

Secure Rural Schools and Community Self-Determination Act of 2000  
(Reauthorized and amended 2008 under Public Law 110-343) ("Payments to Counties" Program) Title II Project  
Submission Form Deschutes-Ochoco Resource Advisory Committee

**Memorandum**

To: Potential Title II Applicants  
From: Jeff Walter, Designated Federal Official  
Re: RAC Application  
Date: March 2, 2011

Enclosed is an application for grant funding consideration from the Deschutes-Ochoco Resource Advisory Committee (RAC). An estimated \$500,000 in funds will be available for natural resource projects on or adjacent to National Forest lands in Crook, Deschutes, Jefferson, Klamath and Wheeler counties. Funds are authorized under Title II of Public Law (P.L.) 110-343. For a text of the legislation, visit <http://www.fs.fed.us/srs/>

Funds may be used for projects that improve maintenance of existing infrastructure, enhance forest ecosystems, and/or restore and improve land health and water quality. The legislation seeks to create employment opportunities and improve cooperative relationships between people who use and care for Federal lands and the agencies that manage these lands. Demonstrating how your project will achieve these goals will strengthen your application.

Projects approved for funding will be implemented through authorities that are available to the Forest Service. These include agreements, grants, and/or contracts.

**Application**

The application is available at the following websites. If you are unable to download the application, please email or call the point of contact.

<http://www.fs.fed.us/r6/centraloregon/partnership/rac/rac-index.shtml>  
<http://www.coic.org/publicmeetingnotices.htm>

**Point of Contact**

Katrina Van Dis  
Central Oregon Intergovernmental Council  
541-504-3307  
kvandis@coic.org

**Required Items Checklist**

- Application is labeled correctly (see Application Submittal).
- Application is filled out completely. Incomplete applications will not be accepted.
- The Total Budget and Match Forms are filled out and sub-total and total columns are added correctly and are sent both electronically and by hard copy.
- The RAC funded portion of the project begins on or after October 1, 2011.
- Signatures are provided for committed match funds (see RAC Matching Form).
- An 8.5" x 11" map showing the project boundaries is attached to the application.
- 23 copies of supporting documentation included in the mailed copy (see details below).
- You may provide **no more than 4** digital photos of the project site (if available).

## Proposal Tips

When developing your proposal, it may be helpful to understand the history and trends of Deschutes-Ochoco RAC funding decisions. Analysis of successful projects includes the following observations:

- Demonstrate partnerships;
- Provide employment opportunities;
- Clearly demonstrate benefit to Forest Service lands;
- Demonstrate matching funds or resources (although match is not *required* by statute). “Match” can include other funding sources, donated supplies, volunteer labor, etc. The key is that successful applications have demonstrated tangible collaboration and cooperation; and
- Propose discrete on-the-ground projects rather than ongoing programs.

**A full list of approved RAC projects may be viewed at:**

<http://www.fs.fed.us/r6/centraloregon/partnership/rac/rac-index.shtml>

## Grant Application Process

Please read all instructions in the application carefully. **Incomplete applications will not be accepted.** This application is a PDF document that is locked. You cannot save your responses with the form, but you can print your completed form; then scan it to create an electronic version. Press the tab key to go through the document, or mouse click to the next response. This application is for the 2012 Federal Fiscal year, which begins on October 1, 2011.

- **Parts A-C and E:** Use only the space provided for your responses.
- **Parts B-1 – B-6:** Please review and provide information of eligibility and review criteria to ensure that your project meets the Title II guidelines.
- **Part D:** You are allowed two (2) additional pages to record your responses.
- **Part G:** If this is a continuation of a previously RAC-funded project (e.g. Year 2, 3, 4, of a project) you will need to fill out this section.
- **Budget:** Fill out the Project Budget and Matching forms and attach them to your application. If you have a Federally approved negotiated indirect cost rate you may charge up to 5% indirect costs. Documentation of the federally approved rate must be included with your application.

**If your project includes ground disturbance, a NEPA planning process will be required.** You may view a copy of the Law/Statute as well as many guidebooks by going to <http://www.fs.fed.us/emc/nepa/> or call 541-504-3307 to request a copy.

## Application Submittal

Both an **electronic** and **hardcopy** of your application must be submitted. Please read the instructions below. An application is not considered to be submitted until COIC has received both the hard-copy mailed version and the emailed version. **INCOMPLETE AND/OR FAXED APPLICATIONS WILL NOT BE ACCEPTED.**

1. Electronic copy: Please email [kvandis@coic.org](mailto:kvandis@coic.org) with a copy of your application including the Budget and Match forms (3 documents total)
2. Label your electronic documents as follows (for example: *COIC\_RAC\_2012* or *COIC\_TotalBudget*)
  - a. Project Application: “*YourProjectName\_RAC\_2012*”
  - b. Project Budget Form: “*YourProjectName\_TotalBudget*”
  - c. Project Budget Match Form “*YourProjectName\_Match*”
3. Mail copy: Please send only (1) hard copy of your application and budget and match forms and (23) copies of your supporting documents and map (e.g. letters of support or photos) to the address below:

### COIC

**Attn: Katrina Van Dis  
2363 SW Glacier Place  
Redmond, OR 97756**

Applications are due by **Friday March 25, 2011 by 4:30pm**

**Part A: Project Contact & Fiscal Officer Information:**In filling out Part A use no less than 10 point font and **DO NOT EXCEED THE SPACE PROVIDED.****A-1. Project Contact Information:**

|                                  |                             |
|----------------------------------|-----------------------------|
| <b>Funding Amount Requested:</b> | <b>Total Project Costs:</b> |
|----------------------------------|-----------------------------|

*This should match total costs from Column A in your budget**This should match total costs from Column E in your budget**Please list the person who will be able to answer questions about the project as the Contact.*

|                         |                |                  |
|-------------------------|----------------|------------------|
| <b>Project Name:</b>    | <b>County:</b> |                  |
| <b>Project Contact:</b> | <b>Title:</b>  |                  |
| <b>Address:</b>         | <b>City:</b>   | <b>ZIP Code:</b> |
| <b>Phone:</b>           | <b>Fax :</b>   | <b>Email:</b>    |

**A-2. Fiscal Organization/Officer Information:** *Please provide the name of the person and entity responsible for compliance activities should grant funds be awarded.*

|                      |                        |                  |
|----------------------|------------------------|------------------|
| <b>Organization:</b> | <b>Contact Person:</b> |                  |
| <b>Address:</b>      | <b>City:</b>           | <b>ZIP Code:</b> |
| <b>Phone No:</b>     | <b>Fax No:</b>         | <b>Email:</b>    |

**A-3. Time Frame Information:** *Please provide an estimate of start and end dates. The start date cannot be an earlier than 10/1/2011, and the end date should reflect the point at which all project activities, including those supported by matching funds, will be completed.*

|                                                                                                                                                                                                                        |                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| <b>Start Date (mm/dd/yy):</b>                                                                                                                                                                                          | <b>Completion Date (mm/dd/yy):</b> |
| <b>Is this a continuation of a previously RAC-funded project?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>(If yes, complete section G.)</b><br>If yes, what was the title of the previous project? |                                    |

**A-4. Project Description:** Briefly describe the project using ONLY the space provided below.

**A-5. Project Location Information:** (if more than one location, list all)

|                                                                                                                                                                                                     |                                                                        |                     |                                                                 |                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|---------------------|-----------------------------------------------------------------|--------------------|
| <b>Project Location Type</b><br>Please select one (click below):                                                                                                                                    | <b>4<sup>th</sup> Field Watershed Name and HUC#:</b>                   |                     | <b>5<sup>th</sup> Field Watershed Name and HUC# (if known):</b> |                    |
| <b>Project Location Description:</b>                                                                                                                                                                | <b>Legal Description(s):</b><br>(attach additional pages if necessary) | <b>Township(s):</b> | <b>Range(s):</b>                                                | <b>Section(s):</b> |
| <b>Forest Service District:</b>                                                                                                                                                                     | <b>National Forest:</b>                                                |                     |                                                                 |                    |
| <b>Landowner(s) if project will occur on private land:</b>                                                                                                                                          |                                                                        |                     |                                                                 |                    |
| Is an 8 1/2 X 11 area map included? <input type="checkbox"/> Yes <input type="checkbox"/> No    If available, are digital photos included? <input type="checkbox"/> Yes <input type="checkbox"/> No |                                                                        |                     |                                                                 |                    |

**Part B: Title II Eligibility and Review Criteria.**

*Please use the following checklist to ensure that your project will meet the eligibility and review criteria.*

**B-1. Project must meet at least one of the following:**

- Improves maintenance of existing infrastructure. [sec.2(b)]
- Implements stewardship objectives that enhance forest ecosystems. [Sec. 2(b)]
- Restores and improves land health. [Sec. 2(b)]
- Restores water quality. [Sec. 2(b)]

**B-2. Indicate if your project further supports the intent of legislation**

- Improves Cooperative Relationships. [Sec. 2(b)3]
- Creates Employment Opportunities [Sec. 2(b)2]

**B-3. Please indicate the project type: (at least one box must be checked)**

- Road Maintenance [Sec. 2(b)(2)(A)]
- Road Decommission/Obliteration [Sec. 2(b)(2)(A)]
- Other Infrastructure Maintenance (specify): [Sec. 2(b)(2)(A)]
- Soil Productivity Improvement [Sec. 2(b)(2)(B)]
- Watershed Restoration & Maintenance. [Sec. 2(b)(2)(D)]
- Fish Habitat Restoration [Sec. 2(b)(2)(E)]
- Reestablish Native Species [Sec. 2(b)(2)(G)]
- Other Project Type (specify) [Sec. 2(b)(2)]:
- Trail Maintenance [Sec. 2(b)(2)(A)]
- Trail Obliteration [Sec. 2(b)(2)(A)]
- Forest Health Improvement [Sec. 2(b)(2)(C)]
- Wildlife Habitat Restoration [Sec. 2(b)(2)(E)]
- Control of Noxious Weeds [Sec. 2(b)(2)(F)]

**B-4. Target Species Benefited:**

Indicate if threatened, endangered, sensitive or other species will benefit from the project. *If yes, see section D-6.*  Yes  No  N/A

**B-5. Status of Project Planning:**

- National Environmental Policy Act (NEPA) Complete:  Yes  No  N/A
- If no, indicate the estimated date for completion: (mm/dd/yy) \_\_\_\_\_
- Funds requested for NEPA Review. Amount: \$ \_\_\_\_\_
- National Marine Fisheries Service (NMFS) Sec. 7 ESA Consultation Complete:  Yes  No  N/A
- Dept. of State Lands/ODFW\* Permits for In-Stream Work Obtained:  Yes  No  N/A
- Dept. of State Lands/COE\* Fill/Removal & 404 Permit Obtained:  Yes  No  N/A
- State Historic Preservation Office (SHPO) Concurrence Received:  Yes  No  N/A
- Project Design(s) Completed:  Yes  No  N/A

**B-6. Will the project generate merchantable timber [Sec. 204(e)(3)]?** If so, the project may be subjected to merchantable material contracting pilot program or other contracting procedures.  Yes  No  N/A

*\*Note: (ESA) Endangered Species Act, (ODFW) Oregon Dept. of Fish & Wildlife, (COE) Army Corps of Engineers*

**Part C: Project Cost and Budget Information**

Fill out Section C, use no less than 10 point font and **DO NOT EXCEED THE SPACE PROVIDED**

Fill out the **RAC 2012 Budget Form and Project Match Form** (these documents are available at USFS and COIC websites, the same place you found the application form)

**C-1. Total Costs (refer to Columns A and E in the RAC Budget Form):**

Total Requested Title II Funds [Sec. 203(b)(4)]: \$ \_\_\_\_\_

Total Project Costs: \$ \_\_\_\_\_

**C-2. Are you currently under agreement or contract with the USDA Forest Service?**  Yes  No

**C-3. Proposed Method(s) of Accomplishment:(check those that apply)**

County Workforce  Contract  Federal Workforce  Volunteers

Other (describe)  \_\_\_\_\_

**C-4. Are you pursuing any other funding sources for this grant?**  Yes  No

If yes, please list:

**Part D: Narrative.** You are allowed up to two (2) additional pages to respond to questions D-1 through D-8.

**D-1. Is this project consistent with existing resource and/or watershed management plans?**  Yes  No

If yes, name the plan(s) and cite or reference elements of the plan related to the project:

**D-2. Is this project being coordinated with other related project(s) on adjacent lands:**  Yes  No

If yes, please describe project, including project partners:

**D-3. Describe current conditions at the project site:**

**D-4. What are you proposing to do?**

Supply sufficient detail, including treatment design to match project complexity.

D-5. Does the project benefit the watershed?  Yes  No If yes please describe how:

D-6. Identify targeted species that are benefited by this project (if any):

D-7. How will cooperative relations between the people who use federal lands and the agencies that manage them be improved by this project? [Sec. 203(b)(3)]. Identify the entities and individuals that have been contacted about this project (please list).

D-8. Is this project in the public interest? [Sec. 203(b)(7)]  Yes  No

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Part E: Project Outcomes [Sec. 203(b)(5)].

DO NOT EXCEED THE SPACE PROVIDED.

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E-1. Briefly describe project outcomes, including those related to achieving desired ecological conditions and promoting public awareness about watersheds stewardship and the local, cooperative efforts being undertaken to accomplish watershed restoration:

**E-2. Summary of project outcomes:**

|                                                                  |                                            |                           |
|------------------------------------------------------------------|--------------------------------------------|---------------------------|
| <b>Total Acres:</b>                                              | <b>Total Miles:</b>                        | <b>Number Structures:</b> |
| <b>Number of Laborer Days:</b>                                   | <b>Estimated Number of People Reached:</b> |                           |
| <b>Other (Specify commodities such as timber, forage, etc.):</b> |                                            |                           |

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**Part F: Monitoring Plan [Sec. 203(b)(6)].**


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**F-1. What elements will be measured or evaluated to determine how well the proposed project has met the desired ecological conditions? [Sec. 203(b)(6)]** Please define what methods and protocols are to be used.

Who is responsible for monitoring this?

**F-2. How will the project be evaluated to determine how well the proposed project contributes towards local employment and/or training opportunities, including summer youth jobs programs such as the Youth Conservation Corps? [Sec. 203(b)(6)]**

Who is responsible for monitoring this?

**F-3. What evaluation methods and measures will be used to determine how well the proposed project improves the use of, or added value to, any products removed from National Forest System lands consistent with the purposes of this Act? [Sec. 203(b)(6) and Sec. 204(e)(3)]**

Who is responsible for monitoring this?

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**G: Continuation Project Update                      SKIP THIS SECTION IF THIS IS NOT A CONTINUATION PROJECT**

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**G-1. Is this a continuation of a previously RAC-funded project?**    Yes     No

*If Yes, please answer the following questions. If No, skip this section.*

**G-2. Please list the deliverables, outcomes, and/or activities stated on the previous RAC application:**

Did you achieve these results?    Yes     No     If not, please explain why:

**G-3. Please list the match funds anticipated on the previous RAC application:**

| Anticipated Match Sources                           | Dollar Amount | Amount Received |
|-----------------------------------------------------|---------------|-----------------|
| Total Federal Match Anticipated                     | \$            | \$              |
| Total Other Cash (non-Federal) Match Anticipated    | \$            | \$              |
| Total Other In-kind (non-Federal) Match Anticipated | \$            | \$              |

**G-4. If you did not achieve the full amount of match anticipated in your previous application, please state why:**