DEPARTMENT OF NATURAL RESOURCES

2026 Invasive Aquatic Plant Management Grant Application

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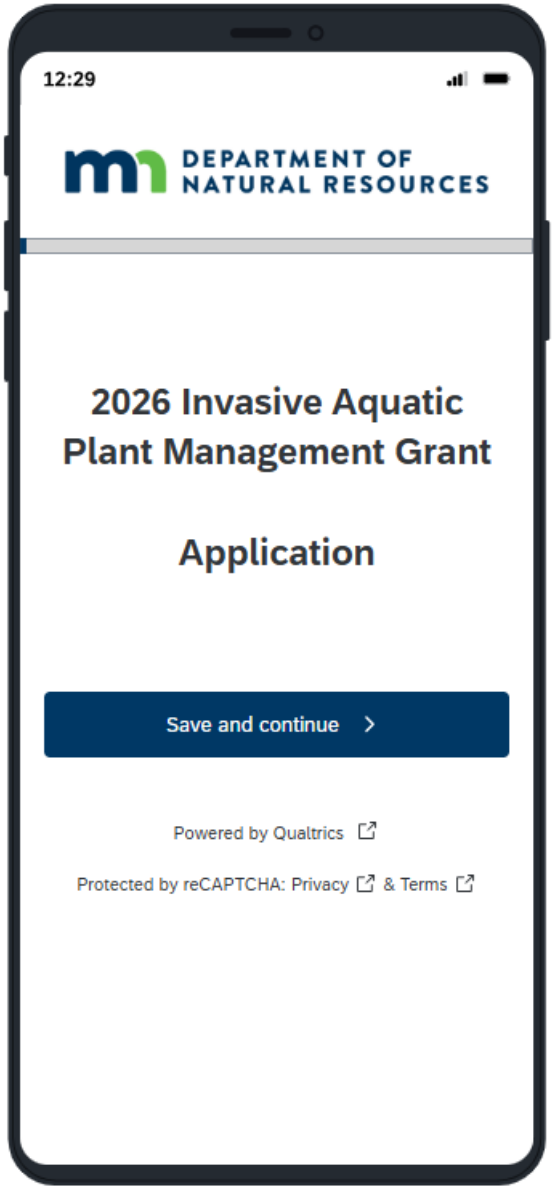

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This Application will occur entirely within your Internet browser. If you click on a link, you will be directed to a new tab. Your application will remain open in the original tab, but you will need to navigate back to this original tab. For those completing this application on a mobile device, you may wish to review how to navigate between multiple tabs within your browser app.

Each time you click "Save and continue" at the bottom of a page, your responses are saved. **If you close the survey and later reopen it in the same browser, the survey will start where you left off.**

For an alternate way to complete the application, please contact Angelique Dahlberg, Aquatic Invasive Species Research and Grants Coordinator.

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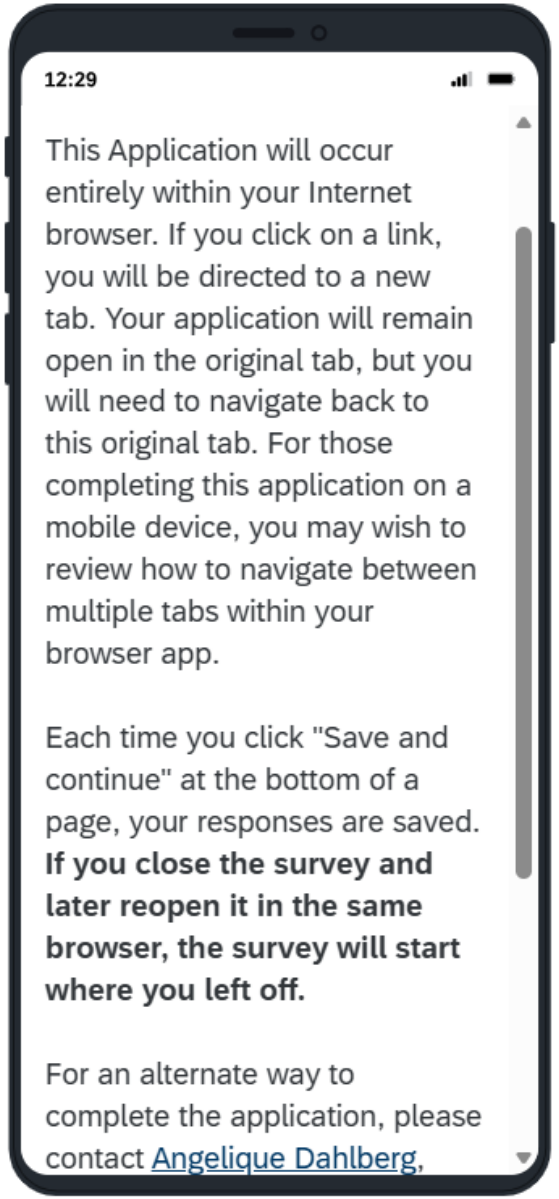

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Overview

The Minnesota Department of Natural Resources (DNR) has made up to $1,060,000 available to Tribal governments and local entities such as lake associations, watershed districts, cities, and counties for the management of curly-leaf pondweed, Eurasian watermilfoil, flowering rush, and/or starry stonewort.

Funding is for reimbursement of expenses incurred while conducting local aquatic invasive species (AIS) management projects under IAPM permits. Small-scale grants will be offered for IAPM of curly-leaf pondweed, Eurasian watermilfoil, flowering rush, and starry stonewort, with highest priority placed on starry stonewort management. Population-scale grants will be offered for IAPM of entire populations of Eurasian watermilfoil within lakes.

Additional information on funding availability, the review process, the award process, work plan requirements, reimbursable expenses, and resources for applicants is available on our main IAPM Grant website: 2026 Invasive Aquatic Plant Management Grant Program. **Please be sure to read the entire Request for Proposals before completing an application, as details have changed since recent years.**

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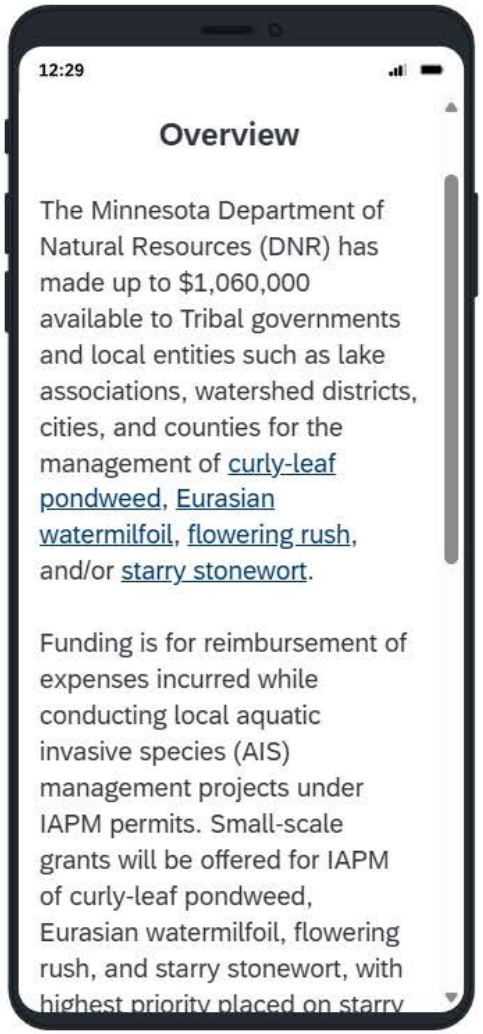

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Application Instructions

In this application, we will ask for information on the following:

1. **The applying organization** (including the organization's SWIFT ID number).

2. **Contact information for the Official with Delegated Authority to Sign.** This is the person in your organization with delegated authority to sign the grant contract agreeing to the terms of the grant program. When they sign this Application with Assurances, they certify that they have read the application and will comply with the approved Application with Assurances and Grant Award Notification (GAN) assurances and all other applicable federal regulations, state statutes, and local policies.

3. **Contact information for a Primary and Secondary Contact.** A Primary Contact is required, and a Secondary Contact is suggested. The Primary Contact may be the same as the Official with Authority.

4. **Information on the lake**, including its Lake ID number. You can find your lake's eight-digit Lake ID by searching for it in the DNR's Lake Finder.

5. **Which plant species** your organization plans to manage with these funds, if selected for an award.

6. **Which management methods** (e.g., mechanical, herbicidal) your organization plans to use with these funds, if selected for an award.

7. **An estimate of lake acreage** that your organization would manage with these funds, if selected for an award.

8. **If applying for a population-scale Eurasian watermilfoil grant, you will be required to respond to four short answer questions (250-500 words per response).** You may save your application and return to it. Be sure to submit it when you are finished.

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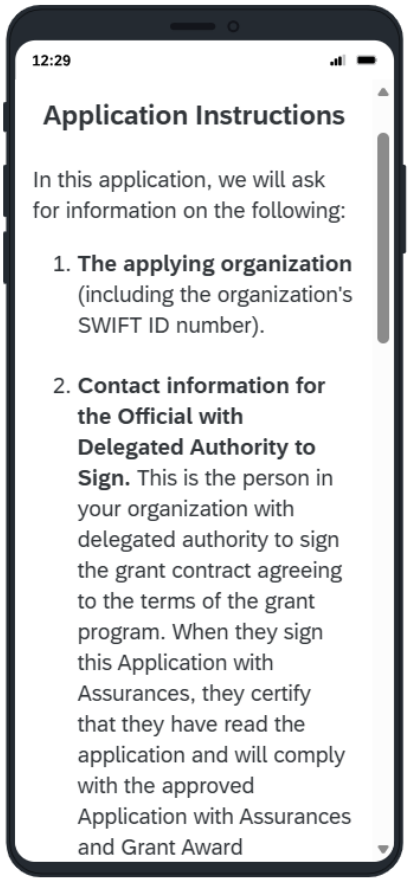

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Additional information

Application window and deadline

This grant program will begin accepting applications at 9:00 a.m. Monday, Nov. 10, 2025. Applications received before this time will not be accepted. The application deadline is 4:30 p.m. Monday, Dec. 8, 2025. All completed applications submitted within the one-month application period will be considered for funding. *To be considered for a 2026 Invasive Aquatic Plant Management (IAPM) grant, please complete this entire application.* You will receive an autogenerated email confirming receipt of your application. If you do not receive an email, we have not received your completed application.

How to submit

Review and fill out this Grant Application with Assurances form, only applying for one grant per unique waterbody ID. For an alternate way to complete the application, please contact Angelique Dahlberg, Aquatic Invasive Species Research and Grants Coordinator.

Signature requirement

This application must include the signature of the person in your

DEPARTMENT OF NATURAL RESOURCES

Application

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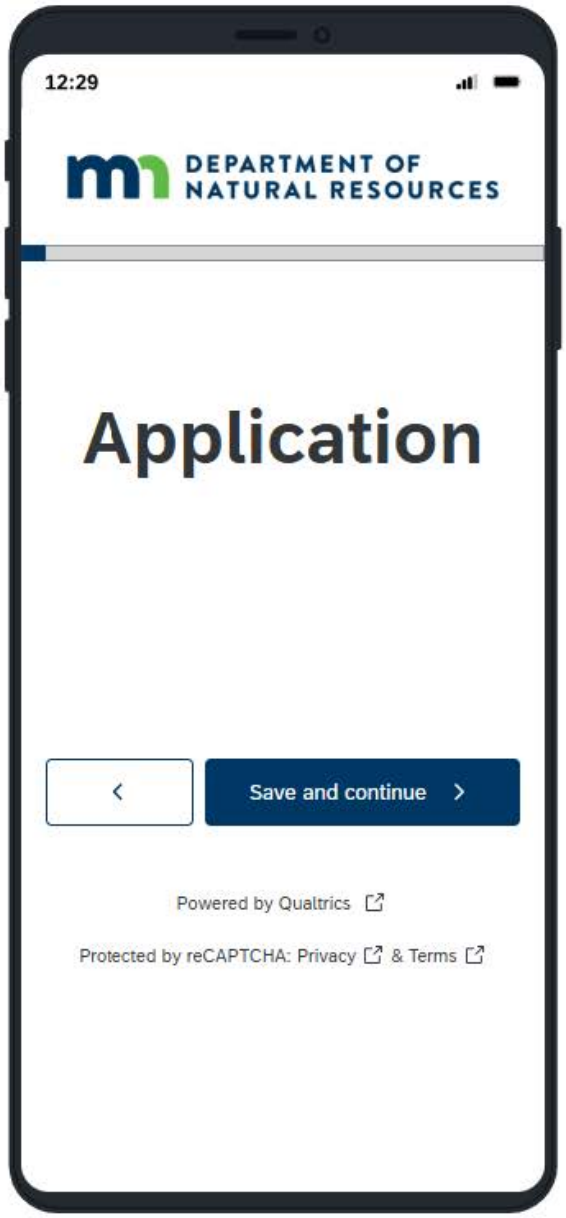

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Information about the Applying Organization

*Legal name of applicant organization

*Organization's official address (number and street)

*City

*State

*Postal code

*Does the organization have a valid SWIFT ID number? *Note: this is sometimes called a Vendor ID number.*

- ◯ Yes
- ◯ No

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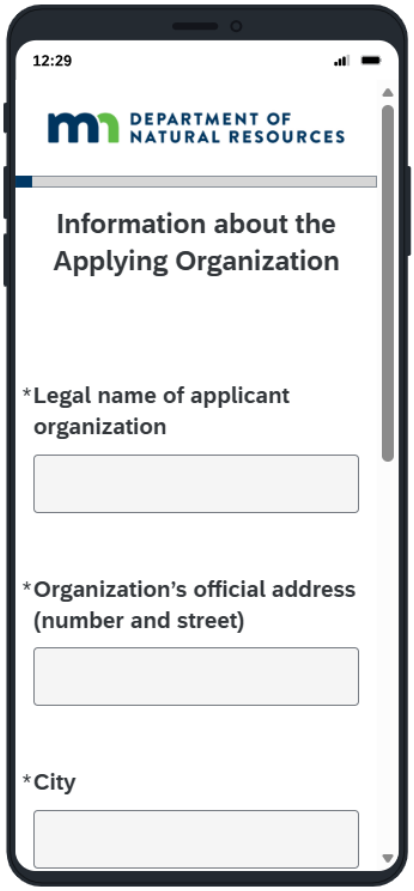

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Official with Delegated Authority to Sign

Please provide an Official with Delegated Authority to Sign. This is the person in your organization with delegated authority to sign the grant contract agreeing to the terms of the grant program. When they sign this Application with Assurances, they certify that they have read the Application with Assurances and will comply with the approved Application with Assurances and Assurances in the Grant Award Notification (GAN) and all other applicable federal regulations, state statutes, and local policies.

***Name of Official with Delegated Authority to Sign**

Title

***Phone number**

***Email address**

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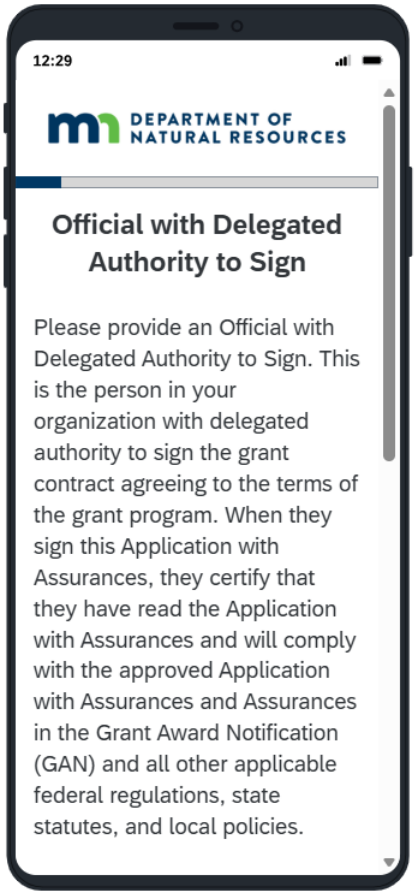

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Primary Contact

Please provide a Primary Contact. This is the person in your organization who will be the main contact between the organization and the State. The Primary Contact may be the same as the Official with Authority.

*Name of Primary Contact

*Phone number

*Email address

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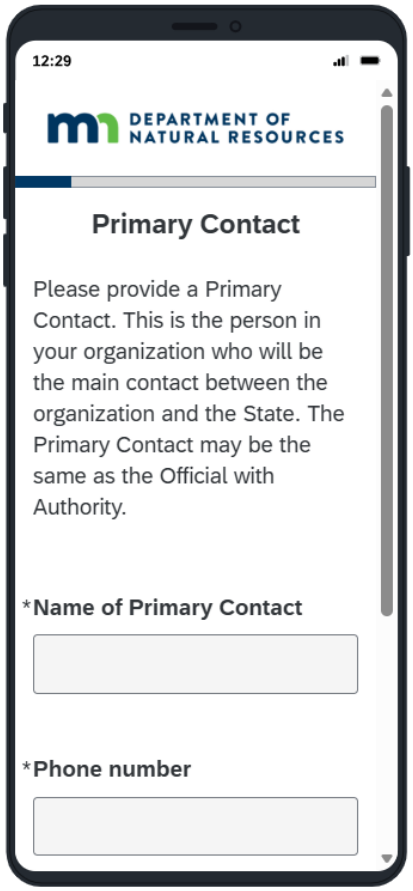

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* **Secondary Contact**

An Official with Authority and Primary Contact is required for this Application with Assurances; a secondary contact is not. However, a secondary contact can be helpful for communication purposes. Does your organization have a secondary contact to include on this Application with Assurances?

- ◯ Yes
- ◯ No

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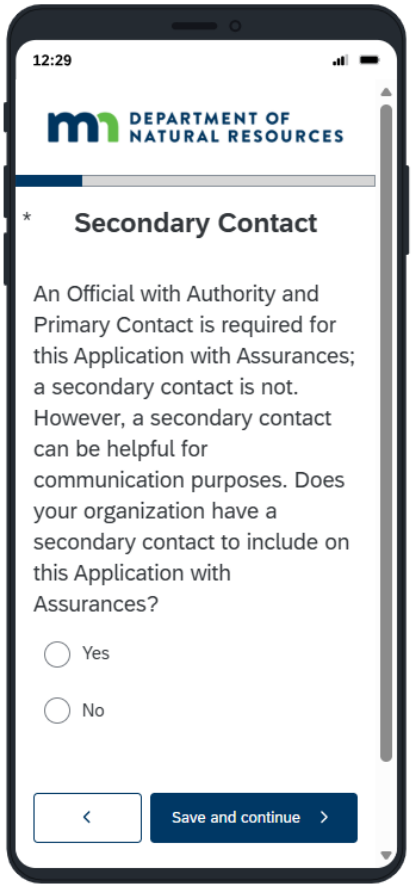

DEPARTMENT OF NATURAL RESOURCES

* **Secondary Contact**

An Official with Authority and Primary Contact is required for this Application with Assurances; a secondary contact is not. However, a secondary contact can be helpful for communication purposes. Does your organization have a secondary contact to include on this Application with Assurances?

- (●) Yes
- ( ) No

* **Name of secondary contact**

* **Phone number**

* **Email address**

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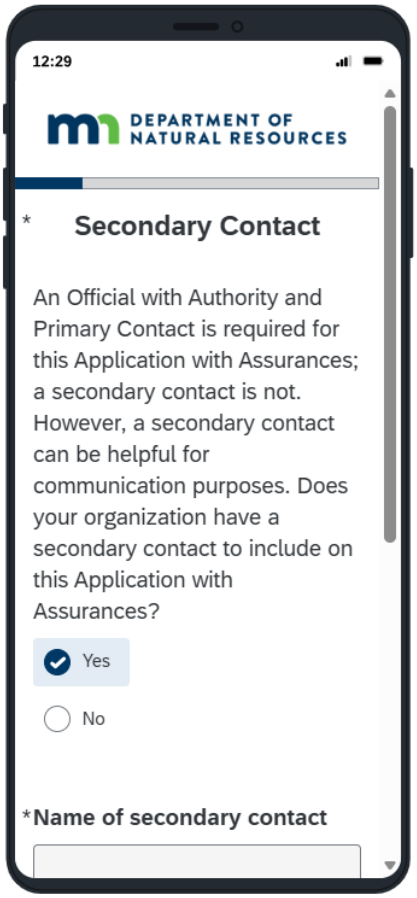

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Lake Information

Which Minnesota lake is this Application with Assurances for?

*Lake name

*Lake county

*Nearest town to lake

*Eight-digit lake ID number

Do not include dash marks. You can find your lake's eight-digit Lake ID by searching it in the DNR's Lake Finder. Grant awards will be limited to one Invasive Aquatic Plant Management grant per waterbody as defined by the waterbody's unique eight-digit Lake ID number.

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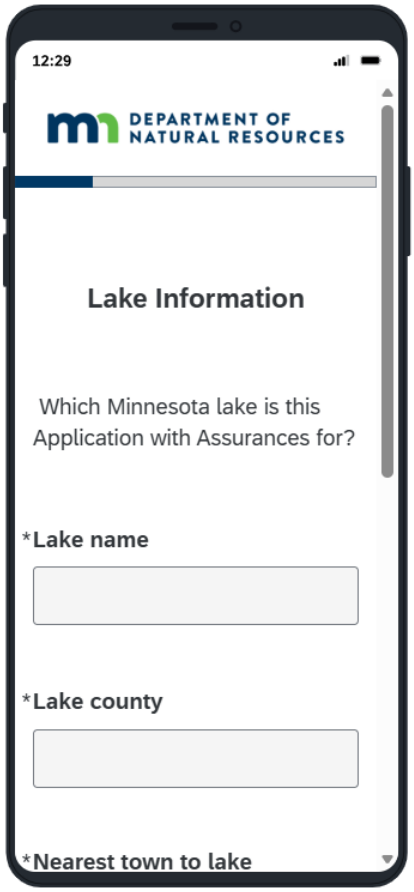

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Grant Type

In 2026, up to $840,000 in program funds are available for small-scale IAPM projects and up to $420,000 are available for population-scale management of Eurasian watermilfoil (EWM).

Small-scale grants

- Eligible projects include Invasive Aquatic Plant Management (IAPM) for curly-leaf pondweed, Eurasian watermilfoil, flowering rush, and starry stonewort, with highest priority placed on starry stonewort management.
- Starry stonewort projects will be considered independently of other species in the same water body. For example, a lake with both starry stonewort and curly-leaf pondweed may receive funding for one, both, or neither species, depending on available funding.
- Curly-leaf pondweed, Eurasian watermilfoil, and flowering rush projects will be evaluated together, rather than considered separately by species.

Population-scale Eurasian watermilfoil (EWM) grants

- Eligible projects include Invasive Aquatic Plant Management (IAPM) for Eurasian watermilfoil
- IAPM must be population-level, addressing the entire population of Eurasian watermilfoil within a water body.
- Awards will be selected based on merit; application questions will be assigned point values and responses will be assessed by DNR Invasive Species Program staff.

Additional detail is provided in this year's Request for Proposals (RFP), available on our IAPM Grants webpage. If you have not, **please carefully review that document.**

*Understanding the differences between the two main types of grants, which are you applying for?

- ◯ Small-scale IAPM grant
- ◯ Population-scale Eurasian watermilfoil grant
- ◯ Both

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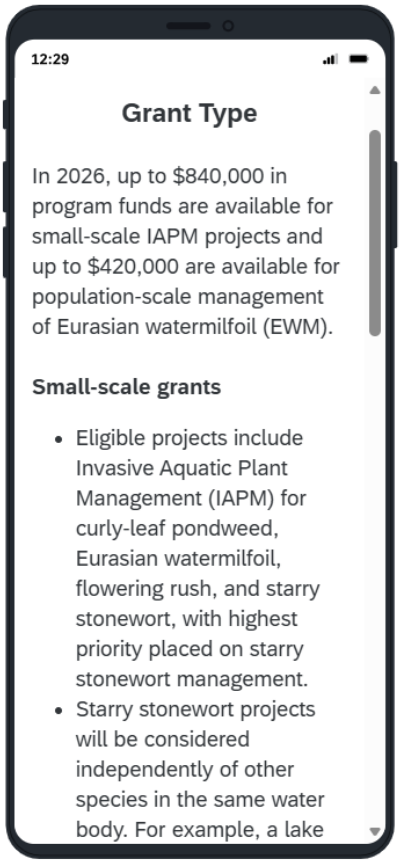

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Small-scale IAPM Grant Application: Project Information

Tell us about which invasive aquatic plant(s) you plan to manage, and how large you anticipate the project will be.

*Target plant(s)

Check all the following that you plan to manage with this grant. To be considered for funding, the lake must be confirmed by the DNR as infested with the species proposed for management. If your project includes management efforts for two or more target species that would require separate treatments, include both here on one Application with Assurances.

- [ ] Curly-leaf pondweed
- [ ] Eurasian watermilfoil
- [ ] Flowering rush
- [ ] Starry stonewort

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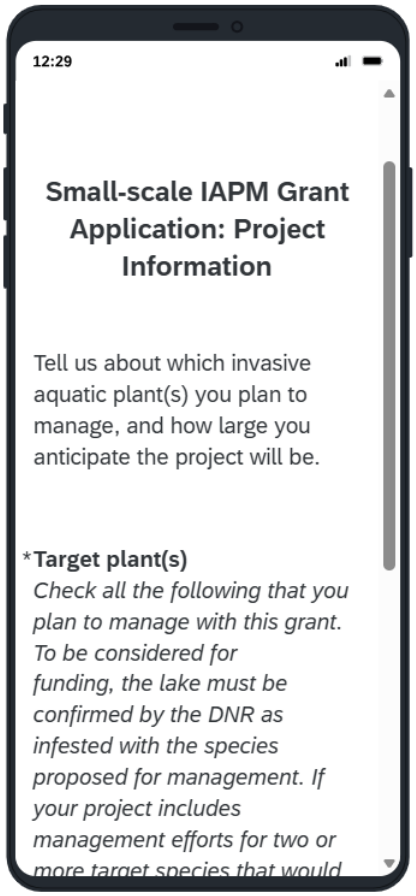

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*Curly-leaf pondweed proposed control method(s). *Check all that apply.*

- [ ] Herbicide application
- [ ] Mechanical harvesting
- [ ] Diver Assisted Suction Harvester (DASH) removal
- [ ] Hand removal
- [x] Other

*Please tell us more about your Other curly-leaf pondweed methods:

*Curly-leaf pondweed proposed project acreage. *Enter the number of acres you plan to manage.*

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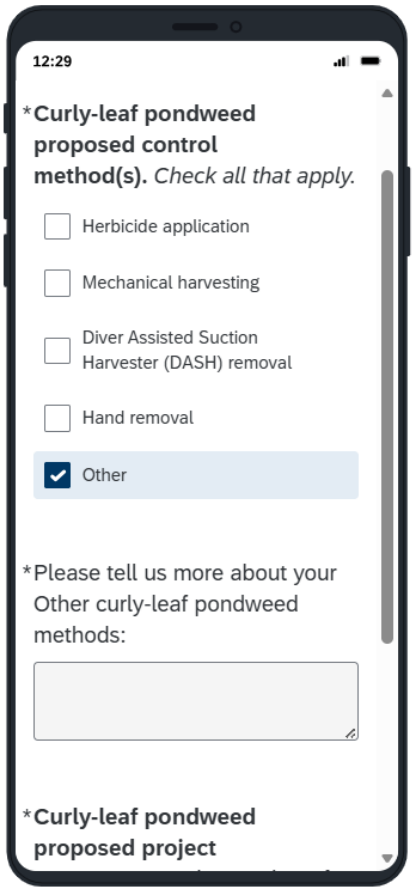

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*Eurasian watermilfoil proposed control method(s). *Check all that apply.*

- [ ] Herbicide application
- [ ] Mechanical harvesting
- [ ] Diver Assisted Suction Harvester (DASH) removal
- [ ] Hand removal
- [x] Other

*Please tell us more about your Other Eurasian watermilfoil methods:

*Eurasian watermilfoil proposed project acreage. *Enter the number of acres you plan to manage.*

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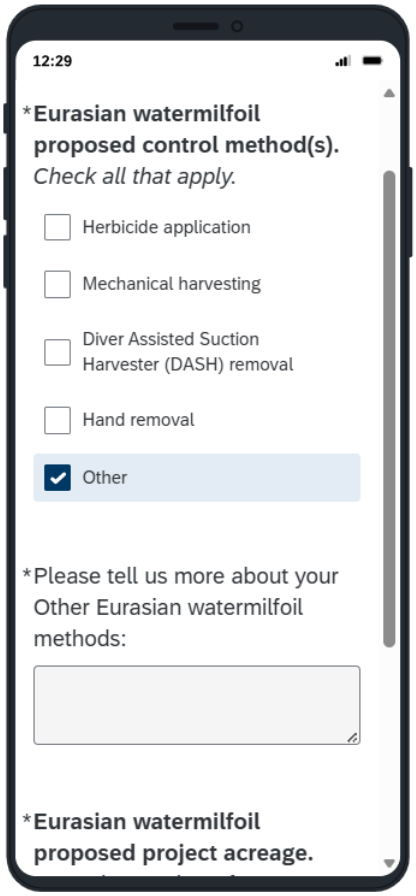

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*Flowering rush proposed control method(s). *Check all that apply.*

- [ ] Herbicide application
- [ ] Mechanical harvesting
- [ ] Diver Assisted Suction Harvester (DASH) removal
- [ ] Hand removal
- [x] Other

*Please tell us more about your Other flowering rush methods:

*Flowering rush proposed project acreage. *Enter the number of acres you plan to manage.*

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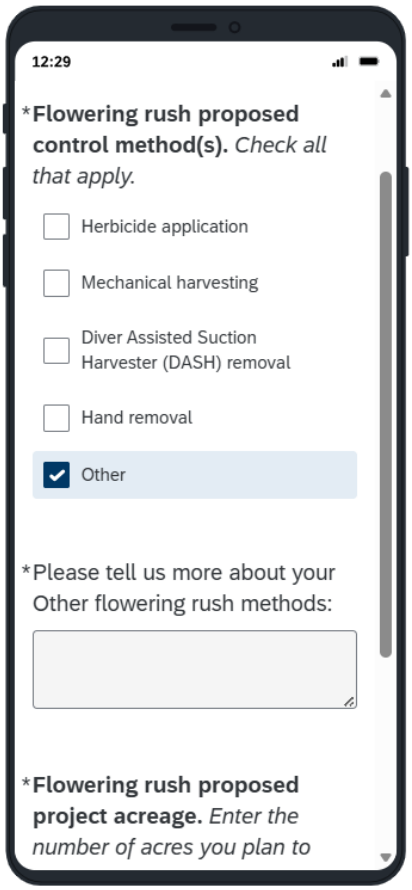

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*Starry stonewort proposed control method(s). *Check all that apply.*

- [ ] Herbicide application
- [ ] Mechanical harvesting
- [ ] Diver Assisted Suction Harvester (DASH) removal
- [ ] Hand removal
- [x] Other

*Please tell us more about your Other starry stonewort methods:

*If you have starry stonewort near your public access(es), do you plan to manage that area? *This may be in addition to other areas; if you have starry stonewort near your public access and plan to manage it, we may have additional funds to include for your award.*

- ( ) Yes; we have starry stonewort near our public access(es) and plan to manage that area as a part of this project.
- ( ) No; we have starry stonewort near our public access(es) and do not plan to manage that area as a part of this project.
- ( ) No; this does not apply to us because we do not have starry stonewort near our public access(es).

***Starry stonewort proposed project acreage.** *Enter the number of acres you plan to manage.*

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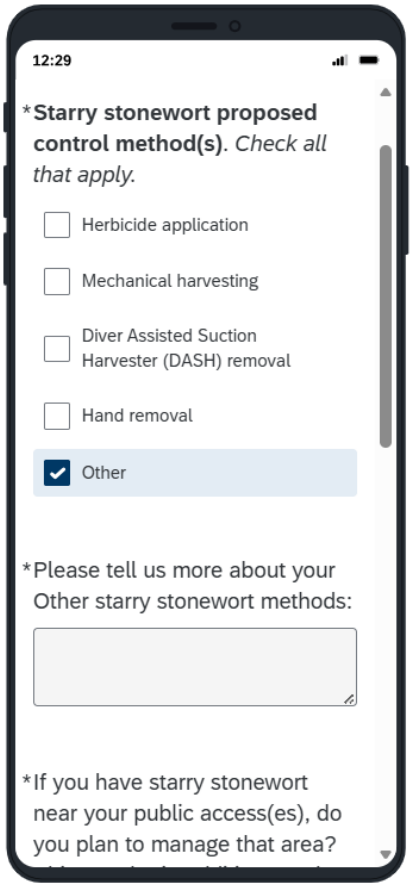

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Population-scale Eurasian watermilfoil Grant Application: Project Information

Tell us more about your Eurasian watermilfoil population and what you hope to accomplish with a grant like this. Awards will be selected based on merit; application questions will be assigned point values and responses will be assessed by DNR Invasive Species Program staff.

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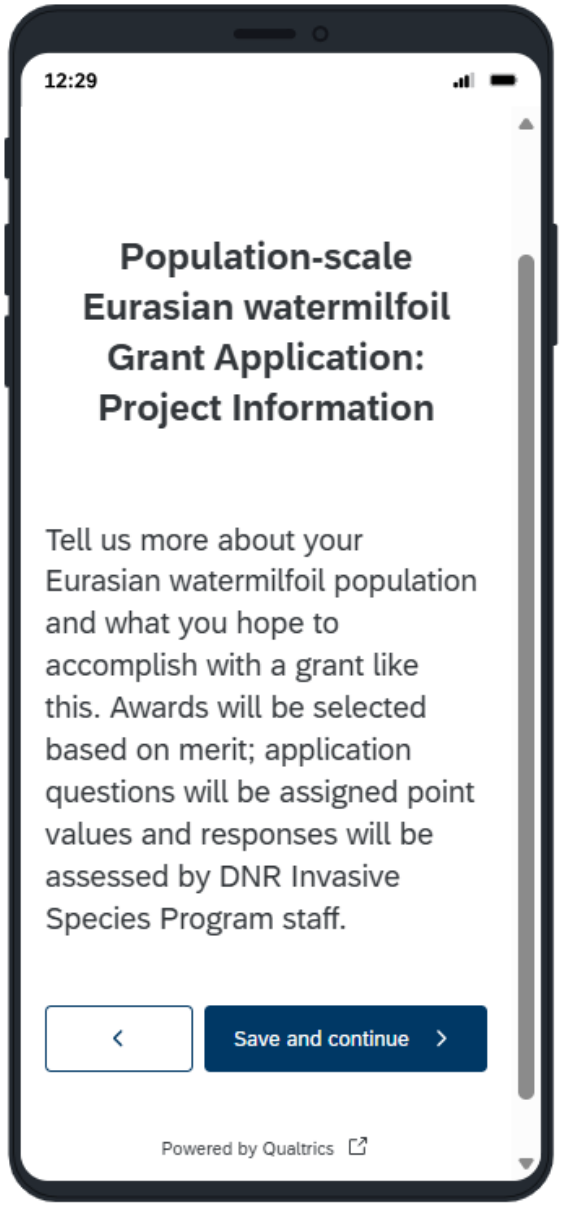

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*Question 1. Describe the history of Eurasian watermilfoil management in your lake. When was Eurasian watermilfoil first identified in your lake? How has it spread since being discovered? What has been done to manage the population? What has been done to prevent the spread of the species? (250-500 words; 25 points)

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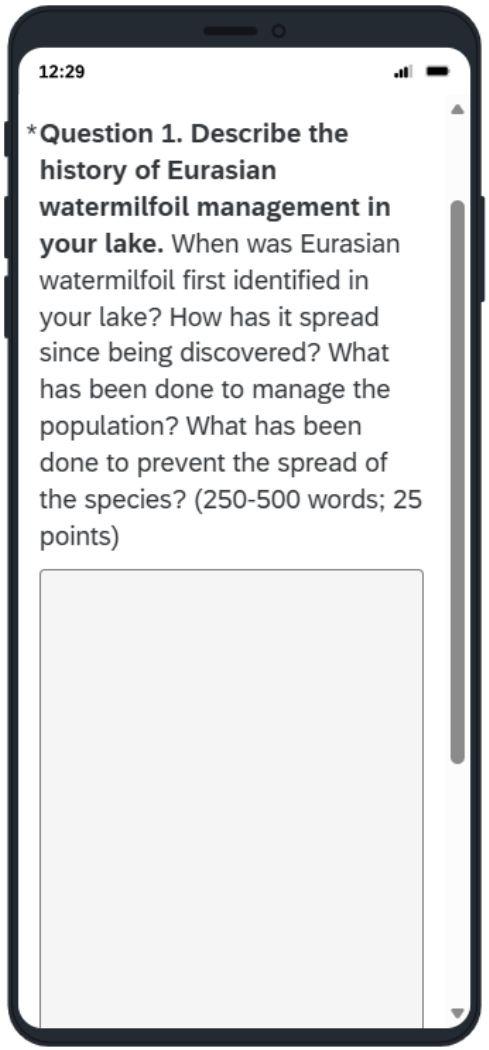

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*Question 2. Describe the current Eurasian watermilfoil problem in your lake and why you are seeking a population-scale grant for its management. (250-500 words; 25 points)

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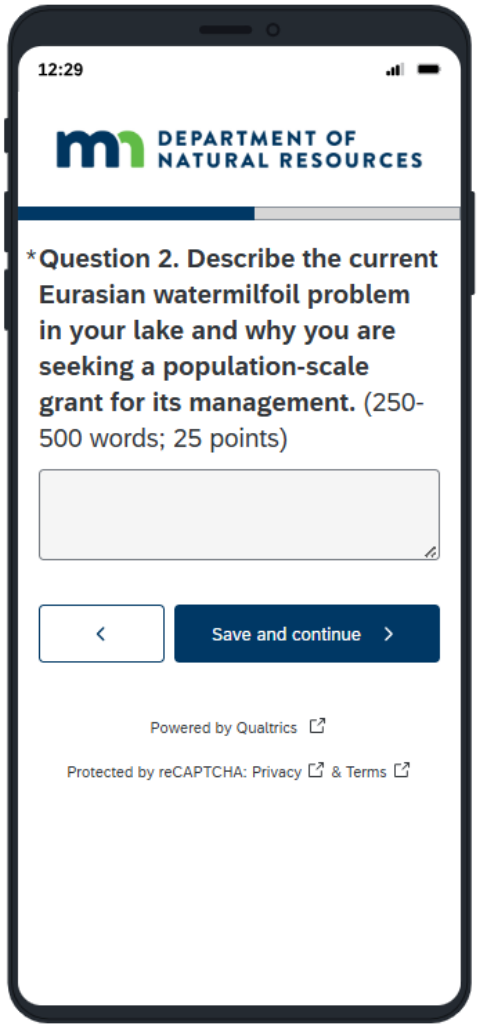

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*Question 3. Describe your goals and possible outcomes for this population-scale Eurasian watermilfoil management project. What do you hope to accomplish, and why? Are there any risks or potential adverse effects from your proposed management plan? How will you reduce those risks? What will “success” look like for your project? (250-500 words; 25 points).

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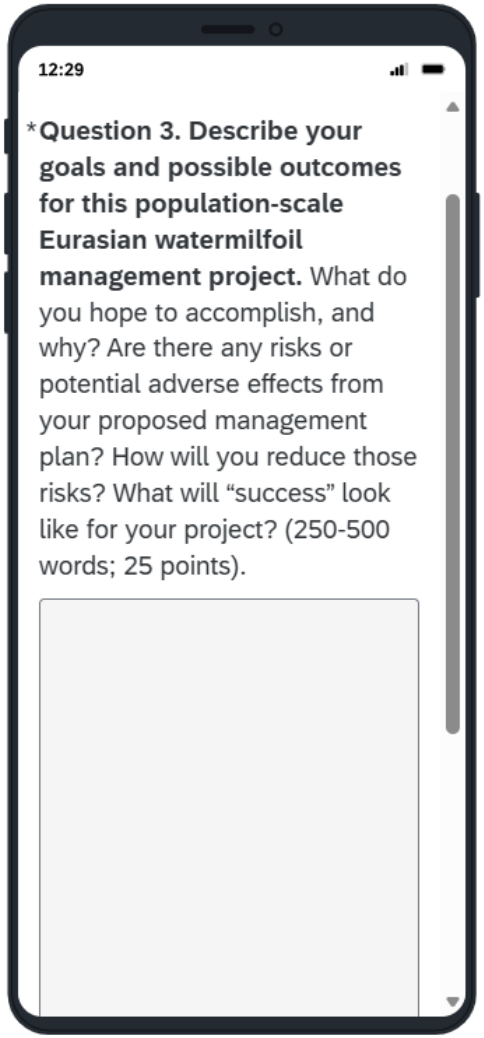

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*Question 4. Describe any other issues in your water body you are working to address (e.g., other invasive aquatic plants, other aquatic invasive species, any water quality issues, etc.). What are you doing to address those issues? (250-500 words; 25 points).

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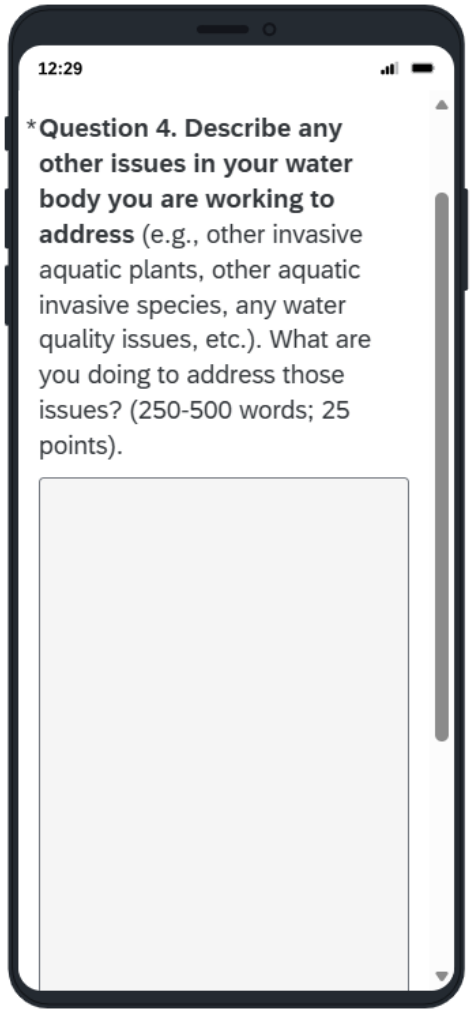

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Thank you - you have entered all of the required information to complete your Grant Application with Assurances (except for a final signature).

In the next section, we will present the Assurances and Recitals. At the end, we will ask for a signature from the Official with Delegated Authority to Sign, agreeing to those terms. *Your application will not be complete and submitted until it is signed.*

Are you the Official with Delegated Authority to Sign?
Please note: if this has been sent to you by a Primary Contact who filled in the application, you will need to change the answer to this question.

- ◯ Yes.
- ◯ No, please email this application to my Official with Delegated Authority to Sign to complete. I do not want to read the Assurances and Recitals.
- ◯ No, please email this application to my Official with Delegated Authority to Sign to complete. However, I still wish to read the Assurances and Recitals.

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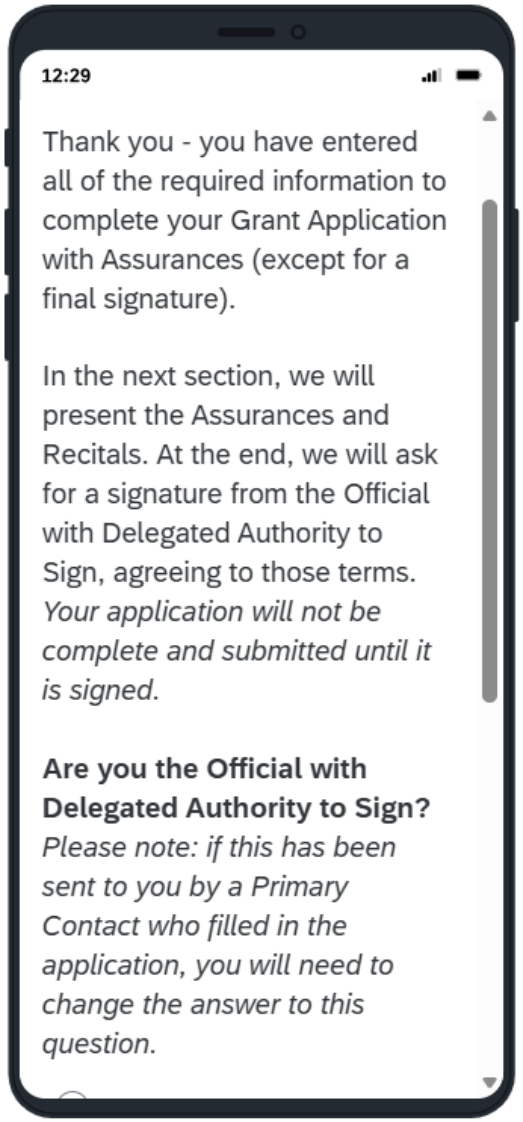

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Grant Assurances and Recitals

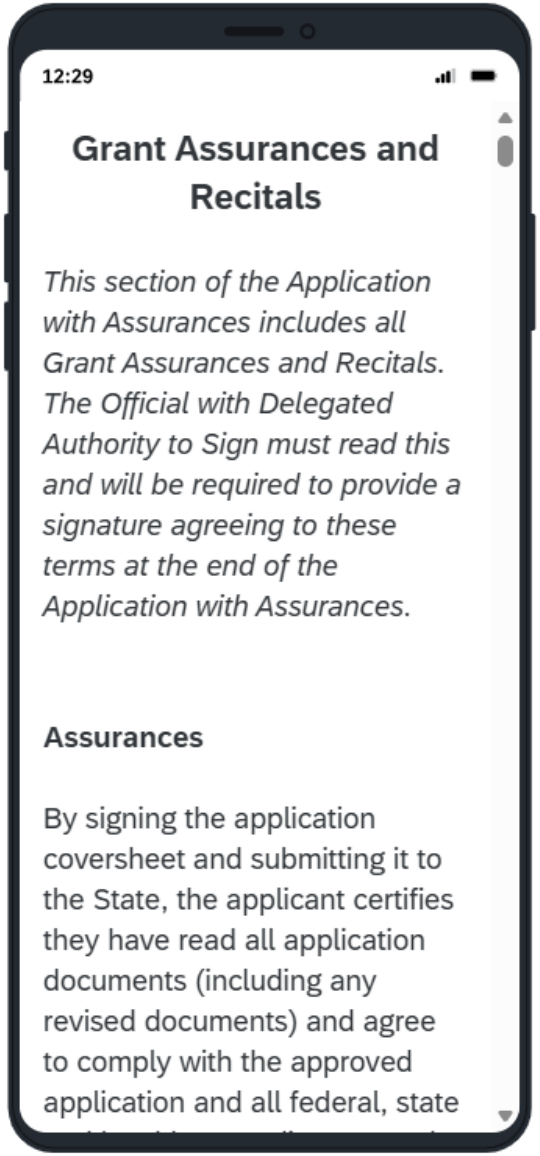
This section of the Application with Assurances includes all Grant Assurances and Recitals. The Official with Delegated Authority to Sign must read this and will be required to provide a signature agreeing to these terms at the end of the Application with Assurances.

Assurances

By signing the application coversheet and submitting it to the State, the applicant certifies they have read all application documents (including any revised documents) and agree to comply with the approved application and all federal, state and local laws, ordinances, rules and regulations, public policies herein, and all others as applicable.

Recitals

Under Minn. Stat. 84.026 the State is empowered to enter into this



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*Signature

I certify I have read the application (request for proposals [RFP], grant narrative, grant assurances, budget and supplemental documents, if applicable) and will comply with the approved application and assurances herein and additional state, local, federal regulations and policies that apply to my organization. The submission of inaccurate or misleading information may be grounds for disqualification from the grant award and may subject me and my organization to suspension or debarment proceedings, as well as other remedies available to the State, by law.

This signature needs to be from the Official with Delegated Authority to Sign (as specified previously in this application).

Type | Sign

Type your name below to generate a signature.

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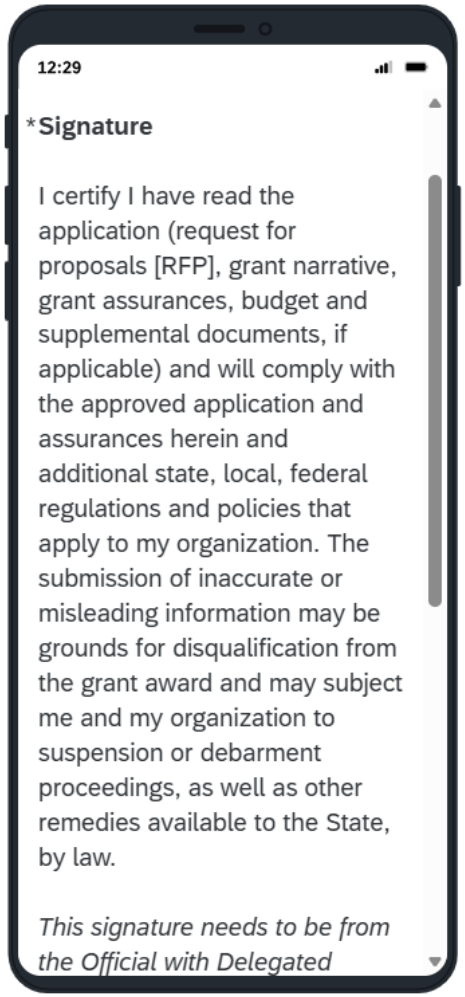

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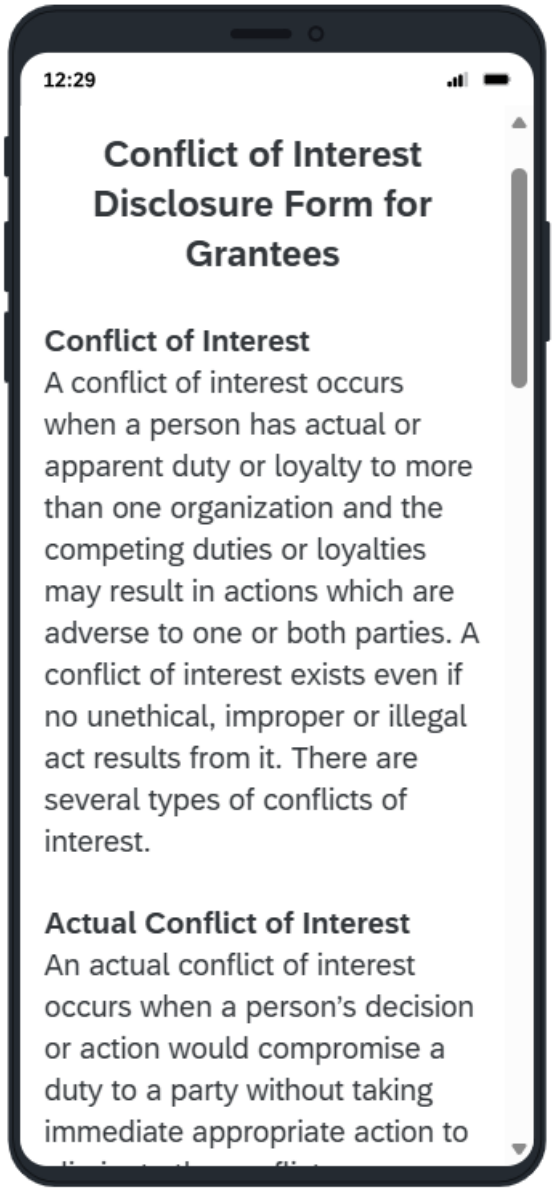
Conflict of Interest Disclosure Form for Grantees

Conflict of Interest
A conflict of interest occurs when a person has actual or apparent duty or loyalty to more than one organization and the competing duties or loyalties may result in actions which are adverse to one or both parties. A conflict of interest exists even if no unethical, improper or illegal act results from it. There are several types of conflicts of interest.

Actual Conflict of Interest
An actual conflict of interest occurs when a person's decision or action would compromise a duty to a party without taking immediate appropriate action to eliminate the conflict.

Potential Conflict of Interest
A potential conflict of interest may exist if a person has a relationship, affiliation, or other interest that could create an inappropriate influence if the person is called on to make a decision or recommendation that would affect one or more of those relationships, affiliations, or interests.

Individual Conflict of Interest



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To submit this application, please click the "Save and continue" button. The Official with Delegated Authority to Sign and Primary Contact will receive confirmation emails containing a copy of this completed application. Only completed applications will be considered for funding. All applications are due by 4:30 p.m. on Wednesday, December 8, 2025.

If you have any questions, please contact Angelique Dahlberg, AIS Research and Grants Coordinator.

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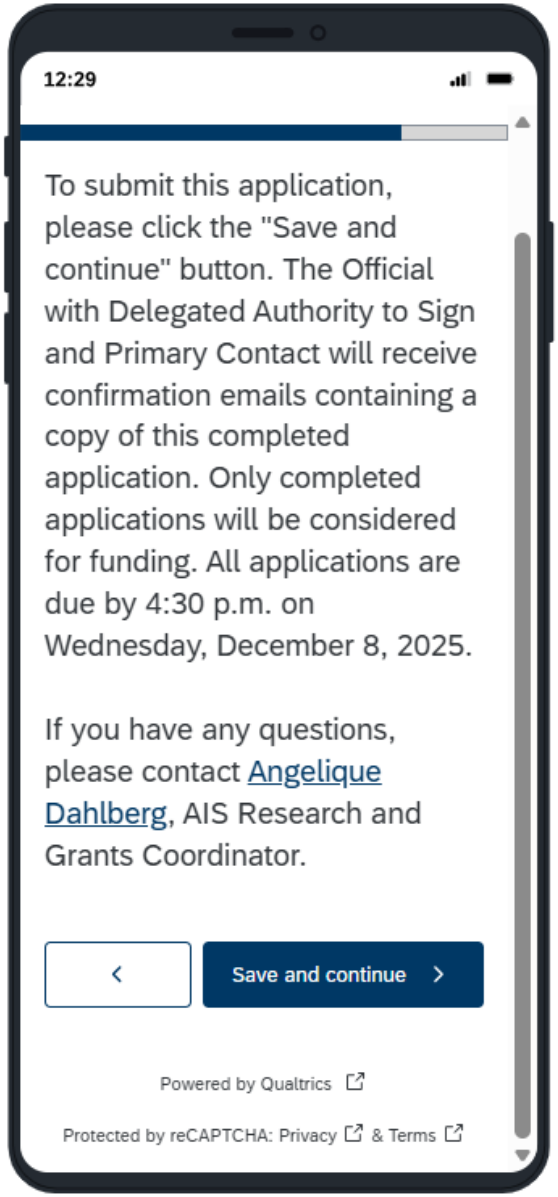

DEPARTMENT OF NATURAL RESOURCES

Thank you for your interest in a 2026 IAPM Grant. Please contact Angelique Dahlberg, AIS Research and Grants Coordinator, with any questions.

If you have submitted your Application with Assurances, the Official with Delegated Authority to Sign and Primary Contact will receive receipt emails confirming submission.

If your application still requires a signature from the Official with Delegated Authority to Sign, that individual will receive an email at the email address provided.