INSTRUCTIONS FOR THE FEDERAL RECREATION TRAILS PROGRAM (RTP) NON-MOTORIZED TRAIL GRANTS

ELIGIBLE PROJECTS AND ITEMS

Listed below are the types of projects eligible for the Federal Recreational Trails Program grant:

- Maintenance and restoration of existing trails,
- o Development and rehabilitation of trailside and trailhead facilities,
- Trail connectivity,
- o Purchase and lease of trail construction and maintenance equipment,
- o Construction of new trails (with restrictions for new trails on Federal lands),
- Acquisition of property for trails/trailheads, and
- Development and dissemination of publications and operation of educational programs to promote safety and environmental protection related to trails (including supporting non-law enforcement trail safety and trail use monitoring patrol programs, and providing trail-related training) (limited to 5 percent of a State's funds).

RTP funding MAY NOT BE used for non-trail related activities such as:

- Development of campgrounds,
- Purchase of picnic tables or fencing,
- Landscaping,
- Irrigation system development,
- o Law enforcement or similar patrols and
- o Trail planning and trail master plans.

TRAILS CONSTRUCTION GUIDELINES

See the Trails Construction Guidelines, http://static.stateparks.utah.gov/docs/trailguidelines.pdf. The guidelines provided are very general and the applicant will need to work with local land managers to understand the specific factors that may affect trail design and construction techniques in any given locale. All proposed projects shall follow these guidelines.

THE PROCESS

In preparation for submitting an application, project proponents are encouraged to contact Chris Haller, (801) 349-0487 chrishaller@utah.gov for guidance and to discuss project details. Chris Haller is the Offhighway Vehicle Coordinator and is also administering the Recreation Trails Program grants.

Submitted applications will be reviewed by either the Utah Off-Highway Vehicle Advisory Council or Utah Recreational Trails Advisory Council. These councils were created by legislation and have been vested with the authority to select the recipients of the federal Recreational Trails Program grants.

TIMELINE

Applications must be in the Utah Division of Parks and Recreation Salt Lake Office on or before 5 PM, Wednesday May 1, 2019. Late applications **will not** be accepted.

Please submit trail applications to:

RACHEL TOKER
UTAH DIVISION OF PARKS AND RECREATION
1594 West North Temple Suite 116
PO Box 146001
Salt Lake City UT 84114-6001

Applications will be reviewed during the months of May and June. Approvals are expected to be made sometime in July. Applicants may be contacted to clarify the details and merits of their proposal. Applicants may also be contacted to arrange on-site tours of the project for Advisory Council members.

APPLICATION INSTRUCTIONS

One completed and signed, hard copy application must be submitted via US Postal Service, FedEx, UPS, etc. or hand delivered.

All items listed below under "Application Checklist" must be included in order to be considered for grant funding.

All responses must be provided in space allocated.

Text of responses should be in 11-point Arial font.

Drawings and charts on 8 ½ " X 11 " document, in either portrait or landscape orientation.

APPLICATION CHECKLIST

Ш	COMPLETED AND SIGNED APPLICATION
	MAP of the project for which funding is being requested
	MAP showing location of proposed project in Utah
	PROOF OF RIGHT-OF-WAY where applicable
	PROJECT SCHEDULE/TIMELINE
	DETAILED PROJECT BUDGET
	LETTERS OF SUPPORT
	FUNDING COMMITMENT LETTERS FROM OTHER FUNDING ENTITIES
	PHOTOGRAPHS OF PROPOSED PROJECT

FUNDING CAP

Due to the overall level of funding available for grant awards, applicants are requested to limit their total request to no more than \$100,000.



Section A: Project Overview

UTAH DIVISION OF PARK AND RECREATION FEDERAL HIGHWAY ADMINISTRATION RECREATIONAL TRAILS PROGRAM GRANT



NON-MOTORIZED TRAIL APPLICATION

A1.	Project Title:					-
A2.	Project Sponsor:					_
A3.	Location (Nearest Town):					_
A4.	County:	A	5. Congression	al District (che	ck one): 1□	2□ 3□ 4□
A6.	Project Manager:					-
	Secondary Project Manager:				_	_
A7.	Address:					_
A8.	Telephone:	A9.	E-mail:			_
A10.	Amount of fiscal assistance required (Up to 50% of total project co		\$		round up to ne	arest dollar)
A11.	Total estimated project costs (If awarded funds, the project sp reimbursement. Federal project sources.)	onsor is res	ponsible for 10	0% of project of		,
A12. P	roject Land Is Owned or Contro	olled By (C	theck one or m	ore):		
	☐ City ☐ County ☐	State	☐ Federal	☐ Private		
for use	is owned by other than applicant e of land; or a letter from the land nd will execute the appropriate le	owner spec	ifying that the	landowner will		
F	Fee Title Purchase	☐ Yes	□ No			
٦	rail Easement	☐ Yes	□ No			
1	NEPA Completed (If Required)	☐ Yes	□ No			
	sion from land managing agency ovide documentation.	to complete	e work	□Yes	□No	
413. Is	Public Access Guaranteed? ☐	Yes	□ No			

If applying for both a NON MOTORIZED RTP fund and MOTORIZED RTP fund, separate applications are required.

CERTIFICATION:

I certify that I am authorized to sign this application and that the information herein provided is, to the best of my knowledge, true and accurate. I further certify that the applicant has the necessary financial resources to fulfill all obligations relative to this project including the cost of operation and maintenance. I further certify that this application is submitted by an official action of the governing board of the applicant agency.				
Signature of Authorized Agent	Title	Date		
Signature of Secondary Project Manager	Title	Date		

Section B: Project Description

B1.	In the space provided, provide project description. Specify what is to be built. If it is a trail, does the project provide physical connections between resources; does it link existing community or regional trails; does it enhance access to recreational opportunities and/or enable residents to use non-motorized means for exercise or recreation? If it is a facility, specify exactly what is to be built. Address current and projected use of trail or facility by providing visitor statistics, traffic counts, usage numbers, or similar data for the area.
Attac Utah.	h one map of the proposed project and one map of the proposed project's location within the State of

B2.	Is Project Pursuant to a Current Maste (If yes, give title and date of pertinent pla plan in the space below. Please do not a	n or assessment and refer to the trail's applicability to the
B3.	PROPERTY ACQUISITION: Please write a description of the land's ac	quisition status in the space below.
B4.	Is This Project A Phased Project?	☐ Yes ☐ No
Anticipated Project Start Date:E		Estimated Completion Date:
Includ	de a copy of the proposed project schedule	timeline.

Section C: Project Budget and Funding

C1. DETAILED PROJECT BUDGET:

Your budget must include source of project funds and when the funds will be available. Show sponsor cash, labor and equipment and any donor contributions such as property, cash, labor or equipment. Project expenses should be broken down by category, item, and quantity. Specify items covered by **your** match along with what the RTP match will cover. MOBILIZATION AND ENGINEERING COSTS SHOULD BE EXCLUDED FROM YOUR BUDGET.

PLEASE NOTE: Budget allowances for contingencies will not be funded by this program and cannot be included as part of the 50/50 match.

This is a critical component of the application. The more detailed the better. Total project costs must correlate with item number A10 and A11 on page three of the application.

RECREATIONAL TRAILS PROGRAM GRANT - BUDGET TEMPLATE

PROJECT TITLE:		
FY/_		
DESCRIPTION	REQUESTED RTP	MATCH / IN-KIND
TOTALS		
TOTAL PROJECT COSTS		

ESTMATED ANNUAL OPERATION AND I	MAINTENANCE COSTS OF THE PROJECT
\$	
Who will be responsible for maintenance? _	
	7

C2.	FUNDING SECURED: Please describe in detail the status of the funding sources and how the funds will be leveraged with other sources. Please identify if other sources are from Private, Municipal, State, or Federal sources.			
Sec	tion D: Project Details			
D1.	Will This Project Replace or Enha	nce Any Existing Dev	veloped Recreation Site? ☐ Yes ☐ No	
D2.	TRAIL USES: Trail uses allowed (check all that app	oly):		
	☐ Jogging/Hiking	☐ Road Bicycling	☐ Mountain Biking	
	☐ Horseback Riding	☐ Snow Biking	☐ Nordic Skiing (Cross Country)	
	☐ Snow Shoeing	☐ Other:		
	Season(s) trail can be used:	pring □ Summer □ Ⅰ	Fall Winter	
D3.	ADA Accessible? ☐ Yes ☐ Note of the If yes, refer to www.ada.gov)		
D4.	TRAIL CONSTRUCTION: (check a New and rehabilitated/relocated trai guidelines to serve the purpose for conditions.	ls funded under this p	rogram shall meet trail construction	
	☐ New Trail	Tread Width	Trail Length	
	☐ Trail Rehabilitation/Relocation	Tread Width	Trail Length	
	Trail Surface Material (Describe):		_	
	☐ Overpass/Underpass		Length o Trail Surface	
	☐ River/Stream Crossing	☐ New Bridge	Width Length	
	☐ Purchase of Hand Tools			

☐ Purchase of Mechanized Equipment (Describe):					
	Describe Other Trail Improvement(s):				
	Describe Other Trail Features/Difficul features, etc.):				
D5.	TRAIL HEAD FACILITIES:				
	☐ New Trail Head	☐ Reconstruction	☐ Trail Head Improvement(s)		
	☐ Parking Stalls #	☐ New Restroom (mus	st be ADA accessible)		
	☐ Kiosk	☐ Signage			
	Surface Material (Describe):				
	Will Trailhead be Plowed in Winter?	□ Yes	□ No		
D6.	TRAIL SIDE FACILITIES:				
	☐ Warming Hut	☐ Yurt	☐ Shelter		
	☐ Restroom	☐ Benches	☐ Kiosk		
	☐ Bike Rack(s)	☐ Hitching Rail(s)	☐ Corral		
	☐ Maintenance Station ☐ Oth	er:			
D7.	TRAIL SIGNING:				
	☐ Route Marking	☐ Informational	☐ Interpretive		
	☐ Regulatory				
	(Describe):				
D8.	TRAIL INFORMATION:				
	Is a Brochure/Map Part of the Funding	g Request? ☐ Yes	□ No		
D9.	TRAIL MAINTENANCE: 1. <u>Travel Routes</u>				
	Trail/Route Name(s) and Length(s)	:			

	ork to be Done: (Check all that apepair or replacement of:	opiy):
	Trail Tread / Route Surface	(Feet or Miles)
	Brush Back Vegetation	(Feet or Miles)
	Stream Crossing(s)	(Number)
	Wet Area Crossing(s)	(Number)
	Bridge(s)	(Number)
	Water Diversion Structure(s)	(Number)
	Culvert(s)	(Number)
	Cattle Guard(s)	(Number)
	Fence	(Feet)
	Gate(s)	(Number)
	Switchback Repair	(Number)
	Disturbed Area Rehabilitation	(Sq. or Linear Feet)
	Sign(s)	(Number)
	Clearing of Obstruction(s) (Logs, rocks, etc.)	(Miles)
	Replacement or Repair of Trail Blazes, Markers & Cairns	(Number)
	Replacement or Repair of Berms, Jumps, Ramps, etc	(Number)
	Back Slope Grooming	(Feet or Miles)
	Retaining Walls	(Feet)
	Other:	
2. <u>Tr</u>	rail Heads	
Tr	ail Head Name(s):	
3. <u>W</u>	ork to Be Done: (Check all that	apply):
	Parking Surface Repair	(Sq. Feet)
	Parking Barriers	(Number)
	Restroom	(Number)
	Signs	(Number)
	Loading Ramps	(Number)

	□ Other:
	DETAILED DESCRIPTIONS OF ITEMS CHECKED ABOVE: (Give specific measurements and details of work to be to be accomplished under "Project Description" above. Describe methods to be used; i.e. hand vs mechanical.)
Se	ction E: Project Education Elements
E1.	EDUCATIONAL PROGRAMS TO PROMOTE TRAIL SAFETY AND ENVIRONMENTAL PROTECTION
	☐ Development and operation of trail safety education program(s)
	☐ Development and operation of trails-related environment education program(s)
	\square Production of trail-related educational material(s) (informational displays, in print, video, audio, interactive computer displays, etc.)
	DETAILED DESCRIPTION OF ITEMS CHECKED: (Give details of problem(s) to be addressed, message(s) curriculum(s), method(s) of delivery, etc., under "Project Description" above.)
	ction F: Project Partnerships
F1.	GIVE EVIDENCE OF PUBLIC SUPPORT FOR YOUR TRAIL PROJECT. In the space below address: (1) how the project is part of a comprehensive plan and/or part of an overall trail network and describe its community, regional, statewide or national significance; how the community has been engaged regarding the project in the form of public meetings/open houses/online engagement (2) volunteer or private sector contributions to the project; (3) support from other groups; cooperation and support among adjoining and/or other affected jurisdictions for your project (such as city to city, city to county, city/county with the Forest Service, BLM, National Park Service, etc.)

F2 .	PAST EXPERIENCE:			
	Has your organization received RTP funding in the past? \square Yes \square No			
_	If yes, provide list of projects funded within the past 5 years and dollar amounts. For each project, specify whether complete or not complete.			
F3.	3. LETTERS OF SUPPORT:			
	Please attach no fewer than two (2) and no more than five (5) letters of support for the specific project for which funding is being requested. These should include a letter from each of the partners; other than the project sponsor.			
Se	ction G: Other			
G1.	NONPROFIT ORGANIZATION:			
	If so; provide nonprofit 501(c)(3) status; most recent by-laws; approved board meeting minutes for which funding is supported; and supporting financial documentation.			