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| MK-DD-30 revised 3/1/18 |
|  | Wisconsin Department of Agriculture, Trade and Consumer ProtectionDivision of Agricultural Development2811 Agriculture Drive, PO Box 8911, Madison, WI 53708-8911Phone: 608.590.7239 |
| 2026 Wisconsin Dairy Processor Grant ApplicationWis. Stat. §§ . [20.115(4)(dm)](http://docs.legis.wisconsin.gov/document/statutes/20.115%284%29%28dm%29), [93.40(1)(g)](https://docs.legis.wisconsin.gov/statutes/statutes/93/40). |
| FULL LEGAL NAME OF ENTITY/BUSINESS      |
| CONTRACT SIGNER NAME AND TITLE      | CONTRACT SIGNER EMAIL       |
| PHYSICAL ADDRESS      | CITY      | COUNTY      | STATE   | ZIP      |
| MAILING ADDRESS (IF DIFFERENT FROM STREET ADDRESS)      | CITY      | COUNTY      | STATE   | ZIP      |
| DO YOU HAVE A DAIRY PLANT LICENSE?[ ]  YES [ ]  NO | LICENSE NUMBER      | BUSINESS NAME LICENSE NUMBER IS UNDER      |
| PROJECT COORDINATOR NAME AND TITLE      | PROJECT COORDINATOR EMAIL      |
| PROJECT COORDINATOR PHONE: (   )     -      |  |
| PROJECT TITLE(S)      |

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| Grant Request: $       | Project Start Date:      End Date:      |

Certification: I certify to the best of my knowledge that the information in this application is true and correct and that I am legally authorized to sign and submit this application on behalf of this organization, which is legally eligible to enter into a grant contract.

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| AUTHORIZED SIGNATURE (TYPED SIGNATURE IS ACCEPTABLE)      | TITLE      | DATE      |

Project Focus: Check all that apply

[ ]  Dairy Plant Expansion

[ ]  Dairy Plant Modernization

[ ]  Dairy Processing Innovation

[ ]  Food Safety/Audit Assistance

[ ]  Dairy Plant Staff Training/Workforce Development

[ ]  Other Dairy Processing Development: (Specify)

Completing this form is required to apply for a 2026 Dairy Processor Grant. Personally identifiable information you provide may be used for purposes other than that for which it was collected. Wis. Stat.§ 15.04(1)(m).

**2026 Dairy Processor Grant Application**

**PROJECT SUMMARY
Describe your project. Include why this project is important to your facility, steps/actions/processes that will take place, and results/changes that will happen as a result of the project**.

**PROJECT OBJECTIVE
Select the objective(s) your project will meet:**

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| [ ]  | Increase production, profitability, processing, marketing, or distribution of Wisconsin dairy products |
| [ ]  | Increase capital investment in the dairy industry |
| [ ]  | Apply new technologies related to dairy production |
| [ ]  | Improve the competitiveness of the Wisconsin dairy industry |
| [ ]  | Make more efficient use of farmland and other agricultural resources for dairy production |
| [ ]  | Create or retain jobs in the dairy industry |

**Describe how your project will meet the selected objectives**

**PROJECT POTENTIAL IMPACT**

**Describe how your project will benefit the dairy industry**

**WORK PLAN
Describe the major steps/activities needed to complete your project**

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| **Project Activity** | **Who will complete** | **Timeline** |
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**Estimated Total Project Budget (Match and Grant Request)**

Grant amounts are up to $50,000.00 per applicant. Matching funds of at least 20% of the grant amount are required. All matching funds must be proven with expense receipts, time sheets, or other means as would grant expenses when requesting reimbursement.

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| **Budget Category: Personnel**  |
| **Position/Title** | **Number of hours OR percent FTE** | **Hourly rate/ Salary** | **Grant** | **Matching** | **Total Cost** |
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| **Budget Category: Training Costs** |
| **Course Title or Description** | **Number of students** | **Course Rate** | **Grant** | **Matching** | **Total Cost** |
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| **Budget Category: Travel** |
| **Trip Destination** | **Number of miles** | **Cost per mile** | **Grant** | **Matching** | **Total Cost** |
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| **Budget Category: Equipment Lease/Rental** |
| **Item Description** | **Number of units** | **Unit Cost** | **Grant** | **Matching** | **Total Cost** |
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| **Budget Category: Supplies** |
| **Item Description** | **Number of units** | **Unit Cost** | **Grant** | **Matching** | **Total Cost** |
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| **Budget Category: Contractual** |
| **Contractual Name/Organization** | **Hourly Rate/Flat Rate** | **Rate Value** | **Grant** | **Matching** | **Total Cost** |
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| **Budget Category: Other** |
| **Other Item Description** | **Number of units** | **Unit Cost** | **Grant** | **Matching** | **Total Cost** |
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| **Total Costs** |  |  |  |