

Application for Federal Assistance SF-424**16. Congressional Districts Of:**

* a. Applicant

99

* b. Program/Project

51

Attach an additional list of Program/Project Congressional Districts if needed.

Add Attachment

Delete Attachment

View Attachment

17. Proposed Project:

* a. Start Date:

07/01/2017

* b. End Date:

06/30/2018

18. Estimated Funding (\$):

* a. Federal	25,000.00
* b. Applicant	0.00
* c. State	20,000.00
* d. Local	35,000.00
* e. Other	0.00
* f. Program Income	0.00
* g. TOTAL	80,000.00

*** 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**☐ a. This application was made available to the State under the Executive Order 12372 Process for review on☐ b. Program is subject to E.O. 12372 but has not been selected by the State for review.☒ c. Program is not covered by E.O. 12372.*** 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)**☐ Yes☒ No

If "Yes", provide explanation and attach

Add Attachment

Delete Attachment

View Attachment

21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

☒ ** I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix:

* First Name:

Mark

Middle Name:

* Last Name:

Spalding

Suffix:

* Title:

President (The Ocean Foundation)

* Telephone Number:

202-887-8996

Fax Number:

* Email:

mspalding@oceanfdn.org

* Signature of Authorized Representative:

* Date Signed:

04/15/2017

Application for Federal Assistance SF-424

*** 1. Type of Submission:**

- ☐ Preapplication
☒ Application
☐ Changed/Corrected Application

*** 2. Type of Application:**

- ☒ New
☐ Continuation
☐ Revision

*** If Revision, select appropriate letter(s):**

*** Other (Specify):**

*** 3. Date Received:**

04/15/2017

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier:

State Use Only:

6. Date Received by State:

7. State Application Identifier:

8. APPLICANT INFORMATION:

*** a. Legal Name:** The Ocean Foundation

*** b. Employer/Taxpayer Identification Number (EIN/TIN):**

71-0863908

*** c. Organizational DUNS:**

6117217590000

d. Address:

*** Street1:**

1320 19th St. NW

Street2:

Suite 500

*** City:**

Washington

County/Parish:

*** State:**

DC: District of Columbia

Province:

*** Country:**

USA: UNITED STATES

*** Zip / Postal Code:** 20036-1610

e. Organizational Unit:

Department Name:

Division Name:

f. Name and contact information of person to be contacted on matters involving this application:

Prefix:

*** First Name:**

Frances

Middle Name:

*** Last Name:**

Kinney

Suffix:

Title: Ocean Connectors Director

Organizational Affiliation:

Ocean Connectors (a project of The Ocean Foundation)

*** Telephone Number:** 619-336-7744

Fax Number:

*** Email:** frances@oceanconnectors.org

Application for Federal Assistance SF-424

* 9. Type of Applicant 1: Select Applicant Type:

M: Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education)

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

* 10. Name of Federal Agency:

U.S. Fish and Wildlife Service

11. Catalog of Federal Domestic Assistance Number:

CFDA Title:

* 12. Funding Opportunity Number:

* Title:

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

OC Site Map - WRP 2017.pdf

Add Attachment

Delete Attachment

View Attachment

* 15. Descriptive Title of Applicant's Project:

Ocean Connectors Bird and Habitat Study

Attach supporting documents as specified in agency instructions.

Add Attachments

Delete Attachments

View Attachments