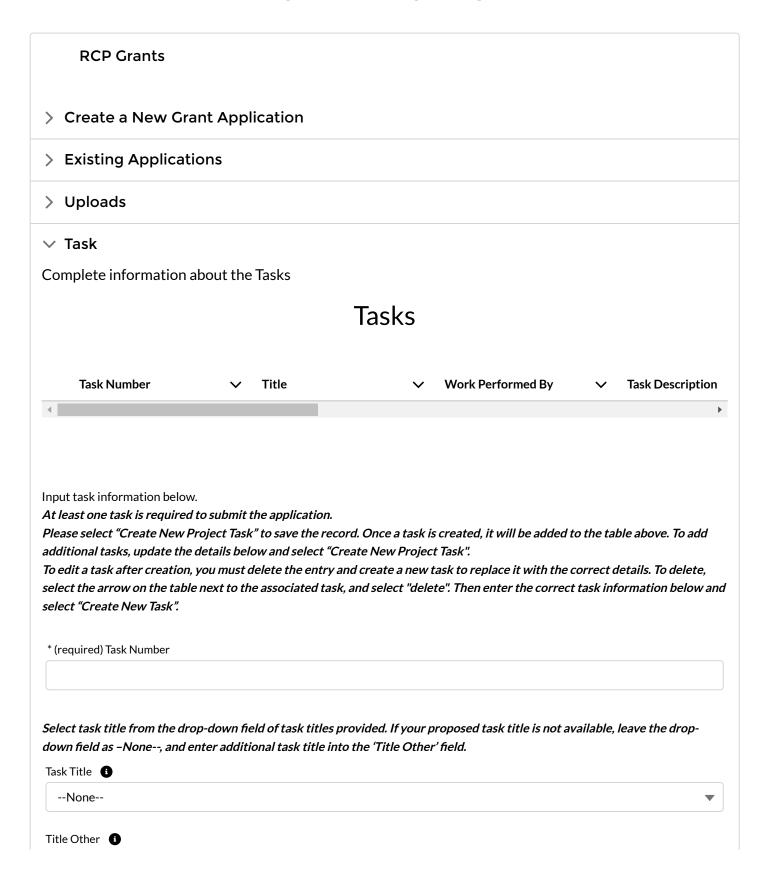


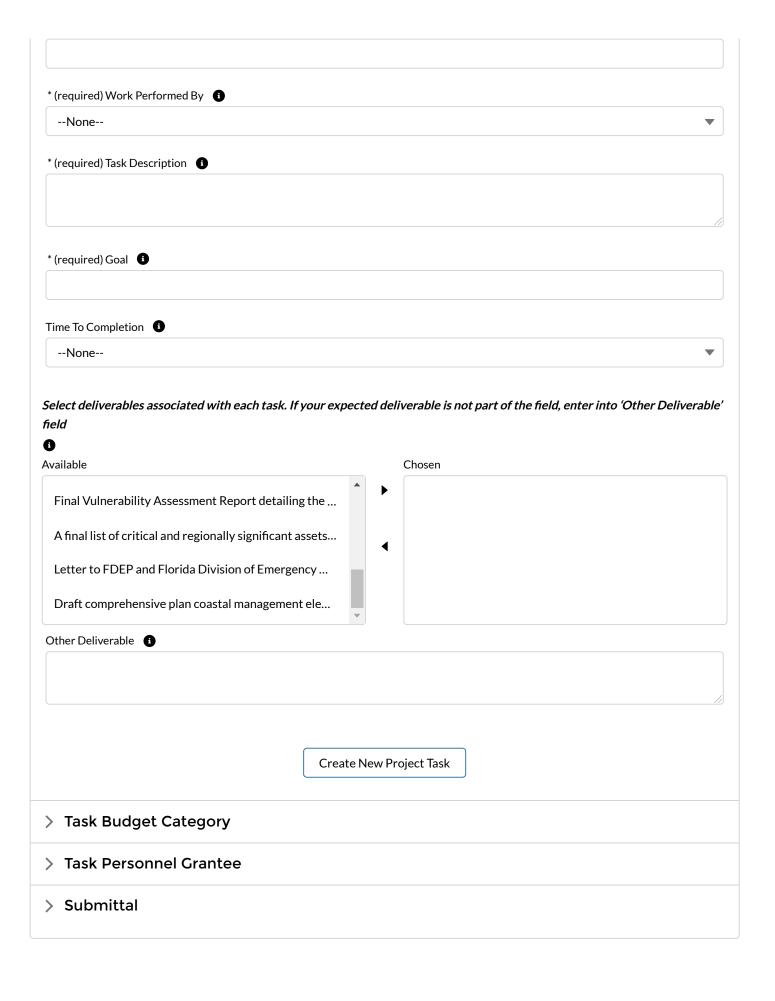
his field is calculated.		
Total Grant Match Amount		
iotal Grant Material Mount		
ist any municipalities directly served	d by the project and included in the scope of	work. In the next step
	nicipalities are included that will be in the co	unties selected below,
enter "all-inclusive."		
List the City(ies)/ Town(s)/Village(s)		
Area Served		
Select your county.		
D		
available	Chosen	
Alachua	↑	
Baker		
Вау	•	
Bradford		
Brevard Vill the vulnerability assessment include	de any state managed lands such as National E	stuarine Research
Reserves (NERRs) or Aquatic Preserves		
D		
None		
Total Population 🐧		
Percent of Population 1		
s. Project Work Plan		
Project Summary 1		
· •		
_		
Project Description (1)		

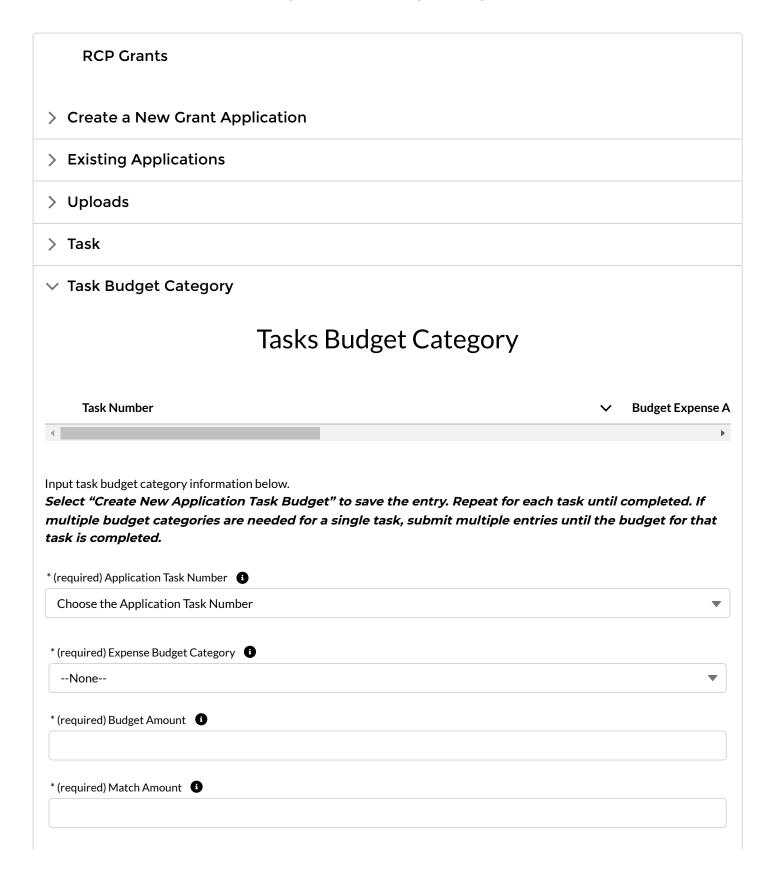
Explain how the proposed project fits into one or mo	re of the Project Types.
If the project is a Vulnerability Assessment for Peril of project will meet the outlined requirements for a Vuln	f Flood compliance or other, please describe how the nerability Assessment under s. 380.093, F.S.
If applicable, explain how the proposed project adaptes defined in s. 380.093, F.S.	ts critical assets to the effects of flooding and sea level rise
Discuss how the project is feasible and can be compl	eted by the grant period deadline.
Has the applicant entity(ies) performed a prior vulner in this application?	ability assessment, separate from what is being proposed
None	▼
In order to access the rest of the application all req in and saved.	uired fields (indicated with an asterisk*) must be filled
Cance	el Save
> Existing Applications	

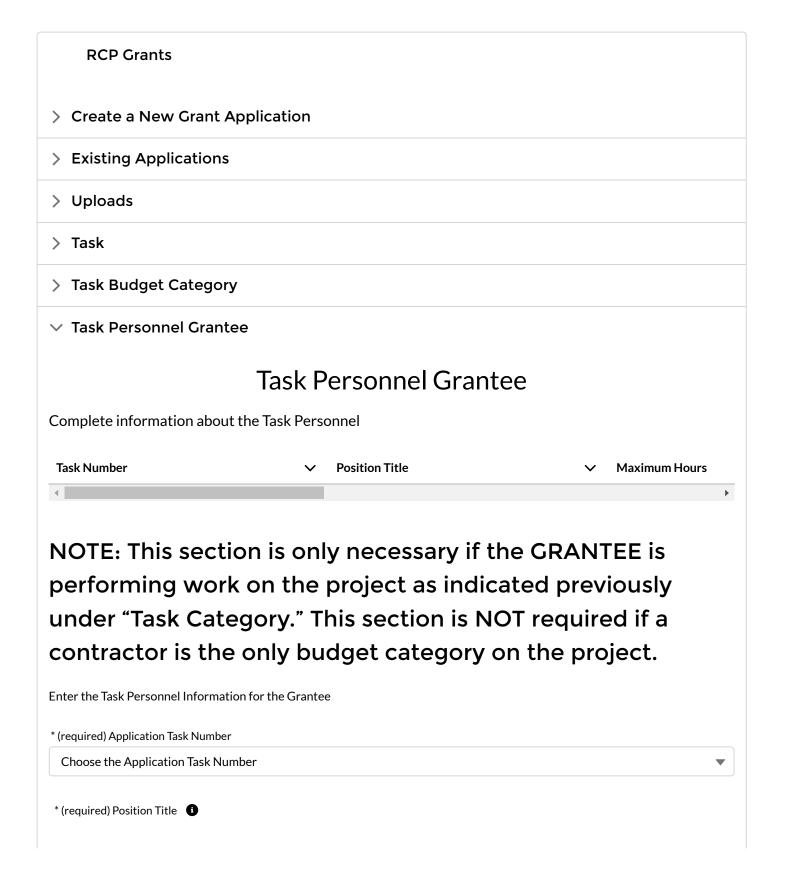
Florida Department of Environmental Protection 3900 Commonwealth Blvd., Tallahassee, Florida 32399-3000

Phone: 850-245-2501









* (required) Maximum Hours	
* (required) Maximum Hours Time Unit	• •
None	•
* (required) Maximum Hourly Rate	
* (required) Fringe Percent 1	
	onnel Grantee Entry" to save the entry. Repeat for each task until completed. ed for a single task, submit multiple entries until all personnel for that task
	Create New Task Personnel Grantee Entry
> Submittal	

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> Cre	eate a New Grant Application sting Applications
> Exis	
> Upl	sting Applications
\ Tacl	loads
/ Iasi	sk
> Tas	sk Budget Category
> Tasi	sk Personnel Grantee
∨ Sub	bmittal
	Grantee's Certification Statement
By signing	ng this Statement page, the undersigned certifies that:
2. If seld Envir 3. Any f funds	
	undersigned has full authority to bind the applicant.
The selec	ction of the checkbox below acts as your signature.
** .	Grantee's Authorized Signer's Name
* (require	red) Authorized Signers Signature 1

Please see the certification statements above and ensure you have entered a value for each indicated required field or section in your application. Once all fields are complete, click the check box to agree to the certification statements and select "Submit" below.

(required) Certification Agreement	0
(rodan out out uniousion to to the	