**NEVADA Off-Highway Vehicles Program**

**Nevada Department of Conservation and Natural Resources**

**Nevada OHV Grant Application**

(Request for grant Applications, Appendix A)

**APPLICATIONS DUE:**

**December 19, 2022 at 5:00 PM, PST**

SUBMIT: ONE FULL COLOR COPY

by MAIL or HAND DELIVERY

(8.5” x 11” only. maps may be 11”x17” no larger)

*and*

ONE single ELECTRONIC FILE; PDF VIA EMAIL NNarkhede@ohv.nv.gov

or memory device enclosed with application

TO: Nevada dept. of conservation and natural resources

OFF-HIGHWAY VEHICLES PROGRAM

ATTN: Nikhil narkhede

901 S. STEWART STREET, SUITE 1003

CARSON CITY, NV 89701

**NEVADA OFF-HIGHWAY VEHICLES PROGRAM**

**GRANT APPLICATION**

**Nevada Commission on Off-Highway Vehicles**

**Nevada Department of Conservation and Natural Resources**

This application has FIVE sections which are all REQUIRED to be filled out in full.

To avoid disqualification, all application areas must be concise and complete; certifications must be signed and dated.

**SECTION I** - **PROJECT AND APPLICANT INFORMATION**

1. Project Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Project Timeline: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Mailing address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**4. Classification of Applicant**: *(check one)*

o Federal o State o County o Local/Municipal o Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

o Partnership o Non-profit o for Profit o Individual

*If the applicant is a corporate or legal entity, proof of good standing in the entity’s state of incorporation is required. NAC 490.1345 (Note: grantees must have the capacity to implement and accomplish proposed project and properly administer awarded funds).*

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Signature Date

**(Chairperson/President/Authorized Official)**

**5. Project Manager:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Mailing address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 **Alternate Contact:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Mailing address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**6. Classification of Land Control: *(check all that apply)***

o Federally managed public land o Private Land o County o City

o Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

o Lease; Attach copy of lease with expiration date.

o R&PP; Attach copy of lease with expiration date.

*If the proposed project is to be carried out on public land, attach any applicable written agreement with any government entity having jurisdiction over that land, including permits, leases, easements, and rights-of-way. NAC 490.135*

**7. Landowner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 Mailing address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**8. THE LANDOWNER MUST PROVIDE A LETTER STATING THAT:**

 (See example Appendix B)

1. Landowner has read the Request for Grant Application package.
2. Landowner agrees with the application and the terms of the grant.
3. Landowner holds an interest in the subject land that is sufficient in scope and authority to allow the applicant to complete the proposed project and operate and maintain the proposed project after its completion.
4. Landowner is legally committing to maintain the trail/facility and will allow public motorized access to such trail/facilities for 25 years or the normal life of the project; and
5. Landowner agrees to provide any match or other tasks in the application that are assigned to Landowner.

**The State may require the landowner/agency to be co-grantee on the grant agreement/contract.**

**9**. **PROJECT COSTS:**

***(grant request and matching funds directly related to the project)***

 State OHV Grant Request: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Matching Funds:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 Total Project Amount : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***What are the sources or Partners for your leveraged (matching) funds?***

o Federal o Private o In-kind o City/County o Other

Please *describe* additional funding source(s):

|  |
| --- |
| Type here:  |

**10. Letters of Support from PARTNERS are required**:

1. Confirming they agree to the terms of the grant; and
2. That they are committed to providing match/cash or other tasks in the application that are assigned to them.

**Additional Letters of Support may be attached at the end of this application** *(limit 3).*

**11. Project Type(s) (NRS 490.069 Sec.2c) check all that apply:**

* Studies or planning for trails and facilities;
	+ Environmental Assessments and Environmental Impact Studies.
	+ Other studies \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Acquisition of land for trails and facilities
* Mapping and signing of trails and facilities
* Reconstruction, enhancement or maintenance of existing trails and facilities
* Construction of new trails and facilities
* Restoration of areas that have been damaged by the use of off-highway vehicles.
* The construction of trail features, trailheads, parking, or other ancillary facilities which minimize impacts to environmentally sensitive areas or important wildlife habitat areas.
* Safety training and education related to the use of off highway vehicles and registration
* Compliance and enforcement (See Appendix C, Enforcement Strategy example)

**12. ALL TRAIL USERS: *(check all that apply)***

 **o** Mountain Biking **o** Hiking/Backpacking **o** Equestrian **o** Single track motorcycle **o** Snowmobiling **o** Snowshoe/ski

 **o** ATV quads **o** Dune buggy **o** UTV Side by side

 **o** Race Course **o** Skills riding course

|  |
| --- |
| Please explain how you intend to manage user interactions: |

**13. Scope of Work:** Please describe *exactly* what work will be completed. Programs, planning, NEPA, surveys, mapping, include miles of trail, trail type and other quantitative goals including a timeline for completing the work. NAC 490.1375. If purchase of equipment is included, please explain where/how it will be housed and maintained

|  |
| --- |
| Type here:  |

**14. Standards/Guidelines that will be applied to your project:**

o Universal Access to Outdoor Recreation - A Design Guide

o USFS Standard Specifications for Construction & Maintenance of Trails

o BLM Handbook 9114-1 Trails

o NOHVCC Handbooks

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**15. Has the applicant received funding from the OHV Program in the past?**

o No o Yes

Number of projects funded: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount of funding Received: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of projects Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION II** – **LOCATION, MAPS, PHOTOS**

**Project Location:**

County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nearest Municipality/Town/City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Center of project: Latitude: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Longitude: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\

**If the shape-files for the trail system are available, please submit them in the e-file. The shape-files of the trail will be required at project end. Program will assist in the collection of the data if needed.**

**Maps are a very important part of the application. They are required AND considered part of the final agreement if funded.**

**Required Maps:** f**or all maps please include a legend, north arrow, scale, and map name. Topographic maps preferred. You may include *additional* aerial/google maps.**

* General location map (showing project area within the state or county)
* Detail map indicating specific project elements (e.g., structures, trail alignment)
	+ Maps larger than 11x17 will not be accepted

**Please attach the following photographs:**

* *At least two* (2) overviews of the project area from different angles and distances. *(Good photographs at trail level and google aerials help the scoring committee to understand the location, depth and breadth of your project.)*

**SECTION III** - **Federal Lands or Other**

**Federal Environmental Compliance**

**A. If Federal funds or Land are a part of the project and NEPA was completed,** indicate which document was produced, and **please attach the decision document to this application:**

* Record of Decision (ROD)
* Finding of No Significant Impact (FONSI)
* Categorical Exclusion (CX)
* SHPO 106 compliance/concurrence letter.
* Other compliance documents already completed. (do not attached the EA or EIS)
* Not applicable

**If NEPA or planning is a part of the project describe the steps in the Scope Section I, #13.**

**SECTION IV** - **BUDGET**

**Proposed Budget**: Provide your budget details to include at a minimum the items in the following table. You may create your own spreadsheet.

* Your budget must align clearly with your scope of work from #13. Be specific, as your application will rate higher.
* Reminder: Include all sources of funds for the completion of the project including federal, in-kind, private/city/county and state funds.
* ***Attach copies of estimates to support your budget and identify what each contract will include.***

***EXAMPLE BUDGET***

|  |  |  |  |
| --- | --- | --- | --- |
| **Item Description** | **OHV Grant Request** | **Other Matching Funds**  | **Total Cost** |
| **Contracts: Environmental studies** |  |  |  |
| **Contracts: design, engineering & construction** |  |  |  |
| **Direct labor costs Salaries, including fringe, actual costs** |  |  |  |
| **Volunteer or donated labor/in-kind** **# Hrs. skilled labor @$27.20/hr. (not required but is important for scoring higher)**  |  |  |  |
| **Purchase or rental of equipment - Specify type of equipment – cost- # of days. *Attach estimate or quote.***  |  |  |  |
| **Materials – Purchase or rental of materials for project** |  |  |  |
| **Travel Costs, Hotel Nights, Per -diem** |  |  |  |
| **Vehicle gas and maintenance standard is now at .58 per mile. Estimate miles.** |  |  |  |
| **Other: be specific** |  |  |  |
| **Totals** |  |  |  |
| **Percentages**  |  |  | **100%** |
|  |  |  |  |
|  |  |  |  |

**SECTION V – PRIORITIES AND SCORING NARRATIVE**

**Grants will be scored based on answers to the Ten (10) criteria listed below. Each criteria carries a weight determined by the OHV Commission, voted upon during the public meeting on 9/7/2021. Please reference scoring criteria form.**

1. **Law Enforcement Strategy that addresses registration enforcement, including Public Education & Outreach aimed at increasing renewals and new registrations:** *How will your project increase the number of OHV registrations on the district. How will the equipment and time be used to increase OHV safety and awareness? Please reference the Law Enforcement Statistics reporting form.*
2. **Enhancement or Maintenance of existing trails and facilities:** *How will maintenance needs be prioritized and how often will your project hold a maintenance/ trails enhancement event? HOW will your project be maintained and WHO has committed to the ongoing maintenance of the facility or trail (note: a minimum of 2 maintenance/ trail events are required per year).*
3. **Training:***Please describe the goals and objectives of your public safety training program.**Is it a nationally recognized certification? What sets your safety training program apart from the others?*
4. **Trail mapping and signing of existing trails and facilities:***If a mapping component is included in the grant, please describe how it will be integrated with the current web mapping application found on OHV.NV.GOV*
5. **Connectivity/Loops:** *How will the project impact connectivity of OHV trails, facilities, and local communities? Please include maps of areas impacted by your project and describe those impacts.*
6. **Planning, Environmental Studies, Conservation:** *Describe how the environmental studies, conservation and/or planning will mitigate resources impacted by OHV recreation. How will your project contribute to the conservation of our natural resources, while enhancing OHV opportunities?*
7. **Access:** *Please describe how your project improves OHV access in the project area. Explain what access/opportunities would be lost or restricted if the project does not occur.*
8. **Partnering and Leverage:** *Who else is involved in this project? Please describe outreach with stakeholders, partners and local governments, that you have communicated with in planning this project.*
9. **Economic Integration:***How will this project improve OHV recreation opportunities that help local, regional, or state economies grow?*
10. **Demand for New Facilities:** *Please provide justification for* ***NEW*** *facility/program development: restrooms, trails, signs, and other amenities*.