

Washington Counties Risk Pool

2558 RW Johnson Rd SW, Suite 106 Tumwater, WA 98512 (360) 292-4500 wcrp.info

WCRP RISK REDUCTION PROGRAM

FUNDING REQUEST

APPLICANT:		
Name of Applicant:	Title:	
County:	Department:	
FUNDING PAYMENT & MAILING INSTRUCTIONS:		
Payee:		
Attention:		
Address Line 1:		
Address Line 2 (suite, bldg #):		
City, State & Zip:		
Identify & describe the project or purchase being considered:		
What is the total cost of the project or purchase?		
2. What is the total cost of the project of purchase:		
3. What is the total amount being requested?		
4. Describe how this purchase would eliminate or reduce a property/liability risk or exposure:		
5. What is the estimated time for completion?		
Following completion of project, WCRP Risk Management will contact the county's Risk Manager for discussion of outcomes.		
What was the success of funding the project?		
Was the funding provided for the total cost, or was it it used as "seed" money?		
SUBMISSION INSTRUCTIONS:		
Please submit this application, along with supporting documentation (such as the project estimate) to the WCRP through the county's Risk Manager for review and submission to WCRP. The county Risk Manager should e-mail this		
form and supporting documentation to MemberServices@wcrp.wa.gov.		
		Date:
Printed Name of Risk Manager:	Signature:	Date: