

## Neighborhood Water Resources Enhancement Grant

Applicant Information					
APPLICANT NAME					
ORGANIZATION (IF APPLICABLE)					
APPLICANT ADDRESS (ALSO INLCUDE PROJECT LOCATION IF DIFFERENT ADDRESS)					
PHONE NUMBER	EMAIL				
I have read and understand the Grant Policies & Information:					

Project Information						
PROJECT TYPE		RAINGAI	RDEN	SHORELINE RESTORATION	NATIVE PLANTING	
		NATIVE	GARDEN	OTHER	(PLEASE VERIFY ELIGIBILITY)	
PROJECT SIZE (SQ FT)				BENEFITTED WATER BODY		
DRAINAGE AREA* (SQ FT)				* This is the combined area of impervious surface (roof, driveway, etc.) from which runoff will enter the proposed raingarden. Often only a portion of the roof and driveway will runoff into the project area. Please provide if possible.		
TOTAL PROJECT COST (ESTIMATE)	\$			REQUESTED GRANT FUNDS (UP TO \$1,000)	\$	
ATTENDING A  LANDSCAPING FOR CLEAN  WATER WORKSHOP?	,	YES	NO	WORKSHOP DATE		
APPLYING FOR A \$250 SWCD GRANT?	,	YES	NO	ROUND 1 ROU	ND 2 ROUND 3	
ADDITIONAL PROJECT PARTICIPANTS						

Return completed applications by:

Friday, May 23, 2025

Email:

john.stelzner@burnsvillemn.gov

Mail: John Stelzner 13713 Frontier Ct. Burnsville, MN 55337

Project Description			
Describe the primary purpose & intended water quality outcomes of your project:			
Grant applications are ranked, in part, by the applicant's ability to successfully complete the proposed			
project. Briefly describe your training, experience, or other knowledge that is applicable to this project –OR–			
what training/resources you are currently using to gain knowledge:			
List the site preparation and installation steps IN DETAIL (for raingardens, include an explanation of water conveyance methods, i.e. how will water enter or be routed to/through the raingarden?):			
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Please review the native plant requirements, then list the plant species that you plan to purchase and plant:			
Outline the estimated timeframe/dates for prepping, installing, and completing your project:			
Please attach a sketch (or map developed in LCW workshop) that shows the proposed layout, and			
approximate dimensions and distances from structures like house, downspout and street:			

Budget						
Please provide a breakdown of expected costs. Use the space below or attach a separate document.						
Supplies (plants, seeds, landscape materials, etc.)		Equipment & Miscellaneous				
ltem	Est. Cost	Item	Est. Cost			

Signatures  I certify that to the best of my knowledge and belief the information contained in this application is true, complete and accurate.					
Name of Applicant	Signature	Date			
Name of additional property owner (if applicable)	Signature	Date			