

# Fiscal Incentive Grant FY22 Q4

## SAMPLE APPLICATION

*\*Please keep in mind, all potential questions are listed on this sample application. Depending on the project, varying questions will need to be completed.*



### Eligible Projects

The Fiscal Incentive Grant (FIG) Program can fund a wide range of projects as they benefit OHV recreation. Projects should fit in one or more of the following categories:

1. FIG funds may be spent on the construction, improvement, operation, acquisition, or maintenance of publicly-owned or -administered OHV facilities (including infrastructure). This **trail work** may include; the development and rehabilitation of trailside and trailhead facilities, the purchase and lease of trail construction and maintenance equipment, the acquisition of property for trails/trailheads, and the assessment of trail conditions for accessibility and maintenance. **Projects that consist predominately of trail work will be scored more competitively during the recommendation process.**
2. FIG funds may be spent on **access protection** such as the participation in federal travel-planning processes by OHV organizations, the State of Utah, and its subsidiaries.
3. FIG funds may be spent on **search and rescue** (SAR), such as the goods and services that SAR teams need for an effective response to OHV-related incidences.
4. FIG funds may be spent on **tourism**, such as the promotion and administration of OHV related events and/or facilities.
5. FIG funds may be spent on **education**, such as the development and dissemination of publications as well as the operation of educational programs that promote safety, courtesy, and resource conservation related to OHV trails (including non-law enforcement trail safety and trail-use monitoring patrol programs).
6. FIG funds may be spent on **other uses** that further OHV policy directly related under Title 41, Chapter 22, Section 1: "It is the policy of this state to promote safety and protection for persons, property, and the environment connected with the use, operation, and equipment of off-highway vehicles, to promote uniformity of laws, to adopt and pursue a safety education program, and to develop trails and other facilities for the use of these vehicles."

### Trail Construction Guidelines

See the Trails Construction Guidelines. These guidelines are general and the applicant should coordinate with appropriate land managers to understand the specific factors affecting trail design and construction techniques based on land management agency policies. All proposed projects shall follow these guidelines.

## NEPA Considerations (if applicable)

Projects breaking ground on federal land might require environmental clearance. Applicants should coordinate with the appropriate land management agencies to obtain the correct environmental clearance before applying. You can download a sample environmental clearance form by [clicking here](#). You can view an Environmental Study - Preparer's Checklist by [clicking here](#).

## Application Process

**All applications must be submitted through the online grant portal.** Applicants are encouraged to contact the Utah Division of Recreation staff before submitting their proposals for guidance and to discuss project details. You can also learn more about FIG on our [website by clicking here](#). Be sure to also review the [FIG FAQs by clicking here](#).

Rachel Toker

RTP/OHV Grant Administrator

Phone: 385-303-1519

Email: [racheltoker@utah.gov](mailto:racheltoker@utah.gov)

If you would like a completeness review of your application, please reach out to the Division of Recreation staff by **April 8th by 5:00 p.m. (MST)**.

Submitted applications will be reviewed by the Utah Off-highway Vehicle Advisory Council. The council was appointed by the board and has been vested with the authority to select the recipients of the state Fiscal Incentive Grant in Utah.

## Adding Application Collaborations

You can add team members to collaborate on the application in real-time. If you click on the "Invite Collaborators" at the top right of the application you will be prompted to enter collaborators' emails.

Collaborators will then receive a link and have access to the application until you complete your submission. Only the application owner will be able to submit.

NOTE: The Primary Project Manager will be the main point of contact for this project. The Primary and Substitute Project Manager should both create a Submittable account. If at any time, the main point of contact changes, please notify Division of Recreation staff.

## Funding Cap

Due to annual funding limits, applicants may request no more than \$350,000 per application.

## Matching Funds

All projects must offer matching funds, and we encourage at least a portion of those funds to come from the project sponsor, directly. Projects that offer more than a **25%** match will be scored more competitively. This expectation is especially the case for projects in which OHV recreation is not the only use, such as many interpretive signs, tourism facilities, and search-and-rescue operations. Leveraging support is a primary way for proposed projects to meet the FIG intent of incentivizing opportunities for responsible OHV recreation.

## Application Submission and Selection Timeline

Applications must be submitted in the grant portal on or before 5:00 p.m., Friday, April 15, 2022. Late applications will not be accepted. Applications will be reviewed during April and early May, with approvals anticipated in mid-May. 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. Applicants are welcome to attend the grant review meeting to clarify their application to the council. No project work can begin until an agreement is in place with the Utah Division of Recreation.

**NOTE: All required questions need to be answered to submit the application. Required questions are noted with a (\*).**

## Application Checklist

- COMPLETED AND SIGNED APPLICATION (Substitute signature required)
- MAP of the project for which funding is being requested (if applicable)
- MAP and COUNTY ORDINANCE indicating it is an open designated OHV trail (if applicable)
- PROOF OF RIGHT-OF-WAY including letters, surveys, deeds, or other documents (if applicable)
- APPRAISAL REPORT (if applicable)
- PROJECT SCHEDULE AND TIMELINE
- DETAILED PROJECT BUDGET
- LETTERS OF SUPPORT (minimum of two (2), no more than five (5))
- FUNDING COMMITMENT LETTERS FROM ALL OTHER FUNDING ENTITIES
- PHOTOGRAPHS OF PROPOSED PROJECT (if applicable)

All items listed on the “Application Checklist” must be included in order to be considered for grant funding. Failure to provide the required elements may result in disqualification from consideration.

Above table serves as a reference for applicants, but each item is not required to be checked.

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## Section A: Project Overview

### A1. Project Title \*

Please use a unique name that conveys what the project entails.

### A2. Applicant Organization \*

### A3. Applicant Organization Non-Profit Tax ID (if applicable):

Limit: 15 characters

### A4. Applicant Organization W9 \*

SAMPLE

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .csv, .doc, .docx, .odt, .pdf, .rtf, .txt, .wpd, .wpf, .gif, .jpg, .jpeg, .png, .svg, .tif, .tiff

Please upload the W9 for the application organization. You can download a blank W9 by clicking [here](#) if needed.

### A5. Please provide us with the applicant's organization logo. If more than one organization intends to complete this project, please include the additional organizations' logos as well. \*

Choose File

Select up to 10 files to attach. No files have been attached yet. You may add 10 more files.

Acceptable file types: .gif, .jpg, .jpeg, .png, .svg, .tif, .tiff

**A6. Location (Nearest Town) \***

**A7. Does your project take place in more than one county? \***

- Yes  
 No

**A8. Primary Project Manager \***

First Name

Last Name

**A9. Primary Project Manager's Title \***

**Primary Project Manager Signature - please type full name \***

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 the official action of the governing board of the applicant agency.

**A10. Address of Applicant's Organization \***

Country

Address

Address Line 2 (optional)

City

State, Province, or Region

Zip or Postal Code

Please provide the mailing address of the Applicant Organization's location. This will be the address all checks should be mailed to.

**A11. Primary Project Manager's Phone Number \***



**A12. Primary Project Manager's Email Address \***

**A13. Substitute Project Manager \***

First Name

Last Name

**A14. Secondary Project Manager's Title \***

**Substitute Project Manager Signature - Please type full name \***

The substitute project manager should be aware of this application and be willing to take over the management of the proposed project should the primary project manager be unable to.

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 the official action of the governing board of the applicant agency.

**A15. Substitute Project Manager's Phone Number \***



**A16. Substitute Project Manager's Email Address \***

**A17. Amount of Fiscal Assistance Requested \***

\$

Due to annual funding limits, applicants may request no more than \$350,000 per application. Please round up to the nearest dollar.

**A18. Amount of Match (Cash & In-Kind) \***

\$

Please round up to the nearest dollar.

**A minimum 25% match of the TOTAL project cost is required.**

**A19. Total Estimated Project Cost \***

\$  USD

Please round up to the nearest dollar.

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## Section B: Project Summary

### B1. Project Abstract \*

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Limit: 150 words

**Summarize the project in a concise 2-3 sentence summary. The abstract will become the long-term public description of the project. Please provide an accurate description.**

### B2. Project Description \*


**B** *I* U ☰ ☷ “ ” 🔗



Limit: 1000 words

**Provide a project description and specify what the project entails.** Convey the need or problem, and how it would be satisfied or solved. Specify what is to be done. If it is a trail, does the project provide physical connections between resources, link existing community or regional trails, enhance access to OHV recreational opportunities, and/or enable residents to use OHVs? If it is a facility, specify exactly what is to be built. If it is an education campaign, specify any message/s, curriculum, method of delivery, or anticipated outcomes. Address current and projected use by providing visitor statistics, traffic counts, or similar data for the area.

**B3. Map: Please attach a map of the project location within the community. On the map, identify the main roads that provide access, and any infrastructure that surrounds it. If it is a trail, show how it links to other recreational amenities or other trails. \***





Choose File

Select up to 10 files to attach. No files have been attached yet. You may add 10 more files.

Acceptable file types: .csv, .doc, .docx, .odt, .pdf, .rtf, .txt, .wpd, .wpl, .gif, .jpg, .jpeg, .png, .svg, .tif, .tiff

**B4. Is this project a phase of a larger plan or future phases? \***

- Yes  
 No

Include an appropriate map identifying this phase of the project and how it connects to any previous or future phases of the plan as identified in Section B2. \*

Choose File

Select up to 10 files to attach. No files have been attached yet. You may add 10 more files.

Acceptable file types: .csv, .doc, .docx, .odt, .pdf, .rtf, .txt, .wpd, .wpl, .gif, .jpg, .jpeg, .png, .svg, .tif, .tiff

**B5. Anticipated Project Start Date \***



Projects should begin 4-6 weeks after the closing date of FIG.

No work for the project can begin before an agreement is in place with the Division of Recreation.

**B6. Estimated Completion Date \***



Project must be completed within two (2) years of the granting of FIG funds.

**B7. Timeline: provide additional detail of the proposed project schedule/timeline with appropriate phases, steps, and/or milestones. \***

Please break out into six-month increments.

## B8. Photos of proposed project or project site.

Choose File

Select up to 10 files to attach. No files have been attached yet. You may add 10 more files.

Acceptable file types: .gif, .jpg, .jpeg, .png, .svg, .tif, .tiff

For restoration projects, please include images of the areas to be improved.

## Section C: Project Details

### C1. Which category or categories best fit the project? \*

- Trail Work
- Access Protection (protecting the access to public lands)
- Search and Rescue (SAR)
- Tourism
- Education
- Other Use That Directly Benefits OHV Recreation

**Note:** Checking multiple categories does NOT make an application more competitive, and most projects fit predominantly into a single category.

### Is public access guaranteed? \*

- Yes
- No
- N/A

Has environmental clearance (e.g. NEPA or RDCC) been completed? \*

- Yes
- No
- N/A

Who is the project land is owned or administered by? \*

- City
- County
- State
- Federal
- Private

Check one or more that apply.

Please check one or more that applies to the OHV trail \*

- Class B Road (UDOT)
- Class D Road
- State
- Federal
- Private

Explain how much funding is received annually from UDOT for this OHV designated road. If funding is received annually from UDOT, please explain why FIG funding is being requested. \*

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Is the applicant the land owner/administrator of where the project is taking place?

\*

- Yes
- No
- N/A

Include copies of leases, proof of right-of-way, easements, or other agreements for use of land; or a letter from the landowner specifying that the landowner will permit the project and will execute the appropriate legal document in a timely manner. \*

Select up to 10 files to attach. No files have been attached yet. You may add 10 more files.

Acceptable file types: .csv, .doc, .docx, .odt, .pdf, .rtf, .txt, .wpd, .wpf, .gif, .jpg, .jpeg, .png, .svg, .tif, .tiff

Please provide a map AND county ordinance indicating the trail is an open designated OHV trail. \*

Select up to 5 files to attach. No files have been attached yet. You may add 5 more files.

Acceptable file types: .csv, .doc, .docx, .odt, .pdf, .rtf, .txt, .wpd, .wpf, .gif, .jpg, .jpeg, .png, .svg, .tif, .tiff

Do you intend to purchase real property with this funding? \*

- Yes
- No

Please explain the current land's acquisition status and plans for a fee title purchase or other means \*

**B** *I* U    

Limit: 150 words

**Please upload the appraisal report \***

Choose File

Select up to 15 files to attach. No files have been attached yet. You may add 15 more files.

Acceptable file types: .csv, .doc, .docx, .odt, .pdf, .rtf, .txt, .wpd, .wpf, .gif, .jpg, .jpeg, .png, .svg, .tif, .tiff

**Describe the type and extent of facilities, as well as the kind of work to be performed. \***

**B** ***I*** **U**    

Limit: 200 words

List the trail types (i.e. motorcycle singletrack, ATV, side-by-side, 4WD) and lengths that will receive each kind of work (i.e. construction, reconstruction, relocation, other tread work, corridor clearing, and installation of signs or structures).

**Please detail and include evidence demonstrating your willingness and ability to protect OHV access responsibly and effectively \***

**B** ***I*** **U**    

Limit: 200 words

**How will you measure the overall effectiveness of the project description in the overall quantity and quality? \***

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Limit: 200 words

**Please describe your organization’s history with protecting access to public lands in the state of Utah. \***

**B** *I* U ☰ ☷ “ 🔗

Limit: 200 words

**During the previous fiscal year, how many incidents did the SAR team respond to, and what percentage of them directly involved OHV recreation? \***

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Limit: 200 characters

**Regarding the proposed project, how many incidences do you anticipate it will benefit, and what portion of those incidences do you anticipate will directly involve OHV recreation? \***

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Limit: 200 characters

During the previous fiscal year, how much tourism took place, and what portion of that tourism was OHV recreation? \*

**B** *I* U ☰ ☷ ” 🔗

Limit: 200 characters

Regarding the proposed project, how much total use do you anticipate, and what percent of that use do you anticipate will be from OHV recreation? \*

**B** *I* U ☰ ☷ ” 🔗

Limit: 200 characters

How will you measure the education project's reach in terms of quantity and quality (e.g. number of impressions and duration or extent of interaction)? \*

**B** *I* U ☰ ☷ ” 🔗

Limit: 200 characters

How will you measure the education project's effectiveness in terms of perceptions or behavior both before and after the implementation of the project? \*

**B** *I* U ☰ ☷ ” 🔗

Limit: 200 characters

Explain how the project would further the policy set forth in U.C.A. 41-22-1, which states "It is the policy of this state to promote safety and protection for persons, property, and the environment connected with the use, operation, and equipment of off-highway vehicles, to promote uniformity of laws, to adopt and pursue a safety education program, and to develop trails and other facilities for the use of these vehicles." \*

**B** *I* U ☰ ☷ “ 🔗

**C2. What type of OHV use(s) will benefit from the project? \***

- Motorcycle Singletrack
- ATV
- Side-by-Side
- 4WD

**C3. Is the project 100% OHV related? \***

- Yes
- No

**What percent of this project is intended for OHV use? \***

 %

**Please explain what the other usage consists of. \***

Limit: 150 words



## Section D: Project Budget and Funding

### D1. Provide a detailed project budget

**Applicants are required to use the provided FIG budget spreadsheet.**

The budget must include the source of all project funds and when the funds will be available. List matching applicant or partner cash as well as any other in-kind donations. Project expenses should be broken down by category, item, and quantity. Specify which items will be covered by FIG funds, your cash match, or through in-kind donations. Budget allowances for contingencies will not be funded by this program and cannot be included as part of the match. **[To see an example budget click here.](#)**

**[Download FIG budget spreadsheet by clicking here](#)**

Upload detailed project budget spreadsheet: \*

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .xls, .xlsx

Upload any bids associated with the FIG budget spreadsheet

Choose File

Select up to 10 files to attach. No files have been attached yet. You may add 10 more files.

Acceptable file types: .csv, .doc, .docx, .odt, .pdf, .rtf, .txt, .wpd, .wpl, .gif, .jpg, .jpeg, .png, .svg, .tif, .tiff

**D2. Please re-type the Total Amount of Fiscal Assistance Requested from the**

**budget spreadsheet: \***

\$  USD

Should mirror section A15.

**D3. Please re-type the Total Cash Match from the budget spreadsheet: \***

\$  USD

Please include the total cash match of applicant and partners combined.

**D4. Please re-type the Total In-Kind Match from the budget spreadsheet: \***

\$  USD

Please include the total in-kind match of applicant and partners combined.

**D5. Please re-type the Total Project Cost from the budget spreadsheet: \***

\$  USD

Should mirror section A17.

**D6. Does your project have annual maintenance costs or agreements? \***

- Yes  
 No

**Annual maintenance costs and agreements \***

\$  USD

Provide an estimated annual operation and/or maintenance cost for the project.

**Agency/Group Covering Costs \***

Limit: 100 characters

Specify who will be responsible for providing those costs and/or the maintenance costs for this project long term.

**D7. Does your application include charging individuals for a service or product? \***

- Yes
- No

**Please explain the reasoning for the funding request and your organizations financial situation. \***

**B I U** [List Icon] [List Icon] [Quote Icon] [Link Icon]

[Text Area]

Limit: 150 words

### Section E: Project Partnerships

Provide evidence of public support for the proposed project.

**E1. Has your organization received FIG funding in the past? \***

- Yes
- No

**Provide list of projects funded within the past 5 years, dollar amounts awarded, and specify whether the project is complete or not complete. \***



Project Name	Fiscal Year Awarded	Amount Awarded	Project Complete (Y/N)


**E2. Describe how you would publicly recognize contributions from the FIG program, such as placing the Division of Recreation logo on signs and uniforms, developing press releases, or event coverage \***

Limit: 150 characters

**E3. Letters of Support:**

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 applicant organization.

**Letter of Support Upload: \***

Choose File

Select up to 5 files to attach. No files have been attached yet. You may add 5 more files.

Acceptable file types: .csv, .doc, .docx, .odt, .pdf, .rtf, .txt, .wpd, .wpf, .gif, .jpg, .jpeg, .png, .svg, .tif, .tiff

**E4. Letters of Commitment, if applicable:**

If your project intends to receive funding from sources other than the applicant. Please attach letters of commitment from those sources.

**Letters of Commitment Upload**

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**Choose File**

Select up to 10 files to attach. No files have been attached yet. You may add 10 more files.

Acceptable file types: .csv, .doc, .docx, .odt, .pdf, .rtf, .txt, .wpd, .wpl, .gif, .jpg, .jpeg, .png, .svg, .tif, .tiff

**Save Draft**

**Submit Form**

**SAMPLE**