North Dakota Parks and Recreation Department

Recreation Division – 701-328-5357 – parkrec@nd.gov

Land & Water Conservation Fund (LWCF) Grant Application

Date:

CONTACT INFORMATION

Project Sponsor:
(Must be political subdivision.)
Project Name:

Primary Contact

Name:
Title:
Address:
City, State, Zip:
E-Mail:
Phone:
County:

Alternate Contact

Name:
Title:
Address:
City, State, Zip:
E-Mail:
Phone:
County:

REIMBURSEMENT CONTACT INFORMATION

Name and address for where reimbursement payments should be sent to.
If same as Primary/Alternate Contact, please state "Same As Primary Contact OR Same As Alternate Contact"

If not, please fill out below.

Reimbursement Contact:

Name:
Title:
Address:
City, State, Zip:
E-Mail:
Phone:
County:

PROJECT DESCRIPTION

Acquisition: Yes ☐ No ☐ New Development: Yes ☐ No ☐
Renovation Development: Yes ☐ No ☐
Combination Acquisition & Development: Yes ☐ No ☐
Briefly Explain:

(Example: Project sponsor is proposing to construct a playground. Project sponsor is proposing to acquire land. Project sponsor is proposing to construct a softball field.)

Estimated Start Date: ☐ Estimated Completion Date: ☐
(Grant recipients have 18 months to complete projects.)

Who will maintain the project site? ☐
Does the proposed project meet requirements of the American with Disabilities Act and Architectural Barriers Act? ☐
Briefly Explain.

PROJECT LOCATION

Property Name:

Physical Address: ☐
County: ☐
Legal Description: ☐
Township: ☐ Range: ☐ Section: ☐
Latitude (in decimal degrees): example: 46.785690 ☐
Longitude (in decimal degrees): example: -100.622172 ☐

*Please use **Google Maps** to find your latitude and longitude.*

Is the proposed project location a current LWCF site? Yes ☐ No ☐
If yes, what is the current acreage of the encumbered recreation area? ☐
If yes, list past LWCF project numbers for this site only. ☐
If no, what is the total acreage that will be encumbered if the project is awarded funding? ☐
If land acquisition project, what is the acquired number of new acres? ☐

COMMUNITY INFORMATION

Population:

List current recreational opportunities offered:

Was a survey conducted indicating a need for the proposed project? Yes No

Is the proposed project part of a strategic plan? Yes No

If yes, briefly explain.

Proposed projects must meet regional recreation demand per the State Comprehensive Outdoor Recreation Plan (SCORP).
"http://www.parkrec.nd.gov/information/department/attachments/scorp-2013-2017.pdf"

Region

Primary: Secondary: Tertiary:

List of current partnerships/agreements with project sponsor:

BUDGET INFORMATION

Total project cost:

Total grant amount requested:

Would partial funding affect the completion of the grant? Yes No

If yes, briefly explain.

Do you have an established Title VI program? Yes No

"http://www.fhwa.dot.gov/civilrights/programs/tvichecklist.cfm"

ATTACHMENTS (Applications *without* these items will be rejected.)

A legible copy of the Warranty Deed (project sponsor must have clear title to the project lands through Warranty Deed).
Project location map (see example) include entrance site.
Project 6f boundary map (see example) include official park name, directional arrow, & total acres.
Site Development Plans.
Budget and Match (see form).
Project Proposal - to include site development plans. (Max 10 pages)

Yes	No	
☐	☐	Is the land suitable for intended use?
☐	☐	Is the anticipated use compatible with surrounding lands?
☐	☐	Is the site located in a floodplain?
☐	☐	Is the area easily accessible?
☐	☐	Are there improvements on the property? If so, what will be done with them?
☐	☐	Are there existing overhead wires at the site?
☐	☐	Are there any reserved rights/restrictions on the property? If so, will they adversely affect the use of the area?
☐	☐	Are there any special permits required?
☐	☐	Are any unique or new ideas in design concepts anticipated?
☐	☐	Are there any potential health or safety problems?
☐	☐	Is the applicant aware of the provisions of the Title VI of the Civil Rights Act in regard to employment and participation?
☐	☐	Are there any known historic or archeological sites, wildlife areas, etc. on or near the property?
☐	☐	Is the project to be phased?
☐	☐	Will income be generated on site prior to development?
☐	☐	Will the proposal cause a negative impact on the environment?
☐	☐	Will the project compete with private recreational facilities in the area?

BUDGET INFORMATION CONSTRUCTION PROGRAMS

Total Project Cost		
Total Grant Amount Requested		
Cost Category	**Amount**	
Administrative and legal expenses		
Land, structures, rights-of-ways, appraisals, etc.		
Relocation expenses and payments		
Architectural and engineering fees		
Other architectural and engineering fees		
Project inspection fees		
Site work		
Demolition and removal		
Construction		
Equipment		
Materials		
Miscellaneous		
TOTAL PROJECT COST		
Matching Funds		
Source	**Amount**	**Description**
TOTAL MATCHING FUNDS		

*** Total project cost will need to be submitted upon completion of project.**

Application Attachment A

Certifications Regarding Debarment, Suspension and Other Responsibility Matters, Drug-Free Workplace Requirements and Lobbying

Persons submitting this form should refer to the regulations referenced below for complete instructions:

Certification Regarding Debarment, Suspension, and Other Responsibility Matters – Primary Covered Transactions – The prospective primary participant further agrees by submitting this proposal that it will include the clause titles, "Certification Regarding Debarment, Suspension, Ineligibility and voluntary Exclusion – Lower Tier Covered Transaction," provided by the department or agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions. See below for language to be used; use this form for certification and sign; Certification Regarding Drug- Free Workplace Requirements-Alternate I. (Grantees Other Than Individuals) and Alternate II. (Grantees Who are Individuals) – (See Appendix C of Subpart D of 43 CFR Part 12)

Checking the boxes on this form and submitting it provides for compliance with certification requirements under 43 CFR Parts 12 and 18. The certifications shall be treated as a material representation of fact upon which reliance will be placed when the funding agency determines to award the covered transaction, grant, cooperative agreement or loan.

PART A: Certification Regarding Debarment, Suspension, and Other Responsibility Matters – Primary Covered Transactions

☐ CHECK IF THIS CERTIFICATION IS FOR A PRIMARY COVERED TRANSACTION AND IS APPLICABLE.

1. The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
    1. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
    2. Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
    3. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
    4. Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default
2. Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Part B: Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier Covered Transactions

☐ CHECK IF THIS CERTIFICATION IS FOR A LOWER TIER COVERED TRANSACTION AND IS APPLICABLE.

1. The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.

2. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Part C: Certification Regarding Drug-Free Workplace Requirements

☐ CHECK IF THIS CERTIFICATION IS FOR AN APPLICANT WHO IS NOT AN INDIVIDUAL

Alternate I. (Grantees Other Than Individuals)

1. The grantee certifies that it will or continue to provide a drug-free workplace by:
    1. (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
    2. (b) Establishing an ongoing drug-free awareness program to inform employees about-
        1. The dangers of drug abuse in the workplace;
        2. The grantee's policy of maintaining a drug-free workplace;
        3. Any available drug counseling, rehabilitation, and employee assistance programs; and
        4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
    3. (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
    4. (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will –
        1. Abide by the terms of the statement; and
        2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statue occurring in the workplace no later than five calendar days after such conviction;
    5. (e) Notifying the agency in writing, within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification numbers (s) of each affected grant;
    6. (f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted—
        1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
        2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
    7. (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a),(b),(c),(d),(e) and (f).
2. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant: Place of Performance (Street address, city, county, state, zip code)

Address Line 1:	
Address Line 2:	
City:	
State:	
Zip:	

☐ Check if there are workplaces on file that are not identified here

Part D: Certification Regarding Drug-Free Workplace Requirements

☐ CHECK IF THIS CERTIFICATION IS FOR AN APPLICANT WHO IS AN INDIVIDUAL

Alternate II. (Grantees Who Are Individuals)

1. The grantee certifies that, as a condition of the grant, he or she will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant;
2. If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, he or she will report the conviction, in writing, within 10 calendar days of the conviction, to the grant officer or other designee, unless the Federal agency designates a central point for the receipt of such notices. When notice is made to such a central point, it shall include the identification number (s) of each affected grant.

Part E: Certification Regarding Lobbying
Certification for Contracts, Grants, Loans, and Cooperative

☐ CHECK IF CERTIFICATION IS FOR THE AWARD OF ANY OF THE FOLLOWING AND THE AMOUNT EXCEEDS $100,000: A FEDERAL GRANT OR COOPERATIVE AGREEMENT; SUBCONTRACT, OR SUBGRANT UNDER THE GRANT OR COOPERATIVE AGREEMENT.

☐ CHECK IF CERTIFICATION IS FOR THE AWARD OF A FEDERAL LOAN EXCEEDING THE AMOUNT OF $150,000, OR A SUBGRANT OR SUBCONTRACT EXCEEDING $100,000, UNDER THE LOAN

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an agency, a Member of Congress, and officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, load, or cooperative agreement.
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LL, “Disclosure Form to Report Lobbying,” in accordance with its instructions.

The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered unto. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, title 31, U.S. Code. Any person who fails to tile the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

As the authorized certifying official, I hereby certify that the above specified certifications are true and that all information in this application is accurate to the best of my knowledge:

Responsible Official's Signature	**Responsible Official's Title**
Political Subdivision (Project Sponsor)	**Date**

Please submit one electronic copy by 1:00 P.M. CST on January 29, 2016 to:

Electronic Copy: Press to submit by e-mail

If you have any questions, please contact Kevin Stankiewicz at 701-328-5364 or kstankiewicz@nd.gov.

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Project location map (see example) include entrance site.
Project 6f boundary map (see example) include official park name, directional arrow, & total acres.
Site Development Plans.
Budget and Match (see form).
Project Proposal - to include site development plans. (Max 10 pages)

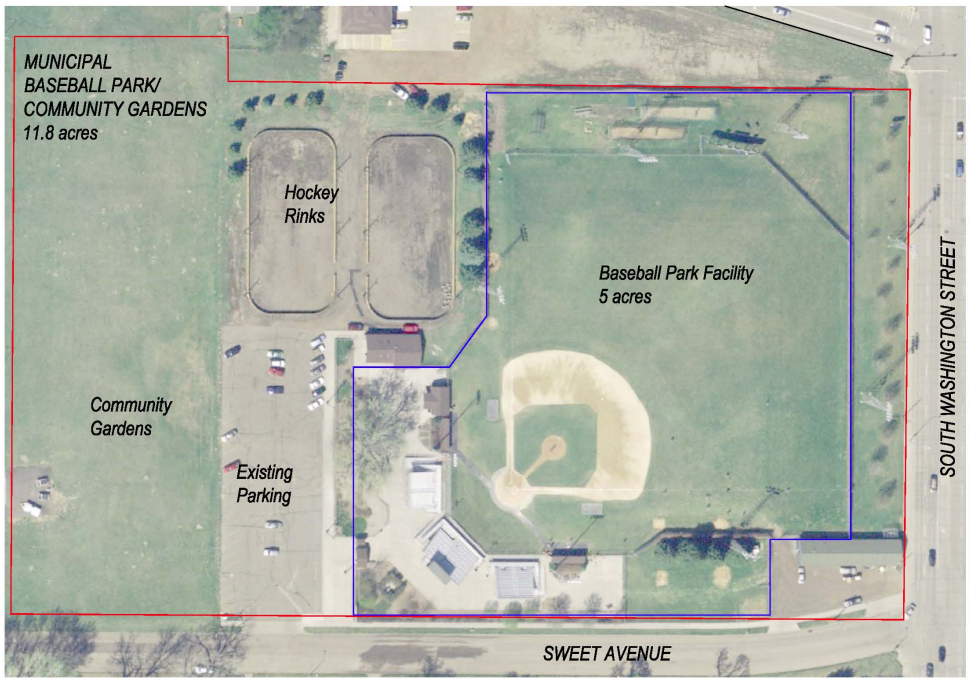
To attach documents to this file, here is how to do it!

With this document open, click on View, then go down to Comment, and go over to Annotations.
The Annotations will open up on the right hand side. Click on the Paperclip Picture. Then left click below somewhere on this page and a Tack Pin will show up. Left click and the "Add Attachment" window will open up and here is where you will locate the file you would like to attach to this document. Double click on the file. A File Attachment Properties will pop up. Leave the appearance as a Blue Paperclip and click OK. To add another document, repeat this process.

When finished filling out form and attaching documents, please click on the gray "Press to submit by e-mail" button above.

Golden Valley County Memorial Park

Project Location Map Example



Project 6f Boundary Map Example