

Final FEMA

State of Wisconsin
 Department of Natural Resources
 PO Box 7921, Madison WI 53707-7921
dnr.wi.gov



Outdoor Motorized Recreation Trail Aids Application
 For: (Choose all that apply) Form 8700-159 (R 04/16) Page 1 of 5

- All-Terrain Vehicle Trail Aids
 County Snowmobile Trail Aids
 Motorized Stewardship (20% match required)

Notice: Completion of this form is required under s. 23.09(26) and 23.33, Wis. Stats. Failure to complete this form will result in denial of financial assistance. Personally identifiable information found on this form is not intended to be used for any other purpose. The Department of Natural Resources (DNR) may provide this information to requesters as required by Wisconsin's Open Records law [ss. 19.31 - 19.39, Wis. Stats.].

Instructions: Applications may combine more than one source of funds. They may be submitted for consideration of both traditional ATV, Snowmobile funding AND Motorized Stewardship funding. Submit two (2) copies of all forms and attachments. See page 2 for necessary attachments. Mail applications to your Community Services Specialist.

Activities Involved in Application: (Select all that apply)

- Maintenance Insurance Bridge Rehabilitation
 Acquisition Development Trail Rehabilitation

Leave Blank - DNR Use Only
Project Number

Applicant Information

Applicant/Organization Name Burnett County Forest & Parks	Check Recipient: Individual other than authorized individual to act on behalf of the applicant. Provide check recipient information below:
Authorized Individual Name, Title Susan Tollander, Recreation Coordinator	Check Recipient Name: (Name to Appear on Check) Burnett County Forest & Parks
Address 7425 County Rd K	Address Same
City, State, ZIP Code Siren, WI 54872	City, State, ZIP Code Same
Telephone Number (715) 349-2157	E-Mail Address stollander@burnettcounty.org

Project Information

Project Title Burnett County ATV Trail Storm Damage	Number of Trail Miles 20
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Project Description

- For maintenance, include a concise statement of the type of maintenance activities and the type of grooming equipment used.
- For major bridge rehabilitation, describe the proposed construction items to rehabilitate the bridge.
- For trail rehabilitation, describe the repair and renovation activities necessary to improve the trail for user safety.
- For development, describe development activities and structures to be constructed.
- For development of intensive use areas; describe the need and expected use and method of operating and maintaining the facility.
- For Motorized Stewardship describe project **and source of matching funds**, narrative must include the source of the matching funds.
- Minimum Useful Life Agreement is required to be submitted before grant will be issued.

Burnett County would like to request funding for trail damages that occurred as a result of the July 11, 2016 rainstorm. This storm brought massive amounts of rain, causing numerous washouts on our summer and winter ATV trails. Club members and contractors have worked on trail repairs in order to address safety issues as soon as possible and keep our summer ATV trail system open to the public. More repairs are needed to restore our trails to the condition they were in prior to the storm, and to fix washouts on our winter-only trails. Because this work is beyond the scope of regular maintenance, we are requesting funding to help cover the cost of these unexpected expenses. We have been approved to receive FEMA funding, so we are requesting the 12.5% matching funds.

Estimated Cost

Maintenance	Acquisition	Insurance	Development	Bridge Rehab.	Trail Rehab.	Total Estimated Cost
					\$1,399.95	\$1,399.95

Leave Blank - DNR Use Only						

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For: (Choose all that apply)

Form 8700-159 (R 04/16)

Page 2 of 5

Applicant Certification

As the applicant's authorized official, I certify that, to the best of my knowledge, the information in this application is true and correct.

Typed Name of Authorized Official

Susan Tollander

Official's Title

Recreation Coordinator

Signature of Authorized Official

Susan Tollander

Date Prepared

10/12/16

Attachments - All projects require: Governmental unit resolution authorizing participation (sample below)

Maintenance: (Use with Snowmobile & ATV)

County map showing trail location

Acquisition: (Use with Snowmobile & ATV)

- For fee acquisition, consult with regional community service specialist to make sure proper procedures are followed.
For leases or easements, certification of easements or leases held

Insurance: (Use with ATV only)

Estimate of annual insurance premium

New Maintenance or Development: (Use with Snowmobile & ATV)

- County plat and topographic map showing trail location and classification (existing and proposed new trail); bridges, culverts, railroad crossings, shelters, toilets, parking lots, and new trail construction for the new development segment.
Lease / easement certification (to be supplied prior to trail opening)
Cost estimate worksheet Form 8700-014 (development only) or pages 3 and 4 of application for new bridge
Construction plans for bridges or other structures

Motorized Stewardship: Requires the attachments as identified in each specific category. See http://dnr.wi.gov/Aid/MotorStew.html for eligibility.

Trail Rehabilitation: (Use with Snowmobile & ATV)

- County plat map showing segment proposal for rehabilitation
Cost estimate worksheet, Form 8700-014

Major Bridge Rehabilitation or New Bridge: (Use with Snowmobile & ATV)

- County plat map showing trail system and location of bridge
Pages 3 and 4 of application
Construction plans for new bridge or bridge repair

Intensive Use Area: (Use with ATV only)

- County and plat maps showing project boundaries
Site plans showing any existing facilities along with proposed new construction including bridges, culverts, shelters, riding courses, parking lots, toilets and trails
Topographic map with major project elements noted
Preliminary construction plans for buildings, bridges, major grading, etc.
Cost estimate worksheet Form 8700-014

Sample Resolution Authorizing Participation

Whereas (Applicant) is interested in maintaining, acquiring, insuring, or

developing lands for public outdoor motorized trail use; and

Whereas said public motorized trails are eligible for snowmobile, all-terrain vehicle and/or motorized stewardship grant funds.

Therefore, be it resolved, that (Applicant)

hereby authorizes (Name), (Title)

of (Committee or Department)

to act on behalf of (Applicant) to:

Submit an application to the State of Wisconsin Department of Natural Resources for any financial aid that may be available; sign documents; and take necessary action to undertake, direct and complete the approved project.

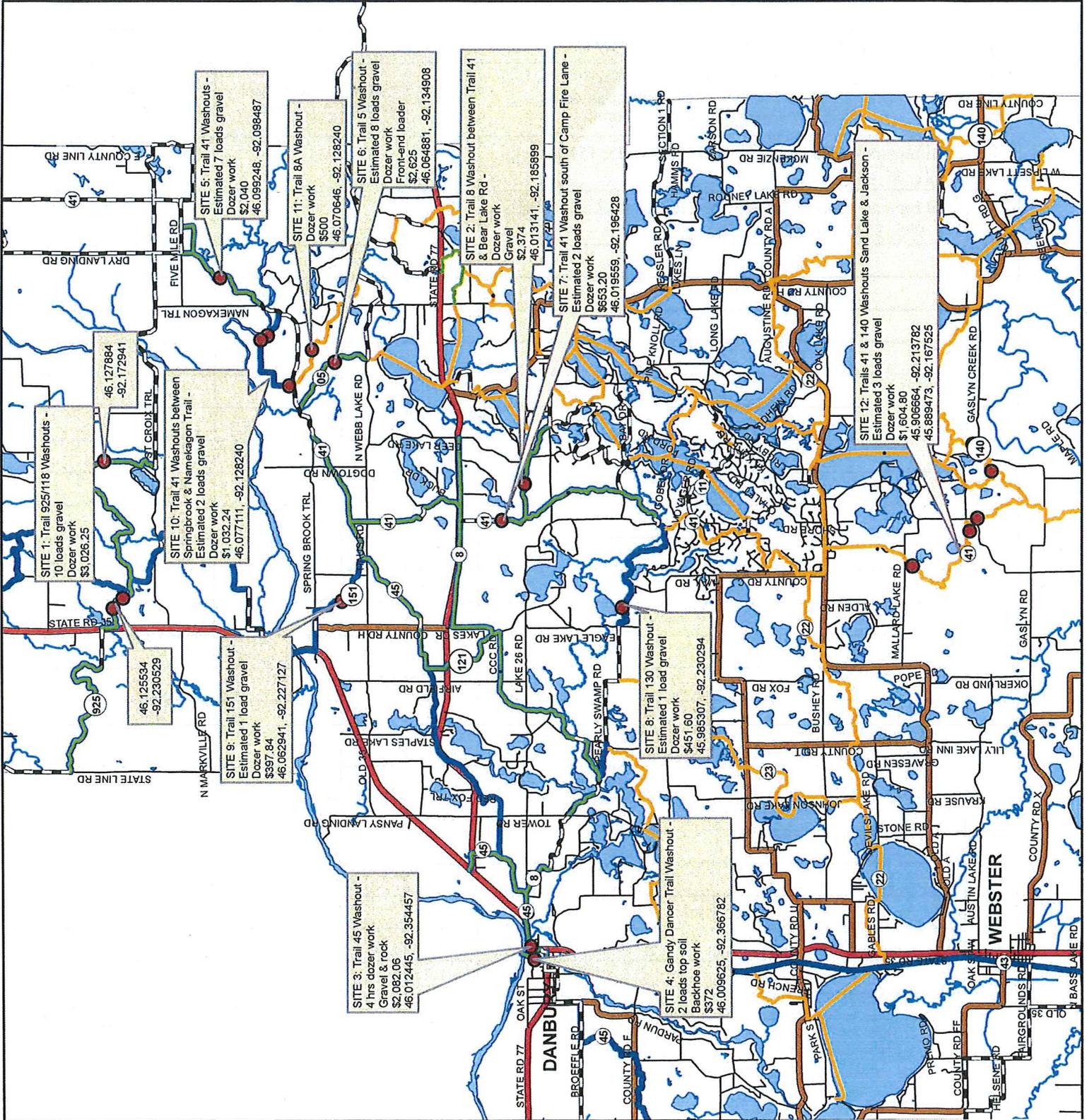
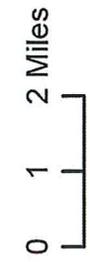
Adopted this day of , 20

I hereby certify that the foregoing resolution was duly adopted by at a legal meeting held on the

Burnett County ATV/Snowmobile Trail Storm Damage July 11, 2016

Legend

-  Route
-  Snowmobile Trail
-  Summer ATV Trail
-  Snowmobile/Winter ATV Trail
-  Town Road
-  County Highway
-  State Highway





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Address 7425 County Rd K	Address Same
City, State, ZIP Code Siren, WI 54872	City, State, ZIP Code Same
Telephone Number (715) 349-2157	E-Mail Address stollander@burnettcounty.org

Project Information	
Project Title Burnett County Snowmobile Trail Storm Damage	Number of Trail Miles 30

Project Description

- For maintenance, include a concise statement of the type of maintenance activities and the type of grooming equipment used.
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Burnett County would like to request funding for trail damages that occurred as a result of the July 11, 2016 rainstorm. This storm brought massive amounts of rain, causing numerous washouts on our snowmobile and ATV trails. Club members and contractors have worked on trail repairs in order to address safety issues as soon as possible. More repairs are needed to restore our trails to the condition they were in prior to the storm, and to fix washouts on our winter-only trails. Because this work is beyond the scope of regular maintenance, we are requesting funding to help cover the cost of these unexpected trail repairs. We have been approved to receive FEMA funding, so we are requesting the 12.5% matching funds.

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Susan Tollander

Official's Title

Recreation Coordinator

Signature of Authorized Official

Susan Tollander

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Adopted this _____ day of _____, 20____,

I hereby certify that the foregoing resolution was duly adopted by _____ at a legal meeting held on the

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- Legend**
-  Route
 -  Snowmobile Trail
 -  Summer ATV Trail
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