

Business Recycling Grant Application



Date: _____

Applicant Information

Business/Organization Name	
Contact Name	
Contact Title	
Mailing Address	
Phone Number	
Email Address	
Street Address	
City, Zip Code	

If you are a multi-tenanted property, please list the names of businesses/organizations at this location:

Tenant Name(s):

Duties and Budget Justification: Please provide a brief justification for the budget items requested. Include an explanation of how costs were determined. Describe how the business will implement the program. (Less than 500 words)

Please check yes or no for each of the following questions.

Reference Questions

	Yes	No
Did you work with MN Waste Wise or JL Taitt and Associates in developing your grant application? Please select: <input type="checkbox"/> MN Waste Wise <input type="checkbox"/> JL Taitt <input type="checkbox"/> Other:		
Does your business or organization currently have a recycling program?		
Does your business or organization currently have a food waste or organics/SSO recycling program?		

How did you hear about us?

	Yes	No
Lesstrash.com website		
Professional association (Chamber, Economic Development Association)		
Connected by BizRecycling Consultant Please select: <input type="checkbox"/> MN Waste Wise <input type="checkbox"/> JL Taitt <input type="checkbox"/> Other:		
Facebook		
Twitter		
Other: Please specify		

Eligibility Questions

	Yes	No
Is your business or organization physically located in Ramsey or Washington County?		
Is your business or organization a for-profit or non-profit non-residential waste generator?		
Is your business or organization responsible for managing the recycling and trash hauling contract for the properties you own, lease, rent, manage or maintain?		

Budget

Starter Grant

Line Item	Description	Total Proposed Amount
Staff/Personnel		
Consultant Fees		
Supplies		
Equipment		
Other Expenses		
Final Report	Complete Project Report and Submit to Project *	\$250
Start Grant Sub-Total		

*Note: Each grantee is eligible for \$250 for completing and submitting the final report.

Container Grant Please select containers from BizRecycling Container Catalog and complete order form below or attach the PDF wish list from the BizRecycling Container. Total container equivalent value shall not exceed \$9,750. The catalog can be found at: <http://www.lesstrash.com/resources/container-catalog>.

Container Name - Description (Make and Model)	Quantity	Cost per Container	Total Cost
Container Grant Sub-Total			

BizRecycling Grant Grand Total (Start Grant Sub-Total plus Container Grant Sub-total) = \$ _____

If awarded a grant, _____ <business name> agrees to the following activities:

Please check yes or no for each of the following questions.

	Yes	No
Host a site visit with a Project technical assistant to review current operations, the applicant's objectives and approach, report and provide assistance.		
Carry out recycling activities for a minimum of 18 months.		

Provide a 3 sentence testimonial with a picture or video at the end of the 18-month grant period and agree to serve as a "Success Story," if asked.		
Complete report documenting baseline pre-grant and post-grant quantities of a) materials recycled, b) food/SSO recovered, and c) trash.		
Please attach a W-9		

Mail to: Ramsey/Washington Recycling and Energy Board
2875 White Bear Ave N, Suite 350
Maplewood, MN 55109-1320
Attn: Business Recycling Reward Application

Fax to: 651-266-1177
Attn: Business Recycling Grant Application

Email to: grants@co.ramsey.mn.us
Subject: Business Recycling Grant Application

Online at: www.LessTrash.com