





2016

North Dakota Forest Service America the Beautiful (ATB) Tree Planting Grant

Application Deadline: 30 April 2016

Entity	:		
	nunity:	_	
Primary Contact Person:	Name: Mailing Address: Day Phone: Email:	City:	Zip:
Secondary Contact Person:	Name: Mailing Address: Day Phone: Email:	City:	
to	Applicant MUST contact No coordinate project planning efforts during the propersonnel contact information at y	ocess of completing this ap	plication. See
Name	e of NDFS Community Forestry Staff:		
Date	of Contact:		

Provide the legal land description of 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

PROJECT DESCRIPTION

Please describe your project by answering the following questions.

1. a.	What is the project? Include a planting or design plan with your application. (Supporting Documents)
b.	Where will the project be located? Include maps of the community showing the location of the project and a detailed map of the project site. (Supporting Documents) Remember to consider the location of above ground and below ground utilities.
C.	Why is the project important to the community?
d.	Who will be involved with the project 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 Estimate In-kind Contribution

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 X Hours	TOTAL = Hours	VALUE X PER/HR	GRAND = TOTAL
	(Copy amount into In-Kind Labor on Project Budget Estimate.) TOTAL VALUE OF IN-KIND LABOR			1A		

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 int	o In-Kind Equipmen	nt on Project Bud VALUE OF IN-KIN	get Estimate.) ID EQUIPMENT	2A

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 V**ALUE **TOTAL VALUE OF IN-KIND SUPPLIES Project Cost - Cash Expenses Grant Funds and Applicant Cash Match Expenditures.** 3. Cash expenses for your project. **A. Site Preparation**. What is the estimated cost of preparing the site for the project? **ACTIVITY COST TOTAL**

B. Supplies. What is the estimated cost of non-plant materials needed for completing this project?

TOTAL ESTIMATED COST OF SITE PREPARATION

3B and/or 3C

ITEM PURCHASED	QUANTITY OF ITEM	COST PER ITEM	TOTAL COST OF ITEM
	TOTAL ESTIMATED	COST OF SUPPLIES	4B and/or 3C

Emerald ash borer (EAB) is a highly invasive, non-native beetle that attacks and kills all species of ash (*Fraxinus*) trees. Ash is one of the most common trees planted and found in North Dakota communities. The loss of these trees would be devastating from an ecological and economic standpoint. Given this threat and potential threats of future invasive insects or diseases, it is in the long-term interest of communities to increase the genetic diversity of the trees we plant. This can be done by planting multiple genera and species within these genera. Examples of genera: Oak – *Quercus*, Birch – *Betula*, Linden - *Tilia*

The use of multiple genera and species will result in higher scores from the review committee.

C. List the Plant Materials to be used.

Estimate the cost of plant materials to complete your project.

Size examples: 6' Bare Root (BR) 1½", (BR) #5 container, 1½" Balled and Burlapped (B&B)

SPECIES	SIZE	Number	COST PER TREE	TOTAL COST
				TD 11 TO
	5B and/or 5C			

Businesses that sell nursery stock must have a valid nursery license issued by the ND Department of Agriculture (NDCC 4-21.1-06).

No person may engage in the business nor act in the capacity of a contractor within this state when the cost, value, or price per job exceeds the sum of two thousand dollars without first having a license. (NDCC43-07-02).

D. Contracted Planting Services.	
Estimated Labor Cost for planting services:	\$
	6B and/or 6C

Community must follow a three-year maintenance requirement. See Supporting Documents.

PROJECT BUDGET ESTIMATES

PROJECT EXPENSES		APPLICANT IN-KIND MATCH A	APPLICANT CASH MATCH B	GRANT FUNDS	TOTAL
Labor	1	Question-2A		NOT ALLOWED	A1+B1=D1
Equipment	2	Question-2B		NOT ALLOWED	A2+B2=D2
Site Preparation	3		Question-3A	Question-3A	A3+B3+C3=D3
Supplies	4	Question-2C	Question-3B	Question-3B	A4+B4+C4=D4
Plant Materials	5		Question-3C	Question-3C	A5+B5+C5=D5
Contracted Planting Services	6		Question-3D	Question-3D	A6+B6+C6=D6
TOTAL	7	Sum A1-A6	Sum B1-B6	Sum C3-C6	Sum D1-D6 = Sum A7+B7+C7

	Total Project Cost	(D7)
	(Grant funds requested may not be mo	ore than maximum allowable grant award.)
	Grant Funds Requested	(C7)
	Applicant's Cash Contribution	(B7)
Budget Summary	Applicant's In-kind Contribution	(A7)

NOTE: - Eligible projects may request up to \$10,000

- 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 from sources other than federal funds, in the form of cash and/or in-kind contributions

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.

Check List

F

ck appropr	iate 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 * 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.							
Propose	ed Projects (original & 8 copies of each of the following)							
a. []	Completed application.							
b. []	Photographs of proposed project site.							
c. []	 Vicinity maps indicating loacation of project; A map identifying project location within the city; and A map of the project location identifying highways, streets and properties. surrounding the project (residential, businesses, schools, etc.). 							
d. []	Project planting or design plan.							
	b. [] b. [] b. [] c. []							

The federal government has adopted the use of DUNS numbers to track how federal grant money is allocated. Failure to provide a DUNS number will result in disqualification of the grant application. (If you do not know your organization's DUNS number, call 1-866-705-5711 or visit the Dun & Bradstreet webpage at http://fedgov.dnb.com/webform/displayHomePage.do.

Please identify your organization's DUNS number:

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.

Print Name Print Title Authorized Signature Date

USDA "In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/ complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov USDA is an equal opportunity provider, employer, and lender.'

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