Project information	
Project title:	Date submitted:
Name of individual/group making request:	
Requested funding amount:	
Project description:	
(mara angga an rayaraa)	
(more space on reverse)	
Evaluation criteria	
Evaluation criteria	
Does the project appear in, or is the project compatible with:	
☐ Town Plan	
☐ Other plans	O N
O Regional Plan O Northfield Area-Wide Plan (2016) O VCRD 1 (2002) O VDAT Final Report (2014)	
O VCRD 2 (2023) O Northfield Hazard Mitigation Plan	C TOWITT Great Glewardanip Thair
O ARPA Community Advisory Project Report	
□ Northfield Selectboard Priorities (short/medium/long term)	
Help us undersand more about your project:	
Y N	
☐ ☐ Is there expressed community desire for this project?	
Is the project consistent with the expressed desire of multiple smaller projects rather than one larger one?	
☐ ☐ Are there other grants available for this project for	
which ARPA funds could be used as a match? Does the project compliment another ongoing project	
allowing for efficiency?	
□ □ Does it benefit a wide group of Northfield residents?	
☐ ☐ Does it have a long-term positive impact?	
Does it align with the ARPA intentions of addressing COVID impacts?	
☐ ☐ Are there ongoing costs? (maintenance, etc.) If yes,	
briefly describe. (more space on reverse)	
Please describe any additional considerations on reverse.	

