**Cheatgrass Challenge Team**

**Cooperative Annual Grass Project Application**

**2022-2023**

Grant funds requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part I – Contact Information**

1. **Applicant:** i.e., the person or organization taking the lead on the project

|  |  |
| --- | --- |
| Name: |       |
| Organization: |       |
| Address: |       |
| City, State, Zip Code: |       |
| Telephone: |       |
| Email: |       |

1. **Fiscal contact:** Individual and/or organization responsible for handling and dispersing award funds

|  |  |
| --- | --- |
| Name: |       |
| Organization: |       |
| Address: |       |
| City, State, Zip Code: |       |
| Telephone: |       |
| Email: |       |

1. **Other contacts:** If needed, include any special contact information, or additional contacts

|  |  |
| --- | --- |
| Landowner: |       |
| Project manager: |       |
| Technical contacts: |       |

**Part II – Project Overview**

1. **Project location:** Include a shapefile or pin with application.

|  |  |
| --- | --- |
| Single/Multiple Sites: |  |
| County: |       |
| Sage-grouse Conservation Area: |  |
| Sage-grouse Habitat Mgmt. Area: |   |
| Ownership: *select multiple if applicable, for federal specify (e.g. BLM, USFS, etc.)* | [ ]  Private [ ]  State [ ]  Federal [ ]  Tribal  | For federal specify:  |

1. **Narrative:** Where is your project located? How does it fit in with the larger landscape? What other actions are occurring that your project complements? Is your project associated with regional, state, and local plans? What partners are involved and how are they involved? Explain current conditions on the site, describe what the site is like before the project.

|  |
| --- |
|       |

1. **Issue:** How does your project meet the criteria for Cheatgrass Challenge? What factors have been identified and will be addressed?

|  |
| --- |
|       |

1. **Solution:** How will the problem/conditions be addressed? What are the objectives, methods used, total acres treated, amount/type of project treatments installed, etc. The objectives should be measureable. How will the project benefit resistance and resilience to annual grass invasion

|  |
| --- |
|       |

1. **Project Timeline (Project funds awarded must be utilized 2 years + December**. I.e. funds awarded in July 2021would expire in December 2023**) OPTIONAL: Include provided treatment scheduling timeline (excel format).**

Start date: mm/dd/yyyy End Date: mm/dd/yyyy

What is the proposed project schedule? Elaborate below on each step of your project.

|  |
| --- |
|       |

1. **Permits**

|  |  |
| --- | --- |
| Are permits needed for the project?  |  |
| Will they be completed in time?  |  |
| List what permits are needed: |       |

1. **NEPA**

|  |  |
| --- | --- |
| Is NEPA needed for this project?  |  |
| Has NEPA been completed?  | If Yes, list document name & POC. |

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

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

1. **Maintenance:** Who will maintain the project, what aspects need to be maintained in the future and for how long?

|  |  |  |
| --- | --- | --- |
| Who will maintain: | How the project be maintained: | Duration of maintenance: |
|       |       |       |
|       |       |       |

1. **Post-Implementation Monitoring:** Provide additional information on how the project will be monitored to show effectiveness.

|  |  |  |
| --- | --- | --- |
| Who will monitor: | How will the project be monitored: *photo points, line point, etc.* What variables are you monitoring for: *i.e. invasive/noxious species establishing/returning, , seeding establishment/survival, etc.)* | Duration of monitoring: |
|       |       |       |
|       |       |       |

1. **Year End Reports: Who is responsible for submitting yearly reports? (Due Dec. 31 each year of project)**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Technical Assistance:** Who will provide technical assistance to the project? Who will plan/design the project?

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Preferred Funding Source:** There are multiple funding sources available (see table in 13. for examples). Please **clearly** indicate whether you would like this application to be considered under a specific funder, or whether you have no preference.

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

1. **Project Partners:** Show all anticipated and requested funding sources and indicate the dollar value for cash or in-kind (labor, equipment, fuel, materials, etc.) **Some funding sources require match – please include any financial or in-kind contributions from landowners! Use the box provided below to explain what has been committed (i.e.from landowners) and what is being requested (i.e. from Cheatgrass Challenge Team).**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Funding Source:** *partner and contribution* | **Cash** | **In-Kind** | **Total** | **Match funding secured?** *Yes/No* |
| Cheatgrass Challenge Team | $      | $      | $      |  |
| NRCS | $      | $      | $      |  |
| IDFG | $      | $      | $      |  |
| USFWS | $      | $      | $      |  |
| Landowners | $      | $      | $      |  |
| Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $      | $      | $      |  |
| Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $      | $      | $      |  |
| **Total estimated funds:** *add all amounts in far-right column* | $      |  |

**Explain:** What project component/s will each source fund?

|  |
| --- |
|       |

**14. Maps**

Include the following 3 maps with the application.

1. A map containing the project area (outlined clearly) with the most recent RAP annual grass layer
2. A map containing the project area (outlined clearly) with land ownerships clearly depicted
3. A third map depicting fence lines/management units (pastures/allotments) would be extremely helpful.  This can be incorporated into the 2nd map if clear and legible. See note below.

**ALL Maps** should be of a scope large enough to display a nearby community and/or major road (State Highway at a minimum), for spatial reference.

Additional data is welcome (IDFG migratory areas, GRSG habitat, etc) but should be included on additional maps in order to minimize “stacking” layers.

Additionally, as the application states, whenever possible, applicants should include an ArcGIS or Google Earth shapefile of the project area.

**Part III – Project Budget (Use whole numbers, do not include cents)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Expense Category** | **No. of units** | **Unit Cost** | **Cheatgrass Challenge Funds** | **Cost Share:** *In-Kind/Cash (match)* | **Description**: *what will be purchased or done, who will provide the item/perform work* |
| **Contracted Services:** *labor, supplies, materials and travel to be provided by non-staff for project information.* |
|       |       | $      | $      | $      |       |
|       |       | $      | $      | $      |       |
|       |       | $      | $      | $      |       |
|       |       | $      | $      | $      |       |
|       |       | $      | $      | $      |       |
|       |       | $      | $      | $      |       |
|       |       | $      | $      | $      |       |
|       |       | $      | $      | $      |       |
|       |       | $      | $      | $      |       |
|       |       | $      | $      | $      |       |
|       |       | $      | $      | $      |       |
|       |       | $      | $      | $      |       |
| **Subtotal (1)** | $      | $      |  |
| **Materials and Supplies:** *refers to items that are purchased by or invoiced to the applicant, and are “used up” in the course of the project. Costs to the Actions Team must be directly related to the implementation of this grant.* |
|  |  | $      | $      | $      |       |
|  |  | $      | $      | $      |       |
|  |  | $      | $      | $      |       |
|  |  | $      | $      | $      |       |
|  |  | $      | $      | $      |       |
|  |  | $      | $      | $      |       |
|  |  | $      | $      | $      |       |
|  |  | $      | $      | $      |       |
| **Subtotal (2)** | $      | $      |  |
| **Other:** *land use signature costs, project permit costs, small equipment repair, commercial equipment rental.*  |
|  |  | $      | $      | $      |       |
|  |  | $      | $      | $      |       |
| **Subtotal (3)** | $      | $      |  |
| **Modified Total Direct Cost (MTDC)***Add subtotals 1-3* | $      | $      |  |
| **Grant Administration:** *not to exceed 10% of MTDC.*  |
| **Grant Administration** | $      | $      |  |
| **Project totals** | $      | $      |  |

We, the undersigned, attest that to the best of our knowledge the information contained in this application is accurate and:

• The project funds awarded will be utilized Dec 1 two years after award (i.e. project awarded July 1 2021 would close Dec 1 2023.

• We understand that the submitted application is a matter of public record.

Also, should funding for this project be awarded we understand that:

• We may not incur any project expenses until all designated signatories have signed the OSC grant agreement.

• We will be required to provide proper accounting of project expenses.

• We will be required to provide the necessary and normal maintenance to sustain the value of the project once it is completed.

By their signatures, the landowner(s) attest that they are authorized to sign as landowner, and they agree to provide, upon prior request and at a mutually acceptable time, site access to the applicant or representatives of the Cheatgrass Challenge for a period up to two years following project completion to allow project work to be implemented, monitored and maintained.

Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date: \_\_\_\_\_\_\_\_\_\_\_

Landowner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date: \_\_\_\_\_\_\_\_\_\_\_

Landowner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date: \_\_\_\_\_\_\_\_\_\_\_

Landowner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date: \_\_\_\_\_\_\_\_\_\_\_

Landowner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date: \_\_\_\_\_\_\_\_\_\_\_

Landowner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date: \_\_\_\_\_\_\_\_\_\_\_

Landowner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date: \_\_\_\_\_\_\_\_\_\_\_

Landowner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date: \_\_\_\_\_\_\_\_\_\_\_

Supporting Agency Representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date: \_\_\_\_\_\_\_\_\_\_\_

Supporting Agency Representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date: \_\_\_\_\_\_\_\_\_\_\_

Supporting Agency Representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date: \_\_\_\_\_\_\_\_\_\_\_

Fiscal agent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date: \_\_\_\_\_\_\_\_\_\_\_

**Project checklist:**

☐ All maps and photos are attached to the application (required)

☐ Include a project shapefile or location pin for each project feature (required)

☐ Site drawings/diagrams/designs are included in the application submission (if applicable)

☐ Landowner, applicant, and fiscal agent have signed the grant application (required)