

GRANT NAME: Triple N Ranch and Indian River County Expansion Project GRANT # \_\_\_\_\_

AMOUNT OF GRANT: \$200,000.00

DEPARTMENT RECEIVING GRANT: Parks, Recreation and Conservation - Shooting Range

CONTACT PERSON: Jerry Seldes TELEPHONE: 772-226-3091

1. How long is the grant for? E xp 12/31/24 Starting Date: Upon final signature

2. Does the grant require you to fund this function after the grant is over? \_\_\_\_\_ Yes XX No

3. Does the grant require a match? \_\_\_\_\_ Yes XX No  
If yes, does the grant allow the match to be In-Kind services? \_\_\_\_\_ Yes \_\_\_\_\_ No

4. Percentage of match to grant N/A %

5. Grant match amount required \$ N/A

6. Where are the matching funds coming from (i.e. In-Kind Services; Reserve for Contingency)?  
Though a match is not required, County funding in the amount of \$199,120 is provided through Optional Sales Tax/Parks/Shooting Range Clays Trail Elevation

7. Does the grant cover capital costs or start-up costs? XX Yes \_\_\_\_\_ No  
If no, how much do you think will be needed in capital costs or start-up costs: \_\_\_\_\_ \$  
(Attach a detail listing of costs)

8. Are you adding any additional positions utilizing the grant funds? \_\_\_\_\_ Yes XX No  
If yes, please list. (If additional space is needed, please attach a schedule.)

Acct.	Description	Position	Position	Position	Position	Position
011.12	Regular Salaries					
011.13	Other Salaries & Wages (PT)					
012.11	Social Security					
012.12	Retirement – Contributions					
012.13	Insurance – Life & Health					
012.14	Worker’s Compensation					
012.17	S/Sec. Medicare Matching					
	TOTAL					

9. What is the total cost of each position including benefits, capital, start-up, auto expense, travel and operating?

Salary and Benefits	Operating Costs	Capital	Total Costs

10. What is the estimated cost of the grant to the county over five years? \$ N/A

	Grant Amount	Other Match Costs Not Covered	Match	Total
First Year	\$ 200,000	\$	\$ 0	\$ 200,000
Second Year	\$	\$	\$	\$
Third Year	\$	\$	\$	\$
Fourth Year	\$	\$	\$	\$
Fifth Year	\$	\$	\$	\$

Signature of Preparer: Elizabeth Powell

Digitally signed by: Elizabeth Powell  
DN: CN = Elizabeth Powell email = bpowell@indianriver.gov C = US O = Indian River  
County OU = Parks Recreation and Conservation  
Date: 2024.01.12 12:12:18 -0500

Date: \_\_\_\_\_