



9549 Hwy 5  
P.O. Box 6  
Columbus, ND 58727  
701.939.6671  
www.bdec.coop

## 2026 RDFC Grant Application

Applicant/Organization: \_\_\_\_\_

Applicant Tax ID Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact Email: \_\_\_\_\_

Project Name: \_\_\_\_\_

**Check one:**

- Community-owned business or facility (i.e. ambulance, hospital, fire district, recreation, community center, etc.)
- Community-based project (i.e. service group/club; youth/school programs, etc.)

**How will the grant funds be used?** *(Funds are to be used for community betterment and/or economic development projects as noted above. Funds may not be used for medical fundraisers or general operating expenses.)*

**Funding Request:** \_\_\_\_\_ **Total Project Cost:** \_\_\_\_\_  
*(Minimum grant amount is \$1000. Maximum grant amount is \$2,000)*

**Funding Sources:** The organization requesting funds must have \$4 in other funds to \$1 in RDFC funds.

Local Incentive Funds: \$ _____	RDFC Member Co-op Funds: \$ _____
State Funds: \$ _____	Funding from Bank: \$ _____
Federal Funds: \$ _____	Requested RDFC Funds: \$ _____
City Funds: \$ _____	Other (List amounts & sources): \$ _____
County Funds: \$ _____	Total of all Funding Sources: \$ _____

*(Must equal total project cost listed above.)*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Return completed applications to:**  
Burke-Divide Electric Cooperative, Attn: Heidi Haugen-Grohs—Member Services Manager  
P.O. Box 6, Columbus, ND 58727 or heidi@bdec.coop  
**Application deadline is July 1, 2026**