

RESOLUTION 2009-14

WHEREAS, East Fallowfield Township, Chester County ("applicant") desires to undertake the following project

[*project title*] East Fallowfield Community Park; and

WHEREAS, the applicant desires to apply to the Department of Conservation and Natural Resources ("Department") for a grant for the purpose of carrying out this project; and

WHEREAS, the application package includes a document entitled "Terms and Conditions of Grant" and a document entitled "Signature Page for Grant Application and Grant Agreement"; and

WHEREAS, the applicant understands that the contents of the document entitled "Terms and Conditions of Grant," including appendices referred to therein, will become the terms and conditions of a Grant Agreement between the applicant and the Department if the applicant is awarded a grant; and

WHEREAS, the applicant understands that, by signing the "Signature Page for Grant Application and Grant Agreement" and submitting it to the Department as part of the grant application, the applicant agrees to the terms and conditions of the grant and will be bound by the Grant Agreement if the Department awards a grant;

NOW THEREFORE, it is resolved that:

1. The "Signature Page for Grant Application and Grant Agreement" may be signed on behalf of the applicant by the official who, at the time of signing, has the title of Chairman.
2. If this official signed the "Signature Page for Grant application and Grant Agreement" prior to the passage of this Resolution, this grant of authority applies retroactively to the date of signing.
3. If the applicant is awarded a grant, the "Signature Page for Grant Application and Grant Agreement," signed by the above official, will become the applicant/grantee's executed signature page for the Grant Agreement, and the applicant/grantee will be bound by the Grant Agreement.
4. Any amendment to the Grant Agreement may be signed on behalf of the grantee by the official who, at the time of signing of the amendment, has the title specified in paragraph 1 and the grantee will be bound by the amendment.

I hereby certify that this Resolution was adopted by the [*identify the governing body of the applicant, e.g. city council, borough council, board of supervisors, board of directors*] BOS this 25th day of August, 2009

Secretary

DCNR USE ONLY

Project Number: BRC-OPD-14-382

**GRANT AGREEMENT SIGNATURE PAGE FOR THE GRANTEE &
COMMONWEALTH**

Name of the Grantee: **East Fallowfield Township,
Chester County**

Federal ID #: **23-6000309**
SAP Vendor #: **138656**

GRANTEE:

WITNESS:

BY _____

BY _____

Title: _____

Title: _____

Date: _____

Date: _____

Commonwealth of Pennsylvania - Department of Conservation and Natural Resources

Director, Bureau of Recreation and Conservation

Date

Approved as to Legality and Form:

Chief/Assistant Counsel

Office of Attorney General

N/A

Office of General Counsel

Certification of Funds:

I certify that funds in the amount of \$50,000 are available under Appropriation Symbol(s):

GR# _____

SAP Fund	Cost Center	G/L Account	Internal Order	Amount
1039607000	3842310001	6600400		\$50,000

Program OTHER PARKS
ME # 2786382
Project # BRC-OPD-14-382
CFDA # _____
(Federal Grants)

PP&R Comptroller's Office





PARKS, RECREATION & CONSERVATION GRANT

PAYMENT REQUEST**INSTRUCTIONS**

1. Complete Section I - Grantee and Project Identification.
2. Sign and date this form in Section II - Grant Payment Request.
3. Submit the completed form to the Bureau's central office at the following address:

Department of Conservation and Natural Resources
Bureau of Recreation and Conservation
P.O. Box 8475
Harrisburg, PA 17105-8475

4. Keep a copy of the submission for your files.

SECTION I - GRANTEE AND PROJECT IDENTIFICATION

Payee/Grantee: East Fallowfield Township
County: Chester

Employer Identification Number:
23-6000309

Address: 2264 Strasburg Road
East Fallowfield, PA 19320

DCNR Project (Invoice) Number:
BRC-OPD-14-382 (F)

Please select one:

Check:

Electronic Fund Transfer:

Project Title: East Fallowfield Community
Park

SECTION II - GRANT PAYMENT REQUEST

I hereby request the Department to authorize a **100% grant payment**. The grantee understands that all grant funds received must be deposited in an insured, separately identifiable account in accordance with Article V of the Grant Agreement. The grantee acknowledges that a close out report or audit must be submitted to the Department upon completion of the project in accordance with Article XII of the Grant Agreement.

Signature of Local Project Coordinator

Title:

Date:

COMPLETED BY DCNR CONTRACTING & PAYMENTS STAFF ONLY

ME #: 2786382

GR #:

SAP Vendor #: 138656

Bureau of Recreation & Conservation Approved:

Grant Amount

\$50,000

(Signature Authority)

Eligible Payment

\$50,000

Invoice Date: _____

Balance

\$0

Comptroller Issues Contact: Lillian Quinones 717-783-2656

Funding: Heritage & Other Parks Fund

SAP Fund	Cost Center	G/L Account	Internal Order	Amount
1039607000	3842310001	6600400		\$50,000
				\$
				\$