



**Passaic County Open Space, Farmland,
& Historic Preservation Trust Fund
2024 PARK DEVELOPMENT GRANT APPLICATION**

ATTACHMENT CHECKLIST

This checklist is enclosed to ensure that you submit a complete application. Before submitting your application, be sure to run through the following checklist:

- Completed Application**
- Site location map (legible street map)**
- Tax map outlining boundaries of the site and identifying adjacent land uses**
- Site Plan** – plans should be prepared by an authorized, licensed professional. Site plans should identify all proposed facilities as well as any existing facilities and improvements
- Cost estimate** – Include a detailed estimate of units and quantities for the exact work to be done using the requested grant funding, prepared and signed by an authorized, licensed professional
- Projected timeline for completion, including phasing if applicable**
- Breakdown of annual operating expenses after development of the site**
- Permit inquiries** – Applicants with projects requiring permits, grants, or other approvals must contact all applicable permitting agencies to secure permit information and application materials prior to the submission of an application.
- Notice of public hearing** – including published advertisement and certified mail receipts of public notice to property owners within 200 feet of the project site.
- Minutes of public hearing** – portion pertaining to this application only
- Resolution** from the governing body authorizing the municipality or nonprofit to submit the application and the amount requested
- Photographs of Site** in JPEG format (no printed photos please)



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ADDITIONAL REQUIREMENTS FOR NON-PROFIT ORGANIZATIONS:

- Please provide a copy of the current IRS determination letter;
- A copy of the organization's W-9 form (showing EIN);
- A copy of the NJ Business Registration Certificate (BRC) – don't have one? Apply online at: <http://www.state.nj.us/treasury/revenue/busregcert.shtml>
- Management/Lease Agreement - *If you are a non-profit developing municipal parkland, you must have an **executed memorandum of agreement** setting the roles and responsibilities of each party with respect to the improvements and maintenance of the project.*

SUBMISSION REQUIREMENTS

- Please submit **one (1) paper copy and one (1) electronic copy** for the following materials:
 - Application Forms
 - Proposals from Professionals, Consultants, Contractors, etc.
- The following materials can be submitted as an electronic copy via email or USB stick:
 - All photos as JPEG images
 - All other supporting documentation in PDF format
- Submittals shall be bound by paper clip or binder clip only. The use of binders, plastic separators, non-recyclable materials, etc. are strongly discouraged. Submittals will not be evaluated on the basis of the aesthetic of the package.
- Please be advised that handwritten submissions of applications will not be accepted. Fillable PDF forms are available online at our website www.passaiccountynj.org/openspace

Completed Park Development Grant Applications and all required materials, shall be submitted by Friday, March 22, 2024, no later than 4:00PM to:

Salvatore Presti, Open Space Coordinator
County of Passaic
Department of Planning and Economic Development
401 Grand Street, Room 417
Paterson, NJ 07505

For any questions, please contact Salvatore Presti, Open Space Coordinator: salvatorep@passaiccountynj.org.



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Project Name: _____ Priority: _____

I. Applicant Information

Type of Organization: [] Local Government Unit [] Non-profit

Name: _____

Street Address: _____

Town/State/Zip: _____

Municipality: _____

Chief Executive Officer: _____

Contact Person: _____

Phone: _____

Fax Number: _____

E-Mail: _____

Relationship of applicant to subject property:

[] Owner

[] Lease (Please include copy of the lease with your application)

If lease, owner's name: _____

[] Management Agreement (If you are a non-profit developing municipal parkland, include a copy of Resolution approving the project application from the governing body)

[] Other: _____



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II. Project Information

Project Name: _____

Amount Requested: _____

Project Address: _____

Block: _____ **Lot:** _____

Total Area (Acres): _____

Existing Use: _____

Project Description (Please provide a detailed description of the proposed park improvements. If the project is proposed in phases, please describe what will be completed as part of this grant cycle. Please include conformity with local, county, regional, and/or state masterplans; and describe, if applicable, any restrictions such as encumbrances, utility easements, etc. Please use additional pages if necessary.):



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Does the project comply with Americans with Disability Act (ADA) requirements? Describe.

If the project requires tree removal, will replanting be done on-site or elsewhere in the municipality as a mitigation measure?

III. Project Budget

- 1. Design Costs: \$
2. Construction Costs: \$
TOTAL PROJECT COST: \$
(Sum of Items 1 and 2)

IV. Matching Funds

- 1. Green Acres Grant/Loan: \$
2. Previous Passaic County Open Space Trust Fund Grant(s): \$
3. Local Government Unit Open Space Trust Fund: \$
4. Local Government Unit Funds: \$
5. Other: \$
TOTAL MATCHING FUNDS: \$
(Sum of Items 1-5)



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V. Certification

The applicant certifies the following:

- a. The filing of this application has been approved by the governing body of the applicant;
- b. The facts, figures, and information contained in this application, including all attachments, are true and correct;
- c. Any funds received will be expended in accordance with the grant agreement to be executed with the County of Passaic; and
- d. The individual signing has been authorized by the organization to do so on its behalf, and by his/her signature, binds the organization to the statements and representations contained in the application.

Acting as a duly authorized representative for the applicant organization, I am submitting this request for assistance from the Passaic County Open Space, Farmland, and Historic Preservation Trust Fund.

Name: _____ Title: _____

Signature: _____ Date _____