



Environmental Community Opportunity Fund Grant Request Form

In the Community to Serve

1. Organization name: _____

2. Organization name shown on 501 (c)(3) Letter *(if different from above)*:

3. Address: _____

(City) (State) (Zip Code)

4. Telephone number: () _____ E-mail address: _____

5. Contact person's name/title: _____

6. Recipient tax status: *(Please check)*
 Public charity Exempt private foundation
 Public non-profit educational institution Other - Specify
 Private non-profit educational institution _____

7. Has recipient organization received notice from the Internal Revenue Service of a change in the organization's exempt status, or has it received notice that the organization will be considered a private foundation as defined in Section 509(a) of the Internal Revenue Code: _____

8. Federal Tax Identification Number: _____

9. Primary purpose of organization:

10. Program/Project Title for which funds are requested and brief description:
Please provide a copy of any brochures or other information, if any.

11. Type of request: Capital construction Operating support
 Special project Other _____

If this is a capital construction project, please complete questions 13-18. If not, go to question 19.

12. What is the total cost of the project: _____

13. Is construction in progress: _____ If yes, when did construction begin and how much money has been expended to date for the project: _____

14. Excluding expenditures to date for construction in progress, how much money is available from other sources for completion of this project: _____
Please provide a project budget.

15. Please identify funding sources and amounts:

16. How much money has been raised or pledged by individuals associated with your organization:

17. What is the estimated completion date of this project: _____

Please provide a project timeline.

18. Total fund drive goal: _____ Amount secured: _____

19. What community support is present or planned for this project:

20. List any major corporate contributions and amounts received:

- _____ \$ _____
- _____ \$ _____
- _____ \$ _____

21. Other funding sources and amounts pledged or received for this project:

22. Geographic area project or program will support: _____

23. List the names and affiliations of directors and officers of the organization:

- _____ • _____
- _____ • _____
- _____ • _____

24. Amount requested from Cascade Natural Gas Corporation (\$2,500 maximum): _____

25. Why should Cascade Natural Gas Corporation support this project:

Name: _____ Title: _____

Date of Application: _____

Upon completion, please submit the application to
Mark Hanson at mark.hanson@mduresources.com