

Historic

Riverside Township

27 Riverside Road – Riverside, IL 60546

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www.riversidetownship.org



Vera A. Wilt, Supervisor

Jay Reyes, Clerk

Mary Jo Miller, Assessor

Trustees

Mary Rob Clarke

Timothy Heilenbach

Matthew J. Decosola

Kelly Navarro

RIVERSIDE TOWNSHIP 2026 - 2027 COMMUNITY PARTNERSHIP APPLICATION

The Riverside Township Board will review requests for funding from non-profit community organizations on a quarterly basis. It may also consider public safety or community support funds to government taxing bodies, as permissible by law. Requests will be reviewed quarterly, at regular board meetings, specifically on:

May 12, 2026, August 11, 2026, November 17, 2026 and February 9, 2027.

If the consideration is rescheduled for a special meeting other than the regular board meeting, applicants will be notified of the new meeting date.

The Township Board reserves the right to limit the amount of community partnership money available to any individual organization. Any funding to governmental taxing bodies or their subsidiaries, such as libraries, schools, or public safety organizations, must serve the residents of the Township, and funds will only be given through a direct purchase of the items by the Township. If your organization is such an entity, please complete the second page, "Indemnification" portion of the application.

It is your duty to determine the timing appropriate to your community partnership request. If you fail to submit a request by the deadline, you will forfeit the opportunity to receive timely funding. Requests must be received by the Township no later than 1 week prior to the consideration meeting (see meeting dates above). Due to the limited availability of funds, an organization which meets eligibility requirements shall not receive more than two (2) approved requests per fiscal year, and the Township Board may limit the amount of any partnership.

NOTE: Notwithstanding past experience, there is no guarantee that future requests will be approved.

Recipients may be asked for an accounting. If a community partnership is awarded, and there are surplus funds not used for the stated purpose, the balance shall be returned to the Township. Incomplete applications are considered unqualified for funding. Be sure to specify the payee on the form, both name and address, and please note that the checks are issued to organizations, not individuals. If you need additional space, use a separate page, and you are encouraged to attach supplementary information. Additional information may be requested upon review, but please provide detailed responses to the questions in the application. **You are strongly encouraged to have a representative present at the meeting to answer any questions.**

A copy of the Riverside Township Community Partnership Application may also be found on our website at: <http://riversidetownship.org/resident-services/community-partnership/>. Completed applications can be dropped off at or mailed to the Township Office, or emailed to: supervisor@riversidetownship.org.

Vera A. Wilt, Supervisor

RIVERSIDE TOWNSHIP COMMUNITY PARTNERSHIP APPLICATION

(Effective April 1, 2026 through March 31, 2027)

Name of Organization: _____

Address of Organization: _____

Organization Phone: _____ Organization E-Mail: _____

Website of Organization: _____

Legal form of entity: _____ 501(c)(3) - Provide your letter from IRS.

- IL Not for Profit; provide certificate of Good Standing or a status screen shot from:

http://www.cyberdriveillinois.com/departments/business_services/corp.html

Contact Person for Application (Name, Phone, E-Mail): _____

Provide a Description of the Organization and its mission:

Please provide the names and contact information of the officers and directors of your organization:

Amount Requested for Community Partnership: \$ _____

Check is made out to (organization name, not individual): _____

Please provide a detailed description of how your organization would allocate the funding from Riverside Township, if awarded. Attach information, brochures, etc., regarding event or services to be provided. Attach budget information or financial statement for your organization to assist the board in evaluating the need and accountability of the applicant.

Specify anticipated benefits to Township residents (include an estimate of the number of Riverside Township residents to be served): _____

Date

Applicant's Signature and Title

It is strongly encouraged to have a representative present at the meeting to answer any questions.

**The following indemnification paragraph is to be completed when funds are used
by Riverside Township to purchase item(s) on behalf of the organization.**

_____, recipient of _____,
(organization) (item(s) purchased)
purchased through community partnership funds by Riverside Township on our behalf, shall fully indemnify, hold harmless and
defend Riverside Township and its officers, agents and employees from and against all claims, demands, actions, suits,
damages, liabilities, losses, settlements, judgments, costs and expenses which arise out of the use of _____
_____. _____ acknowledges that
(item(s) purchased) (organization)
upon receipt of _____ from Riverside Township, _____
(item(s) purchased)
_____ becomes the owner of the property and assumes all liability and maintenance for the
(organization)
property. Further, _____ acknowledges that Riverside Township did not have any
(organization)
ownership interest in _____ before _____
(item(s) purchased) (item(s) purchased)
_____ were transferred to _____.
(organization)

This paragraph generally applies to requests from municipalities, fire and police departments, libraries, etc.

Date

Applicant's Signature and Title

FOR OFFICE USE ONLY

COMMUNITY PARTNERSHIPS AWARDED IN PREVIOUS FISCAL YEARS

2026-27 \$ _____

2025-26 \$ _____

2024-25 \$ _____

2023-24 \$ _____

2022-23 \$ _____

2021-22 \$ _____

2026-27 Community Partnership Approved by Township Board on _____ Amount \$ _____

2026-27 Community Partnership Denied by Township Board on _____

Supervisor