

**SNOWMOBILE TRAIL GRANT APPLICATION**

This snowmobile trail grant application constitutes a formal request for a cooperative agreement to acquire, develop, and/or maintain snowmobile trail grooming equipment and/or trail facilities. **Applications are due July 1st, annually.**

Snowmobile and OHV Program  
Iowa Department of Natural Resources  
502 E 9<sup>th</sup> Street  
Des Moines, Iowa 50319

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Agency or Club Name**

\_\_\_\_\_  
**Corporation / Federal ID #**

\_\_\_\_\_  
**Street or P.O. Box**

\_\_\_\_\_  
**City**

\_\_\_\_\_  
**Zip Code**

\_\_\_\_\_  
**Name of Club President**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Home Phone**

\_\_\_\_\_  
**Work**

\_\_\_\_\_  
**Cell**

\_\_\_\_\_  
**Email Address**

\_\_\_\_\_  
**Treasurer/Alternate Contact:**

\_\_\_\_\_  
**Street or P.O. Box**

\_\_\_\_\_  
**City**

\_\_\_\_\_  
**Zip Code**

\_\_\_\_\_  
**Home Phone**

\_\_\_\_\_  
**Work**

\_\_\_\_\_  
**Cell**





## Minority Impact Statement

Pursuant to 2008 Iowa Acts, HF 2393, Iowa Code Section 8.11, all grant applications submitted to the State of Iowa which are due beginning January 1, 2009 shall include a Minority Impact Statement. This is the state's mechanism to require grant applicants to consider the potential impact of the grant project's proposed programs or policies on minority groups.

**Please choose the statement(s) that pertains to this grant application. Complete all the information requested for the chosen statement(s).**

- The proposed grant project programs or policies could have a disproportionate or unique **positive** impact on minority persons.

Describe the positive impact expected from this project

Indicate which group is impacted:

- \_\_\_ Women
- \_\_\_ Persons with a Disability
- \_\_\_ Blacks
- \_\_\_ Latinos
- \_\_\_ Asians
- \_\_\_ Pacific Islanders
- \_\_\_ American Indians
- \_\_\_ Alaskan Native Americans
- \_\_\_ Other

- The proposed grant project programs or policies could have a disproportionate or unique **negative** impact on minority persons.

Describe the negative impact expected from this project

Present the rationale for the existence of the proposed program or policy.

Provide evidence of consultation of representatives of the minority groups impacted.

Indicate which group is impacted:

- \_\_\_ Women
- \_\_\_ Persons with a Disability
- \_\_\_ Blacks
- \_\_\_ Latinos
- \_\_\_ Asians
- \_\_\_ Pacific Islanders
- \_\_\_ American Indians
- \_\_\_ Alaskan Native Americans
- \_\_\_ Other

- The proposed grant project programs or policies are **not expected to have** a disproportionate or unique impact on minority persons.

Present the rationale for determining no impact.

I hereby certify that the information on this form is complete and accurate, to the best of my knowledge:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

## Definitions

“Minority Persons”, as defined in Iowa Code Section 8.11, mean individuals who are women, persons with a disability, Blacks, Latinos, Asians or Pacific Islanders, American Indians, and Alaskan Native Americans.

“Disability”, as defined in Iowa Code Section 15.102, subsection 5, paragraph “b”, subparagraph (1):  
*b.* As used in this subsection:

(1) “*Disability*” means, with respect to an individual, a physical or mental impairment that substantially limits one or more of the major life activities of the individual, a record of physical or mental impairment that substantially limits one or more of the major life activities of the individual, or being regarded as an individual with a physical or mental impairment that substantially limits one or more of the major life activities of the individual.

“*Disability*” does not include any of the following:

- (a) Homosexuality or bisexuality.
- (b) Transvestism, transsexualism, pedophilia, exhibitionism, voyeurism, gender identity disorders not resulting from physical impairments or other sexual behavior disorders.
- (c) Compulsive gambling, kleptomania, or pyromania.
- (d) Psychoactive substance abuse disorders resulting from current illegal use of drugs.

“State Agency”, as defined in Iowa Code Section 8.11, means a department, board, bureau, commission, or other agency or authority of the State of Iowa.





I-9

8" x 8" Sq  
15518 \$1.90



I-9

8" x 8" Sq  
15519 \$1.90



I-9

8" x 8" Sq  
15504 \$1.90



I-9

8" x 8" Sq  
15505 \$1.90



I-9

8" x 8" Sq  
15520 \$1.65



I-9

8" x 8" Sq  
15521 \$1.65



I-9

8" x 8" Sq  
15522 \$1.65



I-9

8" x 8" Sq  
15523 \$1.65



I-9

8" x 8" Sq  
15506 \$1.65



I-14

10" x 8"  
15525 \$2.35



I-12

9" x 6"  
15526 \$1.60



I-13

8" x 10"  
15524 \$2.05



I-10

8" x 8" Dia  
15502 \$1.65



I-10

8" x 8" Dia  
15503 \$1.65



I-10

8" x 8" Dia  
15507 \$1.65



I-10

8" x 8" Dia  
15509 \$1.65



I-10

8" x 8" Dia  
15510 \$1.65



I-10

8" x 8" Dia  
15511 \$1.65



I-10

8" x 8" Dia  
15514 \$1.65



I-10

8" x 8" Dia  
15515 \$1.65



I-10  
White

8" x 8" Dia  
15516 \$1.90



I-7

12" x 12" Oct  
15500 \$3.55



I-9

8" x 8" Sq  
15517 \$1.65



I-11

5" x 7" Dia  
15513 .90



Iowa Department of Natural Resources  
 Wallace State Office Building, 502 East 9<sup>th</sup> Street  
 Des Moines, IA 50319-0034

**SPECIAL EVENT APPLICATION AND PERMIT**  
 UNDER 462A, 321G, & 321I CODE OF IOWA

Please read form before completing application.

Please TYPE or PRINT plainly.

NAME of event: \_\_\_\_\_

DATE of event: \_\_\_\_\_

TIME of event: \_\_\_\_\_  
(Start) (End)

LOCATION of event:

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

River or Lake: \_\_\_\_\_  
(If on the Mississippi or Missouri River, include mile marker.)

Location of Boat Ramp: \_\_\_\_\_

Park: \_\_\_\_\_

Public or Private Property: \_\_\_\_\_

TYPES of vessels/vehicles: \_\_\_\_\_

Number of Participants: \_\_\_\_\_

Number of Spectators: \_\_\_\_\_

DESCRIPTION OF EVENT: \_\_\_\_\_

Will the event interfere with/impede the normal use of area by the public? \_\_\_\_\_

What extra/unusual hazard to spectators will be introduced into the event area? \_\_\_\_\_

Have any objections been received from other interested parties? \_\_\_\_\_

Number of vessels/vehicles provided by sponsoring organizations for safety assistance: \_\_\_\_\_

Does the sponsoring organization deem their patrol adequate for safe conduct of event? \_\_\_\_\_

Is State/Coast Guard Auxiliary assistance requested: \_\_\_\_\_  
(Officer - Specify/Include number of vessels.)

Location of applicant during event: \_\_\_\_\_

**DO NOT USE -- FOR OFFICIAL USE ONLY**

Application Approved By:

Officer/Ranger: \_\_\_\_\_

Central Office: \_\_\_\_\_

Special Stipulations:

NAME/ADDRESS of Sponsoring Organization: \_\_\_\_\_

NAME/ADDRESS of Applicant: \_\_\_\_\_

TELEPHONE NUMBERS (home/business): \_\_\_\_\_



The undersigned applicant for a special event permit understands and agrees that neither the State of Iowa nor the Department of Natural Resources will be responsible for any injury to persons or damage to property arising out of incident to the activities which are the subject of this application. The undersigned applicant agrees by the execution hereof to indemnify and hold harmless the State of Iowa and the Department of Natural Resources against all liabilities, costs and expenses which may arise in consequence of the granting of this permit.

The undersigned has full authority to represent the sponsoring organization:

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Complete Address:*

\_\_\_\_\_  
*Street*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*Zip Code*

- Please recheck the application to be sure all the required information is provided and is legible.
- Please adhere to the 30-day stipulation.
- Mail or deliver the completed application to the Park RANGER (if in a STATE park) or to the LOCAL STATE CONSERVATION OFFICER in charge of the area in which the event is to take place.
- Please keep the permit available during the event so you can, upon request, provide it to any Conservation Officer.

**QUESTIONS SHOULD BE DIRECTED TO:**

Rod Slings, Recreational Safety Programs Supervisor, Department of Natural Resources, 515/281-8652

**COMMENTS:**

