



**Mattress Recycling Council
Funding for Illegally Dumped Mattress Pilot Studies**

APPLICATION FORM

RESPONDENT NAME

DATE



EXECUTIVE SUMMARY

- 1. A description of the Applicant's qualifications and experience with illegal dumping mitigation and/or enforcement, community based social marketing and/or similar projects.**

- 2. Identify the name and title of your proposed project manager, technical lead, functional lead and consultant (if applicable) for this project.**

- 3. A project description that clearly outlines the impact and methods for measuring success, and justifies why the project will be effective in terms of:**
 - a. Additional mattresses that could be prevented from becoming illegally dumped**
 - b. Improved awareness and enforcement of illegal dumping laws**
 - c. Improved education around proper disposal of mattresses**

- 4. Historical baseline data of illegally dumped mattresses that will be used for the analysis of this study. Please provide as an attachment with the proposal.**



Qualifications / Experience of Firm

1. Relevant Staff List
2. Qualifications/Experience
3. Consultant Name and Qualifications (if applicable)

Contents of this section begin here

1. Staff Member, Qualification/Experience, Project Role

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2. Staff Member, Qualification/Experience, Project Role

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3. Staff Member, Qualification/Experience, Project Role

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4. Staff Member, Qualification/Experience, Project Role

5. Staff Member, Qualification/Experience, Project Role (if applicable)

6. Consultant Name, Qualification/Experience, Project Role (if applicable)



Proposed Implementation Methodology and Approach

1. Project Approach and Methodology to Prevent Illegal Dumping of Mattresses
2. Project Impact and Estimated Decrease in Illegally Dumped Mattresses
3. Project Timeline

Contents of this section begin here

1. Project Approach and Methodology to Prevent Illegal Dumping of Mattresses

2. Project Impact and Estimated Decrease in Illegally Dumped Mattresses



3. Project Timeline

Project Timeline and Deliverables				
Activity	End Result	Staff/Contractor	Start Date	End Date



Project Timeline and Deliverables				
<i>Activity</i>	<i>End Result</i>	<i>Staff/Contractor</i>	<i>Start Date</i>	<i>End Date</i>



FUNDING

1. The funding request, any matching funds from the Applicant (optional) and the total project cost
2. Compensation schedule, outlining staff time, estimated hours per task, hourly rate and total amount requested

Contents of this section begin here

1. Funding Request

<i>Funding Request</i>	\$
<i>Matching Funds</i>	\$
<i>Total Project Cost</i>	\$

2. Compensation Schedule

Compensation Schedule					
<i>Activity</i>	<i>Staff</i>	<i>Estimated Hours</i>	<i>Estimated Hourly Rate</i>	<i>Estimated Task Total Cost</i>	<i>Amount Requested</i>



Compensation Schedule					
<i>Activity</i>	<i>Staff</i>	<i>Estimated Hours</i>	<i>Estimated Hourly Rate</i>	<i>Estimated Task Total Cost</i>	<i>Amount Requested</i>

Equipment Quotes (if applicable) – Please provide as an attachment.