

Grant Title/Project Name:	The Rachael Ray No-Kill Excellence Grant
Department:	Animal Services
Requestor:	Misty Valenta
Contact Email:	mvalenta@wilco.org
Contact Phone Number:	mvalenta@wilco.org
Start Date:	1/1/2023
End Date:	1/1/2023
Please select request category:	Asset, Service
Describe the purpose of the grant in detail to include all requirements.	This grant would aid in the shelter's lifesaving by helping community cats and elevating our dog enrichment program. This grant would cover the expense of spaying and neutering neighborhood community cats to lessen the population of kittens in the county. The dog enrichment program would aid the dogs currently at the shelter so they could find their adoptive homes faster with in shelter good manners training and additional enrichment kennels.
Select the type of grant your department is applying for:	Private Foundation
What is the amount of the grant?	\$60,000.00
Please provide a breakdown of the total cost above.	\$36,000 pays for spay/neuter clinics including veterinarian costs and medications  \$6,000 pays for a CPDT positive reinforcement based trainer to work one on one with our dogs  \$11,000 pays for two additional stand alone dog cabins to provide housing and in kennel enrichment
Is there a match requirement?	No
What is the source of the match?	
Does the grant cover the cost of the request 100%?	Yes
If not, how much is left unpaid?	
What is the plan to obtain grants/funds for the remaining amount?	
List other similar assets in the County and/or region and if they are available for use?	
How is this asset request different from any similar assets currently in the County and/or region?	
What types of events/purpose would this asset be used for that cannot be accomplished with a current County asset?	
How often do these events occur?	
Identify the number of personnel required to operate this asset and/or be available for the function where it is to be used? How much time is required of those personnel? What is the cost of the personnel?	
Where will the asset be stored?	
What is the useful life of the asset?	

Will a replacement be requested from general funds when useful life has been exhausted?	
Will other agencies be billed for the use of this asset (e.g. vendors paid, employee worked hours and paid, inventory costs etc.)?	
Does this asset require insurance coverage?	
If yes, what is the estimate of asset insurance coverage?	
Will this asset require on-going maintenance? Please describe the maintenance required along with an estimate for these costs.	
How will this asset be funded when the grant ends?	
What is the impact if the grant is not received?	
New Personnel position is:	
Where will this position office?	
Who will this position report to?	
What tasks will this position perform? Include the five primary functions and the percentage of time spent to be spent on each function.	
Will this position take over tasks from current County employee?	
If yes, please explain the impact to current employee.	
How will this position be funded when the grant ends?	
Does this position or a similar position currently exist within the department?	
If "yes" how many of these similar positions exist	
Describe any alternatives considered to achieve desired outcome in lieu of a position (i.e. equipment, software, technology or change in business practice).	
Describe how workload will be accomplished/re-allocated should grant not be approved.	
List other similar items in the County and/or region and if they available for use?	na
How is this item request different from any similar assets currently in the County and/or region?	This would be in addition to what the shelter already has
What types of events/purpose would this item be used for that cannot be accomplished with a current County asset?	This would be in addition to what the shelter already does
Identify the number of personnel required to operate this item and/or be available for the function where it is to be used?	3
Please explain how this item will create the need for more or less personnel (or mark n/a for no change)?	This item would require one of our health technicians to help with surgery on the clinic days scheduled (once a month.) We would need staff to clean and sanitize the cabins when changed out between dogs, but this would be in line with their current duties.

Where will the item be stored?	Animal Shelter
What is the useful life of the item?	This would support once a month TNR clinics for a year, training for a year, and two cabins that will last at least 10 years with good upkeep.
Will other agencies be billed for the use of this item (e.g. vendors paid, employee worked hours and paid, inventory costs etc.)?	
Does this item require insurance coverage?	No
Will this item require any form of licensing?	No
Will this item require on-going maintenance? Please describe the maintenance required along with an estimate for these costs?	The dog kennels will have stand alone air conditioning and heating, which will need to be maintained.
How will this item be funded when the grant ends?	No additional funding will be requested
What is the overall budgetary impact? (i.e. revenue generation, expense reduction, etc.)	Less cat intake would lessen the amount of funds spent on daily care of cats. Quicker adoptions from training would lessen the daily cost of care of dogs. Additional kennels would aid the overcrowding a bit at the shelter.
Please identify any additional equipment needed/required (now or in the future) should the grant/asset is awarded.	none
What is the cost and frequency to maintain/update the additional equipment?	\$100 for filters
What is the impact of this grant application on other internal/county departments?	Maintenance would need the change the AC filters
If yes, what is the estimate of that license fee?	
If yes, what is the estimate of insurance coverage?	
Will a replacement be requested from general funds when useful life has been exhausted? (OR)	No
If yes, how much is the match amount?	
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