



2019 Senate Democratic Caucus

Date Received	
Senator Frockt	<input type="text"/>
Budget Staff	<input type="text"/>

Member Requested Local Community Project Information Form

This request must be submitted to Senator David Frockt by February 15th 2019.

Project Name:

Physical Location of Project

Address of Project Site:

District:

Legislative Sponsor:
<input type="text"/>
Amount Requested:
<input type="text"/>

I. Project Contact Information

Name(s):

Title:

Organization:

Organization's Website:

Phone:

E-Mail:

Mailing Address:

II. Organization Information

- (1) Is this organization registered with the state as a non-profit organization? **Y** **N**
- (2) Is there a current or pending 501(c)(3) IRS registration? **Y** **N**
- (3) If answered NO to either of the above, is applicant a local government? **Y** **N**

III. Project Description *Please include the phase of the overall project for which funds are requested.*

NOTE: This form is prepared for the use of the Capital Budget Chair, Senator Frockt. He may elect to submit this form for filing in the Capital Budget Committee records. In addition, if the proposed request is funded in the enacted capital budget bill, the form may be filed with the state agency that distributes funding for the project. If so filed, this form will become a legislative record subject to public disclosure and will be archived consistent with Chapter 40.14 RCW.

IV. Project Details

1) What is the Primary Project Objective? (Please check only one.)

Economic Development

Health Care

Environment

Social Services

Historic Facilities

Housing

Education

Parks & Recreation

Other (describe)

Infrastructure

Arts and Culture

Start Date

Completion Date

2) Eligible Project Type or Phase. (Please check all that apply to this request and insert requested amount.)

Land Acquisition

Demolition and Site Preparation

Design

New Construction

Renovation

Other (describe)

Total Request

3) Is this a joint project?

Y N

If yes, please list the partners:

4) Is the site owned?

Y N

5) Is it optioned for purchase?

Y N

6) Is it under a lease of 5 years or more with renewal options that total at least 10 years?

Y N

7) Has project applied (or will apply) for other sources of state funding?

Y N

If yes, please provide program and details:

8) Has the applicant initiated a fundraising campaign?

Y N

If yes, what percentage of matching funds have been secured?

What other sources of matching funds are available?

What source(s) of non-state funds exist for completion of the project and its ongoing maintenance and operation?

V. Public Benefit

(1) Please describe public benefit of the project.

(2) Please list the measurable objectives of this benefit:

(3) Please describe the measurement process:

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