Outdoor Recreation Legacy Program (ORLP)

Initial Application Submission for Louisiana

1. Sponsoring Agency: _____
2. Contact Person for Project: _____
3. Contact Person Phone Number: _____
4. Contact Person e-mail Address: _____
5. Estimated Total Project Cost: _____
6. Amount of Federal Funding Requested: _____
7. Physical Location of Proposed Project:
   a. Street Address: _____
   b. GPS Coordinates: _____
8. Which of the Following Statewide Comprehensive Outdoor Recreation Plan priorities are addressed by this project:

__ Trails	__ Swimming/Splash Pad
__ Water Access	__ Spectator Facilities
__ Land Acquisition	__ Athletic Fields
__ Camping	__ Hunting Facilities
__ Playgrounds/Picnic	__ Natural Areas/Gardens

9. Briefly describe the scope of work that would be accomplished through this grant:

_____
_____
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_____ _____

Signature of Applicant Date

Submit Completed Form to outdoorrec@crt.la.gov