

**Arizona Department of Agriculture
Livestock and Crop Conservation Grant Program (LCCGP)**

PROJECT PROPOSAL FORM - INSTRUCTIONS

1. **Project Title** - Using five to seven words, title your project in a way that is clear and descriptive.
2. **Project Summary** - In one paragraph or less, sum up the overall project (why is it needed/important, what will be accomplished and how).
3. **Type of Project** - Check the boxes that apply to the appropriate type of project and provide descriptions where applicable.
4. **Proposed Project Will Take Place On** - Check all boxes that apply to the ownership of the land where the project will take place. For example, if the project will take place partially on your private land and partially on State Trust Land, check both the private property and State Trust Land boxes.

Please enter how many acres will be affected by the project per land type. (Please include the acres directly and indirectly affected by the project. For example, installing drinkers on less than one acre, but the availability of water may impact an entire allotment or several hundred acres.) **Note: This is not a ranking criteria.**

5. **Project Start/ End Date** - Enter the date you intend to begin the project and the date you anticipate the project will be completed, no later than June 30, 2025.
6. **Location of Project** - Enter the section, township and range coordinates of the project location.
7. **Applicant Information** - Enter the applicable information for the entity/individual receiving funds and reporting funds on their tax return.
8. **Project Manager/ Contact Person** - Enter the applicable information for the person that will have day to day knowledge or management of the project. This is the person that will be contacted if project clarification is required.

9. **Project Costs** -

LCCGP Funds Requested - Enter the amount of your grant request.

Leveraged Funds from another Agency - Enter the amount (if any) that another Agency will provide. Also, enter the name of the Agency if applicable.

Matching Funds from Applicant - Enter the amount (if any) that the applicant will provide. (Includes any time/labor, supplies, or equipment use that the applicant will provide.)

Total Project Cost - Enter the total project cost, which equals the grant request plus funds from other sources.

10. **Project Purpose** - In no more than **two** pages, describe why the project is necessary/important and address the following questions:
 - What problem is addressed by the project?
 - What will the project accomplish?
11. **Scope of Work** - In no more than **two** pages, describe in detailed steps how you will accomplish what you have described in the Project Purpose. Include the following:
 - **Project Location** - Outline where the project will take place on the map(s) included with your application and provide section/township/range coordinates. Include maps that are

appropriate to your project so the grant evaluators will be able to clearly understand where your project is located on the operation, the surrounding topography, the type of rangeland and what's around the project site (i.e. is it close to a town, next to a United States Forest Service (USFS) allotment, nearby a highway etc.). Make sure your maps precisely illustrate the project to give the evaluators a clear understanding of what you are planning to do. You may contact your local Natural Resources Conservation Service (NRCS) or Forest Service offices to obtain maps. Also see mapping website resources in Appendix A. You may also use the websites listed in Appendix A to help you with maps. The project/topographical map should be in a 1:24,000 scale. Include state or federal permit/lease allotment maps. You are required to provide additional drawings and/or photographs describing the project site.

- **Key Personnel** - Who will be doing the work? If work is being contracted, include the name of the contractor if known or state "solar contractor" or "pipeline contractor," etc.
- **Timeline** - When will the work be done? Include a detailed schedule of **project milestones** with estimated completion dates. Milestones are significant events or tasks which will occur throughout the implementation of the project.
- **Schedule of Tasks and Deliverables (see example below), including:**

SAMPLE - Schedule of Tasks and Deliverables

| No. | Task | Deliverable | Expected Date of Completion |
|-----|---|---------------------------------|-----------------------------|
| 1 | Obtain drinker and supplies. | Drinkers and supplies obtained. | 1/25 |
| 2 | Install drinkers | Drinkers installed. | 2/25 |
| 3 | Contract labor/equipment to install solar. | Solar installed. | 4/25 |
| 7 | Write and submit Final Report to AZDA to close out grant. | Final Report submitted. | 6/25 |

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PROJECT PROPOSAL FORM

Fill in all information on this page.

| |
|---|
| 1. Project Title - <i>Please limit the length of the title to five to seven words.</i> |
| 2. Project Summary - <i>Sum up the overall project in a few sentences.</i> |
| 3. Type of Project - <i>check all that apply:</i> <input type="checkbox"/> Drinkers <input type="checkbox"/> Storage tanks on an existing water system <input type="checkbox"/> Solar on an existing water system <input type="checkbox"/> Windmill to solar conversion <input type="checkbox"/> Fencing (excluding corrals or holding/shipping pens) <input type="checkbox"/> Grassland Restoration <input type="checkbox"/> Erosion Control |
| 4. Proposed Project Will Take Place On - <i>check all that apply:</i> <input type="checkbox"/> Private Property Estimated # of acres impacted _____ <input type="checkbox"/> State Trust Land Estimated # of acres impacted _____ <input type="checkbox"/> Federal Land Estimated # of acres impacted _____ |
| 5. Project Start Date: _____ Project End Date: _____ |
| 6. Location of Project: Section: _____ Township: _____ Range: _____ Section: _____ Township: _____ Range: _____ Section: _____ Township: _____ Range: _____ |

7. Applicant Information:

Applicant Name:
Operation Name:
Address:
Address:
City:
State:
ZIP Code:
County:
Phone:
Email:

8. Project Manager/ Contact Person - Individual who will have day to day knowledge or management of the project and should be contacted if clarification is required (if different than applicant name):

Name:
Title:
Address:
Address:
City:
State:
ZIP Code:
Phone:
Email:

9. Project Costs:

| | | |
|--------------------------------------|----------|---|
| LCCGP Funds Requested: | \$ _____ | (Min \$10,000 – Max \$20,000) |
| Leveraged Funds from another Agency: | \$ _____ | (If applicable) |
| Agency Name: _____ | | |
| Matching Funds from Applicant: | \$ _____ | (If applicable) |
| Total Project Costs | \$ _____ | (Total Project Costs must equal the total on the budget form included in the application) |

10. Project Purpose:

Please address the following questions:

Why is the project needed?

What problem is addressed by the project?

What will the project accomplish?

What public benefit(s) will be provided by the project? What benefit(s) will be provided to wildlife by the project?

How does the project provide for the preservation of open space? What is the threat to open space in the area?

How have you worked with other agencies to promote conservation on your operation (other than receiving funding)?

