



2017

North Dakota Forest Service America the Beautiful Program Development (ATBPD)

Application Deadline: 30 April 2017

Entity: _____

Community: _____

Primary Contact Person:

Name: _____ Title: _____

Mailing Address: _____ City: _____ Zip: _____

Day Phone: _____ Cell: _____

Email: _____

Secondary Contact Person:

Name: _____ Title: _____

Mailing Address: _____ City: _____ Zip: _____

Day Phone: _____ Cell: _____

Email: _____

<p>Applicant MUST contact NDFS personnel to coordinate project planning efforts during the process of completing this application. See personnel contact information at www.ndsu.edu/ndfs/.</p>
Name of NDFS Community Forestry Staff:
Date(s) of Contact:

Provide the legal land description of the project location. We will use this information to conduct Class I cultural resource reviews. To assist with your legal land descriptions: <http://mapservice.swc.state.nd.us/>

County Name	Township Number	Range Number	Section Number	Quarter NE, NW, SE, SW

Eligible ATB Program Development projects will be prioritized in the following order:

- A. Tree inventories
- B. Tree removals
 - Ash trees – implementation of an Emerald Ash Borer (EAB) Community Action Plan;
 - Trees that have a potential risk of failure (dead trees, structural problems) and
 - Dutch elm disease
- D. Development of a Community Forestry Action Plan (include diversity, preparing for EAB)
- E. Master planting plans
- F. Other projects based on benefit to the community

PROJECT DESCRIPTION

1. Please describe your project by answering the following questions.

a. *What is the project?*

b. *How will the project stimulate the development of an effective community forestry program?*

c. *Why is the project important to the community?*

Attach additional pages as necessary for any of the questions.

d. Who are the project personnel and what will they do?

e. How are volunteers involved with the project?

f. What is your plan of work and project schedule?

g. What additional information would you like to share with the review committee to help them understand the project?

Attach additional pages as necessary for any of the questions.

Project Cost In-kind Contributions

2. Community's In-Kind Contribution

Donated items must be used for the project; no peripheral expenses can be used as match, such as food, refreshments, or other items outside the scope of the project.

A. In-Kind Labor – Volunteers

Estimate the community's "In-Kind Labor Contribution" to complete this project.

Suggested Volunteer Labor Value: \$15.00 per hour.

ACTIVITY	VOLUNTEER GROUP'S NAME (IF APPLICABLE)	# OF PEOPLE	# OF HOURS	= TOTAL HOURS	X VALUE PER/HR.	= GRAND TOTAL
(Copy amount into In-Kind Labor on Project Budget Estimate.)						
TOTAL VALUE OF IN-KIND LABOR						

B. In-Kind Equipment

What donated equipment will be used to complete this project?

Suggested Values: Small Equipment \$15 - \$20 per hour, Large Equipment \$50 - \$70 per hour.

ACTIVITY	EQUIPMENT USED	# HOURS	X VALUE PER HOUR	= TOTAL VALUE
(Copy amount into In-Kind Equipment on Project Budget Estimate.)				
TOTAL VALUE OF IN-KIND EQUIPMENT				

C. In-Kind Supplies

What supplies or other donated items of value will be used to complete your project?
(Food and refreshments are not eligible.)

SUPPLIES	VALUE
(Place the value of the in-kind item in the appropriate category of the Budget Estimate.) TOTAL VALUE OF OTHER IN-KIND CONTRIBUTIONS	

D. In-Kind Space Rental

(Example: meeting room)

SPACE RENTAL	VALUE
(Place the value of the in-kind item in the appropriate category of the Budget Estimate.) TOTAL VALUE OF OTHER IN-KIND CONTRIBUTIONS	

Project Cost Cash Expenses

Grant Funds and Applicant Cash Match Expenditures

3. Estimate Cash Expenses for your Project

A. Site Preparation: What is the estimated cost of preparing the site for the project?

ACTIVITY	TOTAL
TOTAL ESTIMATED COST OF SITE PREPARATION	

B. Supplies: What is the estimated cost of supplies needed for completing this project?

ITEM PURCHASED	QUANTITY OF ITEM	COST PER ITEM	TOTAL COST OF ITEM
TOTAL ESTIMATED COST OF SUPPLIES			

C. Contracted Services

Estimated cost of contracted services: \$ _____

5B and/or 5C
from PROJECT BUDGET ESTIMATES on pg 7

No person may engage in the business nor act in the capacity of a contractor within the State of North Dakota when the cost, value, or price per job exceeds the sum of four thousand dollars without first having a license. (NDCC 43-07-02).

PROJECT BUDGET ESTIMATES

PROJECT EXPENSES	APPLICANT IN-KIND MATCH A	APPLICANT CASH MATCH B	GRANT FUNDS C	TOTAL D
Labor 1	Question-2A		NOT ALLOWED	A+B=D
Equipment 2	Question-2B		NOT ALLOWED	A+B=D
Site Preparation 3		Question-3A	Question-3A	A+B+C=D
Supplies 4	Question-2C	Question-3B	Question-3B	A+B+C=D
Contracted Services 5		Question-3C	Question-3C	A+B+C=D
Rental space 6	Question-2D			A+B+C=D
Other (please specify) 7				A+B+C=D
TOTAL 8	Sum A1-A7	Sum B1-B7	Sum C3-C7	Sum D1-D7=Sum A8+B8+C8

Budget Summary Applicant's In-Kind Match Contribution (A8) _____

Applicant's Cash Match Contribution (B8) _____

Grant Funds Requested (C8) _____

(Grant funds requested may not exceed maximum allowable grant award.)

Total Project Cost (D8) _____

NOTE:	<ul style="list-style-type: none"> - Applicant must contact NDFS personnel to coordinate project planning efforts in the course of completing the application. - At least 50% of the total cost of the project must be contributed by the applicant in the form of cash, services, and/or in-kind contributions. - Eligible projects may request up to \$10,000
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Project expenses for which you seek reimbursement must be incurred AFTER a contract is signed.

Project grant funds are distributed on a reimbursement basis. Reimbursement requests must be submitted for payment at the completion of the project by the due date listed, and only upon passing inspection by NDFS Community Forestry Staff. Proof of payment in the form of cleared checks or receipts showing payment by a credit card are required to be submitted with reimbursement documents.

The federal government has adopted the use of DUNS numbers to track how federal grant money is allocated. (If you do not know your organization's DUNS number, call 1-866-705-5711 or visit the Dun & Bradstreet web-page at <http://fedgov.dnb.com/webform/displayHomePage.do>.)

Failure to provide a DUNS number will result in disqualification of the grant application.

Please identify your organization's DUNS number: _____

Check List

Please check appropriate boxes.

1st Tree Ordinance.

- a. One (1) copy of your community's tree ordinance. If your community does not have a tree ordinance, a pledge is required to develop one. See below at the asterisk * located above the signature line. (Not required for Tree City USAs, we have one on file.)
- b. Please indicate here if you are a Tree City USA.

2nd Proposed Projects (ORIGINAL & seven (7) copies of each of the following)

- a. Completed application.
- b. Photographs of proposed project site.
- c. Vicinity maps indicating location of project;
 - 1. Map identifying project location within the city; and
 - 2. Map of the project location identifying highways, streets and properties surrounding the project (residential, businesses, schools, etc.).
- c. Project planting or design plan.

AUTHORIZING SIGNATURE

By signing below, I certify to the best of my knowledge the information is true. I acknowledge that I am authorized to commit funding and accept America the Beautiful Grant Funds if this project is approved by the ND Community Forestry Council and the State Forester.

*Our community does not have a tree ordinance; we pledge to develop one and present it for approval to the appropriate local government officials. Once approved, a copy of the ordinance will be sent to the ND Forest Service. This must be done before reimbursement will be made to the community.

<i>Print Name</i>	<i>Print Title</i>	<i>Authorized Signature</i>	<i>Date</i>
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ATB Program Development