions for definitions) |
| List Participating Jurisdictions and contact information | Food Recovery  Plastic Recovery  Multi-tenant Recovery  Waste Prevention/Reuse |
| **Will you use a subcontractor? Yes**  **No**  **If Yes, fill out contractor information below:** | |
| **Subcontractor name:** | **Contact person:** |
| **Contact person title:** |
| **Subcontractor mailing address:** | **Subcontractor e-mail address:** |
| Phone: | Web address: |

Please fill-in the answers to Questions 1 – 4 starting in the grey rectangle. Refer to the Instructions for assistance.

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| **Question 1. Project Overview**  **Provide a brief summary of your project.**  **Question 2. Project Description**  **a. What environmental or public health need does this project address?**  **b. What are the goals of the project?**  **c. How will the project achieve those goals?**  **d. How will the project’s success in achieving the goals be measured?**  **Question 3. Project Resources and Commitment**  **a. Identify the key people who will be involved in developing and implementing the project and describe the roles they will play.**  **b. How will your project be cost-effective?**  **c. What community support do you have for the project?**  **Question 4. Potential for Project Continuity/Ongoing Benefits**  **Describe any on-going benefits from this project after the grant period.** |

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| **Project Budget**  Complete all sections of the budget. **“Matching Funds" are cash contributions ONLY**, used to support the grant project. (**“In-kind contributions”** such as office space, goods or services, and labor should NOT be reported here, but listed in relevant Questions above.) |

(A) **PERSONNEL SERVICES -** List principal personnel by name and project title. Include salaries and costs of benefits, such as quoted payments for insurance, retirement, social security, etc. Be sure to give subtotals of funds requested, matching resources, and total costs in the spaces provided. Then, state the source of the matching funds.

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| **(A) List Project Personnel** | **Hourly Rate** | **Est. Hours on Project** | **DEQ Grant Funds Requested** | **Matching Funds**  **(optional)** | **Total Costs** |
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| Source of matching funds: |  | | | | |

(B) **PROFESSIONAL SERVICES -** List consultants, contractors, etc. Be sure to give subtotals of funds requested, matching funds, and total costs in the spaces provided. Then, state the source of the matching funds.

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| **(B) List Consultants or Contractors** | **Hourly Rate** | **Est. Hours on Project** | **DEQ Grant Funds Requested** | **Matching Funds**  **(optional)** | **Total Costs** |
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| Source of matching funds: |  | | | | |

(C) **CAPITAL OUTLAY** **-** List all items to be purchased with a value greater than $5,000. Be sure to give subtotals of grant funds requested, matching funds, and total costs in the spaces provided. Then, state the source of the matching funds. **For items costing $5,000 or more, provide a bid or spec sheet** that demonstrates the anticipated cost.

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| **(C)** **List Capital Outlay Items** | | | **DEQ Grant Funds Requested** | | **Matching Funds**  **(optional)** | | **Total Costs** |
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| Source of matching funds: |  | | | | | | |

(D) **SERVICES AND SUPPLIES** **-** Include items not listed in “Personnel Services,” “Professional Services,” and “Capital Outlay.” Examples are computer services, duplicating, materials/supplies, postage, publication charges, telephone, fuel, automobile mileage, travel, etc. The need for services and supplies should be clear from your answers to the questions on page 2. If you need to clarify further, you may provide additional information below. For example, if you include costs for travel, be certain to explain who will travel, where they will go, the purpose of the travel, and specific expenses (mileage, accommodations, meals, etc.). Be sure to give subtotals for funds requested, matching funds, and total costs. Then, state the source of the matching funds.

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| **(D) List Services and Supplies** | | | **DEQ Grant Funds Requested** | | **Matching Funds**  **(optional)** | | | **Total Costs** |
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| Source of matching funds: |  | | | | | | | |

Additional Information:

1. PROJECT BUDGET SUMMARY - Fill in all applicable spaces. Be sure to total grant funds requested, matching funds, and total costs.

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| --- | --- | --- | --- |
| **(E) Project Budget and Summary** | **DEQ Grant Funds Requested** | **Matching Funds (optional)** | **Total Costs** |
| A. Personnel Services |  |  |  |
| B. Professional Services |  |  |  |
| C. Capital Outlay |  |  |  |
| D. Services and Supplies |  |  |  |
| E. Total DEQ Grant Funds Requested |  |  |  |
| F. Total Matching Funds Committed |  |  |  |
| G. Total Project Cost |  |  |  |

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| **Project Work Plan and Schedule**  Please make sure that you identify all major activities required for project completion. Be as specific as possible. Include dates for progress reports and the final report. You may add additional lines as necessary. Assume that grant funds will be available after May 1, 2016. | | | | | | |
| Planned Project Beginning Date: |  | Planned Project Ending Date: | |  | |  |
| **Task or Activity** | | **Beginning Date for Each Task** | **Ending Date for Each Task or Activity** | | **Person/Group**  **Responsible for Completion** | |
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| **Signatures**  The **authorized representative** of the local government applying must sign the application. This is an official who has the authority to obligate the applicant’s resources and is usually an elected official such as chair of the county commission, county executive, mayor, city manager, or chair of the city council. If more than one local government is applying, you must have signatures of authorized representatives from each jurisdiction. | | | | | | |
| *I certify that, to the best of my knowledge, the information provided in this application and attachments is correct and true. I understand and agree that if grant money is awarded as a result of this application, I will comply with all applicable statutory provisions and with applicable terms, conditions, and procedures of the DEQ grant agreement.* | | | | | | |
| Signature of Authorized  Representative (Applicant #1) | |  | | Date |  |  |
|  | | | | | | |
| Title |  | | Telephone Number |  | |  |
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| Signature of Authorized Representative (Applicant #2) | |  | | Date |  |  |
|  | | | | | | |
| Title |  | | Telephone Number |  | |  |
|  | | | | | | |
| Signature of Authorized Representative (Applicant #3) | |  | | Date |  |  |
|  | | | | | | |
| Title |  | | Telephone Number |  | |  |
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**Scan signed page and attach to completed Application Form prior to emailing**