



LYCOMING COUNTY
ACT 13 "LEGACY FUND" APPLICATION
(Oil & Gas Act of 2012)

Name (POC): _____

Address: _____

Phone: _____

Email: _____

Organization: _____

Project Name: _____

Brief Description ((Need, Urgency, Solution, Impact of Project))

Readiness: Project Start (est): _____ Project Completion (est): _____

Project Cost: _____

Funding:

Committed: _____

Requested: _____