

TOWN OF BRISTOL

GRANT SUMMARY DOCUMENT

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

Funding Agency Name: Municipal Highway and Stormwater Mitigation Program

Address/Contact: Ross.Gouin@vermont.gov

Vermont Agency of Transportation

219 North Main Street, Barre, VT

Date of Application Submission: 12 / 31 / 2024

Explanation of what grant funds will be used for: Additional funds toward the Basin Street improvement project construction in FY2026 or FY2027

Application Amount \$500,000

Description of Matching or Other Funds to be Used 20% local match required. Some of the matching funds can come from other grants and the Capital Roads Reserve Fund.

Name of Grant Applicant: Town Administrator/Public Works Department

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: \$ _____