

RECREATIONAL TRAILS PROGRAM
EQUIPMENT INVENTORY FORM
Submit a separate form for each piece of equipment

Project Number:

Organization Name:

Project Name:

Address where Equipment is stored:

- 1) What is the year/make/model of the equipment?
- 2) Serial number:
- 3) Date of equipment acquisition:
- 4) Is the equipment still owned and operated by the same organization which purchased the equipment with federal funds?
 Yes No
- 5) Current condition of the equipment:
- 6) Is the equipment being used for the same purpose as originally intended by the federal award?
 Yes No
- 7) Is the equipment still sufficient for this purpose? Yes No
- 8) Are the trails on which the equipment is used open to the public? Yes No
- 9) Are fees charged for these trails? If yes, explain below Yes No
- 10) Are all land use agreements in place? Yes No
Note: If the trail is on any state land, please **provide a copy** of the current agreement for said equipment use.

Please provide any additional information. If the equipment is no longer in use by the same organization for its originally intended purpose, or if the equipment has been sold or disposed of, then federal regulation require notice be provided to the State and Federal awarding agency. Attach additional sheets if necessary.

Comments:

Project Representative: _____
(print name)

_____ Date _____
(signature)

OPRHP may inspect the equipment purchased or the trail being maintained at any time during the period specified in the contract. A physical inventory of the equipment must be taken at least once every two years (2 CFR 200.313(d)(2)).

FOR OPRHP USE ONLY

Reviewed by:

Name _____ Signature _____ Date _____

Comments: