

This is not a DNR form. Courtesy of City of Delafield.

Healthy Lakes Grant Claim Form

CITY OF DELAFIELD INFORMATION

NAME OF AGENCY City of Delafield	TELEPHONE NUMBER (262) 646-6220
ADDRESS 500 Genesee Street	CITY, STATE, ZIP CODE Delafield, WI 53018

SIGNATURE OF CITY CLERK

DATE

PROPERTY OWNER INFORMATION

Grant Amount Requested	GRANT AMOUNT UP TO 75% NOT TO EXCEED \$1,000
NAME OF PROPERTY OWNER(S) (Whether Individual, Corporation, Trust, Estate, or Partnership) :	
TELEPHONE NUMBER	
ADDRESS	CITY, STATE, ZIP CODE
PROPERTY ADDRESS or LEGAL DESCRIPTION:	
INSTALLATION PERIOD	
FROM:	TO: December 31, 2017

SIGNATURE OF PROPERTY OWNER

DATE

PRINT NAME

SIGNATURE OF PROPERTY OWNER/SPOUSE (indicate if not applicable)

DATE

PRINT NAME

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1. The property owner agrees to include the following in grant submittal:

- A. Detailed Project Drawings.
- B. Detailed Project Cost Estimate (segregating the costs specific to each BMP that funding is being requested for).
- C. Signed Healthy Lake Commitment Pledge.
- D. For Fish Sticks: number of fish stick clusters with number of trees per cluster.
- E. For Native Plantings: type and number of plants; planted area dimension (must be at least 350 square feet total and 10' in width to be eligible) including length of shoreline put into a native planting.
- F. For Rain Garden: dimensional area, volume water infiltrated, type and number of plants.
- G. For Diversion Practices: size of area being served by construction of the diversion practice.
- H. For Rock Infiltration Practice: type and volume of water infiltrated.

2. The property owner agrees to provide the following if selected for funding:

- A. Signed Standard 10-year Conservation Commitment Contract, which describes that the best practice(s) must remain in place for that timeframe.
- B. Completed installation checklist.
- C. Pre and Post project installation photographs.
- D. Approved Operation and Maintenance Plan.
- E. Self-reporting and/or monitoring may occur along with the operation and maintenance plan to ensure project success.

3. The City of Delafield agrees:

- A. To pay the requested amount agreed upon.
- B. To maintain project records as required by the grant agreement.

PROPERTY OWNERS' INITIALS:	DATE INITIALED:	CITY CLERK INITIALS:	DATE INITIALED:



HEALTHY LAKES PARTICIPATION PLEDGE

I/we _____ pledge to participate in Wisconsin's Healthy Lakes initiative. More property owners implementing the suggested best practices over time may eventually add up to significant success and healthier lakes for current and future generations.

I/We pledge to work with DNR Lake Protection Grant sponsor **Lake Welfare Committee** to install the following best practice(s) to restore fish and wildlife lakeshore habitat and/or prevent storm water runoff and erosion. (Check practices to be installed on the property)

- Fish Sticks
- 350 square feet native plantings
- Diversion practice(s)
- Infiltration practice(s)
- Rain garden

I/We understand that by signing this Pledge I/we am/are indicating a strong interest to follow through with a Healthy Lakes project on my/our property, but this is not a legal requirement to do so.

Describe Personal Participation Goal (optional):

Name: _____ (please print)

Phone #: _____

E-mail address: _____

Signed: _____

Date: _____