

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION POLLUTION PREVENTION AND ENERGY ASSISTANCE OFFICE

# COMPREHENSIVE ENERGY ANALYSIS GRANT PROJECT APPLICATION

This form is to be used to apply to the Department of Environmental Protection for a Comprehensive Energy Analysis Grant. Projects will be supported through Federal funds. **See instructions and grant program conditions.** 

**Applicant:** I certify that the information in this application is true and correct to the best of my knowledge. Submitted By: (Applicant Organization Date Submitted: Printed Name: Signature: Title: 1. Proposal Title (ten word maximum): 2. Applicant Name: Address: Address 2: Citv: Zip Code: State: Contact Person: Contact's Phone: \_\_\_\_\_ Contact's Fax: Contact's e-mail: Organization type: (specify LLC, "S" Corp, "C" Corp, etc.: Applicant's Federal Employer Identification Number (FEIN) or Tax Number: ☐ Yes ☐ No Does applicant have any outstanding obligations to the Commonwealth? Does applicant have any unresolved compliance issues with DEP? ☐ Yes □No Organizational DUNS: 3. Will the project be completed by Dec. 31, 2012? ☐ Yes □No 4. Leverage In-Hand Please use the following table to show leveraged funds. All items listed must be accompanied by a letter of commitment. **Status** (applied for, Value in pledged or in-hand) Partner/Contributor **Description** Dollars

#### 0340-FM-PPEAO0193 6/2012

5. Budget Summary (Must be consistent with the attached Detailed Budget Worksheet)

Category	Grant Request (from DEP)	+	Match (from Applicant)	=	Project Cost (Total)
Salaries/Benefits		+		=	
Administration		+		=	
Other		+		=	
Total for each column:					

- 6. Attachments Provide Attachments A C as described in the application instructions. Be sure to include all necessary elements as presented in the guidelines
  - A. Executive Summary
  - B. Detailed Project Description
  - C. Letters of Commitment
- 7. Please complete the detailed budget worksheet attached.

### Pennsylvania Comprehensive Energy Analysis Budget Worksheet

This worksheet must be submitted with the application.

Totals for each category should be entered on the application budget summary, item 5.

#### 1. SALARIES/BENEFITS

INDIVIDUAL	POSITION	HOURLY RATE	HOURS	BENEFITS	TOTAL COST

#### 2. ADMINISTRATION

TASK	COST
TOTAL ADMINISTRATION	

#### 3. OTHER

TASK	COST
TOTAL OTHER	

#### 4. MATCH

Please use the following table to calculate matching contributions of cash, goods and services to be entered on the application form. Do not include other DEP provided funds or in-kind services. All items listed must be accompanied by a letter of commitment.

CONTRIBUTOR	BUDGET CATEGORY	DESCRIPTION	STATUS (applied for, pledged or in- hand)	VALUE in DOLLARS