

## Aquatic Nuisance Control Grant-in-Aid 2024 Report

### I. Cover Page

*Please do not leave blank fields in the report which may result in returned or denied invoices.*

<b>A. Project Information</b>		
1. Project Type(s)::		
2a. Waterbody:	2b. Watershed Basin:	
3a. Town:	3b. County:	
4. Public Access Type (check all that may apply): <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Municipal <input type="checkbox"/> Other <input type="checkbox"/> None		
<b>B. Grantee Information</b>		
5a. Grantee:		
5b. Contact Name:	5c. Title:	
5d. Street Address:		
5e. Town:	5f. State:	5g. Zip Code:
5h. Phone:	5i. Email Address:	
<b>C. Permit Requirements</b>		
6. Please provide information for the ANC grant activities that required a permit below. <i>* All permits must be in good standing and acquired prior to the award release.</i>		
a. VT Fish & Wildlife Department Special Use Permit (SUP) received? Yes Approval Number _____ <input type="checkbox"/> No		
b. Aquatic Nuisance Control (ANC) Permit(s)? Yes No If yes, list the permit numbers and expiration dates below.		
b1. ANC Permit #: _____ Expiration Date: _____		
Date approval confirmation was received from ANC Permitting prior to activities beginning: _____		
Date report was submitted to ANC Permitting after activities were completed: _____		
b2. ANC Permit #: _____ Expiration Date: _____		
Date approval confirmation was received from ANC Permitting prior to activities beginning: _____		
Date report was submitted to ANC Permitting after activities were completed: _____		
b3. ANC Permit #: _____ Expiration Date: _____		
Date approval confirmation was received from ANC Permitting prior to activities beginning: _____		
Date report was submitted to ANC Permitting after activities were completed: _____		
<b>D. Types of ANC Practices Incorporated with Project(s). Please check all that apply:</b>		
<input type="checkbox"/> Education & Outreach	<input type="checkbox"/> Volunteer Handpulling	<input type="checkbox"/> Contractor Diver Handpulling
<input type="checkbox"/> Greeter Program	<input type="checkbox"/> Active Vermont Invasive Patroller(s)	<input type="checkbox"/> Diver Operated Suction Harvesting
<input type="checkbox"/> Decontamination Unit	<input type="checkbox"/> Contractor Plant Survey	<input type="checkbox"/> Mechanical Harvester
<input type="checkbox"/> Active Lay Monitor	<input type="checkbox"/> Active Lakewise Program	<input type="checkbox"/> Herbicide Application
<b>E. Project Report Forms. Please submit the applicable final reports to complete the required deliverables.</b>		
II.A. Greeter Project Report Form		
II.B. Management Project Report Form		
II.C. Education, Outreach, Survey Project Report Form		
<b>F. Project Expenditures Form. Please report on ANC Project Budget(s) for each project.</b>		