



SNOQUALMIE INDIAN TRIBE

IMPACT MITIGATION FUNDING APPLICATION

LIST & ATTACH EVIDENTIARY DOCUMENTATION OF IMPACTS (e.g. photographs, maps, data, ect.): _____

PROPOSED IMPACT MITIGATION (Describe the impact mitigation for which the proponent seeks assistance from the Committee. Explain how the mitigation will address the problem identified): _____

IMPACT MITIGATION PLAN (Describe the plan for how the mitigation proposal will be implemented, including a project description, objectives, activities, and any other relevant information): _____



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FUNDING REQUESTED (Specify the amount requested, including documentation that provides the basis for the amount, other sources of funding anticipated or used for the project, including any funds from other casinos, and a detailed budget for how the requested money will be spent. Any requests for staff funding must also include a detailed salary and benefits breakdown): _____

WILL THE PROJECT BE COMPETITIVELY BID? _____

PLAN TO RECOGNIZE IMPACT MITIGATION COMMITTEE CONTRIBUTION: _____



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CONDITIONS OF IMPACT MITIGATION FUNDING-----

- All project funding requires the approval of the Snoqualmie Casino impact mitigation committee.
- Funds disbursed are subject to audit at the discretion of the Committee.
- Entities receiving Impact Mitigation funds are required to prepare an annual progress report as well as a final report upon completion of the project.
- Upon submission of this application, the project proponent grants permission for the Impact Mitigation Committee to send a representative to visit and assess the site(s) of identified impact(s) and to verify the proper use of impact mitigation funds.
- The Committee reserves the right to ask an applicant to address the Committee about the proposal.
- The Committee reserves the right to take appropriate action against an applicant, up to and including reimbursement, upon discovery of financial mismanagement of any kind.
- The applicant that receives impact mitigation funding shall provide notice to the public, either through a slogan, signage or other mechanism, stating that the project has received funding from the Snoqualmie Casino Impact Mitigation Fund.

CERTIFICATION-----

As contact person for this application, I hereby certify that all of the information provided in this document is true and correct and that any funds obtained from the Fund will only be used for the purposes specified herein. I understand that: (1) impact mitigation funding requires the approval of the Snoqualmie Casino Impact Mitigation Committee; (2) acceptance of funding stipulates that we will prepare and submit an annual progress report to the Impact Mitigation Committee; and (3) any funds our entity receives may be subject to audit by the committee.

DATED THIS _____ DAY OF _____, 20____,

IN _____, WASHINGTON BY:

Signature

Date

RETURN FOUR (4) COPIES OF THE COMPLETED APPLICATION TO:

SNOQUALMIE INDIAN TRIBE
ATTN: SNOQUALMIE CASINO IMPACT MITIGATION COMMITTEE
PO BOX 969
SNOQUALMIE, WA 98065

OR ELECTRONICALLY (PDF preferred) TO: IMF@SNOQUALMIETRIBE.US