

Grant Agreement (Form OSHA-110)

<p>U.S. DEPARTMENT OF LABOR Occupational Safety and Health Administration</p> <p>GRANT AGREEMENT</p> <p>OSHA 23(g) OPERATIONAL PROGRAM</p>	<p style="text-align: right; font-size: small;">Page 1 of 1</p> <p>(1) Region: _____</p> <p>State: _____</p> <p>Grantee: _____</p> <p>Grant Number: 60F2-00 _____</p> <p>Starting Date: _____ October 1, 2001</p> <p>Ending Date: _____ September 30, 2002</p>												
<p>(2) Recipient</p> <p>Name:</p> <p>_____</p> <p>Address:</p> <p>_____</p> <p>Recipient Liaison Representative</p> <p>_____</p> <p>Area Code and Telephone Number</p> <p>_____</p>	<p>(3) U.S. Department of Labor</p> <p>_____</p> <p>OSHA Liaison Representative</p> <p>_____</p> <p>Area Code and Telephone Number</p> <p>_____</p>												
<p>(4) Authority for Grant: P.L. 91-596, under Section 23(g)</p> <table style="width: 100%; margin-top: 20px;"> <thead> <tr> <th style="width: 80%;"></th> <th style="width: 20%; text-align: right; font-weight: normal;">Pct. Total Funds</th> </tr> </thead> <tbody> <tr> <td>1. Federal Base Award Amount: _____</td> <td style="text-align: right; vertical-align: bottom;">50%</td> </tr> <tr> <td>2. State Base Award Amount: (please do not include 100% funding) _____</td> <td style="text-align: right; vertical-align: bottom;">50%</td> </tr> <tr> <td>3. Total Recipient Share: _____</td> <td></td> </tr> <tr> <td>4. Recipient 100% Funding: (please also include in line 3) _____</td> <td></td> </tr> <tr> <td>5. Total State and Federal Funds Allocated to This Agreement: (line 1 plus line 3) _____</td> <td></td> </tr> </tbody> </table> <div style="border: 1px solid black; padding: 5px; margin-top: 10px; font-size: small;"> <p>Terms and Conditions of the Grant: This GRANT AGREEMENT consists of the entire grant application, including all attachments, exhibits, enclosures, etc.</p> </div>			Pct. Total Funds	1. Federal Base Award Amount: _____	50%	2. State Base Award Amount: (please do not include 100% funding) _____	50%	3. Total Recipient Share: _____		4. Recipient 100% Funding: (please also include in line 3) _____		5. Total State and Federal Funds Allocated to This Agreement: (line 1 plus line 3) _____	
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<p>(5) Recipient Approval</p> <p>_____</p>	<p>(6) Federal Approval</p> <p>_____</p>												
<p>Signature _____ Date _____</p> <p>_____</p> <p>Type Name and Title</p>	<p>David C. Zeigler, Director _____ Date _____</p> <p>Administrative Programs</p>												