## **Budget Justification**

| Applicant Organization Name:  |  |
|---|--|
| Cost Share: If the cost of your project exceeds the amount of the Energy Efficiency & Conservation Block Grant you are applying for, what source of funds will you use to pay the difference? ( <i>if applicable</i> ): |  |

**SUMMARY OF PROJECT COSTS:** may include items under several categories for design, management, and implementation of project.

| <b>Project Costs</b>        | WV EECBG | Cost Share | Total Funds |
|-----------------------------|----------|------------|-------------|
| Personnel - Wages/Salaries  |          |            |             |
| Personnel - Fringe Benefits |          |            |             |
| Supplies/Materials          |          |            |             |
| Equipment                   |          |            |             |
| Contractual                 |          |            |             |
| Other                       |          |            |             |
| Total Project Budget        | \$0.00   | \$0.00     | \$0.00      |

## **DETAIL OF PROJECT COSTS BY CATEGORY**

**Personnel Costs:** Provide the title or payroll class of the individual and the percent of time (FTE = Full Time Equivalent) dedicated to the project. include wage/salary and fringe benefit costs for your employees..

Contractor personnel costs are included under Contractual category.

| Wages/Salaries – Title/Group            | WV EECBG   | Cost Share | Total Funds |
|---|------------|------------|-------------|
| Example: Assistant II, 5% FTE, \$40,000 | \$2,000.00 | \$0.00     | \$2,000.00  |
|   |            |            |             |
|   |            |            |             |
|   |            |            |             |
| Total Salaries                          | \$0.00     | \$0.00     | \$0.00      |

| Fringe Benefits – Title/Group        | WV EECBG | Cost Share | Total Funds |
|--------------------------------------|----------|------------|-------------|
| Example: Assistant II, 20%<br>Fringe | \$400.00 | \$0.00     | \$400.00    |
|                                      |          |            |             |
|                                      |          |            |             |
| Total Fringe Benefits                | \$0.00   | \$0.00     | \$0.00      |

| Supplies/Materials       | WV EECBG | Cost Share | Total Funds |
|--------------------------|----------|------------|-------------|
| Example: LED 2x4 fixture | \$48.00  | \$0.00     | \$48.00     |
|                          |          |            |             |
|                          |          |            |             |
| Total Supplies           | \$0.00   | \$0.00     | \$0.00      |

Non-expendable Equipment: Items with an acquisition cost greater than \$5,000.00 and useful

life greater than 1 year.

| <b>Equipment Item</b>                | WV EECBG   | Cost Share | Total Funds |
|--------------------------------------|------------|------------|-------------|
| Example: Central heat pump condenser | \$7,400.00 | \$0.00     | \$7,400.00  |
|                                      |            |            |             |
|                                      |            |            |             |
| Total Equipment                      | \$0.00     | \$0.00     | \$0.00      |

**Contractual:** For proposed contracts, list service to be provided, estimated cost and Equipment that may be purchased by the contractor.

| Contractor, service to be provided & Equipment purchased by Contractor | WV EECBG | Cost Share | Total Funds |
|--|----------|------------|-------------|
| Example: Labor cost to install new LED fixture                         | \$45.00  | \$0.00     | \$45.00     |
|  |          |            |             |

| <b>Total Contractual</b> | \$0.00 | \$0.00 | \$0.00 |
|--------------------------|--------|--------|--------|

Other Costs: List other costs necessary for direct project cost and not included in above categories

| Other Cost               | WV EECBG | Cost Share | Total Funds |
|--------------------------|----------|------------|-------------|
| Example: City permit     | \$30.00  | \$0.00     | \$30.00     |
|                          |          |            |             |
|                          |          |            |             |
| <b>Total Other Costs</b> | \$0.00   | \$0.00     | \$0.00      |

**Budget Information Contact:** Provide name, phone number, and email address of person to contact for questions regarding budget.

| Name:                |        |
|----------------------|--------|
| Phone number:        |        |
| Email:               |        |
| Signatory Authority: |        |
| (Signature)          | (Date) |
| (Name Typed/Printed) |        |