

COMMUNITY PROJECT ACCOUNT (Small, De Minimus Public Projects)

APPLICATION

1) Name of Project: <u>Canebrake Fire Department – automated external defibrillators</u> (AED)

Check Project Type:

- □ Nonrecurring community requests for infrastructure:
 - □ Flooding
 - □ Roads
 - □ Lights
 - □ Sewer and drainage
 - □ Public buildings and grounds
 - □ Infrastructure related studies

X Contributions to local governments in Greenville County for community projects

2) Amount of Funds Requested: \$ \$8,368_

3) Project Sponsor

Organization:	Canebrake Fire Department		
Mailing Address:	100 Hillside Church Rd		
	Fountain Inn, South Carolina 29644		
Contact Darcon			

4) Contact Perso	n:				
Name	Zac Terry		Title <u>Fire C</u>	Chief	
Telephone	(864) 862-1100		Alt. Telephon	e No	
Email	zterry@canebrake.com_		Fax No		
Council Re	presentative(s) <u>Cates</u>				
5) Project Timeline ~ Beginning: 6/30/2			Ending:	_6/30/2016_	
	MONTH/D	MONTH/DAY/YEAR		MONTH/DAY/YEAR	

6) Date Funds are Needed: ______ 6/30/ 2016

7) Location of Project: Canebrake Fire Department

- 8) Project Description: (Attach additional pages if necessary)
 - a. General Description: <u>The Canebrake Fire Department is adding 3 additional</u> <u>automated external defibrillators (AED) and associated equipment to rolling assets</u>
 - b. Benefit project will provide the Community:
 - Enhanced public life/health protection for the district
 - c. Additional Comments: _____

9) Project Budget:

- a. Total Project Budget including all sources of funds: <u>\$ 10,434</u>
- b. Percent request equals of the total Project Budget? <u>80%</u>

List below all funding sources for this project:

Funding Source	Amount
Canebrake Fire Department	\$2,066
Greenville County	8,368
TOTAL:	\$10,434

County of Greenville Community Project Account Application

Title