

Grant Application

Print Form



The Natural Resources Agency

Project Title: Towsley Canyon **Date:** November 7, 2012

Funds: Proposition 40 **Amount:** 178,500

Applicant Name: Mountains Recreation and Conservation Authority **Match amount:** []

Address: 570 W. Ave 26, Los Angeles **Match source:** []

State/Province: California **Total Project Cost:** 178,500

Zip/Postal code: 90065

Phone: (323) 221-9944 **Brief Project Description:** Land acquisition for parkland in the Santa Clarita Woodlands

Fax: (323) 221-9934

Santa Monica Mountains Conservancy
 5750 Ramirez Canyon Road
 Malibu, California 90265
 Phone: 310-589-3200
 Fax: 310-589-3207
 www.smmc.ca.gov

Grantee's Authorized Representative: Lisa Soghor, Deputy Executive Officer (323) 221-9944, ex 105 lisa.soghor@mrca.ca.gov

<i>Name and Title</i>	<i>Phone Number</i>	<i>Email</i>
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Person with day-to-day responsibility: Dawn Yasui, Legal Assistant (818) 878-0866, ext 238 dawn.yasui@mrca.ca.gov

<i>Name and Title</i>	<i>Phone Number</i>	<i>Email</i>
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Project Objective: Acquisition of remaining 25% undivided interest in Towsley Canyon property in the Santa Clarita Woodlands; the former "Brandon property" parcels, to ensure protection of existing open space parkland, recreational trails, habitat, wildlife linkages, and riparian resources. 75% interest in the property was acquired by MRCA in 1991 and 1992. APN's 2826-018-900 and 066;-901 and 067;-902 and 068; 2826-019-901 and 040; and -902 and 041

*Attach additional pages as necessary

Project Address: Access via 24255 The Old Road, Newhall, CA

Latitude: []	Acreage: approx 273	Trail Length: approx 2miles
Longitude: []	APN's: 2826-018-900 and 066;-	Stream Miles: approx. 1 mile
Congressional District: 26th	State Senate District: 27th	Assembly District: 38th

Tasks / Milestones:	Budget:	Completion Date:
Prepare a purchase and sale agreement	2000	
Due diligence addtl property inspection	1000	
Title report	1000	
Escrow fees	2600	
Purchase funds deposited into escrow.	\$170000	1/31/13
Recordation fees; Deed filing	400	
Contingency staff time	1500	

*Attach additional pages as necessary

I certify that the information contained in this Grant Application form, including required attachments, is accurate.

Lisa Soghor
 Signature of Authorized Representative

11/21/12
 Date