

# North Dakota Forest Service America the Beautiful Tree Planting (ATBTP)

## Application Deadline: 30 April 2017

Ent	ty:		
Cor	nmunity:		
Ë	Name:	Title:	
lary Perso	Name: Mailing Address: Day Phone:	City:	_ Zip:
Prim ntact	Day Phone:	Cell:	
C	Email:	-	
, on:	Name:	Title:	
Secondary Contact Person:	Mailing Address:	City:	_ Zip:
Seco ontact	Day Phone:	Cell:	
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#### 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 (supporting documents) with your application.

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?

#### **PROJECT DESCRIPTION**

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 >	( <sub>#OF</sub> = HOURS	TOTAL X	VALUE =	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.

Αςτινιτγ	Equipment <b>used</b>	) # Hours	VALUE = Per Hour	= Total Value
(Copy amoun	t into In-Kind Equipment TOTAL VALU	on Project B	Sudget Estimate.)	

#### 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	

Project Cost Cash Expenses - grant funds and applicant cash-match expenditures3. Cash expenses for your project.

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

Αςτινιτγ	ΤΟΤΑΙ
TOTAL ESTIMATED COST OF SITE PRI	EPARATION

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

ITEM PURCHASED	Qty OF ITEM	Cost Per Item	Total Cost
Τοται			

#### 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)

		X =		
SPECIES	SIZE	NUMBER	Cost Per Tree	TOTAL COST
	TOTAL Number of Trees		TOTAL Cost of Trees	

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).

#### D. Contracted Planting Services.

Estimated Labor Cost for planting services:

6B and/or 6C from PROJECT BUDGET ESTIMATES on pg 7

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

### **PROJECT BUDGET ESTIMATES**

PROJECT EXPENSES		Applicant In-Kind Match	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
TOTAL	7	Sum A1-A7	Sum B1-B7	Sum C3-C7	Sum D1-D7=Sum A8+B8+C8
L		-		1	1

**Budget Summary** 

NOTE:

Applicant's In-Kind Match Contribution (A7)

Applicant's Cash Match Contribution (B8)

Grant Funds Requested (C7)

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

Total Project Cost (D7)

- 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

#### 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 <a href="https://fedgov.dnb.com/webform/displayHomePage.do">https://fedgov.dnb.com/webform/displayHomePage.do</a>.

# Failure to provide a DUNS number will result in disqualification of the grant application. Please identify your organization's nine-digit 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.

Print Name

Print Title

Authorized Signature

Date

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