UTAH DEPARTMENT OF AGRICULTURE AND FOOD INVASIVE SPECIES MITIGATION GRANT APPLICATION FY 2019 UDAF

PLEASE COMPLETE A SEPARATE APPLICATION FOR EACH INDIVIDUAL PROJECT AREA

Project Information Summary

(to be completed by Applicant)

Applicant

Project Name						
Organization Name (Applicant)			Contact Person (Project Manager)			
Mailing Address		City			State	Zip
Telephone	Cell Phone			Email		

Note: If the Fiscal Agent listed is from a different organization than Applicant, both the Applicant and the Fiscal Agent must sign the grant application in order for the application to be considered complete for ranking and funding. In addition, if an independent organization is to be used by the Applicant as a Fiscal Agent, please review and complete Attachment A-1.

Fiscal Agent (if different from Applicant):

Fiscal Agent			Co	Contact Person (Financial Manager)		
Mailing Address		City		State	Zip	
Telephone	Cell Phone			Email		

Must attach latest tax return showing Name, Address, and Federal Tax ID Number (may submit State of Utah Vendor Number in place of tax return). To receive funding from the State of Utah you must have a vendor number which ties received funding to a legal entity. Vendor numbers are linked to Federal Tax ID numbers and associated name and address.

The State Vendor Number can be found on copies of previous contracts with the State of Utah.

Proposed Project

Project Name			
Project Location	County	GPS Coordinates * (minimum project center	point)
Noxious Invasive Weed Targeted			Total Number of Acres to be Treated
Primary Target Weed-			
Secondary Target Weed-			
Description of Proposed Project (in	clude history of pro	ect)	

If the description exceeds the space given in this form, please attach either anotehr page of this form or a word document of the continued information.

^{*} A map with the Project Area outlined over satellite/aerial photograph coverage showing treatment areas for Primary and Secondary Targets should also be provided.

Budget and Scope of Work

Budget Table:

<u> </u>					
Category	ISM Grant	Federal	Other Gov.	Private	Total
Herbicide					
Labor					
Equipment					
Other					
Administration					
Totals					

Scope of Work/Work Plan:

For each Item on the Work Plan below, you <u>must</u> attach a separate, fully completed treatment page (either Herbicide Application, Biocontrol, Mechanical, or Revegetation page). Select the Treatment Number of the sheets that you filled out for the treatments that correspond to the attached treatment sheet. <u>The costs listed here should reflect the costs that ISM will pay for each treatment.</u>

Item	Description of Item Needed or Task to be Performed	Estimated Date	ISM Cost
1	165.00 10110111101	2445	
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17	Final Report Submitted to UDAF (Up to 10% of Total) * Report must include GPS/GIS Data		
		Total	

Payments will be made based on the above Scope of Work or Work Plan. Design your items so that you will have the cash flow needed to complete the project successfully

^{*} Also note that 10% of the grant amount will be withheld until a final report is received by UDAF along with GIS coverage of the project (not just a printed map). Please contact Aaron Eagar or Amy Wengren about how to provide this data, if you do not have access to GIS or a GIS Professional.

Project Landowner/Contributor Information

Please provide the approximate land ownership acres and percentages for the proposed project area as well as information about project contributors.

Private Land (Acres)	Other Agency Land (Acres)		Federal Land (Acres)		
Percent of Covera	ge of Primary and Second	lary We	eds by Owne	ership	
Private Land %	Other Agency Land	%	Fed	eral Land %	
Primary Weed:	Primary Weed:		Primary Wee	ed:	
SecondaryWeed:	Secondary Weed:		Secondary V	Veed:	
Projec	ct Partner Contribution	ns (Ge	neral)		
Contributors	In-Kind Contribution	n	Monetar	y Contribution	
Private Contributions					
Other Government Contr.					
Federal Contributions	No In-Kind Allowed	i			
Total Funds					
Project Partner Contributions (Detailed)					
Contributor Name			n-Kind tribution	Monetary Contribution	

Project Ranking Assessment

<u>Multiple Year Project:</u> Is the proposed project a continuation of a previous ISM Grant. The proposed continuation of the project is part of an approved management strategy which utilizes multiple years in order to complete clearly defined goals and objectives.				
YES □	NO 🗆			
	rement of no more than 10% of the proposed project budget allocated to planning and e costs been followed?			
YES □	NO 🗆			
area? Measur	arly identified timeline for measurable reduction and control of the target species in the project able goals and objectives are clearly identified and stated in the proposal and there is a high success (as measured against the stated goals and objectives and expected and intended results).			
YES 🗆	NO 🗆			
	is proposed by a Federal Agency or landowner, is the project matched by at least an equal amount tin-kind) as required by the Invasive Species Mitigation account legislation?			
YES □	NO 🗆			
GIS data prov	rided from project manager for previously funded projects in timely manner?			
YES 🗆	NO 🗆			
Completion re	eport provided from project manager for previously funded projects upon completion of projects?			
YES 🗆	NO 🗆			
Has the applic	cant and/or fiduciary agent received funding for a previous ISM grant?			
YES \square	NO 🗆			
If yes, has the in a timely ma	applicant and/or fiduciary agent fully complied with all funding and administrative requirements anner?			
YES □	NO □			

Ranking Score

Proposed Project

20 pts Possible

Early Detection Rapid Response(EDRR) Focus Species:

Project is targeting an invasive weed species which has been identified by the Utah Department of Agriculture and Food as an invasive species of concern for FY2019. These invasive species are: (not listed in order of importance)

Common crupina	Crupina vulgaris	Garlic mustard	Alliaria petiolata
African rue	Peganum harmala	Purple starthistle	Centaurea calcitrapa
African Mustard	Brassica tournefortii	Goatsrue	Galega officinalis
Small bugloss	Anchusa arvensis	Giant reed	Arundo donax
Mediterranean sage	Salvia aethiopis	Japanese knotweed	Polygonum cuspidatum
Spring millet	Milium vernale	Oxeye daisy	Leucanthemum vulgare
Syrian beancaper Ventenata (North	Zygophyllum fabago	Vipers bugloss, blueweed	Echium vulgare
Africa) grass	Ventenata dubia	Elongated mustard	Brassica elongata
Plumeless thistle	Carduus acanthoides	Common St. Johnswort	Hypericum perforatum
Malta starthistle	Centaurea melitensis	Sulfur cinquefoil	Potentilla recta
Camelthorn	Alhagi maurorum	African mustard	Brassica tournefortii
Cutleaf vipergrass	Scorzonera laciniata		
		Other justifiable species (p	lease list below and

Other justifiable species (please list below and (explain justification)

Locations of EDRR weeds must either be entered into EDDMaps (eddmaps.org) or provide point data (shapefile or gpx file). The invasive population data must be included with the application.

If the description exceeds the space given in this form, please attach either anotehr page of this form or a word document of the continued information.

20	pts
Pos	sible

Multiple Partner Involvement:

Project involves multiple stakeholders, such as a Cooperative Weed Management Area (CWMA). This includes support from private landowners in the proposed project area. Are there matching funds allocated by other agencies which have been specifically assigned to this project to increase the likelihood of success with the proposed project?

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20 pts Possible

Rehabilitation & Treatment:

- The project will have a positive impact to rehabilitate and treat an area that is infested with or impacted by an invasive species, has a fuel load that may contribute to a catastrophic wildland fire, or prevent catastrophic wildland fire through land restoration in a watershed.
- Has the potential to improve the grazing forage for domestic cows or wildlife.
- Addresses soil run-off, erosion, soil infiltration, and flooding to improve water quality and quantity.
- Can provide an economic benefit to project area.

If the description exceeds the space	given in this form,	, please attach	either anotehr	page of this form	or a word
document of the continued informat	ion.				

10 pts Possible	Relationship to other Management Plans: Project will help meet specific goals and objectives and/or management opportunities identified in other planning or assessment documents. Some examples of plans: State weed management plan, county weed management plans, CWMA weed management plans, allotment and/or grazing management plans, species/game management plans, wildlife management unit plans, CRMPs, forest management plans, watershed/TMDL plans, fuel/fire management plans, etc.
20 pts Possible	Monitoring and Future Management: Monitoring shall include at a minimum Photo Points and GPS points with the approximated weed population sizes for the treatment area. Project proposal includes details on future management that will ensure the long term success of the project. This may include: post-treatment grazing rest and/or management plans/changes, wildlife herd/species management plans, ranch plans, conservation easements or other permanent site protection plans, resource management plans, forest plans, etc.

ts ble	<u>Biological Control</u> : Project contains a biological control method for controlling the target weed species. Planning and release of biological control agents to be coordinated with APHIS and UDAF.					
	Please explain in detail the location of your releases and the species. Outline the desired outcome of the release and how it will be monitored and measured.					
-						
	ne ability to bring multiple partner support and additional outside funding to the project will increase e likelihood of funding.					
	the unlikely event that the ranking scores are tied, the following will be used to further validate the oposed projects to break the ties:					
<u>P</u> 1	roject Administration Costs:					
	rojects with lower planning and administrative costs (less than the allowable 10%) will be given reference.					
Eı	nhanced Project Monitoring:					
qι	roject includes intensive monitoring that will measure more specifically the outcomes than just nalitative monitoring, GPS and Photopoints. Enhanced monitoring may include, for example, the llowing methods which are utilized by the NRCS:					
	 a. Pre-project photo documentation or camera on a stick b. Line-point intercept (plant cover and composition) c. Canopy and Basal gap intercept (weed invasion and erosion) d. Belt test/line intercept cover (for invasive species) 					

By signing this document, the Applicant certifies to his/her best knowledge that all of the information on this application is accurate and complete.

Name	Date
Title	

ATTACHMENT A-1: TERMS AND CONDITIONS FOR APPLICANT USING A FIDUCIARY AGENT

THIS FORM MUST BE COMPLETED AND SUBMITTED AT THE TIME OF APPLYING FOR THE GRANT IF:

(1) The Applicant is contracting or using a different entity, organization or person, not employed by or in the same organization as Applicant, to receive or expend any grant monies awarded under this grant application upon final award.

Fiscal Agent:									
Fiscal Agent	Co	Contact Person (Financial Manager)							
Mailing Address	City			State	Zip				
Telephone	Cell Phone		Email						
The Applicant and Fiscal Ag disbursed directly to the Fisc conditions set forth in a sepa Nevertheless, because the ag agreement, it cannot indepen Please attach a copy of the agrequested grant funds to this agreement must accompany and/or disbursed. The failure	gent further agree the al Agent, as appoint rate agreement between the dently be enforced greement between the grant application. It is a copy of the signer to do so may resure.	at, if nted l ween ne A _l by the the A If no d Gra lt in	by the Applicant the Applicant and the State. Applicant and I agreement is ant Agreement the Grant away	ent, pursuant and the Fiscal Agent currently in a in order for rd being der	to the terms and cal Agent. ent is a separate with respect to the place, a copy of the funds to be award and/or rescince.				
By signing, the Applicant and full legal authority to bind the this Agreement on each response.	e Applicant and Fi	ducia							
SIGNATURE OF APPLICA	NT		DATE	<u> </u>					
SIGNATURE OF FIDUCIA			DATE	<u></u>					