



Prairielands Groundwater Conservation District

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Rainwater Harvesting Grant Program Application

Applicant's Information

Full Name: _____

Email: _____ Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip code: _____

Rainwater System Information

Physical Address: _____ City: _____

County: _____ State: _____ Zip code: _____

Detail rainwater project's intended use: _____

Grant Program Eligibility

_____ The system is installed within Ellis, Hill, Johnson or Somervell counties.

_____ Proposals for the cistern(s) or tank(s) are included with this application.

_____ Photos or diagram of sight location attached.

Grant Amount

1. Number of tanks: _____

2. Size of each tank (gallons): _____

3. Total storage capacity (gallons): _____

4. Total Catchment area (sq ft.): _____

5. Estimated Cost: _____

6. Project expected start date: _____ Plan completion date: _____

I, _____, hereby certify and acknowledge the following:
(Print Full Name Above)

1. I have read and understood the eligibility requirements outlined in the Rainwater Harvesting Grant Program Guidelines provided by Prairielands Groundwater Conservation District (PGCD).
2. I confirm that the information provided in this application is true and accurate to the best of my knowledge. I understand that any false statements or misrepresentations may result in the rejection of my application, or the recovery of any grants granted.
3. I understand that the grant provided by PGCD is contingent upon meeting all the eligibility criteria and successfully completing the rainwater harvesting installation as described in the application.
4. I agree to allow representatives of Prairielands Groundwater Conservation District to inspect the rainwater harvesting system, as described in my application, to verify compliance with program requirements.
5. I understand that the grant is subject to the availability of funds in the Rainwater Harvesting Grant Program budget and that PGCD reserves the right to modify or terminate the program at its discretion.
6. I agree to provide any additional documentation or information requested by PGCD to verify eligibility and compliance with program requirements.
7. I agree that the application, along with all necessary documents, including proof of installation of the rainwater collection system, has been fully completed and submitted to the District prior to December 1st.

By signing this agreement, I affirm my commitment to comply with the terms and conditions of the Rainwater Harvesting Grant Program and acknowledge that failure to do so may result in the forfeiture of any grants granted.

Applicant's Signature: _____ **Date:** _____

Office Use only:

Date of receipt: _____ Date inspected: _____

Inspector: _____ Total # of gallons: _____

Final grant amount: _____

_____ Approved

_____ Denied

_____ Pending

Reason for declining application:

PGCD Approval: _____ **Date:** _____