

APPENDIX 1 – APPLICATION COVERSHEET



State of California
 Environmental Protection Agency
 CALEPA ENVIRONMENTAL JUSTICE SMALL GRANTS
2021 Grant Cycle
APPLICATION COVERSHEET

Part 1. Applicant Information

Applicant Name (Organization/Tribal Government. If using fiscal sponsor, include fiscal sponsor's name):	Grant Funds Requested (rounded to nearest dollar):
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Applicant Physical Address (Street, City, State, Zip code):

Applicant Mailing Address (Street, City, State, Zip code) if different from above:

If using fiscal Sponsor, **Fiscal Sponsor Physical Address** (Street, City, State, Zip code):

If using fiscal sponsor, **Fiscal Sponsor Mailing Address** (Street, City, State, Zip code) if different from above:

<input type="checkbox"/> Non-profit Organization under federal Internal Revenue Code Section 501(c)(3) status Tax ID number:	<input type="checkbox"/> Federally Recognized Tribal Government Tax ID number will need to be provided for payment if awarded. Tax ID number may be provided with resolution or upon agreement of contract if awarded.
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Grant Administrator - Manages Day-to-Day Tasks of Project

Grant Administrator - Name of Lead Person who will be Implementing Grant (First name, Last name):	Title of Grant Administrator:
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Phone Number of Grant Administrator (include area code) (required):	Email of Grant Administrator (required):
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Signature Authority - Person Authorized to Legally Enter in Contract for the Applicant
(If Applicant has fiscal sponsor, fiscal sponsor information must be provided in the following)

Signature Authority — Print Name of Person who will be Signature Authority of Grant (First name, Last name):	Title of Signature Authority:
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Phone Number (with area code) of Signature Authority (required):	Email of Signature Authority (required):
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Part 2. Application Agreement and Authorized Signature

I certify that all information in this application is true, correct, and complete to the best of my knowledge and belief. I certify that I am signing on behalf of the applicant in the capacity as a signature authority indicated next to my name below and that I am authorized to execute this application on behalf of the applicant.

Signature Authority Original Signature (signature, no stamps):	Date:
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Signature Authority Printed Name Signing Certification Above (print legibly first name and last name):