APPLICATION FOR FEDERAL ASSISTANCE

OMB Approval No. 0348-0043

2. DATE SUBMITTED February 15, 2002

Applicant Identifier

1. TYPE OF SUBMISSION:

Application
- ☐ **Construction**
- ☑ **Non-Construction**

Preapplication
- ☐ **Construction**
- ☐ **Non-Construction**

3. DATE RECEIVED BY STATE

State Application Identifier

4. DATE RECEIVED BY FEDERAL AGENCY

Federal Identifier

5. APPLICANT INFORMATION

Legal Name: Greer Animal Rescue, INC

Organizational Unit: Marine Mammal District

Address *(give city, county, State, and zip code)*:
3418 Snow Boulevard
Edgewood, MD 20934

Name and telephone number of person to be contacted on matters involving this application *(give area code)*
Lisa Sneed (410) 223-3178

6. EMPLOYER IDENTIFICATION NUMBER *(EIN)*: 9 9 — 1 1 1 1 1 1 1

7. TYPE OF APPLICANT: *(enter appropriate letter in box)* N

A. State
B. County
C. Municipal
D. Township
E. Interstate
F. Intermunicipal
G. Special District
H. Independent School Dist.
I. State Controlled Institution of Higher Learning
J. Private University
K. Indian Tribe
L. Individual
M. Profit Organization
N. Other (Specify) non-profit

8. TYPE OF APPLICATION:

☑ **New** ☐ **Continuation** ☐ **Revision**

If Revision, enter appropriate letter(s) in box(es) ☐ ☐

A. Increase Award B. Decrease Award C. Increase Duration
D. Decrease Duration Other*(specify)*:

9. NAME OF FEDERAL AGENCY:
Department of Commerce/NOAA/NMFS

10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: 1 1 — 4 3 9

TITLE: Marine Mammal Data Program

11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:
Monitoring the success of Cetacean Rehabilitation

12. AREAS AFFECTED BY PROJECT *(Cities, Counties, States, etc.)*:
Maryland

13. PROPOSED PROJECT

Start Date	Ending Date
9/1/02	8/31/03

14. CONGRESSIONAL DISTRICTS OF:

a. Applicant: District 2 (Maryland)

b. Project: Coastal Districts in Maryland

15. ESTIMATED FUNDING:

a. Federal	$ 100,000.00
b. Applicant	$ 20,334.00
c. State	$ 6,000.00
d. Local	$ 2,000.00
e. Other	$ 5,000.00
f. Program Income	$ .00
g. TOTAL	$ 133,334.00

16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?

a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON:

DATE _____

b. No. ☑ PROGRAM IS NOT COVERED BY E. O. 12372
☐ OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW

17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?

☐ **Yes** **If "Yes," attach an explanation.** ☑ **No**

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.

a. Type Name of Authorized Representative	b. Title	c. Telephone Number
Brian Hayden	Administrative Officer	(410) 444-1234

d. Signature of Authorized Representative

e. Date Signed

BUDGET INFORMATION - Non-Construction Programs

OMB Approval No. 0348-0044

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. Marine Mammal Proc	11-439	$	$	$ 100,000.00	$ 33,334.00	$ 133,334.00
2.						0.00
3.						0.00
4.						0.00
5. Totals		$ 0.00	$ 0.00	$ 100,000.00	$ 33,334.00	$ 133,334.00

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total
	(1)	(2)	(3)	(4)	(5)
a. Personnel	$ 35,000.00	$ 10,850.00	$	$	$ 45,850.00
b. Fringe Benefits	4,200.00	2,150.00			6,350.00
c. Travel	3,000.00				3,000.00
d. Equipment	35,000.00				35,000.00
e. Supplies	7,800.00				7,800.00
f. Contractual	15,000.00	20,334.00			35,334.00
g. Construction					0.00
h. Other					0.00
i. Total Direct Charges *(sum of 6a-6h)*	100,000.00	33,334.00	0.00	0.00	133,334.00
j. Indirect Charges					0.00
k. TOTALS *(sum of 6i and 6j)*	$ 100,000.00	$ 33,334.00	$ 0.00	$ 0.00	$ 133,334.00
7. Program Income	$	$	$	$	$ 0.00

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SECTION C - NON-FEDERAL RESOURCES				
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS
8.	$ 20,334.00	$ 6,000.00	$ 7,000.00	$ 33,334.00
9.				0.00
10.				0.00
11.				0.00
12. TOTAL *(sum of lines 8-11)*	$ 20,334.00	$ 6,000.00	$ 7,000.00	$ 33,334.00

SECTION D - FORECASTED CASH NEEDS					
	Total for 1st Year	**1st Quarter**	**2nd Quarter**	**3rd Quarter**	**4th Quarter**
13. Federal	$ 100,000.00	$ 58,750.00	$ 18,150.00	$ 11,800.00	$ 11,300.00
14. Non-Federal	33,334.00	3,250.00	5,750.00	12,000.00	12,334.00
15. TOTAL *(sum of lines 13 and 14)*	$ 133,334.00	$ 62,000.00	$ 23,900.00	$ 23,800.00	$ 23,634.00

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT				
(a) Grant Program	FUTURE FUNDING PERIODS (Years)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16.	$	$	$	$
17.				
18.				
19.				
20. TOTAL *(sum of lines 16-19)*	$ 0.00	$ 0.00	$ 0.00	$ 0.00

SECTION F - OTHER BUDGET INFORMATION	
21. Direct Charges: 133,334	22. Indirect Charges:
23. Remarks:	

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