



**COMMUNITY PROJECT ACCOUNT**  
(Small, De Minimus Public Projects)

**APPLICATION**

**1) Name of Project: Infrastructure for Autonomous Vehicles in Greenville County**

**Check Project Type:**

**Nonrecurring community requests for infrastructure:**

- Flooding**
- Roads**
- Lights**
- Sewer and drainage**
- Public buildings and grounds**
- Infrastructure related studies**

**Contributions to local governments in Greenville County for community projects**

**2) Amount of Funds Requested: \$15,000**

**3) Project Sponsor**

**Organization: CU-ICAR**

**Mailing Address: 5 Research Drive**

**Greenville, SC 29607**

**4) Contact Person: Name Fred Cartwright Title: Exec Director**

**Telephone 864-283-7100 Email: FCartwr@clemson.edu Fax No.**

**5) Project Timeline ~ Beginning: Aug 2017**  
**MONTH/DAY/YEAR**

**Ending: Jan 2018**  
**MONTH/DAY/YEAR**

6) Date Funds are Needed: June 30, 2017

7) Location of Project: CU-ICAR campus and nearby Millennium Drive area intersections

8) Project Description: (Attach additional pages if necessary)

a. General Description: **Install traffic cameras and sensors to enable V2V and V2I communications so that vehicles can connect and drive autonomously in GAVP project**

b. Benefit project will provide the Community: **Create high-tech jobs; reduce traffic accidents, injuries, and deaths; reduce costs of driving thru shared vehicles; allow people w/out personal vehicles to have improved mobility.**

Additional Comments: \_\_\_\_\_

9) Project Budget:

a. Total Project Budget including all sources of funds: \$2 Million estimated

b. Percent request equals of the total Project Budget? Less than 1%

List below all funding sources for this project:

Funding Source	Amount
Global Autonomous Vehicle Partnership	\$1 million
Greenville area supporters of AV technology	\$1 million
<b>TOTAL:</b>	<b>\$2 Million</b>

*Fred Payne*  
Signed

May 11, 2017  
Date

County Council Dist 28  
Title



**Greenville  
County**

**COMMUNITY PROJECT ACCOUNT**  
(Small, De Minimus Public Projects)

**APPLICATION**

1) Name of Project: Dunklin Fire Department – automated external defibrillators (AED)

Check Project Type:

Nonrecurring community requests for infrastructure:

- Flooding
- Roads
- Lights
- Sewer and drainage
- Public buildings and grounds
- Infrastructure related studies

Contributions to local governments in Greenville County for community projects

2) Amount of Funds Requested: \$ \$5,000

3) Project Sponsor

Organization: Dunklin Fire Department

Mailing Address: 11353 Augusta Road

Honea Path, South Carolina 29654

4) Contact Person:

Name Fay Childress

Title Commissioner

Telephone (864) 369-9993

Alt. Telephone No. \_\_\_\_\_

Email fay@leeandsims.com

Fax No. (864) 369-9996

Council Representative(s) Ballard

5) Project Timeline ~ Beginning: 6/06/2017 Ending: 6/30/2017

MONTH/DAY/YEAR

MONTH/DAY/YEAR

6) Date Funds are Needed: 6/30/ 2017

7) Location of Project: Dunklin Fire Department

8) Project Description: (Attach additional pages if necessary)

a. General Description: The Dunklin Fire Department is replacing 2 automated external defibrillators (AED) and associated equipment

b. Benefit project will provide the Community: Enhanced public life/health protection for the district

c. Additional Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9) Project Budget:

a. Total Project Budget including all sources of funds: \$ 5,000

b. Percent request equals of the total Project Budget? 100%

List below all funding sources for this project:

Funding Source	Amount
Greenville County	\$5,000
<b>TOTAL:</b>	<b>\$5,000</b>

  
Signed

04/15/2017  
Date

\_\_\_\_\_  
Title



**Greenville  
County**

**COMMUNITY PROJECT ACCOUNT  
(Small, De Minimus Public Projects)**

**APPLICATION**

1) Name of Project: City of Travelers Rest – Scottish Games

Check Project Type:

Nonrecurring community requests for infrastructure:

- Flooding
- Roads
- Lights
- Sewer and drainage
- Public buildings and grounds
- Infrastructure related studies

Contributions to local governments in Greenville County for community projects

2) Amount of Funds Requested: \$ \$2,500

3) Project Sponsor

Organization: City of Travelers Rest

Mailing Address: 6711 State Park Rd  
Travelers Rest, SC 29690

4) Contact Person:

Name Dianna Turner

Title City Administrator

Telephone (864) 834-8740

Alt. Telephone No. \_\_\_\_\_

Email Dianna@travelersrestsc.com

Fax No. (864) 834-7270

Council Representative(s) Dill

5) Project Timeline ~ Beginning: 5/26/2017 Ending: 5/27/2017

MONTH/DAY/YEAR

MONTH/DAY/YEAR

6) Date Funds are Needed: 6/9/ 2017

7) Location of Project: Furman University, Travelers Rest

8) Project Description: (Attach additional pages if necessary)

a. General Description: The City will provide funding to host the participants and visitors to the Scottish Games.

b. Benefit project will provide the Community:  
Scottish Games brings visitors to the community from all over the region and world.

c. Additional Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9) Project Budget:

a. Total Project Budget including all sources of funds: \$ 2,500

b. Percent request equals of the total Project Budget? 25%

List below all funding sources for this project:

Funding Source	Amount
Greenville County	\$2,500
<b>TOTAL:</b>	<b>\$5,000</b>

\_\_\_\_\_  
Signed

May 17, 2017  
Date

Councilor District 17  
Title



**Greenville  
County**

**COMMUNITY PROJECT ACCOUNT**  
(Small, De Minimus Public Projects)

**APPLICATION**

1) Name of Project: RIVER OAKS STORM WATER  
Check Project Type: FACILITIES REPAIRS

Nonrecurring community requests for infrastructure:

- Flooding
- Roads
- Lights
- Sewer and drainage
- Public buildings and grounds
- Infrastructure related studies

Contributions to local governments in Greenville County for community projects

2) Amount of Funds Requested: \$10,228.00

3) Project Sponsor  
Organization: RIVER OAKS RECREATION ASSOCIATION  
Mailing Address: 5 LEGACY PARK RD, SUITE A  
GREENVILLE, SC 29607

4) Contact Person:  
Name MIKE MCGEE Title H.O.A. PRESIDENT  
Telephone 414-4258 Alt. Telephone No. \_\_\_\_\_  
Email \_\_\_\_\_ Fax No. \_\_\_\_\_

5) Project Timeline ~ Beginning: STARTED 4/1/17 Ending: ES 5/30/17  
MONTH/DAY/YEAR MONTH/DAY/YEAR

6) Date Funds are Needed: ASAP





