#  Federal Recreational Trail Program

## 2025 Equipment Grant Application

**Delete this page before submitting Application**

**Before completing this application read and study the program manual, all information on the program website, and these instructions.**

**APPLICATION DUE DATE: February 28, 2025**

**COMPLETING THE APPLICATION:**

* Carefully review the Project Eligibility section of the program manual to understand the different requirements and eligible expenditures.
* Maximum Grant request is $75,000 and requires a 25% securedcashmatch.
* Type all responses within the blank spaces/boxes associated with each question. Do not type your answers in the same space as the question. For location and site maps, you may insert these as separate pages immediately following each question.
* Replace the sample resolution page with the actual approved resolution.
* DO NOT change the format of this document.
* Respond to all of the required questions and provide all required documents, including those outlined in the Attachment Checklist. **Failure to complete the application appropriately will mean that the project will not be considered for funding.**
* Please keep answers as brief and concise as possible. Answers should focus on the project for which the funds will be utilized.
* Build America Buy America ACT (BAAA) Requirements **Failure to comply with requirements will mean that the project will not be considered for funding.**
* Non-profits must be registered with the State Attorney Generals Office (AGO) (<https://www.ag.state.mn.us/Charity/Search/>) and/or <https://mblsportal.sos.state.mn.us/Business/Search> to register as either a soliciting charity or a charitable trust. If you are an LGU and will be working with via subcontracting or pass through, you will need to provide confirmation of registration with the application.
* If your project is selected, the grantee will need to be evaluated for applicability of pre-award risk assessment under [Minn. Stat. §16B.981](https://www.revisor.mn.gov/statutes/2023/cite/16B.981)/[Chapter 62-MN Laws - Article 7, Section 11](https://www.revisor.mn.gov/laws/2023/0/Session%2BLaw/Chapter/62/).
* If your project is selected and is $50,000 or more, financial documentation will need to be provided in accordance with [Minn. Stat. §16B.981](https://www.revisor.mn.gov/statutes/2023/cite/16B.981)/[Chapter 62 - MN Laws, Article 7, Section 11](https://www.revisor.mn.gov/laws/2023/0/Session%2BLaw/Chapter/62/). This will include recent financial statements and audit as well as a statement of financial position.

**HOW TO SUBMIT THE APPLICATION:**

Applications are to be submitted electronically in a “.pdf” format by the due date above. Paper submission of applications are not accepted. To submit the application, email a pdf version of the application and attachments to Trailgrants.DNR@state.mn.us. This is the official submittal email box. Submitting to any other email will not be accepted. Format the entire application, including all attachments, as one pdf document with all pages 8 ½” by 11” in dimension. After submission, make sure you have received a confirmation email that your application has arrived in a useable format by the due date. **A confirmation email should arrive within one business day after you have submitted your application**. Each email is opened to insure the files are readable and then followed with a confirmation email. Applications submitted in an unusable format will NOT be considered for funding. If there are any questions about submitting the application, please contact the program staff below.

Paper submission of applications are accepted on an as-needed basis. Email the Trail Grant Coordinator if you need to submit by mailing a hard copy. Applications must be stamped and mailed by Februart 28, 2025. If there are any questions about submitting the application, please contact the program staff below.

**GENERAL INFORMATION:**

This is a very competitive program. Staff members are available to discuss your project or review application materials. You are encouraged to submit any draft application or materials by February 7, 2025, if you would like staff to provide comments. For assistance, please contact:

**Daniel Golner, Grant Coordinator**

**daniel.golner@state.mn.us**

**(651) 259-5599**

**Project #**

**FEDERAL RECREATIONAL TRAIL PROGRAM** 

**2025 Equipment Grant Application**

**1) GENERAL CONTACT INFORMATION:**

\*Grant Applicant (Unit of Government Required):

Unique Entity ID:

Contact Person:

Contact Title:

Mailing Address:

Phone:

Email address:

If the project has a trail club, organization, or project partner, please include below:

Organization/Club Name:

Contact Person:

Contact Title:

Mailing Address:

Phone:

Email address:

**2) GENERAL PROJECT INFORMATION:**

Project Name:

Project Summary (30 words or less):

Project Completion Date:

Trail Name:

Website with Trail Info:

**3) FINANCIAL INFORMATION:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Grant Request | $ | Source of Cash Match (describe below in the box next to $ amount)  | Are these match funds secured? YES/NO | Grant-in-Aid Funds? YES/NO |
| Matching Funds (25% cash match required): | $ |  |  |  |
| Matching Funds If another source | $ |  |  |  |
| Matching Funds If another source | $ |  |  |  |
| Total Project Cost | $ |  |  |  |

**Total Project Cost: $ (Grant Request + Matching Funds must = Total Project Cost)**

If this project has received federal funding through the Enhancements Program or MnDOT’s Transportation Alternatives Program, please indicate which year the project is programmed for construction? FFY:

\* If a Non-profit: Organization must be registered with the State Attorney Generals Office (AGO) (<https://www.ag.state.mn.us/Charity/Search/>) and/or <https://mblsportal.sos.state.mn.us/Business/Search> to register as either a soliciting charity or a charitable trust. If you are an LGU and will be working with via subcontracting or pass through, you will need to provide confirmation of registration with the application.

**4) PURCHASE LOCATION:**

County Equipment will be Located:

State Legislative (House) District:

State Senate District:

State House Representative (name):

State Senator (name):

Congressional District:

**5) RECREATIONAL USES FOR EQUIPMENT PROJECT:**

***5A) Indicate the existing or proposed uses of the trail under primary use and the secondary recreation uses which will directly benefit from the proposed project:***

|  |  |  |
| --- | --- | --- |
| Primary Use | Secondary Use |  |
|  |  |  Walking/Hiking |
|  |  |  Bicycling |
|  |  |  Mountain Bicycling |
|  |  |  Horseback Riding |
|  |  |  Cross-Country Skiing |
|  |  |  In-Line Skating |
|  |  |  Snowmobiling |
|  |  | ATV Riding |
|  |  |  Off-Highway Motorcycling |
|  |  |  4 X 4 Trucking |
|  |  |  Other (specify):  |

 ***5B) Describe/Justify how each of the above identified primary and/or secondary trail user groups will benefit from the project. Response required for each identified use above.*** Letters of support attached to this application for both primary and secondary usage **strongly recommended**. See manual for secondary usage criteria.

**6) EQUIPMENT PURCHASE DESCRIPTION:**

*Provide a description sufficient enough to understand the purchase. Provide specifications of the equipment for which you are seeking assistance. Include make and model of equipment, as well as an invoice showing estimate of cost as an attachment (see attachment checklist). Use the space below.*

**7) PROJECT COST BREAKDOWN:**

*Identify each recreational trail/facility being proposed for funding. Provide a short quantitative description of the purchase, the total estimated cost and the expected purchase date for each piece of equipment. Add or delete rows in the text boxes below as appropriate.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Equipment Name** | **Description** | **Estimated Cost** | **Expected Purchase Date** |
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|  | TOTAL COST | $ |  |

**8) EQUIPMENT WORK AREA LOCATION MAP:**

*It is important for reviewers to have an idea of where in the state and/or your region the purchase being proposed will be utilized. This map is to be 8 ½ X 11 in size ONLY, in color and able to show where the purchase will generally be utilized within the state or region. So typically, the scale of this map is large. Insert the map here.*

**9) CURRENT ABILITY TO MAINTAIN TRAILS***:*

***9A)*** *If within the Grant-in-Aid Program, how many miles of trail are groomed / maintained AND how much GIA funding was awarded in the most recent year? Use the space below.*

***9B)*** *Provide the following information for each piece of grooming / maintenance equipment you presently own. Use the boxes below.*

|  |  |  |
| --- | --- | --- |
| Description of equipment (type, make, model, year manufactured): | Total operating hours for each piece of grooming/ maintenance equipment you presently own: | Condition of each piece of equipment and estimated value: |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

***9C)*** *Does your club/organization maintain trails not in the GIA Program, and if so, how many miles? Are any trails maintained through contracts (other than GIA), and if so, how many miles? Use the space below.*

**10) EVIDENCE OF APPLICANT CAPABILITY:**

*Demonstrate your ability to complete the purchase, subsequently operate and maintain it, and protect the equipment after purchase. Specifically provide evidence of successful and timely completion of other such purchases. Discuss where and how the equipment will be housed. Use the space below.*

**11) PUBLIC NEED FOR AND BENEFIT OF PURCHASE:**

*Why should this project be funded? What safety concerns will be addressed with this project? Is there urgency to move ahead with this project now, and what consequences are looming? Demonstrate the benefit from this purchase compared to the total cost? How many people would be expected to use the trail maintained with this equipment over the course of one year? Use the space below.*

**12) CONTEXT OF PURCHASE IN A WIDER PLAN:**

*Demonstrate compatibility with local/area/state trail plans, and compatibility with plans guiding management of trail systems, etc. What relationship does the proposed purchase have to other outdoor recreation facilities and trails? Use space below.*

**13) INDENTIFY ADVERSE IMPACTS THAT MIGHT BE REALIZED AS A RESULT OF PURCHASE:**

*Will the purchase result in increased use? What possible conflict situation may arise? Use space below.*

**ATTACHMENT CHECKLIST**

**REQUIRED ATTACHMENTS (All attachments MUST be 8 ½ by 11 ONLY)**

|  |  |
| --- | --- |
|  | **Attachment A – Required Certifications**The first signature block is to be signed by the proper authority for the grant applicant (Unit of Government). A representative of the trail organization or club that is purchasing the equipment should sign the second section. If the proposed purchase will primarily be utilized public land that is not under the jurisdiction of the applicant, the proper authority must sign the final section in order to assure that they are both aware and supportive of the project. |
|  | **Attachment B – Resolution Supporting Application**The application must be accompanied by either a copy of a resolution, council minutes or some other official documentation that demonstrates that the local unit of government supports the proposed project and the consequent application. The resolution does not need to have a specific form or specific language, as long as it satisfies what was outlined in the previous sentence. A sample resolution has been included. The sample resolution is a combination type resolution example. It shows support of the grant application (as required above), and if the project is awarded, it includes language to support accepting the grant award, names the fiscal agent, and states that the facility or trail will be maintained for no less than twenty years. This combination resolution helps eliminate the need for an additional resolution for this project in the future, if awarded a grant. If the applicant is awarded, all three items must be mentioned in the resolution in order to accept the grant.  |
|  | **Attachment C – Estimated Value/Cost Invoice**If there is a specific piece of equipment that is being proposed for purchase, please contact the appropriate equipment vendor and obtain an estimate of cost sheet. |

ADDITIONAL ATTACHMENTS (if applicable)

|  |  |
| --- | --- |
|  | **Attachment D – Buy America compliance letter.** See Grant Manual for requirements. Link to  [**Requirement**](https://www.govinfo.gov/content/pkg/CFR-2013-title23-vol1/xml/CFR-2013-title23-vol1-sec635-410.xml)**s** |
|  | **Attachment E – Letters of Support****Letters of support are an important factor for reviewers when selecting projects**. There should be an effort to solicit letters from specific groups that will derive a direct benefit from the project, especially from the primary and secondary user groups you identify in Question 5. The applicant is also welcome to provide letters of support from all other sources as well. There is no limit on how many letters may be submitted, and diversity is favorable |
|  | **Attachment F – Grant-in-Aid Award Letter**If the applicant or partnering trail association is receiving funding from one of the DNR grant-in-aid programs (snowmobile, cross-country ski, all-terrain vehicle, off-highway motorcycle, or off-road vehicles), typically the recipients are notified by the DNR, Parks and Trails Area Supervisor with an award letter. Copy the letter and provide as Attachment F. if applicable. |

**Attachment A – REQUIRED CERTIFICATIONS**

Complete the Required Certifications form below with original signatures

**For Grant Applicants:**

*“I hereby certify that all of the information provided in this application is true and accurate to the best of my knowledge. I recognize that in the event of the proposed project being funded, this document will be used as an addendum to the agreement between the sponsoring unit of government and the state to guide project scope and reimbursement. I also acknowledge that all work must be completed by June 30, 2027, and no reimbursement will be sought for an in-house labor service and/or to meet existing payroll. I also preliminarily agree with plans to develop the proposed trail related project on land administered by my agency.”*

*Name: Title:*

*Unit of Government:*

*Signature: Date:*

**For Trail and Park Administrators:**

*“I substantially agree that the proposed trail related project will be mutually beneficial to the local community, as well as to the goals and purposes for which this recreation unit was established. I will cooperate in its provision if the project proposal should be funded.”*

*Name: Title:*

*Unit of Government:*

*Signature: Date:*

**For All Administrators of Public Lands Crossed/Utilized in the Proposed Linkage** *(Required only if the proposed project will utilize public land that is not under the jurisdiction of the grant applicant):*

*“I preliminarily agree with plans to develop the proposed trail related project on land administered by my agency, and I will cooperate in seeking more formal authorization in the event the project proposal is authorized for reimbursement.”*

*Name: Title:*

*Unit of Government:*

*Signature: Date:*

**Attachment B – RESOLUTION SUPPORTING APPLICATION**

***SAMPLE RESOLUTION***

**DELETE THIS PAGE AND REPLACE WITH ACTUAL RESOLUTION**

WHEREAS the City of Sunnybrook supports the grant application made to the Minnesota Department of Natural Resources for the Federal Recreational Trail Program. The application is to purchase snowmobile grooming equipment for the Sunnybrook Recreational Trail System. The trail system is located within 30 acres of Sunnybrook Park, and

WHEREAS the City of Sunnybrook recognizes the twenty-five (25) percent match requirement for the Federal Recreational Trail Program, and has secured the matching funds

NOW, THEREFORE, BE IT RESOLVED, if the City of Sunnybrook is awarded a grant by the Minnesota Department of Natural resources, the City of Sunnybrook agrees to accept the grant award and may enter into an agreement with the State of Minnesota for the above referenced project. The City of Sunnybrook will comply with all applicable state and federal laws, environmental requirements and regulations as stated in the grant agreement, and

BE IT FURTHER RESOLVED that the applicant has read the Conflict-of-Interest Policy contained in the Equipment Grant Manual and certifies it will report any actual, potential, or organizational conflicts of interest upon discovery to the state related to the application or grant award.

BE IT FURTHER RESOLVED, the City Council of the City of Sunnybrook names the fiscal agent for the City of Sunnybrook for this project as:

Name

Director of Finance/Treasurer

City of Sunnybrook

87224 Happy Trails Avenue

Sunnybrook, MN 26395

BE IT FURTHER RESOLVED, the City of Sunnybrook hereby assures the grooming equipment acquired through this grant will be maintained for no less than twenty (20) years as required by the Federal Recreational Trail Grant Program or until such time as appropriate disposition actions are approved by the Minnesota Department of Natural Resources.

PASSED AND ADOPTED BY THE CITY COUNCIL OF THE CITY OF SUNNYBROOK THIS \_\_\_\_\_ DAY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 2025.

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

NAME - MAYOR

ATTEST:

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

NAME - CITY CLERK