

# North Dakota Forest Service Community Family Forest Grant Program

# Application Deadline: 30 April 2016

Entit	y:		
Com	munity:		
ël	Name:	Title:	
Primary Contact Person:	Mailing Address:	City:	Zip:
	Day Phone:	Cell:	
2	Email:		
:	Name:	Title:	
Secondary <u>Contact Person:</u>	Mailing Address:	City:	Zip:
	Day Phone:	Cell:	
ŭ	Email:		

## 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/.

Name of NDFS Community Forestry Staff:

Date(s) of Contact:

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

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

### **PROJECT DESCRIPTION**

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

a. What is the project? Include a planting plan or design 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?

# **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.* 

Αςτινιτγ	Volunteer Group's Name (If Applicable)	# OF PEOPLE <b>X</b>	# OF 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.

Αςτινιτγ	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	4A

# Project Cost Cash Expenses

## 3. Cash expenses for your project.

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

Αсτινιτγ	Соѕт	Τοται
TOTAL ESTIMATED COST OF	3B and/or 3C	
TOTAL ESTIMATED COST OF		

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

ITEM PURCHASED	Quantity OF ITEM	Cost Per Item	TOTAL COST OF ITEM
	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 & 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 invasive insects or diseases, it is in the long term interest of our state 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), 11/2" (BR), #5 container, 11/2" Balled and Burlapped (B&B)

SPECIES	Size	NUMBER	Cost Per Tree	TOTAL COST
	5B and/or 5C			

Businesses that sell nursery stock must have a valid nursery licensed 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. (NDCC 43-07-02).

#### D. Contracted Planting Services.

#### 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	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
Plant Materials	5		Question-3C	Question-3C	A+B+C=D
Contracted Planting Services	6		Question-3D	Question-3D	A+B+C=D
Other (please specify)	7			NOT ALLOWED	A+B=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 Contribution (B8)

Applicant's Cash Contribution (B8)

Grant Funds Requested (C8)

(Grant funds requested may not be more than maximum allowable grant award.)

Total Project Cost

(D8)

NOTE:

- Applicant must contact NDFS personnel to coordinate project planning efforts in the course of completing the application.

- At least 20% of the total cost of the project must be contributed by the applicant in the form of cash, services, and/or in-kind contributions.

- Maximum grant award is \$1500; ND Tree City USA communities may apply for a maximum award of \$2000.

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

#### Please check appropriate boxes.

## 1st. Proposed Planting Projects (original and 8 copies of each of the following).

- a. [] Completed application.
- b. [] Photographs of proposed project site.
- c. [] Vicinity maps indicating location 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, business, education, etc. Examples in Supporting Documents.)
- d. [] Project planting design plan. (Examples in Supporting Documents.)

#### 2nd. Required Maintenance.

[ ] The community will meet or exceed the minimum three year maintenance requirements as described in the Supporting Documents.

#### AUTHORIZING SIGNATURE

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

**Print Name** 

Print Title

Authorized Signature

Date

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