

**Board of Water & Soil Resources
Natural Resources Block Grant
Program Allocation and Contribution Plan**

County: **Waseca**

Grant Period: July 1, 2010 to June 30, 2012 Fiscal Year: 2011

The following lists the eligible state program fund amounts and required minimum match.

P.O. **17566**

State Fund		Required Match	
LWM	\$14,032	Levy:	\$4,941
WCA	\$11,915	1:1	\$11,915
DNR Shoreland	\$2,956	1:1	\$2,956
MPCA SSTS	\$9,931	NA	
MPCA Feedlot Base	\$22,084	0.7:1	\$15,459
MPCA Feedlot PC* Award	\$1,425	NA	

The following designates grant amounts to be used and match amounts to be provided by specified program participants.

PROGRAM PARTICIPANTS	LWM		WCA		DNR SHORELAND		MPCA STSS		MPCA FEEDLOT		
	Grant \$	County Levy	Grant \$	Match	Grant \$	Match	Grant	Match	Grant \$	Match	PC Award*
COUNTY DEPT:											
Planning and Zoning					\$2,956	\$2,956			\$22,084	\$15,459	\$1,425
Water Planning	\$14,032	\$4,941									
Public Health							\$9,931				
SWCD:											
Waseca SWCD			\$11,915	\$11,915							
CITIES:											
OTHER:											
PROGRAM SUMMARY	\$14,032	\$4,941	\$11,915	\$11,915	\$2,956	\$2,956	\$9,931	\$0	\$22,084	\$15,459	\$1,425
PROGRAM CONTRIBUTION	\$18,973		\$23,830		\$5,912		\$9,931		\$38,968		
Total Program Contribution:											\$97,614

*PC = Performance Credit

Actual use of grant and match amounts and the entity using/providing must be reported in eLINK.

BY SIGNING BELOW, WE AGREE to expend grant and match amounts as listed above and to provide documentation to support these actions.

Organization:	Waseca County Planning and Zoning
Printed Name:	
Title:	
Phone Number:	
Signature:	Date:

Organization:	Waseca County Public Health
Printed Name:	
Title:	
Phone Number:	
Signature:	Date:

Organization:	Waseca County Soil & Water Conservation District
Printed Name:	
Title:	
Phone Number:	
Signature:	Date:

Organization:	
Printed Name:	
Title:	
Phone Number:	
Signature:	Date:

I verify that this Program Allocation and Contribution Plan represents the county's request for state funds and the required minimum local match for each specified program.

County LWPer Signature

Date

This NRBG Program Allocation and Contribution Plan meets minimum NRBG requirements.

Board Conservationist Signature

Date