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| **Graphical user interface, text  Description automatically generated** | Nevada Outdoor Recreation Infrastructure (NORI) Grant Application |

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| **Applicant Information** | | | | | | | |
| **Organization Name:** | |  | | | **Date:** |  | |
| **Contact Person:** | |  | |  |  | | |
|  |  | *Name* | |  | *Title* |  |  |
| **Address:** |  | | | | |  |  |
|  | *Street Address* | | | | |  | *Unit #* |
|  |  | | |  |  |  |  |
|  | *City* | | |  | *State* |  | *Zip Code* |
| **Phone:** |  | | **Email:** |  | | | |

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| **Which best describes your organization?** | | | | | |
|  | State Agency |  | Non-Profit 501c3 Organization | |  |
|  | Federal Agency |  | Community-Based Organization | |  |
|  | County/City Agency |  | Other: |  |  |
|  | Tribal Government |  |  |  |  |

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| **Project Information** | | | |
| **Which best describes the project type (check all that apply)?** | | | |
|  | New infrastructure |  | Technical support |
|  | Infrastructure rehabilitation |  |  |

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| **Nearest town/city/municipality:** | |  |
| **County(s):** |  | |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Congressional District(s) (check all that apply):** | | | | | | | |
|  | District 1 |  | District 2 |  | District 3 |  | District 4 |

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| **Is this project eligible for Southern Nevada Public Land Management Act (SNPLMA) funding?** | | | |
|  | Yes |  | No |

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| --- | --- | --- | --- |
| **Ground disturbing activities?** | | | |
|  | Yes |  | No |

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| **Landowner(s):** |  | |
| *If the proposed project is to be carried out on public land, attach any applicable written agreement with any government entity having jurisdiction over that land, including permits, leases, easements, and rights-of-way.* | | |
| **Project Cost** | | |
| NORI grant request | | $ |
| Matching Funds | | $ |
| Total Project Amount | | $ |

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| **What are the sources of matching funds:** |  |

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| **What outdoor recreation users will this project benefit?** |  |

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| **Proposed Scope of Work** |
| Please provide a brief project description |
| Type here: |

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| **Program Purpose** |
| Describe how this program/project will improve physical and/or recreational access. |
| Type here: |
| Describe how this program/project meets a community need. |
| Type here: |
| Describe how this project/program increases regional collaboration. |
| Type here: |
| Describe how this project/program adds recreational value to the area. |
| Type here: |
| Will this program/project help with job creation and/or retention in the community? If so, how. |
| Type here: |
| Does this project/program increase engagement with historically excluded groups or regions? If so, how. |
| Type here: |

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| **Additional Required Application Materials**   * **Project Budget** | |
| Provide a detailed budget that includes, at a minimum, the items below. You may create your own spreadsheet. | |
| * Your budget must align clearly with your scope of work. Be specific, as your application will rate higher. |
| * Reminder: Include all sources of funds for the completion of the project including federal, in-kind, private/city/county and state funds. |
| * Attach copies of estimates to support your budget and identify what each contract will include. |

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| * **Federal Environmental Compliance** | | |
| If Federal funds or Land are a part of the project, NEPA should be completed for any infrastructure projects before entering an agreement for this grant. Please indicate which document was produced, and attach the decision document to this application: | | |
|  |  | Record of Decision (ROD) |
|  |  | Finding of No Significant Impact (FONSI) |
|  |  | Categorical Exclusion (CX) |
|  |  | SHPO 106 compliance/concurrence letter |
|  |  | Other compliance documents already completed. |
|  |  | Not applicable |

* **Classification of Land Control includes proof of written agreement allowing project to proceed on Public lands**
* **Landowner letter of support**
* **Any additional letters of support you may gather**
* **Detailed timeline of project**
* **Maps and/or photos of project area**

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| **Disclaimer and Signature** | | | |
| I certify that my answers are true and complete to the best of my knowledge. | | | |
| If this application is selected for funding, I understand that false or misleading information in my application or presentations may result in the termination of the grant. | | | |
| Signature: |  | Date: |  |
| Printed Name: |  | Title: |  |

APPLICATIONS DUE:

May 31, 2023 at 5:00 PM, PST

SUBMIT ONE SINGLE ELECTRONIC FILE; PDF OR WORD VIA EMAIL TO: [norigrants@ndor.nv.gov](mailto:norigrants@ndor.nv.gov)

To request assistance in planning your project or for questions about the NORI Grant program, please contact

Elisabeth Johnson

[ejohnson@ndor.nv.gov](mailto:ejohnson@ndor.nv.gov)

(775)684-2722

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