



# GRANT APPLICATION

State Form 55049 (R / 3-20)  
INDIANA DEPARTMENT OF NATURAL RESOURCES

## APPLICATION INFORMATION

Type of grant (Please check one.)

- Land and Water Conservation Fund (LWCF)
  Recreational Trails Program (RTP)
- Wabash River Heritage Corridor Fund (WRHCF)
  Other: \_\_\_\_\_

Name of organization <b>South Bend Venues Parks &amp; Arts</b>	Employer identification number <b>35-600121</b>
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Name of contact person <b>Matthew Moyers</b>	Data Universal Number System (DUNS) number <b>07-423-7123</b>
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Address (number and street, city, state, and ZIP code)  
**301 S St. Louis Blvd, South Bend, IN 46617**

Telephone number <b>(574) 235-5940</b>	Fax number ( )	E-mail address <b>mmoyers@southbendin.gov</b>
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Name and brief description of project:  
**Martin Luther King, Jr. Community Campus Improvement Project.**

A renovation of the exterior amenities of the MLK Jr. Community Center including a new splash pad, tournament basketball courts, native plantings, pollinator garden, bat houses and a community market row.

## COST CLASSIFICATION

1. Preliminary expenses	\$
2. Land, structures, and rights-of-way	\$
3. Architectural and engineering basic fees	\$
4. Relocation expenses	\$
5. Construction and equipment	\$
6. TOTAL PROJECT AMOUNT (Lines 1 through 5)	\$ 814,592.00
7. Grant Request in line 6	\$ 407,296.00
8. Applicant's share of line 6	\$ 407,296.00

## METHOD OF FINANCING APPLICANT'S SHARE

1. Local Appropriations (by applicant)	\$
2. Donations	\$
a. Land	\$
b. Cash	\$
c. Labor	\$
d. Equipment	\$
e. Materials	\$
3. Federal source (Specify in Remarks.)	\$
4. Force account (Specify in Remarks.)	\$
5. Other (Specify in Remarks.)	\$
6. TOTAL APPLICANT'S SHARE	\$ 407,296.00

Remarks:  
  
Identified City Share contribution from 301 General Operating Account  
No LWCF funds are to be used for pre-application, preliminary or design expenses.

To the best of my knowledge, information in this application is true and correct, the grant application has been duly authorized by the applicant and it will comply with all conditions of the program if funding is approved.

Signature 	Date (month, day, year) <b>10/17/2022</b>
Printed name <b>Mark Neal</b>	Title <b>President, South Bend Board of Park Commissioners</b>