ACT 13 MARCELLUS LEGACY FUND 2025 PROJECT FORM



APPLICANT INFORMATION					
Applicant :					
Contact Person:					
Project Contact (IF NOT MUNICIPALITY)					
Address :					
City :			State	:	
Zip/Postal Code :					
Phone Number :			Alt Phone	:	
Email :					
		Sul	bmission Date	:	
*Note: If more than or each project. Use add		•	•	orm should be used fo	r
	PROJE	ECT IN	IFORMATION		
Project Title :					
Type of Project : Gr	eenway/Trail		Comm	nunity/Heritage Park	
Open Space/Natural Area			Water Res	ource Management	
Community Conservation/ Beautification			•	sition for Recreation/ n or Land Damaged by Storms/Floods	
Describe in detail the additional pages if ne		resol	ved by the prop	osed project. Attach	

PROJECT INFORMATION

	ibe in detail t s, if needed.	he proposed	l project an	d who will b	enefit. Attac	h additional
Explai	n in detail th	e resolution t	o the probl	em. Attach (additional po	ages, if needed.

PROJECT INFORMATION

Provide a thorough summary of all planning activities that have already taken place concerning the project, including the securing of an engineer or architect, data collection, application for additional funding, engineering or feasibility studies, planning meetings, etc.
PROJECT BUDGET
Attach a written cost estimate, prepared by a contractor or other professional, for each element of the proposed activity.
Municipal/Agency/Local Contribution :
Other Source (Specify) :
Act 13 Funds Requested :
Estimated Total Project Cost :
ATTACH ANY RELATED DOCUMENTS INCLUDING, BUT NOT LIMITED TO A PROJECT LOCATION MAP, ASSOCIATED ENGINEERING ESTIMATES, MATERIAL AND CONSTRUCTION COSTS AND VERIFICATION OF OTHER FUNDING SOURCES
SUBMIT APPLICATION BY 4:00 P.M. ON THURSDAY, APRIL 10, 2025 VIA MAIL OR EMAIL TO THE BELOW ADDRESS:
HUNTINGDON COUNTY PLANNING & DEVELOPMENT DEPARTMENT 205 PENN STREET, SUITE 3

HUNTINGDON, PA 16652
PLANNING@HUNTINGDONCOUNTY.NET