

2018 Wisconsin RPCs and DNR Great Lakes Basin Tree Planting Grant Program

The Wisconsin RPCs and the DNR are offering Tree Planting grants up to \$20,000 to municipalities, counties, and tribes within the Wisconsin Great Lakes Basin. Funded projects will focus on planting trees to mitigate the impacts of the Emerald Ash Borer and reduce runoff in urban communities.

Project proposals are due at 4:00 PM on April 9, 2018. Funded projects can begin on or after May 1, 2018 and must be completed by December 31, 2018. To apply for a Wisconsin RPCs and DNR Great Lakes Basin Tree Planting grant, **please complete and submit this form in its entirety.**

Submission Instructions: Submit your completed application via e-mail (*preferred*) or mail. If you have any questions, please contact angelaka@baylakerpc.org.

Part I: Applicant Information

Applicant Name:

Organization Type:

Located in the County of:

Is your community within the Wisconsin Great Lakes Basin (see Attachment A)? Yes No

Population:

Total number of trees to be planted (including both grand funded and match)?

| | |
|---|------------------|
| Name of Representative Authorized to Act on Behalf of Applicant | Title |
| Street or PO Box | City, State, Zip |
| Email | Phone Number |

Project Manager – Primary Contact (If different from Authorized Representative):

| | |
|------------------|------------------|
| Name | Title |
| Street or PO Box | City, State, Zip |
| Email | Phone Number |

2018 Wisconsin RPCs and DNR
Great Lakes Basin Tree Planting Grant Program

Part II: Project Overview

1. Briefly describe the project, the schedule, the species to be planted, caliper size, type of rootstock (e.g. seedlings, saplings, bare root, potted, or B&B), and impact to community:

2. Does your project improve species diversity within your community?

Yes No If yes, how?

3. Is your community within an EAB Quarantined County (see tinyurl.com/EAB-Quarantine)?

Yes No

4. Is your community within a targeted watershed (see Attachment B)?

Yes No

5. Is your community a member of a Regional Planning Commission (see Attachment C)?

Yes No

6. Is your community within an AOC (see Attachment D)?

Yes No

7. Is your community currently designated a Tree City USA (see tinyurl.com/TreeCityUSA)?

Yes No

8. Will plantings be located on public property?

Yes No

**2018 Wisconsin RPCs and DNR
Great Lakes Basin Tree Planting Grant Program**

9. Check the ONE box in each category (program level, advocacy, staff, and tree maintenance) that best describes your community forestry program:

| | | |
|------------------|---|--|
| Program Level | We have an active, ongoing community tree planting and care program. | |
| | We have recently begun or re-started a program of community tree planting and care but it is still in a developmental phase. | |
| | Tree planting and care activities were once a regular part of a community program that ended. We want to start this program again. | |
| | We are starting a community tree planting and care program for the first time. | |
| | We have tree planting, care and removal needs but don't plan to start a community tree program at this time. | |
| Advocacy | We have a formally established tree advisory group (i.e., committee, commission or tree board) and/or officials that support urban forestry. | |
| | We have citizens or groups informally involved in community tree planting and care activities but no advisory group or board officially charged with overseeing a forestry program. | |
| | The level of involvement and support by boards/committees, organizations and/or elected officials for community tree planting and care activities is low to non-existent. | |
| Staff | We have professional urban forestry staff (can be part-time position) - OR - a volunteer urban forestry professional(s) - OR - contract with a professional for community tree planting and care. [Professional = forestry degree, certified arborist, CTMI graduate, or comparable formal training.] | |
| | We have staff, contractors or a volunteer authorized to handle/advise the municipality on tree planting and care but who is neither a certified arborist nor has comparable formal training. | |
| | We have no staff, contractors or volunteers authorized to handle or advise our community on tree planting and care. | |
| Tree Maintenance | We practice systematic, community tree maintenance (i.e., planting, pruning, pest control, tree removal, etc.) on a regular basis. | |
| | We practice occasional tree maintenance and removal on an as-needed basis. | |
| | We do not practice tree maintenance activities (i.e., planting, pruning, pest control, tree removals, etc.). | |

10. Where will the trees be planted and in what percentages (approximate)?

- % Parkways % Boulevards % Natural Areas

 % Other; **please explain:**

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Great Lakes Basin Tree Planting Grant Program

Part III: Budget

11. Use the table below to provide an estimated, itemized project budget.

| Deliverables/Items | Funds Requested | Matching Funds | Source of Matching Funds | Total (Requested + Matching Funds) |
|--------------------|-----------------|----------------|--------------------------|--|
| | \$ | \$ | | \$ |
| | \$ | \$ | | \$ |
| | \$ | \$ | | \$ |
| | \$ | \$ | | \$ |
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| | \$ | \$ | | \$ |
| | \$ | \$ | | \$ |
| | \$ | \$ | | \$ |
| TOTALS | \$ | \$ | | \$ |

Note: Matching funds must total 25% of the total project cost.

12. Describe the sources of matching funds (including volunteer hours, equipment, staff hours and benefits rate, supplies, facilities, contracted services, etc.).

2018 Wisconsin RPCs and DNR
Great Lakes Basin Tree Planting Grant Program

Part IV: Certification and Submission

Grant Request:

Applicant Match:

(Minimum of 25%)

Total Project Costs:

To the best of my knowledge, the information contained in this application and application attachments are correct and true.

| | |
|---|-------|
| Applicant's Authorized Representative (print) | Title |
| Signature of Authorized Representative | Date |

Part V: Attachments

Resolution -- May be sent separate from the application, but is **due no later than APRIL 20, 2018**.

Community map depicting location(s) of project(s).

Part VI: Submission Instructions

Send completed application with required attachments to:

| | |
|--|--|
| Electronic format (PREFERRED) | Mail hard copies to: |
| Save, then click <i>Submit by E-mail</i> . You will be given the opportunity to edit the message and provide attachments to an email addressed to: angelaka@baylakerpc.org | BAY-LAKE REGIONAL PLANNING COMMISSION ANGELA KOWALZEK-ADRIANS 425 S ADAMS ST STE 201 GREEN BAY WI 54301 |

Electronic submissions must be received, OR hardcopies postmarked by 4:00 PM, APRIL 9, 2018

When saving or submitting by e-mail, please rename this PDF and change the e-mail subject to include the name of your organization.