

# Snowmobile Trails GPS Metadata Form

<b>Name/Position:</b>			
<b>County:</b>		<b>Club:</b>	
<b>Phone Number:</b>			
<b>Email Address:</b>			

**Collection Date:**

**Time Began:**

**Time Ended:**

**GPS Unit (brand):**

**(model):**

**Software** (all software used to download and process the data):

**Coordinate System:**

**Datum:**

**Trail Name** (for example, C5A, S42, etc.) (Use one sheet per trail.):

**Data Collection Process** (brief narrative of how the data was collected):

**Trail Sub-Surface Data:** (Brief description of the trail's main underlying surface classification. For example: farm field, utility line Right Of Way, seasonal road, asphalt, highway ROW inside bank, highway ROW outside bank, etc.):

**Post Processing Process** (brief narrative of anything that was done to the data after it was downloaded from the GPS unit):

I certify that the GPS data provided was collected in full on the date listed above and acknowledge if any part of the data is found to have been collected outside of the date listed, funding for the trail will be removed.

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Name

Signature

# Trail Update Prior Approval Application

2020-2021 Project Year

The appropriate countywide maps must accompany all requests made on this form.

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**TRAIL CHANGE REQUEST:** Use this form for upgrades, including GPS update(s) of an existing trail; Reclassification of Trail (Class A to B/B to A or Secondary to Corridor/Corridor to Secondary); Trail reroute(s); Change of TME; Trail deletion(s)

Trail and Classification:

Current Mileage:

County:

TME:

Please Explain the Trail Change Request:

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Local Sponsor Signature

Print Name

Title

Date

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**OPRHP Response**

**Date:**

\_\_\_\_\_ Approved as trail

\_\_\_\_\_ Denied for consideration for this year.

Reason denied:

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(Authorized OPRHP signature)

# New Trail Prior Approval Application

2020-2021 Project Year

The appropriate countywide maps must accompany all requests made on this form.

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**NEW TRAILS:** Use this form for new trails or trails not funded in previous project year.

County:

TME:

Proposed Class (Corridor or Secondary) and Designation: (A or B):

Anticipated Miles of Trail:

Local Sponsor Priority Ranking: (1-10) (Note: Only one request can be priority 1) \_\_\_\_\_

Purpose of trail:

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Local Sponsor Signature

Print Name

Title

Date

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**OPRHP Response**

**Date:**

\_\_\_ Approved as Corridor / Secondary Trail for \_\_\_\_\_ miles of Class A / B.

\_\_\_ Denied for consideration for this year.

Reason denied:

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(Authorized OPRHP signature)

# Application Checklist

## Snowmobile Trails Grant-in-Aid Application 2020 – 2021

Local Government Sponsor (County/Town of):

All final and complete application forms and information must be on file with OPRHP **NO LATER THAN September 1, 2020** for the Local Sponsor to be eligible for funds. The following items must be included:

Application Checklist (this page; one from local sponsor)

Application Cover Page (one from Local Sponsor)

Local Sponsor Signature form (all pages, one from Local Sponsor)

Landowner Permission and Trail Maintenance Statement Signed (one from each TME)

Department of Environmental Conservation (DEC) Permissions Form (see instructions on Landowner Permission Statement

Other Landowner of Administrator Form (see instructions on Landowner Permission form) Department of Transportation (DOT) Permissions form (one from each TME)

Equipment Summary (one from each TME; Printed from the ATGP with any changes noted. Appendix B is no longer necessary; see page 45)

3-Year Plan (one from each TME or county-wide plan from local sponsor; see page 26)

SEQRA Determination for NEW or MODIFIED trails.

Check here if N/A (No New or Modified Trails in Phase I)

Do any TMEs receive funding thru the Federal Recreational Trails Program (RTP)?

If yes, what is being funded?

Are any TMEs in your municipality current receiving or have received other funding (Federal, State, County, Town, Village or Not For Profit Entities) for projects related to their trail system, other than RTP?

If yes, from which agencies?

Are any TMEs in your municipality receiving municipal trail grant funds in other counties?

If yes, from which agencies?

**NOTE:** Please ensure that all the above referenced materials are included in the application and all parts are properly signed. Incomplete applications will delay or disqualify a local sponsor's funding. The original Local Sponsor Signature Form must be submitted to OPRHP and the Local Sponsor should keep a copy. The original of all other forms (i.e. permission forms) are to be kept on file by the Local Sponsor, a copy retained by each TME for its records, and a copy forwarded with the application to OPRHP. All documentation other than the Local Sponsor Signature Form may be submitted electronically.

# Application Cover Page

## (LOCAL SPONSOR ONLY)

### SNOWMOBILE TRAILS GRANT-IN-AID APPLICATION 2020 – 2021

Information on this page **MUST** be a summary for all TMEs represented in the application.

Do not submit this page from each TME.

**Local Government Sponsor** \_\_\_\_\_

(Print Municipal Name)

**Authorized Official** \_\_\_\_\_

Organization \_\_\_\_\_

Title \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_, NY Zip \_\_\_\_\_

Fax \_\_\_\_\_ Email: \_\_\_\_\_

Current Automated Trail Grant Program Username \_\_\_\_\_

**Authorized Project Administrator** \_\_\_\_\_

Organization \_\_\_\_\_

Title \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_, NY Zip \_\_\_\_\_

Fax \_\_\_\_\_ Email: \_\_\_\_\_

Current Automated Trail Grant Program Username \_\_\_\_\_

**Designated Project Contact** \_\_\_\_\_

(If this individual is a non-governmental employee, attach the official designation letter.)

Organization \_\_\_\_\_

Title \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_, NY Zip \_\_\_\_\_

Fax \_\_\_\_\_ Email: \_\_\_\_\_

Current Automated Trail Grant Program Username \_\_\_\_\_

To request Automated Trail Grant Program access, contact the Snowmobile Unit

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# Local Sponsor Signature Form

## SNOWMOBILE TRAILS GRANT-IN-AID APPLICATION 2020 – 2021

Only one Local Sponsor signature form is to be submitted to OPRHP per application (not for each TME). These pages indicate that the **Local Sponsor** (not a TME) has received all the necessary signatures and permissions for the entire application.

*This application is in support of the mileage previously established by OPRHP.*

### CONDITIONS OF THE GRANT

In consideration of the promises and conditions contained in this grant, **OPRHP** and the **LOCAL SPONSOR** agree as follows:

1. **PROJECT TERM:** The term of this grant shall be one year and shall commence on April 1, 2020 and shall terminate on March 31, 2021.
2. **GRANT AMOUNT:** **OPRHP** agrees, if funds accumulated in the Statewide Trail Fund based upon projected registration are sufficient, to make available to the **LOCAL SPONSOR** a sum not to exceed the prorated amount for the **PROJECT**. If expenditures exceed the total amount of the award, no additional funding will be provided by **OPRHP**. The amount provided shall be based on a maximum per mile figure. If the Local Sponsor contracts for trail maintenance, in no case should grant funds be provided in excess of the per mile rate of reimbursement.
3. **GRANT EXPENDITURES:** The **LOCAL SPONSOR** agrees that the funds available pursuant to this grant are only for those expenditures directly related to the snowmobile trail(s) as approved by **OPRHP**.
4. **PAYMENT PROVISIONS:**
  - a. Payment shall be **made** after **OPRHP** reviews and approves of vouchers executed by an authorized officer of the **LOCAL SPONSOR** and documentation as may be required by **OPRHP**, and subsequent audit and approval by **OPRHP** and/or the NYS Office of the State Comptroller.
  - b. **The LOCAL SPONSOR agrees that the requested funds will not duplicate reimbursement for costs and services received from other sources of state or federal funding.**
  - c. Payment shall be as follows:
    - 1) A payment of seventy percent (70%) of the total State Aid shall be advanced to the **LOCAL SPONSOR** upon execution and approval of this grant, and
    - 2) The balance shall be paid to the **LOCAL SPONSOR** upon completion of the **PROJECT** to the satisfaction of **OPRHP**, including the completion by **OPRHP** of all inspections that it may be required, and the submission of documentation verifying the expenditures for the **PROJECT**.

**Final Grant Payments may be prorated based on the funds available and documentation provided.**
  - d. **The LOCAL SPONSOR agrees to return any State funds beyond the costs of the PROJECT.**
  - e. **LOCAL SPONSORS advance funds at their own risk.**
5. **INSPECTION:** **OPRHP** may make periodic inspections of the **PROJECT** both during its implementation and after its completion to assure compliance with this grant.

# LOCAL SPONSOR SIGNATURE FORM

## SNOWMOBILE TRAILS GRANT-IN-AID APPLICATION 2020 – 2021 CONDITIONS OF THE GRANT (CONT.)

6. **TERMINATION:** The **LOCAL SPONSOR** shall complete the **PROJECT** as set forth in this grant, and failure to render satisfactory progress or to complete the **PROJECT** to the satisfaction of **OPRHP** may be deemed an abandonment of the **PROJECT** and cause for the suspension or termination of any obligation of **OPRHP**. In the event of such termination, all monies paid to the **LOCAL SPONSOR** by **OPRHP** and not expended according to this grant shall be repaid to **OPRHP** upon demand. If such monies are not repaid upon demand, the State Comptroller may cause to be withheld from any State assistance to which the **LOCAL SPONSOR** would otherwise be entitled an amount equal to the monies demanded.
7. **INDEMNIFICATION:** The **LOCAL SPONSOR** agrees to defend, indemnify, save and hold harmless the State and **OPRHP** and their agents and employees from any and all claims, demands, actions or causes of action resulting from the negligent acts, error or omission of the work and services provided for in this grant. When the **PROJECT** is on state land, the applicant may need to supply the state agency that has jurisdiction over the land with a certificate of liability insurance that indemnifies the State and the agency's officers and employees. Again, discussion of that requirement should take place at the meeting between the applicant and the appropriate state agency representative.
8. **OPEN AND FREE TRAIL:** The **LOCAL SPONSOR** agrees that the trail system, as submitted and approved, shall be open for use by all registered snowmobiles without additional charge, except as provided in section 25.09 of the NYS **OPRHP** Law. All **OPRHP** approved trails shall be open for public use, if adequate snow conditions exist, at the end of the *regular* Big Game hunting season and kept open until March 31 of the **PROJECT** year, conditions permitting.
9. **TRAIL MAINTENANCE:** Trails shall be maintained in a fashion to allow for the safe passage of snowmobiles. This will be in accordance with practices outlined in the Guidelines for Snowmobile Trail Groomer Operator Training book. Such trails will be readily identifiable as part of the Statewide Snowmobile Trail System to the public. Corridor and secondary route trail markers and other appurtenant snowmobile trail signs (as identified in the New York State Snowmobile Trail Signing Handbook) must be used on trails receiving state funds and placed in compliance with those guidelines found in the NYS Snowmobile Trail Signing Handbook. The **LOCAL SPONSOR** agrees to notify **OPRHP** of any trail closings within two (2) business days of being notified of said closure. All grant money received under this program must be used for the sole purpose of developing and maintaining the trails approved by **OPRHP**. Trail maintenance is defined as grooming or smoothing the snow on the trail to remove the moguls or potholes, trail brushing, trail surface preparation, building/repairing/replacing culverts, bridges, parking areas, restrooms and facilities construction, fencing, and trail signage.
10. **STATE LAND:** The **LOCAL SPONSOR** agrees that where state lands are involved, all activities relating to the snowmobile trail system will be consistent with the policies and guidelines of the agency that has jurisdiction over such lands. The **LOCAL SPONSOR** acknowledges that their TMEs have obtained the permission from the appropriate agency (i.e. **OPRHP**, DEC, DOT) for the maintenance and development of snowmobile trails. In most cases, written permission will be required. For snowmobile trail grooming, alteration, construction, or maintenance, DEC requires that the applicant must either obtain a Temporary Revocable Permit (TRP), enter into an Adopt-a-Natural Resource Agreement (ANR) or a Voluntary Stewardship Agreement (VSA) before proceeding with the **PROJECT**. It is the responsibility of the **LOCAL SPONSOR** to ensure that the TMEs have obtained all necessary permits for the **PROJECT**.
11. **NON-DISCRIMINATION:** The **LOCAL SPONSOR** shall not limit access or discriminate in the operation of the facilities against any person based on place of residence, race, creed, national origin, sex, age, disability, or marital status.

## LOCAL SPONSOR SIGNATURE FORM

### SNOWMOBILE TRAILS GRANT-IN-AID APPLICATION 2020 – 2021 CONDITIONS OF THE GRANT (CONT.)

12. **EXECUTORY CLAUSE:** In accordance with section 41 of State Finance Law, the state shall have no liability under this contract to the contractor or to anyone else beyond funding appropriated and available for this contract.
13. **SUBCONTRACTS:** In accordance with OPRHP Rules & Regulations section 454.2(b), only the Local Sponsor is permitted to subcontract for trail maintenance of snowmobile trails. The Local Sponsor may only enter into contracts with other municipalities, not-for-profit corporations, snowmobile clubs, and other like entities. TMEs will not be reimbursed for general trail maintenance subcontracts with any TMEs, but subcontracts for specific trail development/maintenance work done **by a contractor** are permissible.
14. **Administrative Costs:** Local Sponsors are permitted to claim reimbursement costs directly related to grant application preparation, planning costs and GIS mapping. Maximum allowable administrative cost reimbursement shall be no more than 10% of the total grant award. The Local Sponsor is required to provide documentation verifying the expenditures. See page 51.

I acknowledge that this application represents a project agreement with OPRHP and agree to all the requirements including the Conditions of the Grant.

I, \_\_\_\_\_, being the **Authorized Official** for \_\_\_\_\_, herby certify that grant funds received under the Snowmobile Municipal Trails grant will be managed and expended in accordance with the applicable laws, regulations, project agreement terms and program guidelines, and that the TMEs in this Municipality will comply, in all respects with applicable laws, regulations, project agreement and Snowmobile Trail Program guidelines. I also attest that all required supporting documentation will be on file and will be available for audit upon request for a period of seven (7) years from the ending project date.

I certify that all landowners, whether private or public, have granted permission to use their property for snowmobile trails as stated in this application for the duration of the project. Any change in permission or any other change affecting approved mileage will be reported to OPRHP immediately, and may affect funding.

I acknowledge that failure to submit any required permissions by the application deadline may jeopardize grant funding. I also acknowledge that failure to disclose the need to obtain permissions will result in all affected miles being removed from funding.

**Authorized Official Signature** \_\_\_\_\_

(Typed or printed) Name \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_



# Landowner Permission and Trail Maintenance Statement

## SNOWMOBILE TRAILS GRANT-IN-AID APPLICATION 2020 – 2021

*One for each TME to be sent to NYS OPRHP*

The \_\_\_\_\_ states that it has received permission from all  
(Name of TME)

private and public landowners that allow NYS OPRHP funded snowmobile trail(s) to cross their property, and that all such landowners are accounted for in the list below. It is acknowledged and accepted that the NYS OPRHP trails have been and will be signed in accordance with the New York State Snowmobile Trail Signing Handbook.

I acknowledge the right of Local Sponsors and OPRHP representatives to contact landowners to verify that permissions were obtained.

\_\_\_\_\_  
(Signature & Name of TME President OR Local Sponsor)

\_\_\_\_\_  
(Date)

**Each of the following fields must be completed. If the TME does not have trails on land belonging to the referenced type of landowner, enter a zero. Do not leave any field blank.** For the purposes of this form, “private landowners” include all non-public entities, such as utilities and sovereign nations. Copies of permits/agreements/etc. from such landowners are not required to be submitted to OPRHP but should be retained by the TME and/or Local Sponsor. Do not include NYS DOT under “Other Public Agency”; see page 43 for the required DOT permissions form.

# of Landowner Permissions obtained:

Private: \_\_\_\_\_

NYS DEC: \_\_\_\_\_ (complete DEC Permissions Form on Page 39 if greater than zero)

Other Public Agency: \_\_\_\_\_ (complete Other Permissions form on Page 41 if greater than zero)

***\* It is incumbent upon the TME to obtain permission and permits or agreements. However, if the sponsor chooses to represent the TME(s) within his/her county and obtain all necessary permissions, permits, and agreements, they may do so. TMEs are encouraged to maintain a by name listing of all landowners. OPRHP may request further documentation of landowner permission at any time; failure to provide such documentation may impact the grant award amount.***

**Rev. 4/19**

# Department of Environmental Conservation (DEC) Permissions:

## SNOWMOBILE TRAILS GRANT-IN-AID APPLICATION 2020 – 2021

Where DEC administered land is impacted by trails included in this application, the following statement must be signed by an authorized DEC representative **and** by either the local sponsor or a TME officer\*. OPRHP will not require a copy of any applicable permits or agreements between the TME and DEC including the Temporary Revocable Permit (TRP), Adopt a Natural Resource (AANR) or Volunteer Stewardship Agreement. However, OPRHP reserves the right to request such agreement. By signing this form, the TME or sponsor is acknowledging that all proper permissions were granted and all applicable agreements have been obtained and are currently valid. If a TME and/or local sponsor signs this form and OPRHP later discovers that DEC permission was not granted or necessary permits or agreements were not current and valid, funding for the trail(s) in question may be affected and this may be grounds for denial of future trail requests.

If the NYS DEC line on the Landowner Permissions form (Page 37) has a number greater than zero, this form must be completed and submitted. If that line reads zero, do not complete or submit this form.

The \_\_\_\_\_ has been granted permission to use and/or maintain  
**Name of TME**

Snowmobile trail(s) on DEC property. A TRP, AANR or VSA with the club has been signed and is valid for the time frame covering April 1, 2020 through March 31, 2021.

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(Authorized DEC Signature, Title, and Region)

(Date)

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(TME or Local Sponsor Signature and Title)

(Date)

***\* It is incumbent upon the TME to obtain permission and permits or agreements. However, if the sponsor chooses to represent the TME(s) within his/her county and obtain all necessary permissions, permits, and agreements, they may do so.***

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# Other Landowner or Administrator Permissions:

(Ex: NYS OPRHP, US Forest Service, etc.)

## **SNOWMOBILE TRAILS GRANT-IN-AID APPLICATION 2020 – 2021**

Where land owned or administered by any agency other than DEC, DOT, or a private landowner is impacted, the following statement must be signed by the respective landowner/administrator **and** by the TME or local sponsor\*. OPRHP reserves the right to request a copy of any applicable permit, agreement, or other relevant documentation required by the landowner. Submit one copy of this form for each landowner/agency. If a TME and/or local sponsor signs this form and OPRHP later discovers that permission was not granted or necessary permits or agreements were not current and valid, funding for the trail(s) in question may be affected and this may be grounds for denial of future trail requests.

If the "Other Public Agency" line on the Landowner Permissions form (Page 37) has a number greater than zero, a copy of this form must be completed and submitted for each impacted landowner/agency. If the line reads zero, do not complete or submit this form.

I \_\_\_\_\_ of \_\_\_\_\_ have received and approved this  
(name) (please print or type agency name)

application for the use and maintenance of snowmobile trails by \_\_\_\_\_  
TME/Local Sponsor

on property under the ownership/management of this agency. This permission is valid for the period of time covering April 1, 2020 through March 31, 2021.

This is approved provided the following stipulations and conditions are met:

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(Authorized Agency Representative Signature and Title)

(Date)

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(TME or Local Sponsor Signature and Title)

(Date)

***\* It is incumbent upon the TME to obtain permission and permits or agreements. However, if the sponsor chooses to represent the TME(s) within his/her county and obtain all necessary permissions, permits, and agreements, they may do so.***

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# Department of Transportation (DOT) Permissions:

## SNOWMOBILE TRAILS GRANT-IN-AID APPLICATION 2020 – 2021

### *One from each TME to be sent to NYS OPRHP*

Where DOT administered land is impacted, the following statement must be signed. A trail crossing of a State highway constitutes an impact. Attach a list of all State highway crossings (For 911 emergency purposes, GIS or GPS coordinates are preferred).

***\*It is incumbent upon the TME to obtain permission and permits or agreements. However, if the sponsor chooses to represent the TME(s) within his/her county and obtain all necessary permissions, permits, and agreements, they may do so.***

I have reviewed the above referenced list and approved this application (provide stipulations below if applicable) for the operation of snowmobiles and associated trail maintenance and grooming on

\_\_\_\_\_  
(location)

This is approved provided the following stipulations and conditions are met:

\_\_\_\_\_  
(Authorized DOT Signature, Title, and Region) (Date)

\_\_\_\_\_  
(TME or Local Sponsor Signature and Title) (Date)

**\*\*\*\*NOTE\*\*\*\***

***If a TME does not have any funded trails crossing, within, or on a DOT rights-of-way, please disregard the above DOT signature and acknowledge that DOT permission is not applicable by signing below:***

The DOT permission form is not applicable to \_\_\_\_\_  
Name of TME

\_\_\_\_\_  
(TME or Local Sponsor Signature and Title) (Date)

## APPENDIX C

### Local Sponsor Claim For Administrative Expenses

This form is to be completed by the Local Sponsor only. List each expense listed below on a separate line.  
Examples: Admin Cost - GIS time, Admin Costs – Audit time, Admin Costs – Application preparation.

Make a single entry in the Standard Payments section of the Miscellaneous Form in the local sponsor's ATGP and attach a completed copy of this form as a receipt. See page 57 for more information.

**Name of Local Sponsor:**

**Personnel Costs:** (Eligible work items: Grant application preparation (Phases I and II); GIS and/or planning staff time used to collect GPS data, prepare shape files and maps; Phase III auditing). Specify numbers of hours worked on each different task.

**Number of staff hours**

**Cost:**

**Materials:** such as disks, paper, plotter ink

**Type:**

**Cost:**

**Total Costs:**