**FINANCIAL ASSISTANCE APPLICATION**

**Applicant Name**­­­­­­­­­­­­­­­­­­­­ Click or tap here to enter text.

**Address** Click or tap here to enter text. **City** Click or tap here to enter text.

**Zip** Click or tap here to enter text.

**County** Click or tap here to enter text. **Phone** Click or tap here to enter text.

**Email** Click or tap here to enter text.

**Contact Person** Click or tap here to enter text.

**Signature of Person Authorized to Sign Agreement**

Certification Statement (Scrap Tire Financial Assistance Only)

Click or tap here to enter text.certifies that the scrap tires being applied for were generated from an illegal dump site(s).

**Type of Applicant:**

**Village**  **Township** **City**  **County**  **Health District**

**County Engineer**  **Sheriff**  **Other Government Agency**

**Non-Profit Organization**  **Education Institution**

**Type of Financial Assistance:**

**Community Clean-Up**  **Yard Waste Management**

**Disaster Debris Management**

**Recycling Assistance-Start-up/Improvement**

**Recycling Assistance-Access**

**Solid Waste/Recycling Outreach and Education Assistance**

**Scrap Tire Clean-Up**

**Total Amount of District Funds Being Requested**: $ Click or tap here to enter text.

**Describe any additional funding being provided by the applicant or other source:**

Click or tap here to enter text.

**Total Amount of Match Funds Being Provided:** $ Click or tap here to enter text.

**Project Narrative**

PROVIDE A BRIEF SUMMARY OF THE PROPOSED PROJECT INCLUDING SUCH THINGS AS VOLUMES OF MATERIAL INVOLVED, NUMBER OF RESIDENTS SERVED, TIMELINES, ETC. (Narrative should not exceed two typed pages.)

Click or tap here to enter text.

SUPPORTING DOCUMENTATION SUCH AS VENDOR QUOTES AND/OR ESTIMATES MAY BE ATTACHED.

Submit application to: District Director

North Central Ohio Solid Waste District

815 Shawnee Road, Suite D

Lima, Ohio 45805

Or fax to:

Fax: 419-229-2156

**Application Review Comments:**

Click or tap here to enter text.

**Application Approved:** Click or tap here to enter text. **Date:** Click or tap here to enter text.

**If Approved. Funding Amount: $** Click or tap here to enter text.

**Application Denied:** Click or tap here to enter text. **Date:** Click or tap here to enter text.