

**ATTACHMENT
Grant Summary Form**

This form is available on the County's Intranet.

**County of Siskiyou
GRANT SUMMARY FORM**

GENERAL INFORMATION

Grant Title		Grant No.(CFDA)	
Used Oil Payment Program - OPP8 FY 17/18			
General Description of Grant Work scope			
The Used Oil Payment Program provides funding to assist local governments in developing and maintaining ongoing used oil and used oil filter collection and recycling programs for their communities.			
Projects include operation and maintenance of used oil and used oil filter collection centers, residential oil change kits, and public awareness and education			
Granting Agency	<input type="checkbox"/> FED <input checked="" type="checkbox"/> STATE <input type="checkbox"/> OTHER	Agency Contact	Phone No.
CalRecycle			(916) 324-8867
Responsible Department		Department Contact	Extension No.
General Services		Arthur Boyd	8272
Board Approval Date	Application Date	Award Date	Est'd Completion Date

GRANT COST AND REVENUE SUMMARY

Program Cost Summary	Total	Grant Portion
Revenue (Please display with brackets <>)	-55,000.00	-55,000.00
Soft/hard cash match or In kind (<>)		
Staffing		
Contract Services	20,500.00	20,500.00
Supplies & Other Operating Expenditures	34,500.00	34,500.00
Capital Outlay		
Indirect Cost@ % of Direct Costs		
TOTAL GRANT COSTS AND REVENUES	\$ 0.00	\$ 0.00

How Was Grant Portion Determined?

Small jurisdictions will be provided a minimum award of \$5,000 for cities and \$10,000 for counties.

Nine (9) jurisdictions (Dorris, Dunsmuir, Etna, Ft. Jones, Montague, Mt. Shasta, Tulelake, Weed, & Yreka) historically authorize the County of Siskiyou to submit the grant application on their behalf.

(9 cities x \$5,000 each) + \$10,000 = \$55,000

Budget Amendment Request Required? Yes No If yes, please attach copy of Budget Appropriation Transfer

Does this grant allow for supplanting? Yes No

Does this grant allow for program income? Yes No

Will this require an advance of grant dollars? Yes No

OTHER COMMENTS (note any significant or unusual compliance requirements)

Use reverse side if necessary to provide additional information

Prepared By: Arthur Boyd

Date: 5/26/17

****Please attach a copy of the grant guidelines and all supporting documents that relate to the program cost summary section.