

ATV Grant Program

Application Workshop

October 2010

Ron Price

ATV Program Coordinator

Ian Caldwell

Eastside Field Representative

Mike Law

Westside Field Representative

Pamela Berger

Grant Coordinator

John Lane

Safety & Education Coordinator



Welcome to the 2011 ATV Grants Workshop

- **House Keeping**
 - **Restrooms**
 - **Cell Phones**
- **Breaks**
- **Questions welcome anytime**

Workshop Overview

- **Introductions**
- **History of ATV Grant Program**
- **Changes**
- **2011 Meeting Dates**
- **ATV Grant Process**
- **Application Documents Review**
- **Test**
- **Billing Forms Review**



Today's Mission

- **How to submit the best application in a competitive market.**



Introductions

- **Your Name**
- **Agency, club**
- **Have you applied in the past?**
- **Expectations for today?**



Please contact the
All-Terrain Vehicle Program Staff
if you have questions or would like help
with your application

- **Eastside Oregon**
- **Field RepresentativeIan Caldwell**
- **ian.caldwell@state.or.us (541) 410-5512**

- **Westside Oregon**
- **Field Representative.....Mike Law**
- **mike.law@state.or.us (541) 991-1989**

- **ATV Grant Program Coordinator.....Ron Price**
- **ron.price@state.or.us (503) 986-0706**

- **ATV Grant Contracts and Billings.....Pamela Berger**
- **pamela.berger@state.or.us (503) 986-0785**

- **ATV Safety Education Program Coordinator.....John Lane**
- **john.lane@state.or.us (503) 986-0585**

- **Grants Division Manager.....Wayne Rawlins**
- **wayne.rawlins@state.or.us (503) 986-0705**

**ATV Program
Background
&
Funding Sources**

OPRD Grant Programs



**All Terrain
Vehicle Grant
Program**

**Land and Water
Conservation Fund
Grant Program**

**Local
Government
Grant Program**

**County Opportunity
Grant Program**



**Recreational Trails
Program**

ATV Funds

- Money comes from two sources
 - **ATV Permit (\$10)**
 - **Fuel Taxes**
- OPRD distributes \$ to federal, state, local agencies, and to OHV clubs to provide riding areas



ATV Grants Program Budget

- 2011 – 2013 Limitation ... \$9,052,591 (proposed)**
- 2009 – 2011 Limitation ... \$8,490,400**
- 2007 – 2009 Limitation ... \$7,460,800**
- 2005 – 2007 Limitation ... \$6,425,600**
- 2003 – 2005 Limitation ... \$6,275,000**

ATV Advisory Committee Grant Subcommittee (5)

- **ATV Member at Large - Tim Custer (Chair)**
- **Class I - Wade Bryant**
- **Class II - Pat Harris**
- **Class III - Steve Doane**
- **Law Enforcement - Rod Roberts**

- **Duties – Review Grants**

ATV Advisory Committee

Full (12)

- **Class I, II, III, At Large and Law Enforcement**
- **ATV Dealer – Jimmy Smith**
- **USFS – Wendy Zustiak**
- **BLM – Chris Knauf**
- **ODF – Nathan Seable**
- **ODOT – Troy Costales**
- **DHS – Lisa Millet**
- **OPRD – John Lane (non-voting)**

- **Duties – Safety, Vehicle Classifications, Funding**

Program Changes for 2011

- **Continue electronic format**
- **Continue criteria based scoring**
- **Two year agreements**
- **Jan. 11,12 & 13**
 - **Operations & Maintenance**
 - **Law Enforcement grants**
 - **Equipment purchases w/ year end \$**
- **April 6, 7 & 8**
 - **Development**
 - **Planning**
 - **Acquisition**
 - **Safety Education**

Types of Grants

- **Operation and Maintenance**
- **Law Enforcement & First Aid**
- **Safety Education**
- **Planning**
- **Development**
- **Acquisition**

Operation and Maintenance (O&M)

- Normal year to year costs to maintain area
- Grant Cycle: July 1 – June 30
- Scoring criteria
- Normal year to year costs to maintain area Most Grants
 - Staff salaries
 - Vehicle costs
 - Signs and map
 - Facilities maintenance costs
 - Trail maintenance costs
 - Equipment purchase



Law Enforcement / First Aid

- Sheriff Deputies
- USFS/BLM LEOs
- State Police



Law Enforcement / First Aid

- Patrol Time
- Vehicles Costs
- Sometimes equipment



Two Year O&M and Enforcement Grants

- **4-year history**
- **2 year (biennium)**
- **Need pre-approval**
- **Need budget forms for each year**
- **1 agreement for both years**
- **Must report 1st year accomplishment to OPRD in July 2012.**
- **If unforeseen costs arise a new Grant application must be submitted.**



Development

- New trail construction
- Staging area development
- Questions??



Planning

- **Environmental Analysis**
- **Travel Mgt Planning**
- **Activity Level Plans**



Safety Education

- Training



Land Acquisition

- Purchase land
- Easements
- Leases
- Morrow /Grant County
- Coos County
- Lily Prairie
- Sportsmen Park- K Falls
- Mt. Emily

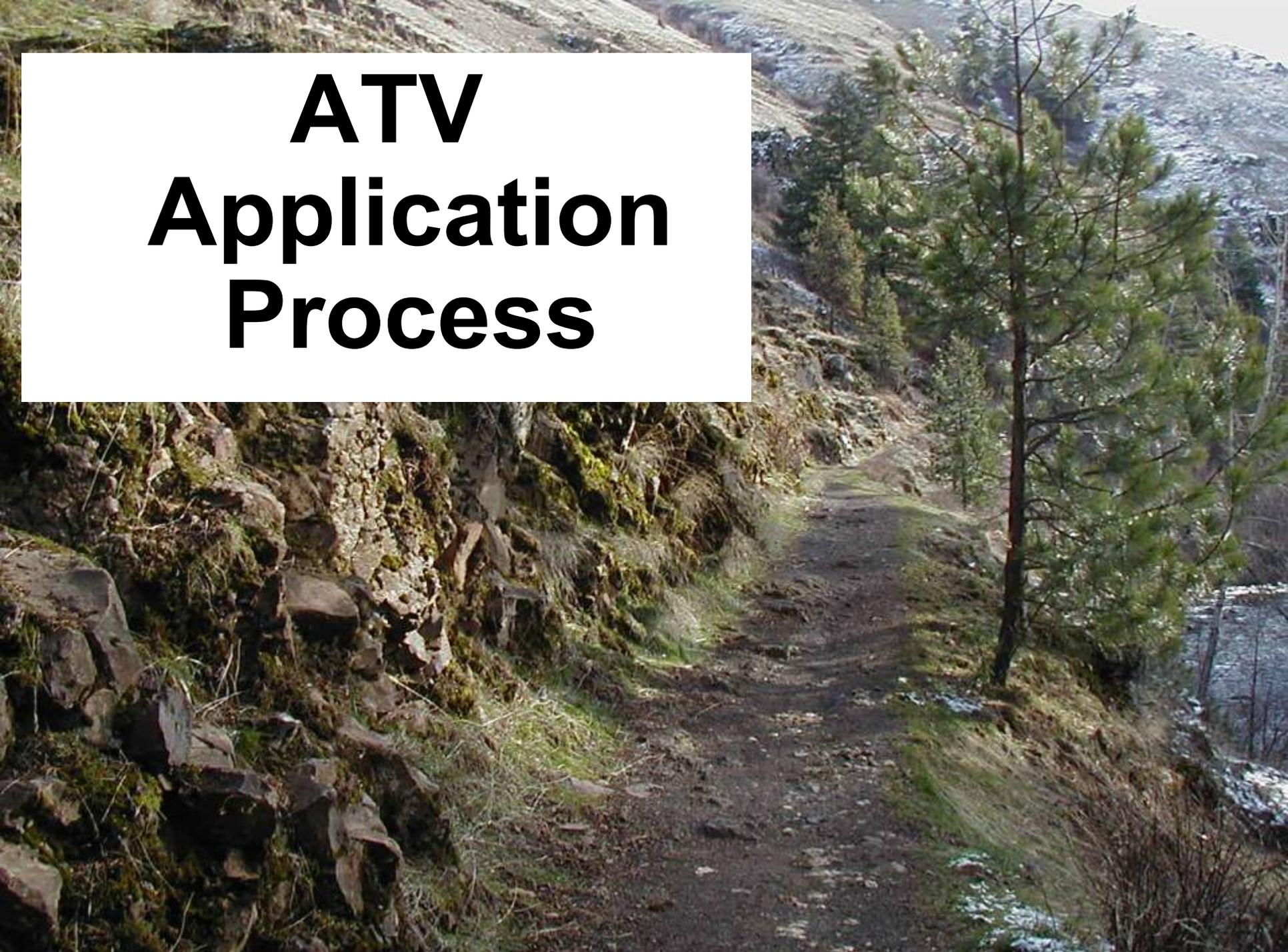


Year End Grants

- **Equipment purchases**
- **Must complete in May and June**
- **No extensions**
- **10 min presentation**
- **Fill out same application forms**
- **Any category**



ATV Application Process



ATV Grant Process

Submit application to State Parks



Before you apply.....

- **Go on-line:**
www.oregonohv.org
- **Check due dates**
- **Review Manual**
- **For Assistance, contact your Field Rep**
- **Letter of Intent - Submit 30 days prior to application deadline**



Submitting Electronically

- **Email to Mike or Ian by 5pm of due date**
 - **No paper applications**
- **Email in original format**
 - **.pdf, exl, .doc**
 - **.jpg**
 - **scan letters**
- **Submit up to 10 pictures**
- **Signature**
- **Committee will read on computers**

2011 ATV Grant Subcommittee Meeting Dates

January 11, 12 & 13

Salem

- Operation and Maintenance
- Law Enforcement
- Year End

CHANGE

April – 6 & 7

- Development
- Planning
- Acquisition
- Safety Education



April 2011 Grant Timelines

- **January 21, 2011** **Letter of intent**
- **February 18, 2011** **Application Due**
- **April 6-7, 2011** **ATV Grant Meeting**
- **May 24, 2011** **Commission Meeting**
- **Spring 2011???** **Final Budget from Legislature**
- **July 1, 2011** **Start Grant**

4 Forms

- **2-page application**
- **Detailed budget worksheet**
- **Source of Funding**
- **Supplemental Questions**

Application Forms

Page 1 of Application

- PDF Format
- State Legislative # and name
- Brief Project Description
- Project term date

SPONSOR INFORMATION			
Sponsor:		Federal Tax Identification Number:	
Address:		Reimbursement Contact:	
City, State, Zip:		Telephone Number:	
District #, State Rep(s) & State Sen(s) for project location: http://www.leg.state.or.us/senate/ http://www.leg.state.or.us/house/		Email:	
		City, State, Zip:	
		County Name(s)-Project location:	
SPONSOR'S AUTHORIZED REPRESENTATIVE AND CONTACT PERSON (S):			
Authorized Representative:		Project Administrator (and/or Project Contact person):	
Title:		Title:	
Telephone Number:		Telephone Number:	
Fax:		Fax:	
Email:		Email:	
PROJECT INFORMATION			
Project Type*: Maintenance - Annual <input type="checkbox"/> Biennial <input type="checkbox"/> Law Enforcement- Annual <input type="checkbox"/> Biennial <input type="checkbox"/>			
Emergency Medical Services: <input type="checkbox"/> Planning <input type="checkbox"/> Development <input type="checkbox"/> Safety Education <input type="checkbox"/> Land Acquisition <input type="checkbox"/>			
<i>*Note: There is one corresponding page in the application for each project type.</i>			
Project Title:			
Brief Project Description/Scope: (Attach Map and full project description if needed)			
Project Term Dates:			
GRANT AMOUNT REQUESTED			
Amount of Grant Funds Requested:	\$0.00		
Amount of Available Match:	\$		
Total Project Cost:	\$		
If you receive grant funding do you have the authorization in place to receive and expend awarded grant funds? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Do you have an emergency or medical assistance plan within the local jurisdiction covering your project site? Yes <input type="checkbox"/> No <input type="checkbox"/>			
What percentage of each Class of ATV will utilize the area?	Class I: %	Class II: %	Class III: %



ATV Grant Program Application 2010



2011 Project Term Dates

Project Term Date *(to put on application)*

1 year grants: July 1, 2011 – June 30, 2012

2 year grants: July 1, 2011 – June 30, 2013

Biennium starts July 1, 2011

Biennium ends June 30, 2013

Match

- **20% match required**
- **Extra points for extra match**
- **Must occur during project term dates**
- **Can use volunteer labor, cash, vehicles, or staff**
- **Prison labor – cost of running crew**
- **Match must be part of the scope of the project**



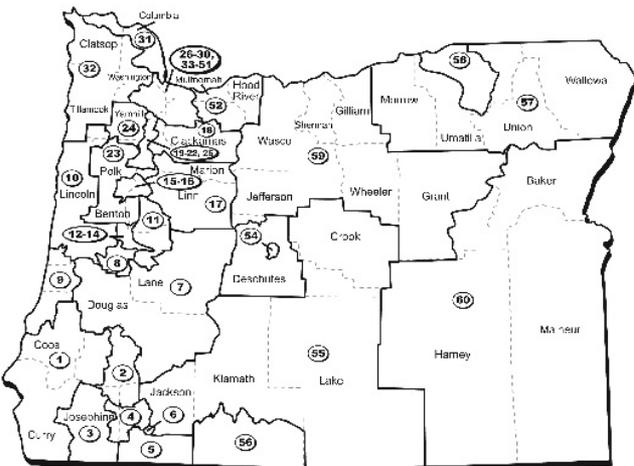
Project Description Examples



- Project Location
- Project Type
- Use of Funds
- Spell out acronyms

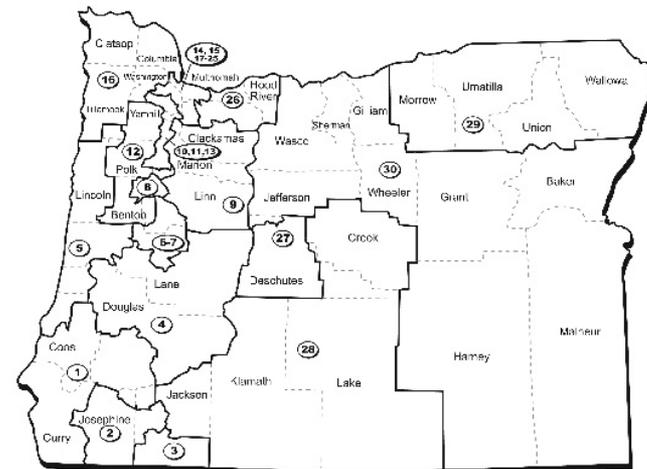
State Legislative Districts

- Need districts included in entire project location
- Need both House and Senate
- Not Washington DC address
- <http://www.leg.state.or.us/house/housedist.pdf>
- <http://www.leg.state.or.us/senate/sendist.pdf>



State of Oregon
House Districts

- | | |
|-------------------------|-------------------------|
| 1 Wayne Krieger (R) | 11 Brad Witt (D) |
| 2 Tim Freeman (R) | 12 Deborah Boone (D) |
| 3 Ron Maurer (R) | 13 Mitch Greenlick (D) |
| 4 Dennis Richardson (R) | 14 Chris Harker (D) |
| 5 Peter Buckley (D) | 15 Larry Galizio (D) |
| 6 Sal Esquivel (R) | 16 Mary Nolan (D) |
| 7 Bruce L Hanna (R) | 17 Scott Braun (R) |
| 8 Paul Holbey (D) | 18 Chris Garrett (D) |
| 9 Arnie Roblan (D) | 19 Bill Kenemer (R) |
| 10 Jean Cowan (D) | 20 Dave Hunt (D) |
| 11 Phil Barnhart (D) | 21 Carolyn Tomei (D) |
| 12 E. Terry Beyer (D) | 22 Jules Bailey (D) |
| 13 Nancy Nathanson (D) | 23 Chip Shields (D) |
| 14 Chris Edwards (D) | 24 Tina Kotek (D) |
| 15 Andy Olson (R) | 25 Michael Dembroff (D) |
| 16 Sara Gelsler (D) | 26 Ben Cannon (D) |
| 17 Sherrie Sprenger (R) | 27 Jefferson Smith (D) |
| 18 Vic Gilliam (R) | 28 Mike Schaeffer (D) |
| 19 Kevin Cameron (R) | 29 Nick Kahl (D) |
| 20 Vicki Berger (R) | 30 Greg Matthews (D) |
| 21 Brian Clem (D) | 31 Brent Barton (D) |
| 22 Betty Komp (D) | 32 Suzanne VanOrman (D) |
| 23 Jim Thompson (R) | 33 Gene Whisman (R) |
| 24 Jim Wendner (R) | 34 Judy Stiegler (D) |
| 25 Kim Thatcher (R) | 35 George Gilman (R) |
| 26 Matt Wingard (R) | 36 Bill Garrard (R) |
| 27 Tobias Read (D) | 37 Greg Smith (R) |
| 28 Jeff Barker (D) | 38 Bob Jenson (R) |
| 29 Chuck Riley (D) | 39 John E. Huffman (R) |
| 30 David Edwards (D) | 40 Cliff Bentz (R) |



State of Oregon
Senate Districts

- | |
|-------------------------------|
| 1 Jeff Kruse (R) |
| 2 Jason Atkinson (R) |
| 3 Alan C. Bates (D) |
| 4 Floyd Prozanski (D) |
| 5 Joanne Verger (D) |
| 6 Bill Morrisette (D) |
| 7 Vicki L. Walker (D) |
| 8 Frank Morse (R) |
| 9 Fred Girod (R) |
| 10 Jackie Winters (R) |
| 11 Peter Courtney (D) |
| 12 Brian Boquist (R) |
| 13 Larry George (R) |
| 14 Mark Hass (D) |
| 15 Bruce Starr (R) |
| 16 Betsy Johnson (D) |
| 17 Suzanne Bonamici (D) |
| 18 Ginny Burdick (D) |
| 19 Richard Devlin (D) |
| 20 Martha Schrader (D) |
| 21 Diane Rosenbaum (D) |
| 22 Margaret Carter (D) |
| 23 Jackie Dingfelder (D) |
| 24 Rod Monroe (D) |
| 25 Laurie Monnes Anderson (D) |
| 26 Rick Meiser (D) |
| 27 Chris Telfer (R) |
| 28 Doug Whitsett (R) |
| 29 David Nelson (R) |
| 30 Ted Hartley (R) |

Application Forms

Page 2 of Application

CHANGE

- Signature
 - Electronic
 - Signed and scanned
 - Signed and mailed
- Land manager signature

Note: Final agreement must have hand written signature mailed to Salem.

LAND MANAGERS CERTIFICATION FOR PRIVATELY OWNED LAND	
Project Sponsor Name: _____ Project Name: _____ As the official responsible for the management of land on which this ATV project is located, I agree that it is the intent for this ATV trail or facility to remain open to the public and we intend to promote and support the ATV user permit program. I further agree to abide by all applicable state and federal laws and regulations.	
_____ (Signature of Land Manager)	_____ (Date)
LAND MANAGERS CERTIFICATION FOR PUBLICLY OWNED LAND	
As the official responsible for the management of land on which this ATV project is located, I agree to the following applicable statement(s):	
<input type="checkbox"/> This project is in compliance with all applicable laws including the National Environmental Policy Act, Americans with Disabilities Act, the Forest and Rangeland Renewable Resources Planning Act, the Federal Land Policy and Management Act, and the Wilderness Act.	
<input type="checkbox"/> The project is in compliance with the appropriate Forest Management Plan or BLM Resource Area Management Plan entitled: _____	
<input type="checkbox"/> A decision has been issued as part of NEPA review process, and a copy of the decision is attached. Dated: _____	
<input type="checkbox"/> If a decision has not been issued, please indicate the date a decision is expected: _____	
<input type="checkbox"/> Law enforcement and emergency medical services are in coordination with land manager and support ATV Program.	
_____ (Signature of Land Manager)	_____ (Date)
_____ (Please print the official's name and title.)	
APPLICANT'S SIGNATURE	
As an authorized representative of _____, I certify that as a condition of receiving ATV Grant Program assistance we will comply with all applicable local, state, and federal laws. This application has been prepared with full knowledge of and in compliance with the Oregon Administrative Rules, Chapter 736, Division 4 for the Distribution of State Funding Assistance to Units of Public and Private Use for All Terrain Vehicles and OPRD's Procedures Manual for the program. I also, certify that to the best of my knowledge, the information contained in this application is true and correct. I will cooperate with OPRD by furnishing any additional information that may be requested in order to execute a State Agreement, should this project receive funding assistance.	
Project Name: _____	
Authorized Representative: _____	
_____ (Signature)	_____ (Date)
_____ (Printed Name & Title of Authorized Representative)	_____ Telephone number
Checklist to assist in Grant Application submission:	
Application:	
<input type="checkbox"/> Federal Tax ID on application?	
<input type="checkbox"/> Signed by land manager, authorized representative?	
<input type="checkbox"/> Billing Contact completed?	
<input type="checkbox"/> Project Term Dates completed?	
<input type="checkbox"/> OHV classes filled out?	
Attachments:	
<input type="checkbox"/> Detailed Budget Worksheet	
<input type="checkbox"/> Source of Funding Worksheet	
<input type="checkbox"/> Supplemental Application by project type	
<input type="checkbox"/> Support Letters	
<input type="checkbox"/> Complete Project Description/Scope	
(If Project information section didn't outline entire project)	

Detailed Budget Worksheet

ATV GRANT DETAILED BUDGET WORKSHEET

Project Sponsor:
 Project Title:
 Project Term Dates:

Type of Item	Unit (describe what unit is)	Unit Cost	Qty.	Subtotal	Match	Grant Request
Labor				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00

Sub-Totals \$0.00 \$0.00 \$0.00

Grant Request Total \$0.00

ATV GRANT DETAILED BUDGET WORKSHEET

Project Sponsor:

Project Title: O&M 2009-2010

Project Term Dates: July 1, 2010-June 30, 2011

Type of Item	Unit (describe what unit is)	Unit Cost	Qty.	Subtotal	Match	Grant Request
Salary	Supervisor/OHV Coordinator/2 workleaders/2 seasonals	\$160.69/day	2276 days	\$365,746.00	\$111,746.00	\$254,000.00
Equipment repair	ATV annual inspections/maintenance/repair	500/each	10	\$5,000.00	\$5,000.00	\$0.00
Signs/ Barricades	open sand signs/fences	\$10,000.00	as needed	\$10,000.00	\$4,000.00	\$6,000.00
Misc Supplies	Hand tools, fasteners, gloves	\$4,000.00	as needed	\$4,000.00	\$1,000.00	\$3,000.00
OHV Crew vehicles	2 trucks annually, 1 truck seasonally	\$6,970.6/each	3	\$20,912.00	\$20,912.00	\$0.00
Sand Rd Maintenance	Heavy Equipment Rental maintain designated routes	\$34,000.00		\$34,000.00	\$0.00	\$34,000.00
Road/Trail signs	signs/posts for OHV designated routes	\$40/each	150	\$6,000.00	\$0.00	\$6,000.00
host support	Propane, uniforms, hepatitis shots	\$26,500.00	as needed	\$26,500.00	\$26,500.00	\$0.00
Dev Rec Crew salary	supervisor/3 Rec Techs/ 1 seasonal	\$256,203.00	1376	\$299,433.00	\$162,856.00	\$136,577.00
Supplies	bathroom shower-cleaning, toilet paper	\$80,000.00	as needed	\$80,000.00	\$80,000.00	\$0.00
Garbage contracts	OHV Developed and Dispersed sites	\$80,000.00	as needed	\$80,000.00	\$80,000.00	\$0.00
Repairs	OHV Developed sites (sinks/toilets/faucets/equipment)	\$40,000.00	as needed	\$40,000.00	\$20,000.00	\$20,000.00
Utilities	OHV campgrounds and staging areas	\$20,000.00	as needed	\$20,000.00	\$20,000.00	\$0.00
Dev Rec vehicles	3 trucks annually, 1 truck seasonally	\$8,664/each	4	\$34,656.00	\$34,656.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00

Sub-Totals

\$1,026,247.00 \$566,670.00 \$459,577.00

Grant Request Total

\$459,577.00

Detailed Budget Worksheet

- **Vehicle costs** Actual rates
- Employee rates Mileage
- Volunteer value % of purchase cost
- Equipment purchases
- Other supplies (maps, signs, hardware)
- Maintenance costs



Detailed Budget Worksheet

- Vehicle costs
 - **Employee rates**
 - Volunteer value
 - Equipment purchases
 - Other supplies (maps, signs, hardware)
 - Maintenance costs
- Estimated rate
- Can include OPE
- Figure COLA, pay raises
- Don't include non-employee costs (dispatch, building, phones)



Detailed Budget Worksheet

- Vehicle costs
- Employee rates
- **Volunteer value**
- Equipment purchases
- Other supplies (maps, signs, hardware)
- Maintenance costs



\$18.37 per hour

Estimate future based on past

Keep volunteer logs



Detailed Budget Worksheet

- Vehicle costs
- Employee rates
- **Volunteer value**
- Equipment purchases
- Other supplies (maps, signs, hardware)
- Maintenance costs

BOLI Rates

Prevailing Wage

Examples:

Trail Maintenance

Labor: \$8.35

Electrician: \$31.47

Independent Sector Rate

\$18.37 per hour

For all labor, one rate

Can only use one method

Detailed Budget Worksheet

- Vehicle costs
- Employee rates
- Volunteer value
- **Equipment purchases**
- Other supplies (maps, signs, hardware)
- Maintenance costs

Use your agency
bidding process

Get a good estimate



Detailed Budget Worksheet

- Vehicle costs
- Employee rates
- Volunteer value
- Equipment purchases
- **Other supplies (maps, signs, hardware)**
- Maintenance costs

Estimate of what you need

Descriptive - General

57 size 2 bolts vs \$500



Detailed Budget Worksheet

- Vehicle costs
- Employee rates
- Volunteer value
- Equipment purchases
- Other supplies (maps, signs, hardware)
- **Maintenance costs**

ATV, SWECO, etc

Need to plan for it

Keep stuff well
maintained



Source of Funding Worksheet

FUNDING REQUEST/SOURCE OF FUNDING WORKSHEET

Use this form to show where all your funds will be coming from.

A. ATV Grant Funding Request: \$ _____

B. Project Sponsor's Match:

Cash Appropriations \$ _____

Cash Donations \$ _____

Donated Equipment \$ _____

Donated Labor \$ _____

Donated Land \$ _____

Donated Materials \$ _____

Donated Property Interests \$ _____

Force Account – Materials \$ _____

Force Account – Equipment \$ _____

Force Account – Labor \$ _____

*Federal Grant - (Name: _____) \$ _____

*State Grant – (Name: _____) \$ _____

*Other Grant – (Name: _____) \$ _____

Penal Labor \$ _____

State Revenue Sharing \$ _____

B. Total Match for Project Sponsor \$ _____

C. TOTAL PROJECT COST (A+B MUST EQUAL C) \$ _____

**Identify the source of your Federal, State, or other Grant Funds you will use for this project:*

Name of Grant:	Agency:
Type of Grant:	Status of Grant Request: ___ Approved ___ Pending
Name of Grant:	Agency:
Type of Grant:	Status of Grant Request: ___ Approved ___ Pending

Supplemental Questions

- **Supplemental Questions**
 - **Separate set of questions for each type of grant**
 - **Points for scoring**
 - **Provide the detail for the grant**
 - **Committee has discretionary points**
 - **Work with Ian and Mike**



Application Package

Things to remember

- **2-page application**
- **Detailed budget worksheet**
- **Source of Funding**
- **Supplemental Questions**
- **Attachments**
 - **Up to 10 letters of support**
 - **Up to 10 pictures**
 - **Maps**

Application Package Submitting

- **Submission Deadline: 5 p.m. to Field Reps via Email**
 - **Max 10 megabytes per email.**
 - **Will get a confirmation email.**

ATV Grant Process

Submit application to State Parks



Review/recommendation by ATV AC



ATV Grant Meeting

- **Schedule based on driving distances**
- **Committee will review grants the prior to the presentations. No comments or input from applicants. Staff can explain.**
- **ATV Grant Presentation**
 - **20 minutes total - presentation and questions**
 - **Displays – Maps, Pictures, PowerPoint**
- **ATV Grant Subcommittee will review, ask questions and score.**
- **Funding recommendations will be made at the end of the meeting.**
- **Staff will contact applicants with the ATV Grant subcommittee recommendations.**

ATV Grant Process

Submit application to State Parks



Review/recommendation by ATV AC



Parks Commission final approval

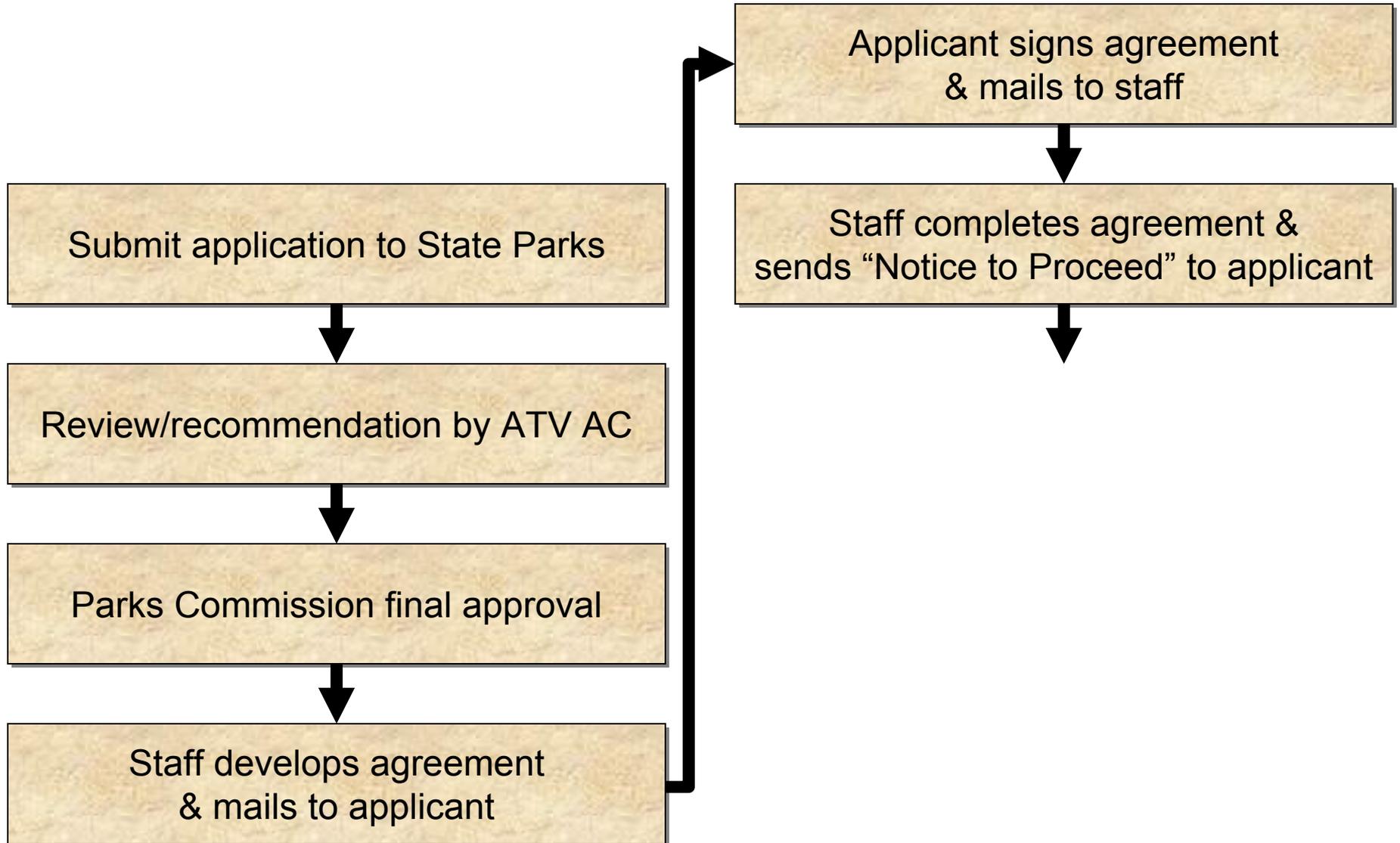


Park Commission Meeting

- OPRD Commission must approve all ATV Grant Applications.
- Make decisions based on ATV Grant Subcommittee recommendation, staff input and public comment.
- Historically, Commission has approved most recommendations.
- Applicants do not need to attend this meeting.



ATV Grant Process



Once you are approved

- **Pam will email you an electronic agreement to Project Administrator**
 - **Mid April for January meeting**
 - **Mid June for April meeting**
- **Print and sign two copies**
- **Mail both copies of signed agreements**
- **You will then receive a “Notice to Proceed” letter & signed agreement**

- **Note: Any expense incurred prior to the date of the “Notice to Proceed” will not be eligible for reimbursement.**

Changes - review



- **Email all documents to Ian/Mike**
- **Submit up to 10 pictures**
- **ATV Committee structure & process**
- **Two year grant agreements**
- **January meeting - O&M and Law Enforcement**
- **Mid term report for 2 year grants**
- **Committee will review on computers**
- **Changes to manual & forms – minor**

Test

1. Submit #_____ paper applications to Salem. **ZERO**
2. Email application to ___ or _____ **IAN OR MIKE**
3. Law Enforcement Grants reviewed in Jan or April? **JANUARY**
4. Letters of Support are...
A. Important
B. Not important **A. IMPORTANT**
5. 2011 Meetings are located in_____ **SALEM**
6. True/False Planning and Development Grants are only going to be review in the April Meeting. **TRUE**
7. Year End Grants will be reviewed in Jan or April? **JANUARY**
8. Starting Jan 1, 2011 everyone under _____ (age) must have their ATV Safety Education Card. **41**
9. Youth under age _____ must get Hands-on Safety Training by 2012. **16**

Bonus Test Question

- **You may begin work on your grant when:**
 - a. **ATV Committee makes recommendation**
 - b. **OPRD Commission approves**
 - c. **You receive your grant agreement**
 - d. **The legislature approves budget**
 - e. **You receive notice to proceed**
 - f. **All the above must occur before starting**

Field Representatives

Communicate with field
reps prior to submitting
grant.

East – Ian Caldwell

541 410-5512

ian.caldwell@state.or.us

West – Mike Law

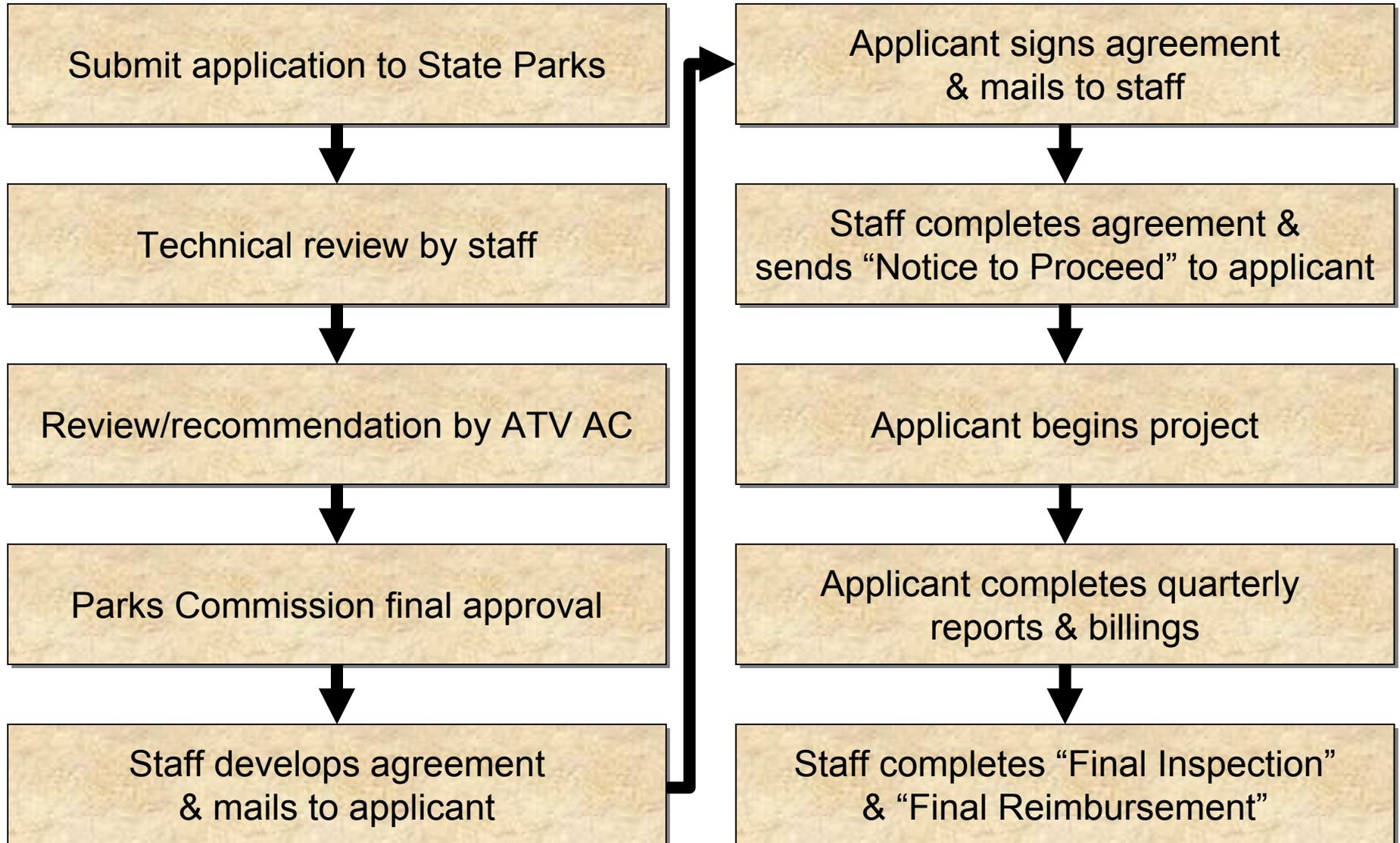
541 991-1989

mike.law@state.or.us



Reimbursement Process

ATV Grant Process



Advance Request Form

- Discuss with Salem prior to submission
- Can only request 25% of grant



ATV Grant Advance Request



DATE: _____

Sponsor Name:	ATV Agreement #:	Billing #:
Project Title:		
Billing Period:	Partial:	Final:

PROJECT / GRANT SUMMARY

a. ATV Grant Amount:	\$
b. ATV Grant Match:	\$
c. ATV Project Total:	\$
d. Hold Back (a x .25)	\$

AMOUNT OF ADVANCE REQUESTED \$ _____
(Limited to a maximum of 25% of the total ATV Grant Amount)

*Note: 25% of the total ATV Grant award will be withheld until completion of the ATV project.

I certify that this billing is correct and is based on actual costs incurred and can be supported with documentation on file with the Sponsor.

I also certify that the work and services which have been performed to date are in accordance with the approved project agreement including amendments thereto, and that this Sponsor has complied with all applicable State and local statutes.

I agree to retain records pertaining to this billing for three years past the project completion date.

I certify that this Sponsor, is not involved in any court litigation or lawsuit wherein it is alleged by private parties of the United States that persons were, on the grounds of race, color or national origin excluded from participation in, denied benefits of, or otherwise subject to discrimination in the programs or facilities of this Sponsor.

Signature of Sponsor's Authorized Representative Title Date

Printed Name of Sponsor's Authorized Representative

Name of Person to Contact for Auditing Purposes Address Telephone No.

Name of Person to Contact for Auditing Purposes Address Telephone No.

Name of Person to Contact for Auditing Purposes Address Telephone No.

For OERD Use Only:

Authorized Payment by:	_____	Date:	_____
Grant:	Phase:	PCA:	A Object: Sub-Object:
Amount of Reimbursement:	_____		

Forms Required Quarterly

- 1. Progress Report**
- 2. Expenditure Form**
- 3. Reimbursement Form w/ receipts**
- 4. Law Enforcement Form**

Reporting Forms Due Dates

Complete:

- Period beginning July 1, ending September 30, report is due **October 31**.
- Period beginning October 1, ending December 31, report is due **January 31**.
- Period beginning January 1, ending March 31, report is due on **April 30**.
- Period beginning April 1, ending June 30, report is due **July 31**.

Progress Report Form



ATV Grant Progress Report



DATE: _____

Sponsor Name: _____	ATV Agreement #: _____	Billing #: _____
Project Title: _____		
Billing Period: _____	Partial: _____	Final: _____

Description of Work Completed:

|

- Discuss work completed, issues
- Need report even if no work completed

Project Problems or Delays

Percentage of Project Completed to Date: _____

Report Completed By: _____
Title: _____

Received by OPRD: _____ Date: _____

Progress Reports are due no less than one per quarter. Progress Reports are required as part of all ATV Agreements.

Expenditures Form



ATV Grant Grant Fund Expenditures



DATE: _____

ATV GRANT FUND EXPENDITURES
ATV Agreement #ATV _____

Salaries and Wages

Employee

	Hourly Rate	Hours	Match	Grant
	\$		\$	\$
	\$		\$	\$
	\$		\$	\$
	\$		\$	\$
	\$		\$	\$
	\$		\$	\$
	\$		\$	\$
Grand Total			\$	\$

Equipment, Materials, and Supplies

	Item	Match	Grant
Equipment		\$	\$
Supplies		\$	\$
Materials		\$	\$
Other		\$	\$
Total		\$	\$

Please attach a copy of your receipts for equipment, materials, and supplies purchased and being purchased shown as match or grant funds.

Reimbursement Form



ATV Grant Reimbursement Request

DATE: _____

Sponsor Name:	ATV Agreement #:	Billing #:
Project Title:		
Billing Period:	Partial:	Final:

PROJECT / GRANT SUMMARY

a. Grant Amount:	\$
b. Grant Match:	\$
c. Project Total:	\$
d. Hold Back (a x .25)	\$

EXPENDITURES:	Costs Incurred This Period	Costs & Advances Billed Previously	Total Costs to Date	Balance of ATV Grant
Salaries and Wages				
Equipment, Materials and Supplies				
Other				
Sub-Totals - Expenditures:				

MATCH VERIFICATION:	Match amount this period	Match period from Previous Periods	Total Match to Date	Balance of Project Match
Salaries and Wages				
Equipment, Materials and Supplies				
Other				
Sub-Total - Match:				

PROJECT TOTAL

(Total Match to date + Total Expenditures to date)

Total Expenditures on Project to Date	\$
---------------------------------------	----

Documentation Supporting Expenditures and Match will be required for every Reimbursement.

I certify that this billing is correct and is based on actual costs incurred and can be supported with documentation on file with the Sponsor.

I also certify that the work and services which have been performed to date are in accordance with the approved project agreement including amendments thereto; and that this Sponsor has complied with all applicable State and local statutes.

I agree to retain records pertaining to this billing for three years past the project completion date.

I certify that this Sponsor, is not involved in any court litigation or lawsuit wherein it is alleged by private parties of the United States that persons were, on the grounds of race, color or natural origin excluded from participation in, denied benefits of, or otherwise subject to discrimination in the programs or facilities of this Sponsor.

Signature: _____ Date: _____

For OPRD Use Only:

Authorized Payment by: _____	Date: _____
Grant: _____ Phase: _____ PCA: _____ A Object: _____	Sub-Owner: _____
Amount of Reimbursement: _____	

Reimbursement Request Form

- **Bill quarterly, when needed, and/or for large purchases**
- **Reimbursement Documentation Required (i.e. receipts, timesheet log)**
- **Return to sender**
 - **Wrong form**
 - **Can't understand**
 - **Unorganized**
 - **Need totals**
 - **Numbers don't match**

Reporting Forms

LEA Monthly Report Form

Reporting

- Complete Monthly
- Turn in Quarterly

Grant Application

- 12 month report January to December

**ATV Safety and Enforcement
Quarterly Report**

Agency: _____ Grant #: _____
Year: _____ Quarter: _____

This report needs to be returned with the quarterly REIMBURSEMENT form to the ATV Grant Coordinator.

1 ATV Related Enforcement Hours

a	<input type="text"/>	Patrol (using agency vehicle)	g	<input type="text"/>	Public education & outreach
b	<input type="text"/>	Patrol (using ATV)	h	<input type="text"/>	Search and Rescue
c	<input type="text"/>	Court	i	<input type="text"/>	Training
d	<input type="text"/>	Administration	j	<input type="text"/>	Travel
e	<input type="text"/>	Maintenance (OHV Equipment)	k	<input type="text"/>	Other
f	<input type="text"/>	Investigations	<input type="text"/>		Total hours for _____ officers

2 ATV Specific Warning/Citations

a	<input type="text"/>	Flag violation	l	<input type="text"/>	Violating posted restrictions
b	<input type="text"/>	Sound violation	m	<input type="text"/>	Youth not wearing approved fastened helmet
c	<input type="text"/>	Lights violation	n	<input type="text"/>	Carrying loaded weapon on ATV
d	<input type="text"/>	Other equipment violation	o	<input type="text"/>	Hunting or harassing animals from ATV
e	<input type="text"/>	No operating permit (sticker)	p	<input type="text"/>	Committing unlawful damage with an ATV
f	<input type="text"/>	No ATV Safety Education Card	q	<input type="text"/>	Dangerous operation of ATV
g	<input type="text"/>	No supervision	r	<input type="text"/>	Permitting dangerous operation of ATV
h	<input type="text"/>	Rider fit (Class I)	s	<input type="text"/>	Class II or III ATV in prohibited snow area
i	<input type="text"/>	No helmet or helmet is unfastened	t	<input type="text"/>	Treble damages for damage to property
j	<input type="text"/>	Operator under age 7 (Class III)	u	<input type="text"/>	Other
k	<input type="text"/>	Operating ATV on highway or railroad	<input type="text"/>		Total ATV specific citations and warnings

3 Motor Vehicle Violations Applied to ATVs

a	<input type="text"/>	Driving under the Influence of Intoxicants	e	<input type="text"/>	Driving uninsured
b	<input type="text"/>	Driving while suspended or revoked	f	<input type="text"/>	Failure to carry proof of insurance
c	<input type="text"/>	Violation of open container law	g	<input type="text"/>	Operating without proper fenders or mudguards
d	<input type="text"/>	Operation with obstructing passenger	h	<input type="text"/>	Other
				<input type="text"/>	Total motor vehicle violations applied to ATVs

4 ATV Related Safety Incidents

a	<input type="text"/>	ATV Related Fatalities	d	<input type="text"/>	ATV Search and Rescue
b	<input type="text"/>	ATV Related Injuries	e	<input type="text"/>	Other
c	<input type="text"/>	ATV Accidents - no injuries	<input type="text"/>		Total safety incidents

5 Miscellaneous ATV Events

a	<input type="text"/>	Public Contacts	c	<input type="text"/>	Other
b	<input type="text"/>	Staging Area/Campground Checks	<input type="text"/>		Total miscellaneous events

6 Please relate any significant events that occurred during this quarter of special interest.

Completed By: _____

AS OF 5/19/2009




Budget Changes

- **Extensions**

- **Written request**

- 30 days before end of grant
 - Justification Email to Pamela
 - Reason
 - Length of time

Only within biennium

- **Changes**

- **Within Scope of Project**

- **Labor vs. Materials**

- **Must have written prior approval from Pamela**

Final Billing

- **Need final billing within 30 days of agreement end date (July 30)**
 - **Plan ahead (fire season; allow time for unforeseen situations)**
- **Final Quarterly Report**
- **10% hold back**
- **Schedule Final Inspection with your Field Rep (Ian or Mike)**
- **Display ATV signs / stickers**

- **Notify OPRD if:**
- **Project Administrator Changes**
- **Billing Address Changes**

Questions???

