RESOLUTION

WHEREAS, The City of Stoughton hereby requests financial assistance under
(name of municipality, tribal government or non-profit organization)

s. 20.370, Wis. Stats., Chapter NR 47, Wis. Admin. Code, for the purpose of funding urban and community forestry projects or urban forestry catastrophic storm projects specified in s. 20.370(5)(bw) and (1)(mv), Wis. Stats.,

THEREFORE, BE IT RESOLVED, that The City of Stoughton HEREBY AUTHORIZES
(name of municipality, tribal government or non-profit organization)

City Forester, an official or employee, to act on its behalf
(position title of authorized representative)

to: Submit an application to the Department of Natural Resources for financial assistance under s. 20.370, Wis. Stats., Chapter NR 47, Wis. Admin. Code;

Sign necessary documents; and

Submit a final report.

Adopted this _____ day of _____, 20_____

_____
Name

_____
Title

_____
Name

_____
Title

_____
Name

_____
Title

I hereby certify that the foregoing resolution was duly adopted by _____

at a legal meeting on the _____ day of _____, 20_____.

_____
Name

_____
Title

State of Wisconsin
Department of Natural Resources
Division of Forestry
dnr.wi.gov

Urban Forestry Grants Application

Form 8700-298 (R 6/20)

Notice: Pursuant to US Public Law 95-313, s. 6(b), s. 23.097, Wis. Stats., and ch. NR 47, Wis. Adm. Code, this completed form is required to apply for an Urban Forestry Grant. The Department of Natural Resources (DNR) will be unable to process your application unless complete information is provided as requested. Information will be used to determine grant award lists, provide statistical information and potentially to use as an example for other grant applicants. Personally identifiable information collected will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Public Records Law [ss. 19.31-19.39, Wis. Stats.].

Grant is for calendar year **2021**

Resolution required with application submittal – see sample

Section I: Grant Type

Select the appropriate grant type. Please note: a maximum of three urban forestry startup grants may be awarded to an applicant within the lifetime of the startup program. Click the link for more information related to each grant type.

(●) Regular Grant ( ) Start-up Grant

Section II: Applicant Information

A. Applicant Organization

Applicant Organization Name

City of Stoughton, Wisconsin

Applicant organization is a *(check one)*

(●) City ( ) Village ( ) Town ( ) County ( ) Tribal Government ( ) 501(c)(3) nonprofit organization

Located in the county of: Dane

DNR USE ONLY SC

B. Applicant Authorized Representative

Last Name	First Name	MI	Position Title
Kemppainen	John		City Forester

Organization Address (same as Treasurer or W9)	Phone Number	FAX Number
207 S Forrest St	(608) 873-6303	(608) 877-6387

City	State	ZIP Code	E-mail
Stoughton	WI	53589	jkemppainen@ci.stoughton.wi.us

C. Project Manager (if different from Authorized Representative)

Last Name	First Name	MI	Position Title

Address	Phone Number	FAX Number

City	State	ZIP Code	E-mail

D. Grant Request Summary – will automatically be populated from Section VII Calculations

Grant Request:	Applicant's Share:	Total Project Cost:
2,072.30	2,072.30	4,144.60

Section III. Community Urban Forestry Program Status

Below are basic elements of a well-established municipal, county, or tribal urban forestry program. Select ONE option in each category that best describes your current urban forestry program.

Applicants for the Startup Grant will be redirected to a regular grant application if they select the top box in 3 or more of the categories.

501(c)(3) organizations omit this section UNLESS your project results in a municipality advancing to the top level in any of the categories. Then, list the municipality here and complete the grid to reflect that municipality's current urban forestry program.

Municipalities: _____

Tree Inventory	We have a current, complete tree inventory.	◉
	Our tree inventory is incomplete or needs updating or upgrading.	○
	We have no formal inventory or other written records of our trees.	○
Urban Forest Management Plan	We have a current, useful, written, inventory-based urban forest management plan.	○
	Our inventory-based, written urban forest management plan is incomplete or out of date.	◉
	We do not have a written urban forest management plan based on our tree inventory data or on similar forest resource assessment.	○
Program staffing	Urban forestry program management is done by staff, contracted consultants &/or volunteers who have: a forestry degree; ISA certified arborist credentials; have completed WI Community Tree Management Institute; or have other advanced forestry training.	◉
	Urban forestry program management is done by staff, contracted consultants &/or volunteers who have: experience or on-the-job training, but lack a forestry degree; ISA certified arborist credentials; Community Tree Management Institute completion certificate; or comparable advanced forestry training.	○
	We have no staff, contracted consultants or volunteers authorized to handle or advise our community on tree planting & care.	○
Tree ordinance	We have one or more tree ordinance(s) that is/are useful for achieving community tree care and management goals.	◉
	Our tree ordinance(s) is/are out-of-date or inadequate.	○
	Our code ordinance contains no provisions for tree management, care or protection. Tree language is limited to public safety or nuisance abatement.	○
Advocacy	We have an authorized citizen tree board or other organized group actively involved in advising our community urban forestry program.	◉
	We have various groups (clubs, schools, committees) interested and involved in community tree care and management but not formally charged with advising our community urban forestry program- OR- We have an authorized but inactive citizen tree board.	○
	The level of involvement and support by residents and local elected officials for our community urban forestry program is low to non-existent.	○

Comments (optional):

Section IV: Project Description

A. Project Overview

Descriptive Project Title: City of Stoughton Canopy Restoration Project

Describe the project using no more than 2000 characters (including spaces). Provide an overview that includes basics of who is doing what, where, how and why. This can be a bulleted list.

Describe how this project would establish a new program or advance an underdeveloped one.

This project will provide residents of the city of Stoughton with free bare root trees to be planted on private property. This is intended to increase the urban tree canopy of Stoughton in response to EAB tree loss on private property and fill other canopy gaps the citizen may have. Bare root stock will will be purchased in the spring and grown out in the city operated gravel beds for planting in the fall, which is shown to significantly increase survivability of planted trees. Outreach efforts will be conducted in summer of 2021 for interested citizens to pick up trees at specific dates in the fall of 2021. When citizens pick up their tree they will be provided informational handouts on the proper planting techniques, care of the tree and needs and benefits of their specific tree species.

B. Ash tree removals and replacements *(only answer this question if you are requesting funds for ash removal or replanting)*

The WDNR received $175,000 from the USDA Forest Service to assist in response to the catastrophic loss of urban tree canopy due to EAB (Emerald Ash Borer). These additional monies will be administered through WI DNR's competitive 2021 State Urban Forestry Grants Program. Projects funded with these dollars will focus on EAB response on public lands and will only include **ash tree removals and replacements.**

To help determine which funding source may be used for your project, please answer as many of the following questions as possible:

- Does your community have EAB? ◯ Yes ◯ No
- How many trees do you have on public property? ◯ Yes ◯ No
- How many ash trees are currently standing on public property? ◯ Yes ◯ No
- How many ash trees have been removed on public property? ◯ Yes ◯ No
- What is your community's percent tree canopy? *(Check here to find your community.)* ◯ Yes ◯ No
- How many ash trees have been removed on public property? ◯ Yes ◯ No

C. Project Components Choose from the dropdown boxes below. Use the "OTHER" choice to type in alternatives. (See a list of eligible project activities in the application guide) Click + at right to add another component.	Describe each project component. • What are the expected outcomes (results)? • How will expected outcomes be measured, evaluated or shared? **Note:** Complete a separate Cost Estimate Worksheet (CEW) in Section VII for each project component listed below. The CEW will transfer the total to the right-hand column below.	**Component Cost Estimate ($) (field will auto-populate from detail on CEW)**
Tree Maint: Planting	Target Measure (# of units, e.g. staff trained, trees treated, type of ordinance, etc 40	
Description/Outcome: Provide 40 bare root trees to citizens of Stoughton, Wisconsin for planting on private property. These trees will be grown out for a summer in gravel beds.		$3,907.60
Information / Education /Outreach *A	Target Measure (# of units, e.g. staff trained, trees treated, type of ordinance, etc 40	
Description/Outcome: Provide outreach materials to 40 citizens of Stoughton, Wisconsin on proper planting and care of trees.		$237.00

Examples of components for Part B (selected in drop down box above):

* A Information (e.g., news media, print material development), Education (e.g., classes, tree walks, seminars), Outreach (e.g., citizen involvement in planning or implementation of Arbor Day celebration).
* B Fertilization, storm damage mitigation, pest control, etc.
* C Plan Development (Emerald Ash Borer, management, strategic, storm response, pest response, planting).

D. Project Location/Scope

Land Ownership Affected (select all that apply)

- ☐ Single private property
- ☒ Multiple private properties within a municipality
- ☐ Multiple private properties across multiple municipalities
- ☐ Single public property
- ☐ Multiple public properties within a municipality
- ☐ Multiple public properties across multiple municipalities

E. Applicant's Project Partners

Note: Each of the applicant's partners **must** verify their involvement using a Partner Verification (Form 8700-298A, linked here for your convenience). A Partner Verification form must be completed and sent in with this form for a complete application. If applicable, estimate the partner's donated amount on the appropriate CEW.

List Partner Organization(s):	What specific service, product, or role will each partner contribute to the project?

Section V: Alignment with DNR Urban Forestry Program Goals – Only applicable for Regular grants

1. Describe the direct impact(s) your project has on urban tree canopy on private property: N/A ☐

   Provide up to 40 citizens with trees to plant on their private property within the municipality to increase the urban tree canopy.

2. Describe how you will utilize an existing inventory in this project. If no inventory exists or the inventory is outdated, will an inventory be produced because of the grant? How will the new inventory be utilized? N/A ☐

   The existing city tree inventory will be used to purchase tree species that are under represented in the urban forest.

3. If hosting a professional workshop or educational event, describe how your project will build capacity and/or partnerships for those attending. Will other communities be invited to attend? Have you reached out to neighboring communities to identify training demand? N/A ☒

4. Please select if your project will include: N/A ☐

☐ EAB Management Plan ☐ Ash Tree removals ☐ Ash inventories (includes complete tree inventories)
☐ EAB Insecticide treatment ☒ Ash tree replacement planting ☐ EAB Education and Outreach

5. Please select if your project will result in: N/A ☒
   - ☐ A current, useful, written, inventory-based urban forest management plan
   - ☐ One or more tree ordinance(s) that is/are useful for achieving your community tree care and management goal
     Type of ordinance planned to be developed or enhanced (i.e. general street tree, new development, tree protection, etc)
   - ☐ An authorized citizen tree board or other organized group actively involved in advising your community urban forestry program
   - ☐ Staff, tree service contractors &/or volunteers receiving a forestry degree, ISA certified arborist credentials, graduating from WI Community Tree Management Institute, or obtaining other advanced forestry training

6. Describe how **each** component of your project will have a long-term positive impact on the urban tree canopy and the benefits it provides (i.e. increased % canopy cover, or resiliency to pest/disease/storm, reduce liability). Quantify impacts to canopy or associated benefits wherever possible.
   Tie this narrative to the component listed in question #5.
   This project will increase the city urban forest canopy by up to 40 trees for long-term benefits of the city and it's citizens. The tree inventory will be used to increase representation of under represented species to increase diversity and resilience of the city's urban forest. Outreach efforts will inform citizens of the City's Forestry program, Urban Wood Cycle program, the city's Tree Commission and improve public knowledge of tree benefits, planting process and care.

Section VI: Additional Applicant Information – Only applicable for Regular grants

1. Is the community where the project will be implemented a Green Tier Legacy Community? (http://greentiercommunities.org/pilot-communities/) ○ Yes ◉ No ○ N/A
2. Is the community where the project will be implemented a Tree City USA? (www.arborday.org/programs/treeCityUSA/index.cfm.) ◉ Yes ○ No ○ N/A
3. List any specific urban tree care or tree management training received, or conferences attended by your organization's staff or volunteers within the last three years. Please list no more than 5 separate trainings.

Date	Course Title	Training Description	Provider	Attendees	
02/17/2020	WAA Annual Conference	various	WAA/WDNR	John Kemppainen, Kevin Short, Dean Tangemann	
02/18/2019	WAA Annual Conference	various	WAA/WDNR	John Kemppainen, Kevin Short, Dean Tangemann	
02/19/2018	WAA Annual Conference	various	WAA/WDNR	John Kemppainen	

4. Have you received an Urban Forestry grant in the past 3 years? ○ Yes ◉ No
   If so, how is this project different than the project(s) completed previously?

5. Describe any additional significant aspects or outstanding features of this project that you would like us to know about.

Section VII: Cost Estimate Worksheets

A SEPARATE WORKSHEET IS PROVIDED FOR EACH COMPONENT CHOSEN IN SECTION IV.B.
If more space is needed, return to Section IV.B., click + to add another component, choose the same Component name again, enter "Continued" in the Description, and return to this Section to complete your entry.

Project Component: **Tree Maint: Planting**	Estimated Cost	Donation Value
In-Kind Labor & Services *(specify project tasks on lines below, as appropriate)*		
Applicant's Staff Labor: 16 hours or City Forester's time @ $26.45	$423.20	
Fringe Benefits: 48.30%	$204.40	
Other:		
Donated Consultants/Contractors/Services (professional rate)		
Volunteer Labor ($15.00/hr.) 4 volunteers for 8 hours.		$480.00
Municipal Partner Labor Expense (Cooperative Agreement will be required)		
Equipment *(specify type of equipment and DOT class code on lines below, as appropriate)* See application guidelines for a list of commonly used equipment codes.		
Provided by Applicant:		
Donated by third parties:		
Supplies *(specify items on lines below, as appropriate)*		
Provided by Applicant's On-hand Inventory		
Donated by third parties:		
Cash Expenditures *(specify out of pocket payments as appropriate)*		
Hired Consultants/Contractors/Services (professional rate)		
Purchased Equipment *(not to exceed $5,000 /item)*:		
Rented or Contracted Equipment:		
Other Project Purchases: 40 Bare Root Trees	$2,800.00	
Estimated Sub-Total Cost/Donation Value for THIS component:	1. $3,427.60	2. $480.00
Estimated Total for THIS component.	3. $3,907.60	

A SEPARATE WORKSHEET IS PROVIDED FOR EACH COMPONENT CHOSEN IN SECTION IV.B.

If more space is needed, return to Section IV.B., click + to add another component, choose the same Component name again, enter "Continued" in the Description, and return to this Section to complete your entry.

Project Component: **Information / Education /Outreach *A**	Estimated Cost	Donation Value
In-Kind Labor & Services *(specify project tasks on lines below, as appropriate)*		
Applicant's Staff Labor: 4 hours of Administrative Assistant @ $19.76/hr.	$79.04	
Fringe Benefits: 48.3%	$37.96	
Other:		
Donated Consultants/Contractors/Services (professional rate)		
Volunteer Labor ($15.00/hr.) 2 volunteers for 4 hours		$120.00
Municipal Partner Labor Expense (Cooperative Agreement will be required)		
Equipment *(specify type of equipment and DOT class code on lines below, as appropriate)* See application guidelines for a list of commonly used equipment codes.		
Provided by Applicant:		
Donated by third parties:		
Supplies *(specify items on lines below, as appropriate)*		
Provided by Applicant's On-hand Inventory		
Donated by third parties:		
Cash Expenditures *(specify out of pocket payments as appropriate)*		
Hired Consultants/Contractors/Services (professional rate)		
Purchased Equipment *(not to exceed $5,000 /item)*:		
Rented or Contracted Equipment:		
Other Project Purchases:		
Estimated Sub-Total Cost/Donation Value for THIS component:	1. $117.00	2. $120.00
Estimated Total for THIS component.	3. $237.00	

CALCULATIONS

Grant Calculation	Estimated Cost
A. Estimated Project Total: Box 3 for ALL Project Components This amount is the Total Project Cost in Section II.D.	$4,144.60
B. Estimated Donation Value: Box 2 for ALL Project Components	$600.00
C. Estimated Cost: Box 1 for ALL Project Components	$3,544.60
D. 50% of Line A (Cannot be > $25,000):	$2,072.30
E. The smaller of Line C or Line D above. This is your GRANT REQUEST. (Must be between $1,000 and $25,000.) This amount is the Grant Request in Section II.D.	$2,072.30
F. Line A minus Line E. This is YOUR SHARE. This amount is the Applicant's Share in Section II.D.	$2,072.30

Section VIII: Certification and Submission

Application form and required attachments must be received by 11:59 p.m., October 1, 2020, for the application to be eligible.

Attachments

Provide a signed resolution that has been adopted by the applicant's governing body which gives the name of the applicant, authorizes funding for the project, designates an authorized representative (position title) to act on behalf of the applicant and states that the applicant will provide documentation of work done and follow all relevant state and federal rules. A sample resolution is provided at: http://dnr.wi.gov/topic/UrbanForests/grants/documents/UFGrantsCombinedResolution.doc
Check all items you plan to attach.

- ☐ **Authorizing Resolution attached**
- ☐ By-laws & articles of incorporation (501[c][3] applicants only)
- ☐ Partner Verification Attached (8700-298A)

Submission Instructions

Review your application before continuing.

Submission by Email strongly recommended. If not possible, contact the Urban Forestry Financial Specialist

By my signature below, I hereby certify to the best of my knowledge, the information contained in this application and application attachments are correct and true. I understand and agree that any grant monies awarded as a result of this application shall be used in accordance with ch. 23.097, Wis. Stats., and ch. 47, Wis. Adm. Code.

NOTE: Please type your name on the signature line. Your typed name, along with the email message generated from electronic submittal of this form, will be used as an electronic signature which is the legal equivalent to an actual signature.

Signature of Authorized Representative	Date Signed	Applicant's Authorized Representative (print)
John Kemppainen	09/14/2020	John Kemppainen

Position Title