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# Letter of lnquiry (LOI) Template for CEPF Small Grants for the Cerrado Biodiversity Hotspot

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**LOI Instructions**

*Please complete the fields of the letter of inquiry per the questions on each page.*

*Remember to follow the guidance in the Call for Letters of Inquiry and the strategy described in the Ecosystem Profile.*

*You are welcome to provide supporting documents, such as maps or letters of community support, as attached files with the submission of this LOI. Please contact the Regional Implementation Team (RIT) if you have any questions or concerns about your project proposition or how to complete this LOI form.*

**Ineligible Use of Funds**

*CEPF will* ***not*** *fund the capitalization of trust funds, the purchase of land, the involuntary resettlement of people, or the removal or alteration of any physical cultural property under any circumstances.*

## Section 1: Contact Summary

**About the Applicant**

|  |  |
| --- | --- |
| Name: |  |
| email: |  |
| Telephone: |  |

**About Organization**

|  |  |
| --- | --- |
| **Applicant Organization Legal Name:** |  |
| **Short Name/Acronym:** |  |
| **Total Number of Permanent Staff:** |  |
| **Organization Type:** | Click here to select |
| *CEPF defines a “local organization” to be one that is legally registered in a country within the hotspot where the project will be implemented and* *that has an independent board of directors or other similar type of independent governing structure. Organizations not fulfilling these two criteria are considered international organizations.* |
| **Organization Status:** | Click here to select |
| **Year Organization Established:** |  |
| **Telephone:** |  |
| **Telephone country code:** |  |
| **Fax:** |  |
| **Website address:** |  |
| **Official email:** |  |

**Mailing Address**

|  |  |
| --- | --- |
| **Address Line 1:** |  |
| **Address Line 2:** |  |
| **City:** |  |
| **State or Province:** |  |
| **Country:** |  |
| **Postal Code:** |  |

**Physical Address –** *if different from mailing address above*

|  |  |
| --- | --- |
| **Address Line 1:** |  |
| **Address Line 2:** |  |
| **City:** |  |
| **State or Province:** |  |
| **Country:** |  |
| **Postal Code:** |  |

**Organization Chief Executive**:

|  |  |
| --- | --- |
| **Title:** |  |
| **Given Name:** |  |
| **Family Name:** |  |
| **Country:** |  |
| **Telephone:** |  |
| **Telephone country code:** |  |
| **Email:** |  |

**History and Mission Statement** *(Provide a brief description of your organization’s history and mission, including experience relevant to the proposed project.)*

*Enter Text Here*

*Ineligible Recipients of Funds*

*Government agencies, and organizations controlled by government agencies, are* ***not*** *eligible to receive CEPF funds. Government-owned enterprises or institutions are eligible only if they can establish the following – please answer the following questions and submit the relevant documentations to support your answers if applicable.*

**Do you represent, or is your organization controlled by, a government agency?**

Click here to reply

**If your organization is a government-owned enterprise or institution, can it clearly establish that the enterprise or institution has a legal personality independent of any government agency or actor?**

Click here to reply

**If your organization is a government-owned enterprise or institution, can it clearly establish that the enterprise or institution has the authority to apply for and receive private funds?**

Click here to reply

**If your organization is a government-owned enterprise or institution, can it clearly establish that the enterprise or institution may not assert a claim of sovereign immunity?**

Click here to reply

## Section 2: Basic Project Information

**Strategic Direction from the CEPF Ecosystem Profile** *(Enter the single strategic direction this project aims to address. Use the exact number – Strategic Direction 1, Strategic Direction 2, etc. – and wording from the Ecosystem Profile for this region found on* [*www.cepf.net*](http://www.cepf.net) *and the Call for Letters of Inquiry.)*

*Enter text here*

**Investment Priorities:** *(List one or more investment priorities that this project aims to address. Use the exact wording from the Ecosystem Profile.)*

*Enter text here*

**Project Title:** *(10 words or less, Please Make Sure to Capitalize All the Major Words of your Title)*

*Enter text here*

## Section 3: Project Location

*In every region where CEPF invests, its grant making is guided by an Ecosystem Profile that defines conservation priorities at corridor and site (Key Biodiversity Area – KBA) scales. If relevant, please identify the country(s), corridor(s), and site(s) where your project will take place.*

*Refer to* [*www.cepf.net*](http://www.cepf.net) *or* [*www.iieb.org.br*](http://www.iieb.org.br) *and download the Ecosystem Profile to help identify the specific location of your project.)*

|  |  |
| --- | --- |
| **Country(ies):***Please list Country(ies) where project activities will occur* |  |
| **Corridor(s):***If project activities will occur in one or more priority corridors identified in the Ecosystem Profile, list them here* |  |
| **Key Biodiversity Area(s) (KBAs):***If project activities will occur in one or more KBAs identified in the Ecosystem Profile, list them here* |  |
| **Location:** *Please briefly describe where the project will take place and specify the municipality(s) and the state(s).* |  |
| **Protected Area:***If project activities are in one or more protected areas, please give the name of each.* |  |

*Note: If possible, please include a link to an appropriate* [*GoogleEarth*](https://www.google.com/earth/) *map, provide latitude and longitude, or attach a map with your LOI to provide further clarity about your project location.*

## Section 4: Project Concept

**Project Rationale-** *Describe the conservation need addressed by the project (i.e. key threats and/or important opportunities). Explain what would happen if the project was not implemented.*

*Enter Text Here*

**Project Approach** – *Describe the proposed strategy and actions of the project in response to the conservation need stated above, including a summary of project objectives, components, and key activities, if available at this stage. Describe any potential risks you face in implementing this plan and/or critical factors influencing project achievement.*

*Enter Text Here*

**Project Duration**

|  |  |
| --- | --- |
| **Year(s)** |  |
| **Month(s)** |  |
| **Start Date** |  |
| **End Date** |  |

**Project Impact** *-* *List the anticipated conservation impacts of the project.*

*Enter Text Here*

**Policy Advocacy and Influence on Public Policy -** *Describe your project strategy so that its results will influence the formulation, implementation and social control of public policies.*

*Enter Text Here*

**Contribution to the Logical Framework -** *Describe how the project contributes to the achievement of intermediate targets and indicators of the Logical Framework of the Cerrado Hotspot Ecosystem Profile.*

*Enter Text Here*

**Link to CEPF Investment Strategy** – *Describe how your project relates to the Strategic Directions and Investment Priorities selected in the Call for LOIs.*

*Enter Text Here*

**Long Term Sustainability:** *Describe how the components or results of the project will continue over time, or will be replicated after CEPF funding ends.*

*Enter Text Here*

**Organizational Strengths:** *Describe why your organization is well suited to undertake this project. For example: Your organization has long-standing efforts in the area, or was invited by appropriate local stakeholders?*

*Enter Text Here*

## Section 5: Project Partners and Stakeholders:

*Please tell us who will be responsible for the success of your project.  This includes both individual named people or positions as well as organizations, agencies, or community bodies.*

|  |  |
| --- | --- |
|  | **Partners (organizations responsible for implementation of project activities):**   |
| **Name** | **Summary of Role on Project** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

|  |  |
| --- | --- |
|  | **Stakeholders (other actors that benefit from or influence project outcomes):**   |
| **Name of actor** | **Email (if applicable)** | **Summary of Role on Project** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

## Section 6: Eligibility and Safeguards

*The following questions help CEPF determine the eligibility of your organization and/or proposed project activities to receive CEPF funds.  Where possible, you may revise your strategy to avoid these elements or you may wish to consult the “Resources” section at* [*www.cepf.net*](http://www.cepf.net) *that provides links to additional funding sources and resource sites.*

#### *Safeguard Questions*

*The following questions help CEPF determine if your project triggers any social or environmental safeguard. CEPF is required to assess all applications to determine if safeguards are triggered, and if so, whether or not appropriate mitigation measures need to be included in project design and implementation. Selecting “yes” to any of the questions below will not necessarily preclude your project from being funded. For further information on CEPF application of safeguards please refer to* [*http://www.cepf.net/grants/Pages/safeguard\_policies.aspx*](http://www.cepf.net/grants/Pages/safeguard_policies.aspx)*.*If the answer to one or more of the following questions is “*Yes*”, please provide detailed information in the respective section marked ***Justification I, II, III, IV or V.***

#### Environmental Aspects

Will the proposed project involve activities that are likely to have adverse impacts on the environment?

Click here to reply

Will the proposed project support any physical construction or rehabilitation?

Click here to reply

Will the proposed project support any building of trails?

Click here to reply

Will the proposed project require you or your team to interact with live animals?

Click here to reply

Will the proposed project support any forestry activities?

Click here to reply

***Justification I*** - If the answer to one or more of the above questions is “*Yes*”, summarize the potential impacts and how these might be avoided or mitigated. Describe proposed consultation process and assessments that will be undertaken to inform project design, as well as measures to address environmental issues.

Your justification:

#### Social Aspects

Will the proposed project support activities in an area used or inhabited by Indigenous Peoples?

Click here to reply

Will any proposed impact from the grant negatively affect the livelihoods of Indigenous Peoples either in the area or somewhere else?

Click here to reply

Will the proposed project involve activities that are likely to have adverse impacts on the local community?

Click here to reply

Will the proposed project result in the strengthened management of a protected area which may restrict access to this area and its resources by neighboring communities?

Click here to reply

Will the proposed project result in reduced or restricted access to the resources in a protected area?

Click here to reply

Will the proposed project result in removal or eviction of anyone from a protected area?

Click here to reply

***Justification II -*** If the answer to one or more of the above questions is “*Yes*”, summarize the potential impacts and how these might be avoided or mitigated. Describe proposed consultation process and assessments that will be undertaken to inform project design, as well as measures to address social issues.

Your justification:

#### Pest Management

Will the project involve use of herbicides, pesticides, insecticides or any other poison?

Click here to reply

Will the proposed project pay for the manufacture, acquisition, transport, application, storage, or disposal of pesticides, including the costs of materials, equipment, and labor?

Click here to reply

Will the proposed project pay for the planning, management, or supervision of work which involves the general use of pesticides or animal control as described in the points above?

Click here to reply

***Justification III -*** If the answer to one or more of the above questions is “*Yes*”, please provide the name of the pesticide, herbicide, insecticide or poison you intend to use.  In addition, summarize the potential impacts and how these might be avoided or mitigated. Describe proposed consultation process and assessments that will be undertaken to inform project design, as well as measures to address pest management issues.

Your justification:

#### Health and Safety

Will the proposed project have any activities that might impact the *health* of project staff or any other people associated with the project in any way?

Click here to reply

Will the proposed project have any activities that might affect the *safety* of project staff or any other people associated with the project in any way?

Click here to reply

***Justification IV –*** If the answer to one or more of the questions above is “*Yes*”, please provide an explanation of the potential impacts and how these might be avoided or mitigated.

Your justification:

#### Physical Cultural Resources

Will the project involve the removal or alteration of any physical cultural resources (defined as movable or immovable objects, sites, structures, and natural features and landscapes that have archeological, paleontological, historical, architectural, religious, aesthetic, or other cultural significance)?

Click here to reply

***Justification V –*** If the answer to the question above is “*Yes*”, please provide an explanation of the potential impacts and how these might be avoided or mitigated.

Your justification:

## Section 7: Budget Summary

When filling out the budget worksheet below, consider the following points:

1. Keep in mind that the maximum value for the small grants is US$ 20,000.
2. Please feel free to fill the budget in Reais, in Dollars, or using both columns.
3. Budget the travel costs for one person from your organization to Brasília to participate in a training workshop on CEPF project management, which will occur at the beginning of the project cycle.
4. The Management Support Costs should be maximum 13% of Line 5 below.

|  |
| --- |
| **Salaries and Benefits** |
| **Name** | **Title** | **Amount Requested (R$)** | **Amount Requested (US$)** | **Description** |
|  |  |  | $ |  |
|  |  |  | $ |  |
|  |  |  | $ |  |
|  |  |  | $ |  |
| *Line 1: Salaries and benefits sub-total* |  | $ | $ |
| **Consultancies and Professional Services** |
|  |  |  | $ |  |
|  |  |  | $ |  |
|  |  |  | $ |  |
| *Line 2: Consultancies and professional services sub-total* |  | $ | $ |
| **Furniture and Equipment** |
| **Item/Service** | **Amount Requested (R$)** | **Amount Requested (US$)** | **Description** |
|  |  | $ |  |
|  |  | $ |  |
|  |  | $ |  |
| *Line 3: Furniture and equipment sub-total* |  | $ |  |
| **Other Direct Costs** |
| Office Rent and Utilities |  | $ |  |
| Telecommunications |  | $ |  |
| Postage and Delivery |  | $ |  |
| Field and Office Supplies |  | $ |  |
| Maintenance |  | $ |  |
| Travel |  | $ |  |
| Meetings and Special Events |  | $ |  |
| Bank Fees and Insurance |  | $ |  |
| *Line 4: Other direct costs sub-total* |  | $ |  |
| **Line 5: Total Direct Costs (Line 1 + 2 + 3 + 4)** |  | $ |  |
| **Line 6: Management Support Costs** | Percent | % | Reais /Dollars |  | $ |  |
| **Line 7: Total Line 5 (Direct Costs) and Line 6 (Management Support Costs)** |  | $ |  |
| **Sub-Grants** |
| **Sub-Grantee Organization** | **Amount Requested (R$)** | **Amount Requested (US$)** | **Description** |
|  |  | $ |  |
|  |  | $ |  |
| *Line 8: Sub-grants sub-total* |  | $ |  |
| **Line 9: Total amount requested from CEPF (Line 7 + Line 8)** |  |  |  |
| **Counterpart Funding** |
| **Source of Funds** | **Total Funds (R$)** | **Total Funds (US$)** | **Description** |
|  |  | $ |  |
|  |  | $ |  |
|  |  | $ |  |
| *Line 10: Counterpart funding sub-total* |  | $ |  |
| **In-Kind Contributions** |
| **Description of Contribution** | **Total Funds (R$)** | **Total Funds (US$)** |  |
|  |  | $ |  |
|  |  | $ |  |
|  |  | $ |  |
| *Line 11: In-kind contribution sub-total* |  | $ |  |
| **Line 12: Total Project Budget (Line 9 + Line 10 +Line 11)** |  | $ |  |