

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION  
**RECREATIONAL TRAILS PROGRAM GRANT PROGRAM**  
**GRANT APPLICATION PACKAGE**

**INTRODUCTION**

The Intermodal Surface Transportation Efficiency Act (ISTEA) of 1991 included the National Recreational Trails Fund Act (NRFTA) established the National Recreational Trails Funding Program. The National Highway System Designation Act of 1995 (NHS Act) amended and revived the NRTFA. The Transportation Equity Act for the 21<sup>st</sup> Century amended and provided assured funding for the program and changed the program name to Recreational Trails Program (RTP). The purpose of RTP is to provide funds for projects that provide or maintain recreational trails. A recreational trail means:

*A thoroughfare or track across land or water, used for recreational purposes such as bicycling, day hiking, equestrian activities, jogging or similar fitness activities, trail biking, overnight and long distance backpacking, roller skating, in-line skating, running, aquatic or water activity and vehicular travel by motorcycle, four-wheel drive, all terrain off-road vehicles, or dune buggies.*

The RTP is administered by the Florida Department of Environmental Protection (DEP) in coordination with the U.S. Department of Transportation, Federal Highway Administration (FHWA). Grant application proposals are evaluated according to policies and procedures described in Chapter 62S-2, Florida Administrative Code (F.A.C.). This is commonly known as the Rec Trails Rule. Applicants should familiarize themselves with these policies and procedures. This packet will assist all applicants in preparing and presenting the information needed for DEP to evaluate proposed RTP applications.

**GENERAL APPLICATION INFORMATION**

**Please submit the application in a SOFT COVER three prong binder (please, no HARD 3-ring binders). To facilitate the review and scoring process, label or tab all support documents or attachments. We appreciate your cooperation.**

A request for financial assistance under RTP may be for development or maintenance of recreational trails; purchase of trail construction or maintenance equipment; and if funds are available, for trail education projects. Project proposals may address the following recreational trail interests:

- motorized recreation;
- nonmotorized recreation;
- mixed-use projects (either motorized or nonmotorized); or projects that provide for innovative corridor sharing with motorized and nonmotorized recreation;
- construction and maintenance equipment.

Development projects should consist of the complete or partial development of the project site. Grantees shall have up to two (2) years from the effective date of the project agreement to complete the development project. A development project, when completed, must be a usable recreational trail or a trail facility along a usable recreational trail.

Grantees requesting funds to purchase equipment should be prepared to provide proof of insurance, be capable of properly storing and maintaining the equipment, and be familiar with Federal Highway Administration's Recreational Trails Program Interim Guidance, and DEP's Directive 320 as they relate to equipment and surplus property. All equipment purchased with RTP grant funds will be receive a DEP property number.

Grantees may use RTP funds to develop trails, trailhead and trailside facilities and related support facilities including parking, rest rooms, access to drinking water, etc. Development projects may also renovate existing trails and facilities in order to provide access for persons with disabilities.

**MAXIMUM GRANTS FUNDS AN APPLICANT MAY REQUEST FY 2018-2019:**

**Mixed Use and Nonmotorized Projects = \$200,000**

**Motorized Projects = \$500,000**

**THE 2018 SUBMISSION CYCLE IS December 1, 2017- December 15, 2017**

RTP program requires that the grantee provide matching funds. Please refer to Chapter 62S-2.071(3) for complete information on match requirements and match types.

**EVALUATION PROCESS**

Following DEP staff review of the applications, DEP will notify applicants of any deficiencies. Missing or incomplete documentation will usually constitute a deficiency. Applicants must submit requested deficiency information within fifteen (15) working days from date of deficiency notification. After the deficiency period, the Recreational Trails Advisory Committee ranks all eligible applications in accordance with the evaluation criteria set forth in the Rec Trails Rule.

## **APPLICATION SUBMISSION INFORMATION**

Applicants must submit proposals for RTP grants on application form OGT-10. Applications are evaluated on the basis of the information provided by the applicants, except where such data is superseded by official DEP information. Failure by an applicant to present all required application information and documentation may result in the application being declared ineligible for funding consideration. Failure by an applicant to provide accurate information and documentation relating to the evaluation criteria for the proposed project set forth in the RTP Rule may result in a loss of points for the applicant's competitive score.

**Applicants must submit four copies (1 original and 3 copies) of the completed application and all supporting documents** during the announced submission period of December 1 through December 15, 2017. Applications must be postmarked **NO LATER THAN** December 15, 2017, and submitted to:

**PAMELA LISTER, RECREATIONAL TRAILS PROGRAM  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
3900 COMMONWEALTH BOULEVARD, MAIL STATION 585  
TALLAHASSEE, FLORIDA 32399-3000**

If questions arise while preparing the application, please contact Pamela Lister at Pamela.Lister@dep.state.fl.us or 850-245-2501

**Please Note: If you plan to prepare this document by retyping or downloading it to your computer, the language and format used must exactly match this application.**

**This application may be downloaded from the Internet at the  
Recreational Trails Program webpage:  
<http://www.dep.state.fl.us/gwt/grants/>**



**FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION  
RECREATIONAL TRAILS PROGRAM**

DEP USE ONLY  
RECEIVED: \_\_\_\_\_  
POSTMARKED: \_\_\_\_\_  
APPLICATION #: \_\_\_\_\_

**PART I – APPLICANT INFORMATION**

1. Name of Applicant or Organization: \_\_\_\_\_

2. Federal Identification Number: \_\_\_\_\_

3. Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_  
(The contact person is someone who will be in direct contact with DEP)

Street Address/P.O. Box: \_\_\_\_\_

City/State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

E-Mail: \_\_\_\_\_

4. Type of Applicant (Select One):

\_\_\_ City or County Government

\_\_\_ State Agency, Department: \_\_\_\_\_, District: \_\_\_\_\_

\_\_\_ Federal Agency, Department: \_\_\_\_\_, District: \_\_\_\_\_

\_\_\_ Recognized Indian Tribal Government (*projects must be on lands in Florida*)

\_\_\_ Organization \* (*must be State recognized nonprofit*)

**\*Organization as applicant must provide letter of support from land managing agency. Tab as "Exhibit A."**

*I hereby certify that the information provided in this application is true and accurate. I further certify that I possess the authority to apply for this grant on behalf of the applicant.*

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Date

## PART II – PROJECT INFORMATION

1. Name of Project: \_\_\_\_\_

2. Project Location: \_\_\_\_\_

(Show on DOT county road maps or USGS 7 ½ minute quadrangle sheets):

**Tab as “Exhibit B”**

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_

Beginning point: \_\_\_\_\_

Ending point: \_\_\_\_\_

3. **Ownership** (If more than one owner, attach a list of owners and their agents along with a map clearly showing the location of each ownership).

**Site control issues must be resolved by the close of the submission period (December 15, 2017).**

Include a boundary map of the project site. **Tab as “Exhibit C”**

Include a copy of site control documents (e.g. deed, lease agreement, etc.)

**Tab as “Exhibit D”**

Owner: \_\_\_\_\_ Owner’s Agent: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

4. **U.S. CONGRESSIONAL DISTRICTS IN WHICH THE PROJECT SITE IS LOCATED:**

*These should be the district in which the project site is located. If you are not sure of the district, contact your local office of the Supervisor of Elections.*

U.S. Representative’s Name: \_\_\_\_\_

U.S. House District Number: \_\_\_\_\_

**5. STATE LEGISLATIVE DISTRICTS IN WHICH THE PROJECT IS LOCATED:**

*These should be the district in which the project site is located. If you are not sure of the district, contact your local office of the Supervisor of Elections.*

State Senator's Name: \_\_\_\_\_

State Senate District Number: \_\_\_\_\_

State Representative's Name: \_\_\_\_\_

State House District Number: \_\_\_\_\_

**6. PROJECT DESCRIPTION**

Briefly describe the proposed project. *Include physical characteristics of the site, such as land resources, vegetation, fish and wildlife, historical, archaeological resources, previous land usage and transportation access as well as a description of proposed project activities. **If the project is an equipment purchase, describe the equipment, how it will be used to benefit recreational trails (include where it will be stored, who will maintain it, proposed projects for its use and the land managing agency on whose property equipment will be used).***

## PART III – FINANCIAL INFORMATION

1. RTP Funds Requested: Line A \$ \_\_\_\_\_

2. Local Funds Available:

1) Cash: Line B \$ \_\_\_\_\_

2) In-Kind: Line C \$ \_\_\_\_\_

Total Local Funds Available: Line D \$ \_\_\_\_\_

*Sum of lines B and C*

3. Total Cost of Proposed Project: Line E \$ \_\_\_\_\_

*Sum of Lines A and D*

***The Total Project Cost (Line E) must equal the grant request (Line A) plus the total local funds available (Line D). This figure (Line E) should not total more than \$400,000 (non-motorized) or \$1,000,000 (motorized) for the purpose of this application.***

**4. PROJECT COST ESTIMATE:** For each element, please indicate if it is a new facility, renovation or maintenance of an existing facility, accessibility improvements, equipment purchase, or trail user education components. *Costs of planning, permitting and site preparation should be included within the cost of each element (not to exceed 15% of total project cost).*

Element Type	Quantity	Description	Estimated Cost
New			
Renovations			
Maintenance			
Accessibility			
Equipment			
Trail User Ed.			



## PART IV – GENERAL EVALUATION CRITERIA

### 1. PROJECT TYPE

***Provide Conceptual Site Plan. Tab as “Exhibit E”***

***Provide Photographs of the Project Area. Submit color, on-site photographs sufficient to depict the physical characteristics of the project area. Tab as “Exhibit F”***

***Provide Location Map and Directions. Submit a detailed street, road or highway map precisely locating the project site. Also, provide clear and concise written driving instructions from the nearest federal or state highway. Tab as “Exhibit G”***

\_\_\_\_\_ Construction of new trails on federal, state, county or municipal lands where recreational needs for such construction is shown

\_\_\_\_\_ Development and rehabilitation of trailside and trailhead facilities and trail linkages

\_\_\_\_\_ Maintenance and restoration of existing trails

\_\_\_\_\_ Purchase of trail construction or maintenance equipment

### 2. CAPITAL IMPROVEMENT PLAN

A. The project implements the applicant’s adopted local comprehensive plan (city or county); or the land management or recreation or trail plan of a state or federal agency and; is included in their Capital Improvement Plan (CIP) or similar plan during the current year or one of the next three (3) fiscal years: *(Include copies of any necessary documents/plans which clearly indicate the proposed project. Please highlight project name, amount and year.) Tab as “Exhibit H”*

\_\_\_\_\_ Yes

\_\_\_\_\_ No

---OR---

B. Is the proposed project included as part of the plan through a resolution or agency commitment committing the applicant to amend their CIP or similar plan to include the project should the applicant receive program funds: *(Include copies of any necessary documents/plans/resolutions which clearly indicate the proposed project. Please highlight project name, amount and year.) Tab as “Exhibit H”*

\_\_\_\_\_ Yes

\_\_\_\_\_ No

### 3. STATE COMPREHENSIVE OUTDOOR RECREATION PLAN

Explain how the proposed project would address one or more of the issues or goals identified in the State Comprehensive Outdoor Recreation Plan. *Use the **Outdoor Recreation in Florida – 2013 (SCORP)**. Provide quotations or other appropriate references to justify the correlation. Use a separate sheet if necessary.*

**Tab as “Exhibit I”**

### 4. STATE GREENWAYS AND TRAILS PLAN

Explain how the proposed project would address one or more issues or goals as identified in the State’s Greenways and Trails Plan. *Use the **Florida’s Greenways and Trails System Plan – 2013-2017**. Provide quotations or other appropriate references to justify the correlation. Use a separate sheet if necessary.*

**Tab as “Exhibit J”**

### 5. ACCESSIBILITY

Describe how the project facilitates and improves the access and use of trails by persons with disabilities.

## 6. YOUTH CONSERVATION OR SERVICE CORPS

The project is supported through a written letter of commitment between the applicant and a recognized youth conservation or service corps in which the corps agrees to supply a stated amount of labor.

\_\_\_\_\_ Yes

\_\_\_\_\_ No

*If “Yes”, submit a copy of the written letter of commitment between the applicant and the service corps. Written letter must be executed by the end of the submission period and quantify the amount of labor in monetary units. **Tab as “Exhibit K”***

## 7. CONNECTIVITY AND LINKAGES

Describe how the proposed project provides access to or between any of the following:

- (A) Public parks or other recreational lands or facilities;
  
  
  
  
  
  
  
  
  
  
- (B) Features or areas of historic, cultural, biological or archaeological significance; *Provide copy of letter from Florida Department of State (**Tab as “Exhibit L”**) and/or Florida Natural Areas Inventory (**Tab as “Exhibit M”**).*
  
  
  
  
  
  
  
  
  
  
- (C) Existing intermodal transportation corridors or trail systems; and/or
  
  
  
  
  
  
  
  
  
  
- (D) Residential populated areas.

## 8. PUBLIC PARTICIPATION

Please indicate which of the following apply (***select all that apply***):

- \_\_\_\_\_ A. An advertised public meeting was held solely for the purpose of discussing the proposed project. *Attach a copy of proof of publication for the advertisement. Meeting must be for the **SOLE PURPOSE** of discussing **the project proposed in the application**. The advertisement should indicate that the purpose of the meeting is to discuss a RTP grant for this project site. Tab as "Exhibit N-1"*
- \_\_\_\_\_ B. The project was discussed at a regularly scheduled meeting of the applicant's advisory board responsible for park, recreation and leisure service activities. *Provide a copy of the agenda and/or minutes of the advisory board meeting(s) where **this project** was discussed. The board must be an appointed group of citizens, such as a parks and recreation advisory board, who would normally review projects similar to the proposed grant application. Discussion must take place at a regularly scheduled meeting. Planning and zoning or similar boards may be used if a parks and recreation advisory board does not exist. **CITY OR COUNTY COMMISSIONS ARE NOT CONSIDERED ADVISORY BOARDS.** Tab as "Exhibit N-2"*
- \_\_\_\_\_ C. Public input on the proposed project was obtained through presentations to community organizations, neighborhood associations and/or a written opinion survey. *Provide documentation (agenda, minutes or thank-you letter) showing that presentations **regarding this project** were made to community organizations or groups **OR** provide a copy of the survey instrument and a summary of the results and explain how the **results relate to the proposed project**. Tab as "Exhibit N-3"*

## 9. NATIONAL SCENIC TRAIL OR NATIONAL RECREATION TRAIL

A. The project is located on or connects with the Florida National Scenic Trail:

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

*If yes, provide map and documentation (letter from U.S. Forest Service) indicating connectivity with a **certified portion** of the Florida National Scenic Trail. Tab as "Exhibit O"*

B. The project is located on or connects with a National Recreation Trail:

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

*If "Yes", provide a map and documentation (letter from the National Park Service) indicating connectivity with a **designated** National Recreation Trail. Tab as "Exhibit O"*

## 10. STATE OF FLORIDA DESIGNATED RECREATIONAL GREENWAY OR TRAIL

The project is located on or connects with a State of Florida designated greenway or trail.

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

*If "Yes", provide a map and documentation (letter from Office of Greenways and Trails) indicating connectivity. **Designation Agreements must be fully executed by end of submission period. Tab as "Exhibit P"***

## 11. MATCHING RATIO

RTP is a matching grant program. Maximum grant award can account for 80% of total project costs (federal grant amount: grantee's cash and/or in-kind services). Select which matching ratio applies to this project:

\_\_\_\_\_ A.    50:50

\_\_\_\_\_ B.    60:40

\_\_\_\_\_ C.    80:20

**\* Federal Agencies: only 95% of total project costs may be federal dollars. Please explain the source of funds for remaining 5%.**

Source of non-Federal dollars when applicant is Federal Agency: \_\_\_\_\_.

## 12. MIXED USE PROJECTS

A. The specific trail design demonstrates that the project will support recreational trail opportunities for **both motorized and nonmotorized use** through innovative techniques such as multiple trails sharing a single corridor, or time sharing of trails or trailhead facilities, or other innovative corridor sharing techniques.

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

*If "Yes", please explain innovative techniques to be employed and address potential user conflicts. **Tab as "Exhibit Q"***

- B. The specific trail design demonstrates that the project will support mixed-use recreational trail opportunities, either motorized or nonmotorized, through innovative techniques.

\_\_\_\_\_ Yes

\_\_\_\_\_ No

*If "Yes", please explain innovative techniques to be employed and address potential user conflicts. **Tab as "Exhibit Q"***

## **PART V – SPECIFIC CRITERIA**

### **1. MOTORIZED PROJECTS Only:**

- A. The proposed project will: **(select only one)**

\_\_\_ 1. Develop new motorized recreational trails.

\_\_\_ 2. Repair or restore designated motorized trails impacted by normal use.

\_\_\_ 3. Develop motorized trail facilities on existing motorized recreational trail corridors.

- B. The project will support compatible recreational trail use for the greatest number of the following: **(select ALL that apply)**

\_\_\_ 1. Off-Road Motorcycles

\_\_\_ 2. All-Terrain Vehicles

\_\_\_ 3. Off-Highway Vehicles (high clearance vehicles)

\_\_\_ 4. Other Motorized Recreational Trail Use. List all: \_\_\_\_\_.

### **2. NONMOTORIZED PROJECTS Only:**

- A. The proposed project will: **(select only one)**

\_\_\_ 1. Develop nonmotorized recreational trail facilities on new corridors.

\_\_\_ 2. Develop nonmotorized recreational trail facilities on existing corridors.

\_\_\_ 3. Improve or repair existing nonmotorized recreational trail and/or facilities.

B. The nonmotorized project will support compatible recreational trail use for the greatest number of the following: **(select ALL that apply)**

\_\_\_ 1. Bicycling

\_\_\_ 2. Skating

\_\_\_ 3. Day Hiking

\_\_\_ 4. Equestrian Activities

\_\_\_ 5. Fitness Activities

\_\_\_ 6. Overnight or Long Distance Backpacking

\_\_\_ 7. Aquatic Activity

\_\_\_ 8. Other Nonmotorized Recreational Trail Use. List all: \_\_\_\_\_.

### 3. MOTORIZED AND NONMOTORIZED MIXED-USE PROJECTS Only:

A. The motorized/nonmotorized mixed-use project will: **(select only one)**

\_\_\_ 1. Develop new mixed-use trails.

\_\_\_ 2. Repair or restore designated mixed-use trails impacted by normal use.

\_\_\_ 3. Develop mixed-use trail facilities on existing motorized recreational trail corridors.

B. The project will support compatible recreational trail use for the greatest number of the following: **(select ALL that apply)**

\_\_\_ 1. Off-Road Motorcycles

\_\_\_ 2. All-Terrain Vehicles

\_\_\_ 3. Off-Highway Vehicles (high clearance vehicles)

\_\_\_ 4. Other Motorized Recreational Trail Use. List: \_\_\_\_\_.

\_\_\_ 5. Bicycling

**3(B) Motorized/Nonmotorized Mixed-Use Projects Only, cont.**

\_\_\_ 6. Skating

\_\_\_ 7. Day Hiking

\_\_\_ 8. Equestrian Activities

\_\_\_ 9. Fitness Activities

\_\_\_ 10. Overnight or Long Distance Backpacking

\_\_\_ 11. Aquatic Activity

\_\_\_ 12. Other Nonmotorized Recreational Trail Use. List: \_\_\_\_\_.



#### 4. EDUCATIONAL PROJECTS Only:

A. The educational trail project will: **(select ALL that apply)**

- \_\_\_ 1. improve trail user safety.
- \_\_\_ 2. reduce trail user impacts upon the resources.
- \_\_\_ 3. increase public awareness of trail opportunities.

B. Describe the education project in detail. *Include in your discussion goals, objectives, methods and materials to be used, time-line. Use separate sheet if necessary. Tab as "Exhibit R"*

C. List all trail interest groups sponsoring this proposed education project. *Provide letter of commitment from each sponsoring group. Tab as "Exhibit S"*

D. Describe the types of trail users targeted by this proposed education project (e.g., hiking, bicycling, motorcycles, motorized, nonmotorized, etc.).

E. Describe the evaluation method which applicant will use to determine the education project's effectiveness. *Use separate sheet if necessary. Tab as "Exhibit T"*

## PART VI – SUPPORTING DOCUMENTATION

**ATTENTION:** Before you finish your application package, make sure you have all the necessary support documents prepared and attached. Please use this list to make sure that all applicable documentation is included. Attach supporting documents as follows:

Application Item – If Applicable	Tab as Exhibit
NOTE: Four (4) copies of the completed and signed application and all supporting documents must be submitted before <b>December 15, 2017</b> . (1 original and 3 copies)	<b>PLEASE USE A SOFT COVERED BINDER.</b>
A. Organizations provide a <b>Letter of Support</b> from land managing agency. Agency must state that it accepts the post completion requirements as outlined in Chapter 62S-2 F.A.C.	<b>A</b>
B. Show project location on <b>DOT County Road Maps or USGS 7 ½ Minute Quadrangle Sheets</b> . Include beginning and ending points.	<b>B</b>
C. <b>Boundary Map</b> of the project area: The map must provide a description and sketch of the project area boundaries, display known easements and be legally sufficient to identify the project area. Plat maps may accepted if the above criteria are identified. <b>Aerial photographs are not accepted as boundary maps.</b>	<b>C</b>
D. <b>Site Control</b> (e.g., deed, lease): Submit a copy of the site control document for the project site. If submerged lands are included in the development area, provide a legal document (i.e., permit, management agreement, etc.) which indicates permission to use and develop the submerged lands. <b><u>Site control must be effective by the close of the submission period.</u></b>	<b>D</b>

Application Item – If Applicable	Tab As Exhibit
<p>E. <b>Conceptual Site Plan</b> for development of the project area: Submit a conceptual site plan displaying the areas and facilities to be developed as proposed in the scope of the application. The site plan must correlate with the project area identified in the project boundary map and cost estimate. The site plan must CLEARLY DELINEATE between facilities/opportunities currently existing, facilities proposed for funding in this application and facilities planned for future development. <b><i>Please color code your site plan to indicate facilities that are existing, proposed for funding and planned for future development (not in this project).</i></b></p>	<p>E</p>
<p>F. <b>Photographs of the Project Area:</b> Submit color, on-site photographs sufficient to depict the physical characteristics of the project area. Provide color photographs for all four copies of your application. Aerial photographs are requested, but not required. <i>Please mark an approximate boundary of the Project Site and note major roads and/or landmarks on the aerial photo (note – this is not the boundary map).</i></p>	<p>F</p>
<p>G. <b>Location Map and Directions:</b> Submit a detailed street, road or highway map precisely locating the project site. Also, provide clear and concise written driving instructions from the nearest federal or state highway. <b>NOTE:</b> Please confirm that street names listed in the written directions are the same as those posted on street signs in the area.</p>	<p>G</p>

Application Item – If Applicable	Tab As Exhibit
H. <b>Capital Improvements Schedule</b> or a copy of a resolution amending the existing schedule to include the proposed project. State or federal agencies provide copy of their land management or recreation or trail plan.	H
I. <b>SCORP</b> objectives support documentation. Written response to Part IV, Item 3, Page 9 of this application. Include narrative explaining how the project implements one or more of the outdoor recreation goals and objectives as listed in the 2013 SCORP.	I
J. <b>State Greenways and Trails Plan</b> support documentation. Written response to Part IV, Item 4, Page 9 of this application. Include narrative explaining how the project implements one or more of the goals and objectives as indicated in the 2013-2017 State Greenways and Trails System Plan.	J
K. <b>Service Corps:</b> Copy of letter of commitment between applicant and recognized youth conservation or service corps, in which the corps agrees to supply stated amount of labor. <i>Refer to 42 U.S.C. 12572 and 42 U.S.C. 12656 for definitions. Scout troops and similar groups do NOT qualify. AmeriCorps is a recognized service corps.</i>	K
L. <b>Department of State</b> letter to verify that a project is for archaeological/historic/cultural preservation purposes	L
M. <b>FNAI</b> letter to verify resources protected by project.	M

Application Item – If Applicable	Tab As Exhibit
<p>N. <b>Public Participation Documentation:</b></p> <p>1. Copy of public meeting advertisement for <b>SOLE PURPOSE</b> of discussing the project.</p> <hr/> <p>2. Agenda and/or minutes of <b>REGULARLY SCHEDULED</b> advisory board meeting.</p> <hr/> <p>3. Documentation of <b>PRESENTATION</b> to community groups (agenda, letter of thanks, etc. <b>OR . . .</b></p> <p>A copy of the <b>SURVEY</b> instrument and a summary of the results as they relate to the proposed project.</p>	<p>N</p>
<p>O. Letter from U.S. Forest Service documenting project is located along or connects to a <b>certified portion</b> of the <b>Florida National Scenic Trail</b>. <b>OR . . .</b></p> <p>Letter from National Park Service documenting project is located along or connects with a <b>designated National Recreation Trail</b>.</p>	<p>O</p>
<p>P. Letter from Office of Greenways &amp; Trails documenting project is located along or connects with a <b>designated State of Florida Greenway or Trail</b>.</p>	<p>P</p>
<p>Q. <b>Mixed Use Projects:</b> Explanation of innovative techniques to be employed (<i>address potential user conflicts</i>).</p>	<p>Q</p>

Application Item – If Applicable	Tab As Exhibit
<p><b>R. <i>Education Project Description:</i></b></p> <ul style="list-style-type: none"> <li>• <b>Tab as R-1:</b> Explain how this project relates to trails safety, trails-related environmental education, or trails-related environmental protection (e.g. environmentally sensitive trail construction and/or trail maintenance techniques). <b>Limit 1 page</b></li> <li>• <b>Tab as R-2:</b> Show the timetable and deliverables for the project. <b>Limit 1 page</b></li> <li>• <b>Tab as R-3:</b> Explain who the target audience is and what the number of people you expect to reach will be. Explain how you will reach this audience.</li> </ul>	R
<p><b>S. Letters of commitment from each of the sponsoring <i>Trail Interest Groups</i>.</b></p>	S
<p><b>T. <i>Evaluation Methodology</i> for the proposed education project. To be based upon sound research principles.</b></p>	T

**PART VII – CONTACT FOR ADDITIONAL INFORMATION**

CONTACT	PHONE
<b>Recreational Trails Program Information &amp; Assistance</b>	<b>850-245-2501</b>
Florida Statewide Greenways & Trails Plan	850-245-2052
Department of State	850-245-6333
Florida Natural Areas Inventory (FNAI)	850-224-8207
Outdoor Recreation in Florida-2013 (SCORP)	850-245-3068
U.S. Forest Service (National Scenic Trail)	850-523-8501
U.S. Department of the Interior (National Recreation Trails)	601-446-8692 ext. 6