**Instructions:**

***One month prior*** to the end of the grant contract, please submit a draft report to your Recycling Business Development Grant manager via Word (preferred) or PDF. Please do not use shareable links.

Your grant manager will review the draft report, note necessary changes or additions, and return it to you for modification and finalization. Upon receipt of the finalized report, all remaining eligible grant funds will be reimbursed. Your grant manager will schedule a site visit to see the grant-funded purchases and the grant project will be complete.

**Final Report:**

Please complete the information below:

**Part A: Contract Information**

|  |  |
| --- | --- |
| **Grantee Name:** |  |
| **Date of this Report:** |  |
| **Grant Contract #:** |  |
| **Contract Start Date:** |  |
| **Contract End Date:** |  |
| **Preparer of This Report:** |  |
| **Phone Number:** |  |
| **Email Address:** |  |

**Part B: Project Information**

1. **Project Description:** Provide a summary of the grant project. Describe what was purchased with grant funds, including quantities, along with key dates from the project implementation.
2. **Project Accomplishments:** Describe the project’s accomplishments. Did the project meet its goals and expectations? Please explain.
3. **Scope Changes/Unanticipated Events:**
   1. Describe any unanticipated events (negative and positive) that occurred while conducting this project. Were the project goals revised or refined during the project?
   2. If applicable, please list the contract amendment(s) you received (including extensions) and the justification for requesting them.
4. **Lessons Learned:** What lessons did you learn during the project and what advice would you provide to another organization implementing a similar project?

If you could do the project over again, what would you do differently? Are you planning to implement any changes or improvements going forward? If you would not change anything, what factors contributed to the project’s success?

1. **Waste Reduction:**
   1. Provide a description of the waste reduction impact of the grant. What types of materials does your grant project divert?
   2. ***As a result of the grant project, how many additional tons*** will be diverted from landfill disposal each year? Please complete the table below and explain the additional diversion.

|  |  |
| --- | --- |
| Annual diversion (tons) before grant project: |  |
| Annual projected diversion (tons) after grant project: \* |  |

\*  The grant project is complete, but more time is needed to evaluate the impact. We will update NCDEQ in 6 months. Follow up date: \_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Impact:** How many households, businesses, or customers are impacted by this grant project? Are there other metrics used to measure impact and success?
2. **Jobs:** If applicable, how many full-time equivalent jobs were created as a result of this grant project? If possible, please explain what the jobs are (e.g., driver, equipment operator, administration).
3. **Cost Savings:** Describe any cost savings or efficiency gains resulting from the grant project (e.g., transportation, processing, staff time and labor, avoided landfill fees). If financial efficiencies can be quantified, please provide a projection of annual savings expected.
4. **Longevity:** How long do you expect the grant’s impact to last? What is the anticipated service life of items purchased with grant funding?
5. **Press or Media:** Did your grant project receive any press or media coverage? If so, please provide copies of or links to articles, social media, or press.
6. **Educational Materials:** If applicable, list all educational or outreach materials developed for the project (e.g., signage, stickers, brochures, flyers, promotional materials). Please submit digital copies and/or photos of grant-funded educational materials.
7. **Photos:** Submit photos showing the item(s) purchased or upgrades made with grant funds. Photos can be included as additional pages to this report or submitted as email attachments.

**Part C. Financial Information**

**Grant Expenditures**

Complete the following table with actual amounts spent.

|  |  |  |  |
| --- | --- | --- | --- |
| **Item(s)**  *Items purchased must align with original or amended contract budget table. Enter item descriptions as listed in the contract.* | **Actual Cost** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | **Total Project Cost** | **NCDEQ Grant Amount** | **Grantee Cash Match** |
| **Total Project Cost** | **$** | **$** | **$** |