

Blount County, Tennessee Grant (Contract) Worksheet

(adopted February 21, 2013)

Please provide the information below for any Grant being applied for or recently awarded.

Once completed, return the worksheet via e-mail to the Grant Accountant at accounting@blounttn.org.

Requesting Department: General Services

Contact Person's Name, email, phone # (person applying for grant): Don Stallions, dstallions@blounttn.org, 865-223-4729

Financial Reporting Person's information (if different than contact): _____

Project/Program Director's Name, email, phone # Same as Contact

Name of Granting Agency: DOE

Grant Name: EECBG

Is a grant application required? YES X NO _____

Is this a one-time grant? YES X NO _____ If no, is the grant recurring? _____

Grant Funds Requested: _____ \$79,600

Are County Funds Required (Match)? If so when approved, a budget amendment for match will need to be included with this form
No _____

Total Amount of Grant: \$ _____ 79,600

Brief Description for Use of Grant Funds:
(Equipment, Gear, Personnel, etc.)

Energy Efficient Prorams Voucher Program/No matching funds
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If the grant is in the application processes, what is the submission deadline? _____ 10/31/2024

Worksheet reviewed by - _____
Grant Accountant and/or Finance Director: _____

Date of Commission approval: _____

Please provide the remaining information once the Grant is approved.

Grant CFDA# (Catalog of Federal Domestic Assistance): _____

Date of Grant Award: _____

Grant Period: (such as: Oct 1 - Sept 30) _____

Expiration Date of Grant, as established by the Granting Agency: _____

Anticipated Closing Date of Grant Project: _____

How will we receive the Grant Funds? (direct deposit, check, other) _____

How often will the Grant Funds be sent? (monthly, quarterly, one payment, other) _____

****** Attach Budget Amendment(s) to this form when grant approved ******