

**Title II Project Application**  
**Medford District Resource Advisory Committee**

- 1. Project Number** (Assigned by federal unit): \_\_\_\_\_ **AMOUNT REQUESTED** \_\_\_\_\_  
**2. Project Name:** \_\_\_\_\_ **3. County:** \_\_\_\_\_  
**4. Project Sponsor:** \_\_\_\_\_ **5. Date:** \_\_\_\_\_  
**6. Sponsors Phone #:** \_\_\_\_\_  
**7. Sponsor's E-mail:** \_\_\_\_\_  
**8. Project Location** (attach project area maps showing general and specific locations of project.)

a. 4<sup>th</sup> Field Watershed Name and HUC #(if known): \_\_\_\_\_  
\_\_\_\_\_

b. 5<sup>th</sup> Field Watershed Name and HUC #(if known): \_\_\_\_\_  
\_\_\_\_\_

c. Legal Location:

Township _____	Range _____	Section(s) _____
Township _____	Range _____	Section(s) _____
Township _____	Range _____	Section(s) _____
Township _____	Range _____	Section(s) _____
Township _____	Range _____	Section(s) _____
Township _____	Range _____	Section(s) _____
Township _____	Range _____	Section(s) _____
Township _____	Range _____	Section(s) _____
Township _____	Range _____	Section(s) _____

d. BLM District \_\_\_\_\_ e. BLM Resource Area \_\_\_\_\_

f. National Forest \_\_\_\_\_ g. Forest Service District \_\_\_\_\_

h. State / Private / other lands involved?  Yes      No

**9. Statement of Project Goals and Objectives:**

**10. Project Description:** (Provide concise description of project and attach map.)

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**11. Coordination of this project with other related project(s) on adjacent lands?**

Yes     No    If yes, then describe.

**12. How does proposed project meet purposes of the Legislation?** [Sec. 203(b)(1)]

Improves maintenance of existing infrastructure. [Sec. 2(b)]

Implements stewardship objectives that enhance forest ecosystems. [Sec. 2(b)]

Restores and improves land health. [Sec. 2(b)]

Restores water quality. [Sec. 2(b)]

**13. Project Type** (*check one*) [Sec. 203(b)(1)]

- |  |   |
|--|---|
| <input type="checkbox"/> Road Maintenance [Sec. 2(b)(2)(A)]                                  | <input type="checkbox"/> Trail Maintenance [Sec. 2(b)(2)(A)]            |
| <input type="checkbox"/> Road Decommission/Obliteration [Sec. 2(b)(2)(A)]                    | <input type="checkbox"/> Trail Obliteration [Sec. 2(b)(2)(A)]           |
| <input type="checkbox"/> Other Infrastructure Maintenance (specify): _____ [Sec. 2(b)(2)(A)] |   |
| <input type="checkbox"/> Soil Productivity Improvement [Sec. 2(b)(2)(B)]                     | <input type="checkbox"/> Forest Health Improvement [Sec. 2(b)(2)(C)]    |
| <input type="checkbox"/> Watershed Restoration & Mntc. [Sec. 2(b)(2)(D)]                     | <input type="checkbox"/> Wildlife Habitat Restoration [Sec. 2(b)(2)(E)] |
| <input type="checkbox"/> Fish Habitat Restoration [Sec. 2(b)(2)(E)]                          | <input type="checkbox"/> Control of Noxious Weeds [Sec. 2(b)(2)(F)]     |
| <input type="checkbox"/> Reestablish Native Species [Sec. 2(b)(2)(G)]                        |   |
| <input type="checkbox"/> Other Project Type (specify) [Sec. 2(b)(2)]: _____                  |   |

**14. Measure of Project Accomplishments/Expected Outcomes** [Sec. 203(b)(5)]

(Use workload measures used for the budget process)

- |                                  |   |
|----------------------------------|---|
| a. Total Acres: _____            | b. Total Miles: _____   |
| c. No. Structures: _____         | d. Estimated People Reached (for environmental education projects): _____ |
| e. No. Of Laborer Days: _____    |   |
| f. Other (specify): _____        |   |
| g. <b>Program Element:</b> _____ |   |

**15. Duration of Project and Estimated Completion Date** [Sec. 203(b)(2)]: \_\_\_\_\_

**16. Target Species (plants/wildlife etc.) Benefited:** (if applicable) \_\_\_\_\_

\_\_\_\_\_

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**17. How will cooperative relationships among people that use federal lands be improved?** [Sec. 2(b)(3)]

**18. How is this project in the best public interest?** [Sec. 203(b)(7)] **Identify benefits to communities?**

**19. How does project benefit federal lands/resources?**

**20. Status of Project Planning**

- |   |     |                          |    |                          |                |
|---|-----|--------------------------|----|--------------------------|----------------|
| a. NEPA Complete:                             | Yes | <input type="checkbox"/> | No |                          |                |
| b. If No, give est. date of completion: _____ |     |                          |    |                          |                |
| c. NMFS Sec. 7 ESA Consultation Complete:     | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Not Applicable |
| d. USFWS Sec. 7 ESA Consultation Complete:    | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Not Applicable |
| e. Survey & Manage Complete:                  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Not Applicable |
| f. DSL/ODFW* Permits Obtained:                | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Not Applicable |
| g. DLS/COE* 404 Fill/Removal Permit Obtained: | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Not Applicable |
| h. SHPO* Concurrence Received:                | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Not Applicable |
| i. Project Design(s) Completed:               | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Not Applicable |

\* DSL = Dept. of State Lands, ODFW = Oregon Dept. of Fish and Wildlife, COE = Army Corps of Engineers, SHPO = State Historic Preservation Officer

**21. Proposed Method(s) of Accomplishment**

- |  |  |
|--|--|
| <input type="checkbox"/> Contract                      | <input type="checkbox"/> Federal Workforce |
| <input type="checkbox"/> County Workforce              | <input type="checkbox"/> Volunteers        |
| <input type="checkbox"/> <b>Other</b> (specify): _____ |  |

**22. Will the Project Generate Merchantable Materials?** (Sec. 204(e)(3))

- Yes     No

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**23. Anticipated Project Costs** [Sec. 203(b)(3)]

- a. Total County Title II Funds Requested: \$ \_\_\_\_\_
- b. Is this a multi-year funding request?    Yes     No    If yes, then display by fiscal year
  - e. FY04 Request: \$ \_\_\_\_\_
  - f. FY05 Request: \$ \_\_\_\_\_
  - g. FY06 Request: \$ \_\_\_\_\_

**\*\*\* Note: If you have a complex budget, add it as an appendix. The Resource Advisory Committee will want to know specifically how the funds will be spent.**

Item	Fed. Agency Appropriated Contribution [Sec. 203(b)(4)]	Requested County Title II Contribution [Sec. 203(b)(4)]	Other Contributions [Sec. 203(b)(4)]	Total Available Funds
24. Field Work & Site Surveys				
25. NEPA & Sec.7 ESA Consultation				
26. Permit Acquisition				
27. Project Design & Engineering				
28. Contract Preparation				
29. Contract Administration				
30. Contract Cost				
31. Workforce Cost				
32. Materials & Supplies				
33. Monitoring				
34. Other				
35. Project Subtotal				
36. Indirect Costs (Overhead) (per year for multiple year projects)				
37. Total Cost Estimate	\$	\$	\$	\$

**38. Identify Source(s) of Other Funding in Column C. Above** [Sec. 203(b)(4)]

**39. Monitoring Plan (Sec.203 (b)(6))**

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- a. **What measures or evaluations will be made to determine how well the proposed project meets the desired ecological conditions? [Sec. 203(b)(6)] Who will be responsible for this monitoring item?**
  
- b. **How will the project be evaluated to determine how well the proposed project contributes towards local employment and/or training opportunities, including summer youth jobs programs such as the Youth Conservation Corps? [Sec. 203(b)(6)] Who will be responsible for this monitoring item?**
  
- c. **What methods and measures of evaluation will be established to determine how well the proposed project improves the use of, or added value to, any products removed from National Forest System lands consistent with the purposes of this Act? [Sec. 203(b)(6) and Sec. 204(e)(3)] Who will be responsible for this monitoring item?**
  
- d. **Identify total funding needed to carry out specified monitoring tasks (Table 1, Item 33)**

Amount: \_\_\_\_\_