

TOWN OF BRISTOL

GRANT SUMMARY DOCUMENT

(To be authorized by the Selectboard prior to completion or submission of the grant application.)

Funding Agency Name: Vermont League of Cities and Towns
PACIF Loss Control Program

Address: lgerrish@vlct.org

Date of Application Submission: by 10 / 31 / 2023 (open-ended until funds are gone)

Explanation of what grant funds will be used for: Purchase of personal protective equipment for the Public Works Department to improve chainsaw use safety operations: reflective vests, hard hats with eye protection, chaps.

Application Amount Up to \$1,500

Description of matching or other funds to be used For this year only, VLCT PACIF would reimburse 100% of eligible expenses.

Name of Grant Applicant: Public Works Dept.

SUMMARY OF GRANT AWARD

(To be completed by Treasurer's Office)

Date authorized by Selectboard: _____

Fund # (Assigned by Treasurer's Office): _____

Grant Award Date: ____ / ____ / ____

Grant Number issued by Funding Agency: _____

CFDA if applicable: _____

Grant Period: ____ / ____ / ____ to ____ / ____ / ____ Amended to ____ / ____ / ____

Grant Award Amount: \$ _____