



Longview Parks and Recreation Department Neighborhood Park Grant Application

Application deadline: June 17, 2016

**PLEASE SUBMIT EIGHT (8) COPIES OF THIS APPLICATION AND
EIGHT (8) COPIES OF ANY SUPPLEMENTAL MATERIALS**

Date	Project Name	Project Location
Applicant (organization)		Contact Person and Title
Are you a non-profit organization? ☐ Yes ☐ No		If yes, what is your IRS Tax ID#?
Address		City/State/Zip
Daytime Phone	Evening Phone	Email Address

Project Description.

(Applicants are encouraged to attach additional pages including schematic drawings, site location drawings, maps, pictures, and photographs.)

Project Relationship to Grant Rating and Instruction Criteria

(On a separate sheet of paper please explain how this project responds to the eight rating criteria listed in the application process. Addressing the eight criteria will enable the Parks and Recreation Advisory Board to evaluate the importance of the project against others that request funding.)

- ☐ **Need:** Does the community have a need for this project? (Consider whether there are similar or complementary facilities in the area/community)
- ☐ **Community Impact:** Who will benefit from the project? Provide approximate number, range, and diversity of those likely to be served by or benefit from the project? Do they represent a significant underserved population?
- ☐ **Access:** Upon completion, what will the availability of the project be to the public during the year?
- ☐ **Financial Responsibility:** What is the potential life span of the project? What will the maintenance and replacement requirements of the project be, both immediate and long-term?
- ☐ **Cost Benefit:** Do the benefits outweigh the cost of the project? (Benefits include economic impact and community development, additional opportunities for play in the community, and reduction in youth related social problems.)
- ☐ **Compliance:** Does the project comply with the City of Longview's historic preservation plan, park and recreation comprehensive plan, and other city policy initiatives?
- ☐ **Readiness to Proceed:** How soon after the grant is approved can the project begin? (Discuss how quickly the applicant can complete the project by demonstrating availability of the required financial match; permits being secured; and availability of needed labor.)
- ☐ **Funding:** What are the applicant's potential sources of funding? (Please list all cash and in-kind goods and services) Are they already secured? Does the applicant identify partnership arrangements and what value does the partnership(s) bring to the project?

Project Budget and Funding

TOTAL PROJECT COST PRIOR TO SUBMITTING FOR GRANT FUNDS

ESTIMATED TOTAL COST OF THE PROJECT: \$

APPLICANT FINANCIAL BREAKDOWN TO FUND THE PROJECT

APPLICANT CASH: \$ %

*(Monetary value of in-kind donations of goods/labor/services) **APPLICANT DONATIONS:** \$ %

*(Monetary value: 1 Hour = \$10.00) **VOLUNTEER LABOR DONATIONS: *** \$ %

identify source(s) **OTHER:** \$ %

TOTAL OF ALL CASH AND DONATIONS COLLECTED FOR THE PROJECT: \$

* Below please list in detail donated labor and materials: *Secured or Anticipated*

* Below please list number of volunteers and anticipated hours of volunteer work

_____ # of Volunteers X _____ # of Hours Donated = _____ Total Hours of Volunteer Labor Donations

APPLICANT REQUEST: **50%** REIMBURSEMENT OF EXPENDED FUNDS

Applicants may use cash, in-kind donations and services, and volunteer labor hours to account for the total cost of the project. **Matching grant funds are only available for reimbursement on actual expenditures spent on supplies and services and not on donated items or labor.**

GRANT FUNDS REQUESTED FROM CITY OF LONGVIEW:

\$

ADDITIONAL PROJECT QUESTIONS

Will fees be charged in connection with using this project?

☐ Yes ☐ No

If yes, please describe:

Multi-year project?

☐ Yes ☐ No

(If yes, please describe)

Anticipated Start Date:

Anticipated Date of Completion:

Application completed by (print and sign name)

Title

Date

Please return this application by June 17, 2016, to:

**City of Longview
Parks and Recreation Department
2920 Douglas St.
Longview, WA 98632**

Rating Criteria

Need-The project is needed to replace slides that have been removed from service due to excessive vandalism.

Community Impact- The community members that will benefit from the project are all children that visit the playgrounds where the slides will be installed to replace missing units.

Accessibility-The access to the project will be available to the public during all times of the year that the parks are open.

Financial responsibility-The life span of slides has been in the 20-30 year range. If there is only general use the slide will provide this many years of use. The maintenance will be cleaning and preventative maintenance for safety standards.

Cost Benefit-The benefits more than outweigh the costs of the project if the units are used in the manner they were intended.

Compliance-The project is replacement of preexisting units and all meet the policies and plans of the boards and committees.

Readiness to proceed-The project will be started immediately after approval. This will consist of ordering parts, receiving delivery and install of the parts. Delivery has been in the 1-2 month range for previous orders and install can be completed in a day after receipt of the parts.

Funding-Additional funding required will be in the form of operating budget and labor from Parks staff to install the parts.



A PLAYCORE Company

GameTime, C/O SiteLines Park & Playground
Products, Inc. Corporate & Billing Office: 4818
Evergreen Way, #200, Everett WA 98203
800-541-0869 | 425-355-5655 | fax 425-347-3056

QUOTE
#60909

09/23/2015

Victoria Freeman Park Spiral slide

Longview Parks & Recreation
Attn: Curt Nedved
706 30th Ave
Longview, WA 98632
Phone: 360-442-5422
Fax: 360-442-5956
curt.nedved@ci.longview.wa.us

Project #: P53482
Ship To Zip: 98632

Quantity	Part #	Description	Unit Price	Amount
1	168262	Game Time - F5 Spiral Slide [Roto Plastic:_____]	\$1,829.00	\$1,829.00
1	168463	Game Time - F5 SPIRAL SLIDE HOOD [Roto Plastic:_____]	\$692.00	\$692.00
1	176107	Game Time - COATED PLATFORM 41 3/4" [Deck:Pvc:_____]	\$631.00	\$631.00
2	176074	Game Time - HANDRAIL ASSY 35 11/16"LG [Accent:_____]	\$372.00	\$744.00
2	168620	Game Time - STEP RUNG 37 1/2"LG [Accent:_____]	\$146.00	\$292.00
1	200033	Game Time - FOOTBUCK 30 3/4"LG- BLACK	\$72.00	\$72.00
1	168601	Game Time - Ground Socket 38 5/8" GRY	\$157.00	\$157.00
4	A63515	Game Time - Power Lock Base [Accent:_____]	\$15.00	\$60.00
4	A63517	Game Time - Power Lock Cap [Accent:_____]	\$23.00	\$92.00
1	168569	Game Time - HDW-F5 SPIRAL SLIDE	\$55.00	\$55.00
			SubTotal:	\$4,624.00
			Tax:	\$441.92
			Freight:	\$900.06
			Total Amount:	\$5,965.98

MaryAnn Hinze
SiteLines Park & Playground Products, Inc.

***** PLEASE MAKE YOUR ORDER PAYABLE TO "GAMETIME" *****

Buell Recreation LLC
 Fax 866-597-0033
 Business Office:
 7327 SW Barnes Rd. #601
 Portland, OR 97225

(503) 922-1650
 www.buellrecreation.com



Quote

Date	Quote #
12/21/2016	T122116A
Exp. Date	
01/21/2017	

Address

City of Longview
 Parks Dept.
 706 30th Ave
 Longview, WA 98632

Ship To

City of Longview
 Attn: Curt Nedved
 706 30th Ave
 Longview, WA 98632

Ship Via	PROJECT	TERMS OR P.O. #	SALES REP
ABF	Slide parts	30	Trent

Product	Description	Quantity	Rate	Amount
018-0105	• Spiral Slide Color: _____	1	2,171.00	2,171.00T
024-0105	• Post 3 1/2 OD x 123	1	223.00	223.00T
000-0105	• CAP Casting 3 1/2 OD Beam	2	22.51	45.02T
030-0126	• Wave Slide Exit Support	1	144.00	144.00T
036-0167	• Hardware Package	1	5.57	5.57T
036-0343	• Hardware Package	1	86.00	86.00T
046-0333	• Brass Spacer	13	3.07	39.91T
Freight	• Shipping -does not include off loading Forklift generally required for offloading	1	654.00	654.00T
Terms Govt.	• Govt. Purchase Order with payment due 30 days from product shipment and services due upon completion. Equipment may be invoiced separately from other services and are payable in advance of project/supply or completion. No retainage. A 3% charge will be added to all credit card orders over \$5,000.	1	0.00	0.00
Shipping Address	• Ship equipment to: _____ _____ Attention: _____ Phone: _____	1	0.00	0.00

PLACING AN ORDER: Upon ordering please review and return this signed quote with a copy of your purchase order and tax exempt certificate, if applicable. Please mark any changes on the quote such as billing/shipping address, drivers contact and color selection. IF INSTALLATION IS INCLUDED: This quote does not include Prevailing Wages, Davis Bacon Wages or Performance Bonds unless noted. Owner is responsible for site preparation unless otherwise noted.

SubTotal	\$3,368.50
Tax (8%)	\$269.48
Total	\$3,637.98

Accepted By

Accepted Date

Fax: 866-597-0033

1-800-266-1250