

CARROLL COUNTY DEPARTMENT OF RECREATION AND PARKS

**SELF HELP PROJECT REQUEST FORM**

- A. Name of Recreation Council  
\_\_\_\_\_
- B. Group sponsored by Recreation Council \_\_\_\_\_
- C. Name, address, phone number and email address of Project Coordinator  
Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_
- D. Brief description of project including location of project and additions or improvements to be made (attach additional pages if necessary)
- E. Estimated cost of items and materials:  
*(Installation costs for tot lots may be included as a separate line item)*  

<u>Description of Items</u>	<u>Cost</u>
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TOTAL COST OF PROJECT 1 \$

F. Justification of project (Briefly describe benefit to community)

G. Attach site plan and/or project specifications to project request form

**H. This section to be completed only in cases where projects are located on municipal property:**

**Approval of Project Request:**

**Authorized Representative of Town/City of: \_\_\_\_\_**

**I. This section to be completed only in cases where projects are located on school facilities**

**1. Principal's Comments:**

**2. Signature of School Principal \_\_\_\_\_ Date**

**3. Director of Facilities' Comments:**

**4. Signature, Director of Facilities**

**\_\_\_\_\_ Date**

**J. Source of Funding**

Total cost of project (as listed in section E, line #1) 2 \$  
Amount over project limit of \$20,000 3 \$  
Subtract line 3 from line 2 and enter here 4 \$  
Number of volunteer hours 5 \$  
Multiply total in line #5 by \$7 6 \$

**NOTE: VOLUNTEER HOURS WILL NOT BE ACCEPTED FOR TOT LOT PROJECTS**

Subtract line #6 from line # 4 and enter here 7 \$  
Multiply total in line #7 by 75% and enter here 8 \$  
Subtract line #8 from line #7 and enter here 9 \$  
Add total on line #3 plus the total on line #9 and enter here. 10 \$

**This total represents the amount due from the requesting group.**

Please note that this amount must equal at least 15% of the total project cost.

K. Signature of Project Coordinator \_\_\_\_\_ Date

L. Signature of Rec. Council President \_\_\_\_\_ Date

Completed project request forms **must** be submitted to the Department of Recreation and Parks by the first Wednesday in September and February. If you need assistance or have any questions, please contact:

Carroll County Department of Recreation and Parks

300 South Center Street

Westminster, MD 21157

(410) 386-2103

1 (888) 302-8978 X2103

FAX 410-876-8284