



Campbell County Conservation District Urban Improvement Program Guidelines

Program Objectives

The Campbell County Conservation District (CCCD) Board of Supervisors will provide funds from its Optional 1% Sales Tax funding allocation to assist residents and businesses in implementing natural resource conservation practices that address soil erosion, water quality and quantity, improvement of wildlife habitat, beautification, or education.

Project Examples

- ⇒ Educational events or practices with emphasis on natural resource conservation
- ⇒ Greenway projects (e.g., tree plantings, pollinator spaces, etc.)
- ⇒ Boulevard plantings
- ⇒ Bioretention (e.g., rain gardens, permeable pavements, green roofs, etc.)
- ⇒ Xeriscaping to replace traditional lawns with approved native or dry-climate species
- ⇒ Soil erosion projects (e.g., water bars on public trails, streambank stabilization, etc.)
- ⇒ High tunnels (manufactured kits only)

Eligibility

Residents, businesses, service organizations, schools, museums, churches, etc. within the City of Gillette or Town of Wright boundaries are eligible to apply. Only one grant may be awarded per Applicant per fiscal year.

Selection Process

Applications are approved or denied at the discretion of the CCCD Board of Supervisors (Board). Applications will be marked when received and will be considered in order until funds are fully expended. It is the responsibility of the Applicant to ensure and defend that the project meets the goals of the program. The Board will review each application and determine maximum funding allowed for cost-share assistance.

Funding

This program provides up to 50% reimbursement of the actual project costs up to \$2,500.

- ⇒ Applicant must provide a minimum of 50% match (cash or in-kind).
- ⇒ Payment will be issued based on receipts and/or invoices and documentation of cash or in-kind contributions.
- ⇒ A W-9 tax form must be on file with CCCD in order for payment to be released to the Applicant.
- ⇒ All projects must be pre-approved before being initiated.
 - ⇒ **Materials purchased prior to project approval are not eligible for reimbursement.**
- ⇒ All projects must be evaluated by CCCD staff upon completion.

Application Instructions

- 1) Fill out questions completely, including proposed cost estimates. Incomplete applications will not be processed.
- 2) Enclose a map with the location of the proposed project clearly marked. CCCD can assist with the development of a project map if needed.
- 3) One application may include multiple practices, as long as they are all included in the total cost estimate.

Contract

Upon project approval by the CCCD Board, the District and the Applicant(s) will enter into a signed contract for the practices being funded.

Only practices initiated and completed within the contract timeframe will be reimbursed. The Applicant must pay the up-front costs of the project.

The Applicant is responsible for the completion of any required permitting or other government entity requirements (e.g., letter from entity on which property is managed, 811 clearance, etc.). When the project has been inspected upon completion, the Applicant will submit all relevant receipts or invoices to CCCD for reimbursement. Projects must be maintained for the “life-span” of the project as identified in the contract.

FY25 Application Deadline

Applications for the FY25 Urban Improvement Program are due by **JULY 5TH, 2024**.

If funded, applicants will have until May 9, 2025 to complete their projects and submit all relevant receipts, invoices, and documentation of cash and/or in-kind match contributions to CCCD.

I hereby acknowledge that I have received a copy of the Urban Improvement Program Guidelines;

Applicant Signature

Date



Campbell County Conservation District Urban Improvement Program Application

Fill out all questions completely, including proposed costs. Incomplete applications will not be processed.
A map, with the location of the proposed project clearly marked, must be included with the application.

Applicant Information

Applicant Name _____

Mailing Address _____ City/State/Zip _____

Contact Person (If Different than Applicant) _____ Phone # _____

E-Mail Address _____

Any Additional Contact Information (e.g., additional organization members, etc.) _____

Project Information

Project Description (Include estimated completion date) _____

Project Justification (Describe how the project meets the program objectives (e.g., soil erosion, water quality and quantity, improvement of wildlife habitat) _____

Project Design (Describe the projected “life span” of the project and how it will be maintained) _____

Map (Check box if attached)



Campbell County Conservation District Urban Improvement Program Application

Fill out all questions completely, including proposed costs. Incomplete applications will not be processed.
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Project Budget

Cost Breakdown/Practice

Material Description	Unit Amount	Cost/Unit	Total Material Cost

Total Project Cost \$ _____

Amount requested from CCCD \$ _____

(No more than 50% of total project cost allowed, with a maximum of \$2,500)

Match Contribution (Check one) Cash In-Kind

Total Match Amount \$ _____ Match Description (e.g., materials, labor, etc.) _____

(Applicant must invest a minimum of 50% match (cash or in-kind))

Signature

I hereby declare that the information and all statements attached to this application are true, complete, and accurate to the best of my knowledge.

Applicant Signature _____ Date _____

Landowner Signature (If different than Applicant) _____ Date _____

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
 requester. Do not
 send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See <i>Specific Instructions</i> on page 3.	<p>1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)</p> <p>2 Business name/disregarded entity name, if different from above.</p> <p>3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership)</p> <p>Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions) _____</p> <p>3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/></p> <p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____</p> <p style="text-align: right;"><i>(Applies to accounts maintained outside the United States.)</i></p> <p>5 Address (number, street, and apt. or suite no.). See instructions. Requester's name and address (optional)</p> <p>6 City, state, and ZIP code</p> <p>7 List account number(s) here (optional)</p>
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Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number								
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Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person	Date
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they