

Waterford Waterway Management District Minutes Tuesday September 6th 2022

This meeting was held online using Zoom

- 1. Call to Order. 5:32 pm. Commissioners present: Greg Horeth, Alex Abendschein, Grant Horn, Margaret Shoptaw, Dan Schultz, Scott Uhler.
- 2. Surface Water Grant Application Resolution
 - a. Required as a part of the Application process
 - i. Greg motions that we approve this Surface Water Grant Application Resolution. Grant seconded. Approved 6-0.
- 3. Adjournment
 - a. Margaret motion to adjourn. Alex seconded. Motion approved 6-0. Meeting adjourned at 5:37 pm.



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Join via Zoom with video (hot link):

https://us06web.zoom.us/j/87662248609?pwd=UTRSVk5FL1IHUERwbkF5STNGWFZkdz09

Or just call in: 1 309 205 3325 US Meeting ID: 876 6224 8609

Passcode: 635789

DNR SURFACE WATER GRANT APPLICANT GUIDE

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Wat WHEREAS, the <u>Mar</u>	erford Waterway pagement District is interested in obtaining a cost-share grant from the
1	(the applicant)
Wisconsin Departm	ent of Natural Resources for the purpose of EWM treatment on Tichigan Lake
utilizing ProcellaCOR	
(as described in the	application);
WHEREAS, the appli	cant attests to the validity and veracity of the statements and representations
contained in the gra	ant application;
WHEREAS, a grant a	greement is requested to carry out the project; and
NOW, THEREFORE, E	BE IT RESOLVED, that the Waterford Waterway Management District
	(the applicant)

will meet the financial obligations necessary to fully and satisfactorily complete the project and hereby authorizes and empowers the following officials or employees to submit the following documents to the Wisconsin Department of Natural Resources for financial assistance that may be available:

Task	Title of Authorized Representative	Email address and Phone Number
Sign and submit a grant application	WWMD Chairman	chairman@waterfordwwmd.com 847-652-2759
Enter into a grant agreement with the DNR	WWMD Chairman	chairman@waterfordwwmd.com 847-652-2759
Submit quarterly and/or final reports to the DNR to satisfy the grant agreement, as appropriate	WWMD Chairman	chairman@waterfordwwmd.com 847-652-2759
Submit reimbursement request(s) to the DNR no later than the date specified in the grant agreement	WWMD Chairman	chairman@waterfordwwmd.com 847-652-2759
Sign and submit required documentation (name of other documents. Example: Admin Forms)	WWMD Chairman	chairman@waterfordwwmd.com 847-652-2759

Adopted on	day of	, 20				
regulation	is and ordinance	es relating to this project	and the cost-s	hare agreer	nent.	
BE IT FUR	THER RESOLVED	that applicant will comp	ly with all local,	state and f	ederal r	ules,

I hereby certify that the foregoing resolution was duly adopted by _____ at a legal meeting held on day of _____, 20__

Signature (Not Authorized Representative)☆	Date Certified ☆
Title û	