

CPL Grant Program Ecological Restoration and Management Plan

ALL PROJECTS

Contract/PO #:	
Organization Name:	
Name of Project:	
FY of Grant Awarded:	
Contact Name:	
Contact Phone:	Ext:

Please choose the correct response to the below statements as it relates to your above project.

- 1) MCC was given consideration to and timely written contact was made with the Minnesota Conservation Corps for consideration of possible use of their services to contract for restoration and enhancement services.
 Yes No, explain

- 2) This project is on land permanently protected by conservation easement or public ownership.
 Yes No, explain

- 3) Is this project consistent with the highest quality conservation and ecological goals for this site?
 Yes No, explain

- 4) Is the best available science being used to achieve long-term success and durability?
 Yes No, explain

- 5) Has consideration been given to soil, geology, topography and other relevant factors that would provide the best chance of long term success of this site?
 Yes No, explain

6) Implementation Timetable:

Activity	Timeline	Describe specific work activities
	Year	
	Year	
	Year	
	Year	
	Year	
	Year	
	Year	

7) Identify Long Term Maintenance and Management Needs, Source(s) of Funding:

Need	Timeframe	Financial source

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8) **FOR ACQUISITIONS ONLY:** Is this project for fee-title acquisition or for an easement acquisition?

Fee-title Acquisition Permanent Easement Acquisition

9) **FOR ACQUISITIONS ONLY:** Will this property (easement or fee-title) be held by or transferred to a public agency?

Yes No

If yes, complete the table below as an "analysis of increased operations and maintenance costs likely to be incurred by public entities as a result of the acquisition". Use the best estimates possible.

Additional work required by acquisition	Operations costs	Maintenance costs	Funding source

I certify that the information provided above is accurate and that I am authorized by the above organization to submit this report. If this information should change at any time during the grant period, I will notify CPL grant staff immediately.

Name:

Title:

Please submit this form within 30 days of work beginning on the above project or with the first request for payment. You may email this form or print and mail to CPL grant staff.

LSCPLGrants.DNR@state.mn.us or

CPL Grant Program

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