

MISSOURI DEPARTMENT OF NATURAL RESOURCES DIVISION OF STATE PARKS

FEDERAL RECREATIONAL TRAILS PROGRAM CFDA 20.219 TRAIL PROJECT APPLICATION (PAGE 1 OF 12)

| DIVISION OF STATE PARKS USE ONLY | |
|----------------------------------|--|
| PROJECT# | |

PROJECT CATEGORY

If the vendor provides any "personal information" as defined in Section 105.1500, RSMo concerning an entity exempt from federal income tax under Section 501(c) of the Internal Revenue Code of 1986, as amended, the vendor understands and agrees that it is voluntarily choosing to seek a state contract and providing such information for that purpose. The state will treat such personal information in accord with §105.1500, RSMo.

| QUESTIONS 1-9: GENERAL INFORMATION | | | | | |
|---|---------------------------|-------------|----------|-------------------|--------------------------|
| 1. NAME OF AGENCY OR ORGANIZATION REQUESTING GRANT FUNDS | | | | | |
| ADDRESS | | | | | |
| CITY | | STATE | | | ZIP |
| NAME AND TITLE OF RECEIVING OFFICIAL | | ' | | | |
| EMAIL ADDRESS | | | | PHONE | |
| 2. AGENCY/ORGANIZATION UEI NUMBER | | | | | |
| 3. APPLICATION PREPARER | | | | | |
| EMAIL ADDRESS | | | | PHONE | |
| 4. PROJECT CONTACT PERSON | | TITLE OF PF | ROJECT C | CONTACT PERSON | |
| EMAIL ADDRESS | | | | PHONE | |
| IS THIS PROJECT CONTACT A LPA PROJECT CERTIFIED PERSON IN RESPONSIBLE CHA | ARGE? | □ NC |) | □ YES | |
| 5. US REPRESENTATIVE | | | | DISTRICT | |
| 6. STATE REPRESENTATIVE | | | | DISTRICT | |
| 7. STATE SENATOR | 7. STATE SENATOR DISTRICT | | | | |
| 8. REGIONAL PLANNING COUNCIL | | | | | |
| 9. LOCATION OF PROJECT: COUNTY IN WHICH THE PROJECT IS LOCATED | | | | | |
| CITY OR TOWN IN WHICH THE PROJECT IS LOCATED (if project is not located within city limits, indicate r | nearest city or tow | n) | | | |
| TOWNSHIP, RANGE, SECTION | | | LATITUD | E | LONGITUDE |
| QUESTIONS 10-11: PROJECT SPONSOR'S BACKGROUND | | | | | |
| 10. PROJECT APPLICANT IS: STATE LOCAL GOVERNMENT NOT-FOR-PROFIT FEDERAL AGENCY | | | | | |
| DESCRIBE PROJECT SPONSOR'S ORGANIZATION: HOW LONG HAS THE ORGANIZATION BEEN IN EXISTENCE? (indicate number of years; If less than a year, give date organization was established) | WHAT IS THE O | PRGANIZATIO | ON'S ANI | NUAL OPERATING BI | UDGET (please indicate)? |
| DOES THE ORGANIZATION EMPLOY FULL-TIME STAFF? | DOES THE ORG | SANIZATION | EMPLOY | PART-TIME STAFF? |) |
| □ NO □ YES (if yes, designate how many) □ NO □ YES (if yes, designate how many) | | | nany) | | |
| DOES THE ORGANIZATION HAVE A BOARD WITH OVERSIGHT RESPONSIBILITIES? DOES THE ORGANIZATION HAVE VOLUNTEERS? DOES THE ORGANIZATION HAVE VOLUNTEERS? DOES THE ORGANIZATION HAVE VOLUNTEERS? | | | | | |
| □ NO □ YES (if yes, designate how many members) □ NO □ YES (if yes, designate how many) □ SUMMARIZE THE ORGANIZATION'S MISSION | | | | | |
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| QUESTION 12: PREVIOUS | PERFORMANCE [UP TO | 10 POINTS] | | | |
|--|--|--------------------------------|-------------------------------|--|---------|
| 12. HAS THE PROJECT SPONSOR RECE | VED A MoDNR GRANT WITHIN THE L | AST 10 YEARS? | □ NO | ☐ YES (if yes, designate how many) | |
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| IF YES, DOES THE SPONSOR HAVE | A MoDNR GRANT CURRENTLY OPEN | !? | □ NO | ☐ YES (if yes, designate how many pro | jects) |
| WITHIN THE LAST 10 YEARS, HAS T | HE SPONSOR HAD TO WITHDRAW A | MoDNR PROJECT AND DE | -OBLIGATE FUNDING? | □ NO □ YES | |
| WITHIN THE LAST 10 YEARS, HAS T | HE SPONSOR HAD TO ASK FOR AN E | EXTENSION TO COMPLETE | THEIR PROJECT? | □ NO □ YES (if yes, indicate ho | w many) |
| IF THE PROJECT SPONSOR HAS HA | D TO REQUEST AN EXTENSION OR N | VITHDRAW A PROJECT WI | THIN THE PAST 10 YEARS | S, PLEASE PROVIDE AN EXPLANATION. | |
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| QUESTIONS 13-22: PROJE | | O 20 POINTS] | | | |
| 13. PROJECT CATEGORY IS (please select NONMOTORIZED SINGLE € | * | | ☐ MOTORIZED SI | INGLE USE* [1 points] | |
| □ NONMOTORIZED DIVERSE | | | | IVERSE USE* [3 points] | |
| ☐ BOTH NONMOTORIZED & | MOTORIZED DIVERSE USE* [5 p | oints] | *At least 60% of total | I project costs must be motorized-related | costs. |
| 14. PROJECT TYPE IS: (Check either new | development OR rehabilitation/repair | AND property and equipmen | nt acquisition, if applicable | s) | |
| □ NEW DEVELOPMENT (if 60 | % of total project costs) btype below; check all that apply) | | | I/REPAIR (if 60% of total project cos cate subtype below; check all that apply) | its) |
| □ NEW TRAIL CONSTRUCTION | | | , , , | /REPAIR OF EXISTING TRAIL(S) | |
| ☐ NEW TRAILSIDE AND/OR TRA | AILHEAD AMENITIES | | ☐ REHABILITATION | REPAIR OF EXISTING AMENITIES | |
| □ NEW TRAIL CONNECTOR(S) | TO EXISTING TRAIL(S) | | ☐ REHABILITATION | REPAIR OF EXISTING CONNECTORS | |
| ☐ PROPERTY/EASEMENT AC | QUISITION OR LEASE FOR TRAIL | DEVELOPMENT | | | |
| 15. PROJECT WILL BE CONSTRUCTED C | ON (for trail-related construction/rehabi | itation projects): | PUBLIC LAND | ☐ PRIVATE LAND ☐ COMBINA | TION |
| 16. INDICATE IF PROJECT SPONSOR OW | ING LEASES OF HAS ACCESS TO DE | PO IECT I AND* (check all th | at apply) | | |
| OWN | VNO, LEASES ON FIAS ACCESS TO FI | PERMANENT TRA | | ☐ OTHER (please explain |) |
| ☐ LEASE (minimum of 25 year | rs, and signature of | | NSTRUCTION EASEME | | 9 |
| owner/other holders acknowle | edging 25 year commitment to | | | | |
| maintain in outdoor recreation *Additional documentation required. Re | | cklist in the application guid | Δ. | | |
| 17. LIST ALL PRESENT EXISTING AND RE | | | | THE EFFECT ON THE RECREATIONAL EA | ASEMENT |
| THAT WILL BE REQUIRED. | | , , | , | | |
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| 18. ARE THERE ANY RIGHT-OF-WAYS, E | ASSMENTS OF DEVERSIONARY INT | EDECTO ACCOCIATED WITH | LITTLE DECREETV2 | □ NO □ YES (if ves. please ex | ala:a\ |
| 10. ANE THENE ANT NIGHT-OF-WATS, E | ASEMENTS, ON NEVERSIONANT INT | ENESTS ASSOCIATED WITE | TIME PROPERTY | ☐ NO ☐ YES (if yes, please ex | piairi) |
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| 19. INTENDED USES OF THIS PROJECT (| check all that apply) | | | | |
| BICYCLING | ☐ CANOEING/KAYAKING | □ OTHE | R (please specify) | | |
| □ WALKING/JOGGING | ☐ MOTORIZED BOATING | | | | |
| □ HIKING | ☐ ATV/UTV (four-wheel) | | | | |
| BACKPACKING | □ OFF-HIGHWAY MOTORCY | CLING | | | |
| □ EQUESTRIAN | ☐ OFF-ROAD VEHICLE | | | | |
| 20. PROJECT TITLE | | | | | |
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| | IARRATIVE. what is being constructed, rehabilitated/repaired and/or acquired; see application guide for clarification; answer within the space provided; a 400 word limit is encouraç |
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| as proping the principle of the | S PROJECT (include how the project is beneficial and who it benefits; answer in the space provided). |
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| 22. DESCRIBE THE BENEFITS OF THIS | STROLL T (module now the project is beneficial and who it benefits, answer in the space provided). |
| 22. DESCRIBE THE BENEFITS OF THIS | Though the project is considered and who is desirable, an area and a space providedly. |
| 22. DESCRIBE THE BENEFITS OF THIS | Though the project is deficient and who it denotes, answer in the space provided). |
| 22. DESCRIBE THE BENEFITS OF THIS | Though the state of the state o |
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FEDERAL RECREATIONAL TRAILS PROGRAM CFDA 20.219
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| QUESTIONS 23-31: PROJECT PLANNING AND IMPLEMENTATION [UP TO 35 POINTS] | | | | |
|---|---|--|--|--|
| 23. HOW DOES THIS PROJECT MEET A NEED IDENTIFIED IN A LOCAL OR REGIONAL MASTER PLAN | OR THE STATEWIDE COMPREHENSIVE MASTER PLAN (SCORP)? [up to 5 points] | | | |
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| 24. DID THE PROJECT SPONSOR SOLICIT PUBLIC OPINION CONCERNING THIS PROJECT WITHIN | FHE PAST 12 MONTHS? [up to 5 points] | | | |
| ☐ YES (if yes, describe how and provide the documentation outlined in the Supporting Documentation Checklist) | ☐ NO (if no, indicate if the public will be given opportunity to comment and how) | | | |
| outlined in the Supporting Documentation Checklist) | | | | |
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| 25. IDENTIFY WHICH STANDARDS OF THE AMERICAN WITH DISABILITIES ACT (ADA) AND ARCHITE | L CTURAL BARRIER ACT (ABA) ARE BEING ADDRESSED IN THIS PROJECT. DESCRIRE WHAT | | | |
| ACCESSIBILITY CHALLENGES EXIST AND HOW YOU INTEND TO OVERCOME THEM. [up to 5 poi | | | | |
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| 26. HOW WILL THIS PROJECT ADD VALUE TO YOUR CURRENT/FUTURE TRAIL PLANS? PLEASE EXPLAIN THE ROLE OF TRAILS IN YOUR COMMUNITY. PLEASE INCLUDE MAPS. [up to 4 points] |
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| 27. WHAT DESIGN ELEMENTS ARE INCLUDED THAT CONTRIBUTE TO PRESERVING ENVIRONMENTAL RESOURCES AS PART OF ENSURING A QUALITY OUTDOOR RECREATION EXPERIENCE? WHAT OTHER ENVIRONMENTAL CONCERNS WILL YOU HAVE TO ACCOUNT FOR IN REGARDS TO THE PROJECT? [up to 5 points] |
| With Other Environmental Control Mee 100 1970 E 1070000011 Other Mee 110000011. [up to 0 points] |
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| 28. DESCRIBE WHAT LONGTERM SUSTAINABILITY CONSIDERATIONS HAVE BEEN ADDRESSED OR WILL BE ADDRESSED BY THE PROJECT DESIGN AND CONSTRUCTION. [up to 5 points] |
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| 29. DESCRIBE WHAT SAFETY CONCERNS HAVE BEEN ADDRESSED OR WILL BE ADDRESSED BY THE PROJECT DESIGN (include photo). [up to 4 points] |
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| 30. FOR CONSTRUCTION AND/OR REHABILITATION/REPAIR PROJECTS, INDICATE WHO WILL BE DOING WHAT WORK. IF YOU INTEND TO USE IN-HOUSE LABOR FOR THE CONSTRUCTION |
| OF THE PROJECT, SUBMIT A COST ANALYSIS THAT COMPARES IN-HOUSE LABOR VS. CONTRACT LABOR. [up to 2 points] |
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| QUESTION 31: PROJECT MAINTENANCE AND MANAGEMENT [UP TO 5 POINTS] | | | | |
|---|--|--|--|--|
| 31. PROVIDE A DETAILED POST-COMPLETION PLAN OF HOW THE PROJECT WILL BE MANAGED AND MAINTAINED FOR 25 YEARS. | | | | |
| QUESTIONS 32-33: PARTNERSHIPS AND DONATIONS [UP TO 5 P | POINTSI | | | |
| 32. WILL QUALIFIED YOUTH CONSERVATION OR SERVICE CORPS BE INVOLVED WITH THE PROJECT IN NO YES (if yes, list the group/groups that will be contributing in the below box) | | | | |
| 33. LIST ANY CONTRIBUTING PARTNERS OR DONORS INVOLVED WITH THIS PROJECT AND THEIR I (a letter of intent to donate from each donor must accompany the application packet; see Supporting | INTENDED CONTRIBUTIONS. g Documentation Checklist in the application guide) | | | |
| PARTNERS/DONORS | CONTRIBUTION/VALUE | | | |
| А. | А. | | | |
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| QUESTION 34-36: PROJECT BUDGET ESTIMATE AND BUDGET DETAILS | THE TO 15 POINTS |
|--|------------------|
| QUESTION 34-30. PROSECT DODGET ESTIMATE AND DODGET DETAILS | JUE TO IS FORMED |

| QUESTION 34-30: PROJECT BUDGET ESTIMATE AND BUDGET DETAILS [UP TO 15 POINTS] |
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| 34. WHAT ASSURANCES CAN THE PROJECT SPONSOR PROVIDE THAT THERE IS ADEQUATE FUNDING TO COMPLETE THE PROJECT WITHIN THREE YEARS? [up to 3 points] |
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35. FOR EACH PHASE OF THE PROJECT, FILL OUT THE BUDGET TABLE BELOW WITH THE GRANT AMOUNT REQUESTED AND THE MATCHING AMOUNT PROVIDED BY THE PROJECT SPONSOR AND/OR DONOR (use whole dollar amounts only; the maximum grant request is \$250,000, and the minimum match percentage is 20%). [up to 7 points for quality and accuracy of budget]

| COST CATEGORY | GRANT REQUEST | MATCHIN | TOTAL PROJECT COST | |
|---|---------------------------------|-----------------|-------------------------|----|
| | | PROJECT SPONSOR | DONATION (by 3rd party) | |
| Phase 1. Planning/ Engineering/Environmental Review Process (≤ 10% of total project cost) | \$ | \$ | \$ | \$ |
| Phase 2. Right-of-Way Acquisition | \$ | \$ | \$ | \$ |
| Phase 3. Construction | \$ | \$ | \$ | \$ |
| TOTALS | \$ (Not to exceed \$250,000) | \$ | \$ | \$ |

| , , | | MATCHING FUNDS POINT VALUES | | |
|----------------------------|--|-----------------------------|-------------------------------------|-------------|
| | | % | Match | Points |
| Percent of matching funds: | | 30 | 1% and up 1% to 39% 1% to 29% | 5 3 1 |

Projects with a Federal Award \$500,000 or less: USDOT issued a public interest waiver for Buy America requirements effective 8/16/23 for specific projects of \$500,000 or less, subject to the following limitations. The waiver is from Buy America (BABA) requirements for De Minimis Costs and Small Grants to prepare for full compliance with the BIL's new Made in America standards for construction materials. The public interest waiver of BABA's domestic preferences is for projects funded under DOT-administered financial assistance programs, including the Recreational Trails Program administered in Missouri by the Missouri Department of Natural Resources, for iron, steel, manufactured products, and construction materials under a single financial assistance award for which the total amount of Federal financial assistance applied to the project, through awards or subawards, is below \$500,000. The waiver is applicable only to awards that are obligated, or subawards that are made, on or after the effective date of the waiver, 8/16/23.

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36. FILL OUT THE TABLE BELOW TO PROVIDE DETAILED INFORMATION ABOUT THE BUDGET ITEMS WITHIN EACH PHASE OF THE PROJECT. INCLUDE THE ESTIMATED COMPLETION DATE IN MONTH AND YEAR (assuming a start date of Oct. 15, 2024; if eligible costs were incurred prior to the projected start date, please provide the date of completion for the expense).

| Phase: | Detailed Expenditures | Total Expense | Maximum Timeframe | Projected Schedule |
|--|---------------------------------|---------------|---|--------------------|
| 1. PLANNING/ ENGINEERING/ ENVIRONMENTAL REVIEW PROCESS (≤ 10% OF TOTAL PROJECT COST) | ENVIRONMENTAL | | 6 months Environmental/ 6 months Planning/ Engineering | |
| | ENGINEERING | | | |
| | OTHER | | | |
| 2. RIGHT-OF-WAY ACQUISITION | LEASE/EASEMENT/LAND ACQUISITION | | 6 months | |
| | APPRAISALS, FILING | | | |
| | OTHER | | | |



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36. FILL OUT THE TABLE BELOW TO PROVIDE DETAILED INFORMATION ABOUT THE BUDGET ITEMS WITHIN EACH PHASE OF THE PROJECT. INCLUDE THE ESTIMATED COMPLETION DATE IN MONTH AND YEAR (assuming a start date of Oct. 15, 2024; if eligible costs were incurred prior to the projected start date, please provide the date of completion for the expense).

| Phase: | Detailed Expenditures | Total Expense | Maximum Timeframe | Projected Schedule |
|-----------------|-----------------------|---------------|----------------------|--------------------|
| 3. CONSTRUCTION | LABOR | | 18 months | |
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CONSISTENT WITH RTP REQUIREMENTS, THE EIGHT-MEMBER MISSOURI TRAILS ADVISORY BOARD (MTAB) REVIEWS AND SCORES THE RTP GRANT APPLICATIONS. BOARD MEMBERS MAY AWARD THE PROJECT POINTS BASED UPON THEIR SUBJECTIVE EVALUATION OF THE APPLICATION.

| SUPPORTING DOCUMENTATION CHECKLIST | | | | |
|---|--|--------------------------------------|--|--|
| USE THE BELOW CHECKLIST TO ENSURE THE PROJECT APPLICATION IS COMPLET | E (for information specific to each item, | refer to the RTP Application Guide). | | |
| □ SPECIFIC LOCATION MAP | ☐ DRAFT MEMORANDUM OF AGREE | MENT* (if project is on public land) | | |
| ☐ AERIAL PHOTO WITH PROJECT SITE PLAN | ☐ FINANCIAL ASSURANCE LETTER | | | |
| □ SCHEMATIC PLAN | RESOLUTION FROM GOVERNING | BODY | | |
| □ SIGNED LETTERS OF COMMITMENT OR INTENT TO DONATE | LETTERS OF INTENT TO LEASE/SE | ELL/DONATE REAL PROPERTY | | |
| □ SIGNED LETTER OF SUPPORT (if project is on public land) | □ PROOF OF LAND OWNERSHIP OR LEASEHOLDER/EASEMENT RIGHTS | | | |
| ☐ BUSINESS ENTITY CERTIFICATION, ENROLLMENT DOCUMENTATION, AND AFFIDAVIT OF WORK AUTHORIZATION (State and Federal E-Verification) | □ PROOF OF PUBLIC INVOLVEMENT | | | |
| □ PHOTOGRAPHS OF PROJECT AREA | COPY OF RELEVANT PORTION OF | COMPREHENSIVE OR MASTER PLAN | | |
| □ EXISTING TRAIL MAP | □ ENVIRONMENTAL REVIEW (if applicable) | | | |
| *If recommended for funding, a signed Memorandum of Agreement will have to be executed. | | | | |
| CERTIFICATION OF RESPONSIBLE PERSON | | | | |
| A RESPONSIBLE OFFICIAL FROM THE SPONSORING ORGANIZATION MUST SIGN AND DATE THE APPLICATION. APPLICATIONS WITHOUT SIGNATURE WILL NOT BE SCORED. | | | | |
| "I hereby certify that the information contained in this application packet is true and correct to the best of my knowledge. I understand that the application will be rated solely on the information provided on the application and in the enclosed supporting documentation. The submission of incorrect information and the lack of required documentation can result in this application being withdrawn from consideration for funding." | | | | |
| SIGNATURE | TITLE | | | |
| PRINTED NAME | | DATE | | |
| SUBMIT COMPLETED APPLICATION | | | | |

Submit two (2) copies of the application and supporting documentation to the Grants Management Section (address below):

Missouri Department of Natural Resources Division of State Parks **Grants Management Section Attn: RTP Planner** P.O. Box 176 1659 E. Elm St. Jefferson City, MO 65102-0176

Application packets must be submitted or postmarked on or before Feb. 21, 2024. For questions about an application packet or the process, call 573-522-8773 or 573-751-8661 or email mspgrants@dnr.mo.gov.

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THIS SECTION OF THE FORM MUST BE COMPLETED FOR ALL REQUESTS TO PURCHASE/REPAIR/REPLACE TRAIL CONSTRUCTION/ REPAIR/ MAINTENANCE EQUIPMENT UNDER THE RECREATIONAL TRAILS PROGRAM. **PROCUREMENTS MUST BE IN ACCORDANCE WITH 2 CFR 200.319 AND 200.320.**

| QUESTIONS 1-6: REPAIR OF EXISTING EQUIPMENT (COMPLETE IF EQUIPMENT REPAIR IS A PART OF THIS GRANT) | | | | |
|---|--|---------------------------------|--|--|
| 1. WHAT IS THE MAKE, MODEL, YEAR, TYPE, AND HOURS OF THE | | | | |
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| 2. WAS IT ORIGINALLY PURCHASED USING FEDERAL FUNDS? | | | | |
| □ NO | | | | |
| YES (if yes, please provide the name of the grant program, pro- Provide a copy of any commitment you have agreed to as | | | | |
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| 3. DESCRIBE THE EXISTING CONDITION OF THE EQUIPMENT AND |) ITS ESTIMATED MILEAGE/HOURS. | | | |
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| 4. DESCRIBE WHAT REPAIRS/MAINTENANCE AND OTHER ASSOC | NATED COSTS WILL BE COMPLETED LISING GRANT FLINDS | | | |
| 4. BESSTILLE WITH THE TAILOUT WITH WITH THE STREET | WILE GOOD WILE BE COME ELTER COME AT WINT TO NEC. | | | |
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| E WILL A DUILD AMEDICA DUIV AMEDICA WAIVED DE DECUIDED | TO DUDCUAGE THE DADTE MEEDED TO COMPLETE THESE DE | NAIDCO | | |
| 5. WILL A BUILD AMERICA BUY AMERICA WAIVER BE REQUIRED NO YES (complete and include a copy of the BUILD. | | Alto! | | |
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| 6. DESCRIBE HOW THIS EQUIPMENT IS INTEGRAL TO MAINTAINII | NG YOUR TRAIL SYSTEM | | | |
| | trailhead amenities are constructed/repaired/maintained using this | s equipment?). | | |
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| QUESTIONS 7-14: PROJECT SPONSOR'S E | ACKGROUND | | | |
| 7. WHAT IS THE TYPE OF THE PIECE(S) OF EQUIPMENT AND/OR | | GRANT? | | |
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| 8. WILL A BUILD AMERICA BUY AMERICA WAIVER BE REQUIRED. NO YES (complete and include a copy of the Build A | * * | | | |
| ☐ NO ☐ YES (complete and include a copy of the Build A | merica Buy America waiver request form) | | | |
| 9. IS THIS RTP GRANT REQUEST FOR REPLACEMENT OF EQUIPM | | FUNDS? | | |
| □ NO (If no, skip to question 12) □ YES (if yes, go to question 12) | stion 10) | | | |
| 10. IF YES, WILL THE OLD EQUIPMENT BE SOLD AND THE REVEN | UE USED TO OFFSET THE PURCHASE OF THE NEW EQUIPMEN | T? | | |
| ☐ NO (If no, skip to question 12) ☐ YES (If yes, go to question 12) | estion 11) | | | |
| 11. IF YES, CALCULATE THE NET PURCHASE VALUE OF THE NEW | EQUIPMENT BY SUBTRACTING THE ESTIMATED TRADE VALUE | E OF THE OLD EQUIPMENT FROM THE | | |
| PURCHASE PRICE OF THE NEW EQUIPMENT: | THE PROPERTY OF THE PROPERTY O | | | |
| NEW EQUIPMENT PURCHASE PRICE | TRADE VALUE OF OLD EQUIPMENT | NET PURCHASE VALUE | | |
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DIVISION OF STATE PARKS

FEDERAL RECREATIONAL TRAILS PROGRAM CFDA 20.219 TRAIL PROJECT APPLICATION (PAGE 12 of 12)

| AS DESCRIPE THE MEN FOLLOWERS OF A TTA OUN MENTON IN THE STA | | | |
|---|-----------------|--|--------------|
| 12. DESCRIBE THE NEW EQUIPMENT OR ATTACHMENTS IN DETAIL. | | | |
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| 13. DESCRIBE HOW THE NEW EQUIPMENT OR ATTACHMENTS WILL IMPROVE | TRAIL FACILITIE | ES AND BENEFIT TRAIL USERS. | |
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| | UIPMENT OR A | ATTACHMENT WILL BE STORED ADEQUATELY AND MAINTAINED IN GOOD REPAIR FOR ITS | USEFUL LIFE? |
| (please include a maintenance schedule) | | | |
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| Have you ever served on active duty in the Armed Forces of | YES | Would you like to receive information and assistance regarding the | |
| the United States and separated from such service under conditions other than dishonorable? | | | YES |
| | | agency's veteran services? | |
| | | For information visit http://mostateparks.com/CitizensMilitaryService, | ☐ NO |
| | | | |
| | | or send an email to moparks@dnr.mo.gov or call 800-344-6946. | |

MO 780-2618 (12-23)