



WASHINGTON ASSOCIATION OF CONSERVATION DISTRICTS

RESOLUTION

RESOLUTION TITLE: SCC SRF funding including planning and design funding

SPONSORING ENTITY/IES CD(s): PCD

AREA: NW SW NC SC NE SE

RESOLUTION TYPE:

- Policy
- Position Statement
- Recognition
- Study

RESOLUTION ACTION AGENCY (check any option that applies):

- WACD
- WSCC
- OTHER STATE AGENCY \_\_\_\_\_
- NRCS
- NACD (See Page 2)
- NON-STATE/FEDERAL PARTNER \_\_\_\_\_

TYPE OF TEXT OF RESOLUTION (check all boxes that apply):

- Technical (changes address grammar, punctuation, sentence flow and makes **NO** substantive change(s) to the existing policy.
- Substantive change to existing policy. If in doubt, check the box.
- New policy.

BACKGROUND DESCRIBING THE ISSUE/PROBLEM STATEMENT:

CD's cannot efficiently plan or implement SRF projects without capacity to reach out to potential cooperating landowners without funding capacity. This was missed when working on the budget proviso for SRF.

PROPOSED RESOLUTION LANGUAGE:

WACD and WSCC will make efforts to get project planning and design included into funding use again.

IS THERE A WACD FINANCIAL IMPLICATION TO IMPLEMENT THE POLICY? (Funding **required**, staff time, etc.)

- NO
- YES (briefly explain):



WASHINGTON ASSOCIATION OF CONSERVATION DISTRICTS

**If the proposed resolution is to be adopted by NACD complete the sections below to the best of your ability. If the resolution is adopted at the state level, please reach out to the NACD National Director for assistance in finalizing this form.**

**PROPOSED RESOLUTION LANGUAGE:**

If this resolution is adopted by NACD and included in the NACD Policy book it must clearly and concisely, using active verbs, state the specific action(s) expected of NACD; must be based on fact, avoiding opinions and beliefs; the statement should make sense even without the background. (THIS IS GENERALLY NOT WHERE A "WHEREAS" STATEMENT WOULD GO)

**SPONSOR(S) ACTIONS TO DATE:** (What has been done to address the issue; which agencies and organizations have addressed it also.)

**IMPACT ON EXISTING NACD POLICY (if any):** (Review NACD Policy Book for existing policies covering this issue.)

**IF APPROPRIATE, POTENTIAL FISCAL IMPACT ON NACD's OR A FEDERAL AGENCY BUDGET:**  
(E.g., travel, training, equipment, etc.)

**MEETING AND DATE ADOPTED BY SPONSORING ENTITY:** (E.g., WACD annual meeting date)

**AUTHORIZED SIGNATURE(S) AND TITLE(S):** (Type name and Title)

WACD National Director (NACD board member)