

**East Texas Council of Governments
FY 2011 REGIONAL SOLID WASTE GRANTS PROGRAM**

FORM 1. APPLICATION INFORMATION AND SIGNATURE PAGE

Applicant: <i>City of Jacksonville</i>	Funding Amount Proposed: \$ <i>7600.00</i>
Address: <i>301 E. Commerce Jacksonville TX.</i>	Phone/Fax/Email: Ph: <i>409-586-3570</i> Fx: Email: <i>MD.Paissi@JacksonvilleTX.org</i>
Contact Person: <i>MD Paissi</i>	Date Submitted: <i>10/31/11</i>

Project Category

<input type="checkbox"/> Local Enforcement
<input type="checkbox"/> Litter and Illegal Dumping Cleanup and Community Collection Events
<input checked="" type="checkbox"/> Source Reduction and Recycling
<input type="checkbox"/> Local Solid Waste Management Plans
<input type="checkbox"/> Citizens' Collection Stations and "Small" Registered Transfer Stations
<input type="checkbox"/> Household Hazardous Waste (HHW) Management
<input type="checkbox"/> Technical Studies
<input type="checkbox"/> Educational and Training Projects
<input type="checkbox"/> Other

Signature

By the following signature, the Applicant certifies that it has reviewed the certifications, assurances, and deliverables included in this application, that all certifications are true and correct, that assurances have been reviewed and understood, and that all required deliverables are included with this application.

Signature: <i>MD Paissi</i>	Title: <i>City Manager</i>
Typed/Printed Name: <i>MD Paissi</i>	Date Signed: <i>10/31/11</i>

FOR USE BY ETCOG

Date application was received: <i>10/31/2011</i>
Does the application meet all of the required screening criteria: <u> X </u> Yes <u> </u> No
Is the application administratively complete: <u> </u> Yes <u> X </u> No


Project Application
Form 1

**Resolution will be approved
on 11/8/2011*

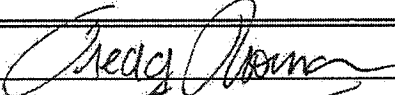
FORM 2. Authorized Representatives

The Applicant hereby designates the individual(s) named below as the person or persons authorized to receive direction from the COG, to manage the work being performed, and to act on behalf of the Applicant for the purposes shown:

- 1. Authorized Project Representative.** The following person is authorized to receive direction, manage work performed, sign required reports, and otherwise act on behalf of the Applicant.

Signature:	
Typed/Printed Name:	Wade Cole
Title:	Director of Public Works
Date:	10/27/11

- 2. Authorized Financial Representative.** In addition to the authorized project representative, the following person is authorized to act on behalf of the Applicant in all financial and fiscal matters, including signing financial reports and requests for reimbursement.

Signature:	
Typed/Printed Name:	Freddy Thomas
Title:	Finance Director
Date:	10/27/11

RESOLUTION 2011-1108-1

RESOLUTION OF THE CITY OF JACKSONVILLE TEXAS AUTHORIZING THE FILING OF A GRANT APPLICATION WITH THE EAST TEXAS COUNCIL OF GOVERNMENT FOR A REGIONAL SOLID WASTE GRANTS PROGRAM GRANT; AUTHORIZING CITY MANAGER TO ACT ON BEHALF OF THE CITY OF JACKSONVILLE, TEXAS, IN ALL MATTERS RELATED TO THE APPLICATION; AND PLEDGING THAT IF A GRANT IS RECEIVED, THE CITY OF JACKSONVILLE TEXAS, WILL COMPLY WITH THE GRANT REQUIREMENTS OF THE EAST TEXAS COUNCIL OF GOVERNMENT, THE TEXAS COMMISSION ON ENVIRONMENTAL QUALITY AND THE STATE OF TEXAS.

WHEREAS, the East Texas Council of Government is directed by the Texas Commission on Environmental Quality to administer solid waste grant funds for implementation of the COG's adopted regional solid waste management plan; and

WHEREAS, the City of Jacksonville in the State of Texas is qualified to apply for grant funds under the Request for Applications.

NOW, THEREFORE, BE IT RESOLVED BY THE CITY OF JACKSONVILLE TEXAS;

1. That Mo Raissi, City Manager is authorized to request grant funding under the East Texas Council of Government Request for Applications of the Regional Solid Waste Grants Program and act on behalf of City of Jacksonville in all matters related to the grand application and any subsequent grant contract and grant project that may result.
2. That if the project is funded, the City of Jacksonville will comply with the grant requirements of the East Texas Council of Government, Texas Commission on Environmental Quality and the State of Texas.
3. The grant funds and any grant-funded equipment or facilities will be used only for the purposes for which they are intended under the grant.
4. That the activities will comply with and support the adopted regional and local solid waste management plans adopted for the geographical area in which the activities are performed.

PASSED AND APPROVED BY THE CITY COUNCIL OF THE CITY OF JACKSONVILLE, TEXAS, on this the 8th day of November, 2011.

MAYOR KENNETH B. MELVIN

ATTEST:

CITY SECRETARY BETTY L. THOMPSON

STATE OF TEXAS)

COUNTY OF CHEROKEE)

I, BETTY L THOMPSON, AS THE CITY SECRETARY OF THE CITY OF JACKSONVILLE AM DULY AUTHORIZED AND DO HEREBY CERTIFY IN THE PERFORMANCE OF THE FUNCTIONS OF MY OFFICE, THAT THE ATTACHED INSTRUMENTS ARE FULL, TRUE AND CORRECT COPIES OF:

Resolution 2011-1108-1. A resolution that will go before Council on November 8, 2011 at a regularly scheduled Council meeting at 6:00 PM

of the City of Jacksonville, Texas, as the same appears of record in my office. I further certify that I am the lawful possessor and keeper of said records and have legal custody of the original records in said office.

WITNESS, my hand and official seal of said City this 20th day of Oct, 2011.


Betty L Thompson

BETTY L. THOMPSON
CITY SECRETARY
CITY OF JACKSONVILLE

Form 5b. Summaries of Discussions with Private Industry

(Refer to instructions concerning information to include on this form. Attach any written comments or input provided)

*Miss WATTS HAS AGREED to place bicycle rack at
this location.*

FORM 6: Project Summary

Please provide a complete project summary. Reference the goals, objectives, and/or recommendations from the regional solid waste management plan that apply to the project, and how the project will assist in implementing the plan. Refer to the application instructions when completing these forms. If necessary, attach additional pages for each form.

Form 6a. Project Description (add additional pages as necessary)

This project consists of placing a 30 yd. container at the Royal Oaks landfill to be used for recycling solid waste. The service will be voluntary and provided to citizens of the City of Jacksonville.

Form 6c. Level of Commitment of the Applicant *(add additional pages as necessary)*

Provide information related to the Applicant's level of commitment to preferred solid waste management practices. If the proposed project is an ongoing service, demonstrate the ability to sustain the program beyond the term of the grant. Explain the extent to which the appropriate governing bodies support the proposed project.

The ongoing service will be provided through revenue from recycled waste.

List any previously demonstrated commitment to preferred solid waste management practice, such as implementing other solid waste management projects, involvement in a local or subregional solid waste management plan or study, or membership in the TCEQ's Clean Texas Program.

If the proposed project has received previous grant funding under this program, explain to what extent the proposal involves expansion of current services or operations; present quantifiable documentation of the success of the project in order to warrant further funding. Demonstrate a good record of past grant contractual performance.

Form 6d. Scope of Work (See application instructions. Add additional pages as necessary)

Provide a work program with a schedule of deliverables for the proposed project or program. The work program with the schedule of deliverables will be considered the Scope of Work to be performed under the contract agreement, if funded. Once the details of the work program have been negotiated with the Applicant and approved by the COG, the work program will be entered into the grant contract.

As concisely as possible, for each task of the proposed project, describe the major steps or activities involved, identify the responsible entities and establish a specific timeframe to accomplish each task. The scope of work for the project or program must include:

- Detailed purpose and goal of the project (should be consistent with implementing the goals, objectives, and recommendations from the regional solid waste management plan, as stated in the project description on Form 6a).
- Specific task statements with responsible entity identified
- List of deliverables/products/activities under each task
- Schedule of deliverables

*The goal of this project is to provide the citizens of Jacksonville
A location and means to dispose of RECYCLABLE WASTE.*

FORM 7. GRANT BUDGET SUMMARY

Please provide the following breakdown of the total amount of grant funding being requested:

Budget Category	Funding Amount
1. Personnel/Salaries	\$
2. Fringe Benefits	\$
3. Travel	\$
4. Supplies	\$
5. Equipment	\$ 7600 ⁰⁰
6. Construction	\$
7. Contractual	\$
8. Other	\$
9. Total Direct Charges (sum of 1-8)	\$ 7600 ⁰⁰
10. Indirect Charges*	\$ —
11. Total (sum of 9 - 10)	\$ 7600 ⁰⁰

12. Fringe Benefit Rate:	%	
13. Indirect Cost Rate:	%	
<p>Identify, in detail, each budget category to which your indirect cost rate applies and explain any special conditions under which the rate will be applied:</p> <p>*In accordance with the UGMS, indirect charges may be authorized if the Applicant has a negotiated indirect cost rate agreement signed within the past 24 months by a federal cognizant agency or state single audit coordinating agency. Alternatively, the Applicant may be authorized to recover up to 10% of direct salary and wage costs (excluding overtime, shift premiums, and fringe benefits) as indirect costs, subject to adequate documentation. If you have an approved cost allocation plan, please enclose documentation of your approved indirect rate.</p>		
<p><i>Please complete any of the following detailed budget forms that are applicable.</i></p>		

FORM 7a: Detailed Matching Funds/In-Kind Services

This budget form should be completed if the Applicant is providing any level of matching funds or in-kind services directly related to the proposed project.

Matching Funds: \$_____

In the space below, please explain in detail the application of any matching funds to be provided by the Applicant, as directly related to the proposed project:

In-Kind Services: \$_____ (monetary equivalent)

In the space below, please explain in detail the application of any in-kind services to be provided by the Applicant, as directly related to the proposed project:

What is the TOTAL COST of the proposed project, considering the total grant funding requested, any matching funds being provided by the Applicant, and the monetary equivalent of any in-kind services being provided by the Applicant:

\$ 7600⁰⁰

FORM 7e: Detailed Equipment Expenses

All equipment purchases must be pre-approved by the COG. If the specific details of an equipment purchase are known, show that equipment on the list below. If the specific details of the equipment costs are not known at this time, list the general details on this form. The specific details of the equipment will then need to be provided to and approved by the COG before the costs are incurred.

Equipment (\$5,000 or more per unit) (Show description, type, model, etc.)	Unit Cost	No. of Units	Total Cost
<i>30yd CONTAINER for RECYCLABLES</i>	\$ <i>7600⁰⁰</i>	<i>1</i>	\$ <i>7600⁰⁰</i>
	\$		\$
	\$		\$
	\$		\$
TOTAL (Must equal Line 5 of the Overall Budget Summary)		\$	<i>7600⁰⁰</i>