PARC APPLICATION FORMS

Updated 12/9/19 to include EAS / CERP Form

December 2019

Instructions: PARC Grant Application Forms

PARC/DOC-1, General Project Data

Item

1. Enter name of local government agency sponsoring the proposed project.

2. Enter title of proposed project (limit title to 36 spaces or less). (i.e. Central Park Development)

3. Enter the name, title, address, telephone number, and e-mail address of the applicant's executive officer. Then enter the name, title, address, telephone number, and e-mail address of the person responsible for the day-to-day coordination of the project. This person must be available for contact between 8 A.M. - 5 P.M., Monday through Friday.

4. Mark the project type.

5. Enter name of county and township where project is located. If the project is located in more than one county or township, indicate name / # of each.

6. Enter the federal Congressional District(s) and Illinois Legislative (Senate) and Representative (House) Districts and members' names where project is located.

7. Enter the applicant's jurisdictional population.

8. Enter the most current "Equalized Assessed Valuation" for the applicant's jurisdiction.

9. Enter the applicant's annual operational budget.

10. Briefly describe the property to be acquired or facilities to be developed (be specific). Include site location. If proposed project is part of a larger recreational complex, also describe relationship of the proposed project to total park area. Use only the area provided, do not type in "See Attached" in this section or add an attachment.

11. Acquisition projects only. Enter the total estimated cost of the project and amount of PARC assistance requested. Estimated appraisal and relocation costs as well as potential archaeological surveying costs must be included in the original application to be eligible for reimbursement. Land acquisition and relocation costs must correspond to amount(s) shown on DOC-2.

12. Development projects only. Enter the total estimated cost of development including design and potential archaeological survey fees, CPA Report Costs, and the dollar amount of PARC assistance requested. Since actual development will not begin until the spring following application submittal, cost estimates should be adjusted accordingly.

13. Source(s) of Local Matching funds. Checking a box and complete additional information if requested.

14. Disadvantaged Community. Check a line that would apply .

15. Federal Employer ID Number (FEIN)

16. Previous funding for PARC

17. Renovation Projects: Answer question and include attachment A-3b.

INSTRUCTIONS: PARC/DOC-2, Acquisition Data

(FOR "ACQUISITION and COMBINATION PROJECTS" ONLY)

NOTE: Title to the project property proposed for acquisition (including donation property) MUST NOT be taken by the local project sponsor prior to OSLAD grant approval, unless otherwise approved by IDNR.

Item

1. Enter name of local government agency sponsoring the proposed project.

2. Enter title of proposed project.

3. List all existing structures on the property to be acquired and briefly describe their condition. Also indicate if anyone is currently residing or storing personal property on the site and the intended disposition and/or use of the structures once the property is acquired. LOCATE AND IDENTIFY ALL STRUCTURES ON THE PREMISE PLAT MAP (Attachment A-4).
   If no structures exist, please check the box.

4. **As an attachment to PARC/DOC-2 provide details of how the estimated land costs were determined and include backup documentation such as an estimated market value analysis.**

5. ACQUISITION SCHEDULE –

   Code: Code letters are located at the bottom of chart. For Acquisition Projects, code parcels as to the anticipated means of acquisition.

   Parcel Number: Assign each parcel to be acquired a number. (A parcel is defined by individual ownership. A project may contain numerous parcels within its scope.)

   Acreage: Total acres contained in each parcel.

   Est. Acq. Costs: Indicate the estimated value of each parcel.

   Relocation Costs: If your project involves the displacement of individuals, families, businesses, farms, not-for-profit organizations and/or personal property, indicate the anticipated costs of relocation for each parcel. (Refer to pages 51 & 52 for additional information.)

5. ACQUISITION STATUS - Complete A, B, C, D, & E as they apply to the project. Any inaccuracies in reporting the acquisition status or entering into any of these actions, excepting leases, prior to IDNR approval may cause OSLAD ineligibility.

6. Provide GPS (Global Positioning System) Coordinates for the site. Ideally, the reading should be taken near the proposed park entrance.

	Latitude	Longitude
GPS Coordinates (Deg./Min./Sec./Dir.)	_____	_____

INSTRUCTIONS: PARC/DOC-2, Acquisition Data Budget Narrative and Cost Analysis

Item

1. Enter name of local government agency sponsoring the proposed project.

2. Enter title of proposed project.

3. Acquisition Cost Analysis

Parcel Number:	Provide Parcel Identification Number (PIN).
Acreage:	Total acres contained in each parcel.
Est. Fair Market Value of Parcel:	Provide the FMV for each parcel listed.
Est. Value of Non-Rec Improvements:	Provide the value of all non-recreational property improvements on this parcel.
Est. Relocation Costs:	If your project involves the displacement of individuals, families, businesses, farms, not-for-profit organizations and/or personal property, indicate the anticipated costs of relocation for each parcel. (Refer to pages 51 & 52 for additional information.)
Est. Grant Eligible Purchase Price:	Indicate the estimated grant eligible cost of each parcel. (50% of parcel cost up to grant limits.)
Other Expenses:	If the project sponsor is going to provide any additional funds over the grant limit, it should be listed here.

5. Project Cost Narrative

Explain how was the estimated value of this property determined? Was there an Appraisers Opinion of Value? Include name of appraiser or realtor used to determine the property value? What did they use to determine that? Comparative Sales; Highest & Best Use; Surrounding Property; Regional Trends?

Provide a copy of your Appraisers Opinion of Value or other method used to determine your Estimated Fair Market Value.

INSTRUCTIONS: DOC-2A, Acquisition History and Certification

(DEVELOPMENT PROJECTS ONLY)

ACQUISITION HISTORY

For the Project Site(s) planned for development:

- Enter parcel #,
- month and year title was transferred to local agency,
- the method of acquisition for each project parcel.

NOTE: For parcels **acquired within the last two years**, attach a separate sheet describing the method of purchase. Give a history of negotiations and any applicable relocation assistance provided.

For parcels **acquired more than two (2) years ago**, see instructions below regarding "Acquisition Certification" portion of the form.

Provide GPS (Global Positioning System) Coordinates for the site. Ideally, the reading should be taken near the proposed park entrance.

	Latitude	Longitude
GPS Coordinates (Deg./Min./Sec./Dir.)	_____	_____

ACQUISITION CERTIFICATION

For development projects involving land acquired more than two (2) years prior to the application submittal BUT after January 2, 1971, the local agency must certify that either:

1) Acquisition proceeded in accordance with the "Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970" (P.L. 91-646); **OR**

2) Acquisition occurred prior to January 2, 1971; **OR**

3) At the time of acquisition or last known displacement there was no intention or plans on the part of the local agency to apply for OSLAD development grant assistance.

Completion of the "Acquisition Certification" portion of this form provides the necessary assurance of compliance with this regulation. If applicable, the chief elected official of the local project sponsor must complete and sign this certification.

INSTRUCTIONS: DOC-3, Resolution of Authorization

1. Enter name of local government agency sponsoring the proposed project in each area required.

2. Enter title of proposed project.

Form submitted must contain dated signature & title by the local agency's chief elected official and must be attested to.

INSTRUCTIONS: DOC-4, Development Cost Estimate

THIS FORM SHOULD CORRESPOND EXACTLY WITH THE PROPOSED DEVELOPMENT AS INDICATED ON YOUR SITE DEVELOPMENT PLAN (ATTACHMENT A-3).

Item

1. Enter name of local government agency sponsoring the proposed project.

2. Enter title of proposed project.

3. Check appropriate box.

NOTE: **Acquisition projects** - Complete only #4 and #6 as they pertain to future development plans. Also, attach schedule for proposed development.

4. Development Item - Give a brief concise description of each major project component.

5. Units - Enter the quantity of each component.

6. Estimated Cost - Estimate the cost of each component, then enter the total development cost (which may include architectural/engineering fees) on the last line. **Also,** be aware that an archaeological reconnaissance survey may be required prior to project construction so costs for such work should be allocated and costs for the "Agreed Upon Procedures" CPA Report should also be included.

EXAMPLE

4. DEVELOPMENT ITEM	5. UNITS	6. ESTIMATED COST
Tennis Courts	2	$25,000.00
Tennis Court Lighting	2	$12,500.00
Picnic Shelter - 20' X 48' pre-fab	1	$20,000.00
Picnic Shelter construction & Electrical	1	$ 8,500.00
Playground Equipment	1	$20,000.00
Playground Surfacing	1	$ 4,000.00
Playground Installation	1	$12,000.00
Landscape Architect Design Fee	1	$10,200.00
CPA Report Costs	1	$ 1,400.00
TOTAL ESTIMATED COST		$113,600.00

7. Provide a quarterly expenditure schedule for the grant funds to the best of your knowledge or ability. Use quarterly time increments. For example: Year 1, Quarter 1 = $10,000 engineering fees. Year 1, Quarter 2 = $0.0 design phase, etc. The project sponsor is not bound to this schedule and revisions can be made during the course of the project as necessary.

BOND FINANCE PROGRAM
from the Illinois Finance Authority

Description: The Illinois Finance Authority through the "Bond Finance Program" provides low-cost loans to local governments that seek local share financing for approved PARC projects. However, success in receiving an PARC grant is not a requirement for participation in the Bond Finance Program. If a local agency is not awarded PARC funds, the Bond Bank is still available to provide, if feasible, 100% loan financing for the project.

Through the Bond Finance Program, the Finance Authority makes loans to local governments at preferred tax-exempt rates and lower up-front costs with flexible repayment terms. Loans are funded through the sale of Illinois Finance Authority bonds.

Eligibility: All cities, townships, villages, counties, park districts and special purpose districts located outside Cook County AND excluding "home-rule" municipalities.

Procedures: Local governments borrow funds through the Bond Finance Program on a pooled basis. Pooled financing includes multiple borrowers and takes place regularly in June and December. Applications are accepted and approvals are granted at no cost or obligation throughout the year.

Fee: Up-front costs range from 1.3% to 1.8% of the amount borrowed for a five (5) year to 30-year term, respectively. Costs may be covered through the borrowing.

Program Contact:

To discuss project financing needs or request additional information and an application packet, contact: Illinois Finance Authority, 427 E. Monroe Street, Suite 202, Springfield, IL 62701; Tele: 217/557-8265.

INSTRUCTIONS: DOC-5, Preliminary Relocation Estimate (Acquisition Projects Only)

Relocation is defined as the displacement of any individuals, families, businesses, farm operations, not-for-profit organizations, and/or personal property, thereof, resulting from the non-voluntary acquisition of land for public use. If the project will involve relocation, it is mandatory that the questions on form DOC-5 be completed with sufficient detail to fully explain the scope and preliminary plans of the local agency.

If the project will not involve any relocation, simply insert "N/A" on the appropriate lines and submit. (PLEASE READ THE FOLLOWING REGARDING PROJECT RELOCATION ASSISTANCE REQUIREMENTS).

Background Information

The federal Uniform Relocation Assistance & Real Property Acquisition Policies Act of 1970 (PL 91-646, 49 CFR 24)), was enacted by Congress and signed by the President on January 2, 1971. The State of Illinois passed enabling legislation on September 17, 1971, entitled the Displaced Persons Relocation Act (310 ILCS 40 et.seq.).

The federal Act is divided into three parts - Title I, Title II and Title III. Title I, includes definitions of terms. Title II, provides for relocation assistance and payments. Title III, establishes real property acquisition policies.

Title II is the part that outlines a uniform policy for the fair and equitable treatment of persons displaced as a result of land acquisition through state and/or federally-assisted programs. **Provisions of Title II are not applicable if the proposed project land acquisition is considered a "Voluntary Transaction"; meaning the landowner freely offered the property for sale and the project sponsor (government agency) will not acquire the property in the event negotiations fail to result in an amicable purchase agreement (ie., eminent domain will not be pursued).**

Title II establishes various benefits to be provided displaced individuals, families, businesses, farm operations, not-for-profit organizations, and/or personal property, thereof as a result of state and/or federally assisted land acquisition. These benefits include: moving and related expenses; replacement housing for homeowners; replacement housing for tenants; and most importantly, relocation advisory assistance and information services for all displaces.

All public agencies utilizing state and/or federal funds for the non-voluntary acquisition of land are required by the Act to provide a relocation advisory assistance program whenever the project requires the displacement of any individuals, families, businesses, farm operations, not-for-profit organizations and/or personal property, thereof. The program shall include, but is not limited to, the following services:

1. Determination of displaces' need(s) for relocation assistance. If displacement involves personal property only, an itemized inventory of property to be moved is required;

2. Current and continuing information regarding adequate replacement sites;

3. Assurance that, prior to displacement, adequate replacement dwelling units will be

available for all displaced individuals and families which are within their financial means;

4. Assisting displaced businesses, farm operations, or not-for-profit organizations in obtaining and becoming established in a suitable replacement location;

5. Supplying information concerning State or federal agencies offering programs that would be of assistance to displaced persons;

6. Providing other advisory services to displaced persons in order to minimize their hardships in adjusting to a new location.

The Relocation Program Must be Initiated Prior to Acquisition

The Relocation Program must be structured in an orderly and logical sequence of reports, assurances and activities that are required and/or desired on each project where a displacement may occur, beginning with conceptual planning and ending with the relocation of the last person or business on the project. The ramifications of the relocation function must receive major considerations throughout implementation of the project.

Responsibility Assigned on Project Basis

Each PARC project, where qualifying displacement will occur, must have assigned to it one or more individuals whose primary responsibility is to provide relocation assistance to the affected parties. The local project sponsor may contract with any qualified individual, firm, association or corporation for services in connection with the administration and implementation of relocation assistance programs. **The local project sponsor shall provide adequate assurance to the DNR at the time of final project billing that appropriate relocation assistance was provided in accordance with PL 91-646 and/or the State Displaced Persons Relocation Act for any qualifying PARC acquisition.**

If there are any questions regarding the necessity for relocation, please contact the IDNR, Office of Grant Management and Assistance staff for assistance (Tele: 217-782-7481).

INSTRUCTIONS: Attachment 1, Narrative Statement

1) Use the form and space provided. Do not attach additional pages.

** Please note: You should follow the outline below. Any deviation from this outline will be considered a deficiency when the application is received and the form will have to be resubmitted.

2) The Narrative Statement should address the following considerations:

A. Objectives and Need for Assistance. Present a clear and concise description of the project. State its primary objectives and explain the need for assistance. Any relevant data based on planning studies should be included or footnoted. If development includes rehabilitation of existing facilities, indicate the age of each.

B. Results / Benefits Expected. Explain the results/benefits to be derived (how the public will benefit). Indicate who will use the facility and how it will be used. The "service area" (neighborhood or community) most directly served by the project should be discussed in terms of: social/economic make-up; population density; and whether the area is newly emergent or established. If the project is located in an area having more than 50% minority population this should be specifically noted and documented by census data. (Minorities are defined as non-whites and persons of Hispanic origin.)

NOTE: Swimming Facility Justification Addendum. All projects involving renovation or new construction of a swimming facility/pool must provide as part of the project "Narrative Statement" the supplemental information outlined in the "Swimming Facility Justification Addendum" checklist .

C. Approach. Outline the plan of action for accomplishing the proposed project and how it will be financed. **For acquisition projects**, prepare an acquisition schedule for each parcel included in the project area. Also, provide a future development schedule for the site once it is acquired.

For development projects, identify any factors that might accelerate or delay construction. Describe any extraordinary community involvement by listing all organizations and key individuals that will work on the project along with a short description about the nature of their effort or contribution.

If force account labor (local agency's employees) and/or donated labor and material is expected to be used to accomplish the project, please describe the nature and extent of such work and/or donations.

D. Geographic Location. Provide a brief description of the geographic location of the project (do not use legal description). Also, provide a map to indicate this location and the area it will serve. If applicable, plot competing facilities on the same map.

E. Previous Assistance. Indicate any previous project assistance from LWCF, OSLA/OSLAD or other state/federal grants that affect this project. List project number(s), project title(s) and grant amount(s). If no previous assistance has been received, enter: No Previous Assistance.

F. Combination Projects. If the property being donated is not the site described in the application, but another location, provide information on how the donated site will be developed in the future. All property acquired through donation must be maintained as public open space in perpetuity.

INSTRUCTIONS: Attachment 1a, Narrative Statement Addendum

SWIMMING FACILITY PROJECT JUSTIFICATION ADDENDUM
[attach as addendum to project "Narrative Statement" (Attachment A-1)]

1. Use form provided.

2. All items listed below MUST be addressed for projects involving renovation or new construction of a swimming facility/pool. Initial each box, as applicable, to verify item has been addressed.

RENOVATION PROJECTS
(Renovation projects are restricted to pools/facilities 15 years old or more)

[ ] facility's original construction date (and prior major renovation dates, if applicable)

[ ] facility's construction material (existing and proposed)

[ ] maintenance impact due to facility location (e.g., subsidence, unstable soils, flood plain, etc.)

[ ] operation/maintenance costs for past 7 years (detailed)

[ ] revenue for past 7 years and existing as well as proposed fee structure.

[ ] service days/year and attendance/year for past 5 years

[ ] service area population

[ ] IL Public Health Dept. reports pursuant to "IL Recreation Area Licensing Act")

[ ] Engineering (Feasibility) Studies including a comparison of renovation vs. new facility construction

(If project scope is less than total renovation (i.e., filtration system, plumbing, pool basin or decking component only, etc.), the feasibility study must address life expectancy of components not being renovated)

NEW SWIMMING FACILITY CONSTRUCTION

[ ] service area population

[ ] other public & private swimming facilities in jurisdiction and/or service area

[ ] facility construction type (material)

[ ] Engineering (feasibility) Studies

[ ] location factors (e.g., topography, water table, flood plain, soil suitability, area undermining)

[ ] fee structure, anticipated annual revenue and expected service days/year

3. Provide resume of project engineer specific to swimming pool facility experience, especially within past 5 years.

4. Indicate experience and training level of the swimming pool operator for the local project sponsor AND specify whether that person has attained either State or national “certification” as a swimming pool operator.

INSTRUCTIONS: Attachment 2, Location Map

1. Type in upper right corner of map:

   A. Attachment A-2 Location Map
   B. (Local agency's name)
   C. (Project Title)

2. Submit a street or county highway map of the area which clearly delineates the project location and boundaries. This map will be used by IDNR staff to locate the project area. Please ensure the street/road names on the map are legible.

INSTRUCTIONS: Attachment 3, Site Development Plan

1. Type in upper right corner of illustration:

   A. Attachment A-3 Development Plan
   B. (Local agency's name)
   C. (Project Title)

2. Submit a development plan (should be 8 ½" x 11") which indicates the following:

   A. All **proposed** development in the scope of the project.
   B. **Existing** facilities at the site to be retained.
   C. **Future** development at the site, including any indoor buildings (senior centers, community centers, indoor water parks, etc.).
   D. Graphic scale and north arrow.

3. If the primary project use will be a natural area or retention of natural features, a detailed narrative noting the ways in which the public will be assured of outdoor recreation opportunities must be prepared (i.e. interpretive programs, hiking-bicycle trails, etc.) Also a site plan is required noting all proposed access and parking areas, if any.

NOTE: The development plan submitted with the application is the "plan of record" for the project and considered a static document. Design it carefully. All proposed project development must be completed or grant program compliance violations and/or grant disqualification may occur. The DNR must be contacted if there is any change in the development plan.

INSTRUCTIONS: Attachment 3 Site Development Map and A-3a, Floor Plan, Elevation and Playground Drawings

1. Type in upper right corner of illustration:

   A. Attachment A-3a Elevation/Floor Plans
   B. (Local agency's name)
   C. (Project Title)

2. The plans should be 8 ½" x 11", but in no case larger than 11" x 17".

3. Floor plans and elevations must be submitted for all structures proposed in the project, (i.e., restrooms, pavilions, shelters, concession stands, interpretive centers, bath houses, fishing piers, etc.). The design must comply with the standards published in the Illinois Capital Development Board's "Illinois Accessibility Code" (April 1997) AND/OR accessibility guidelines of the "Americans with Disabilities Act" (PL 101-336) whichever is more stringent.

4. Playground drawings must be submitted showing proposed components, playground surfacing and location in park with appropriate routing. The latter should be shown on the site development plan.

5. Plans for outdoor ice skating areas must be submitted showing what type of facility will be constructed.

6. Plans for a canoe launch area must show accessibility considerations.

INSTRUCTIONS: Attachment 4, Premise Plat Map

1. Type in upper right corner of map:
   A. Attachment A-4 Premise Plat Map
   B. (Local agency's name)
   C. (Project Title)

2. Submit a plat map (should be 8 ½" x 11") that indicates the following:

   A. Exterior boundaries and dimension of <u>each</u> parcel to be acquired or developed.

   B. Adjacent land uses, both public and private, roads, streets, highways, etc.

   C. All utility lines (capacity noted), easements, and rights-of-way. (Refer to title policy to ensure all easements are shown.) If necessary, attach a separate sheet explaining, in detail, the types and duration of easements, and mineral rights if not owned by the local agency.

   D. All existing structures as coded on DOC-2.

   E. A graphic scale and a north arrow.

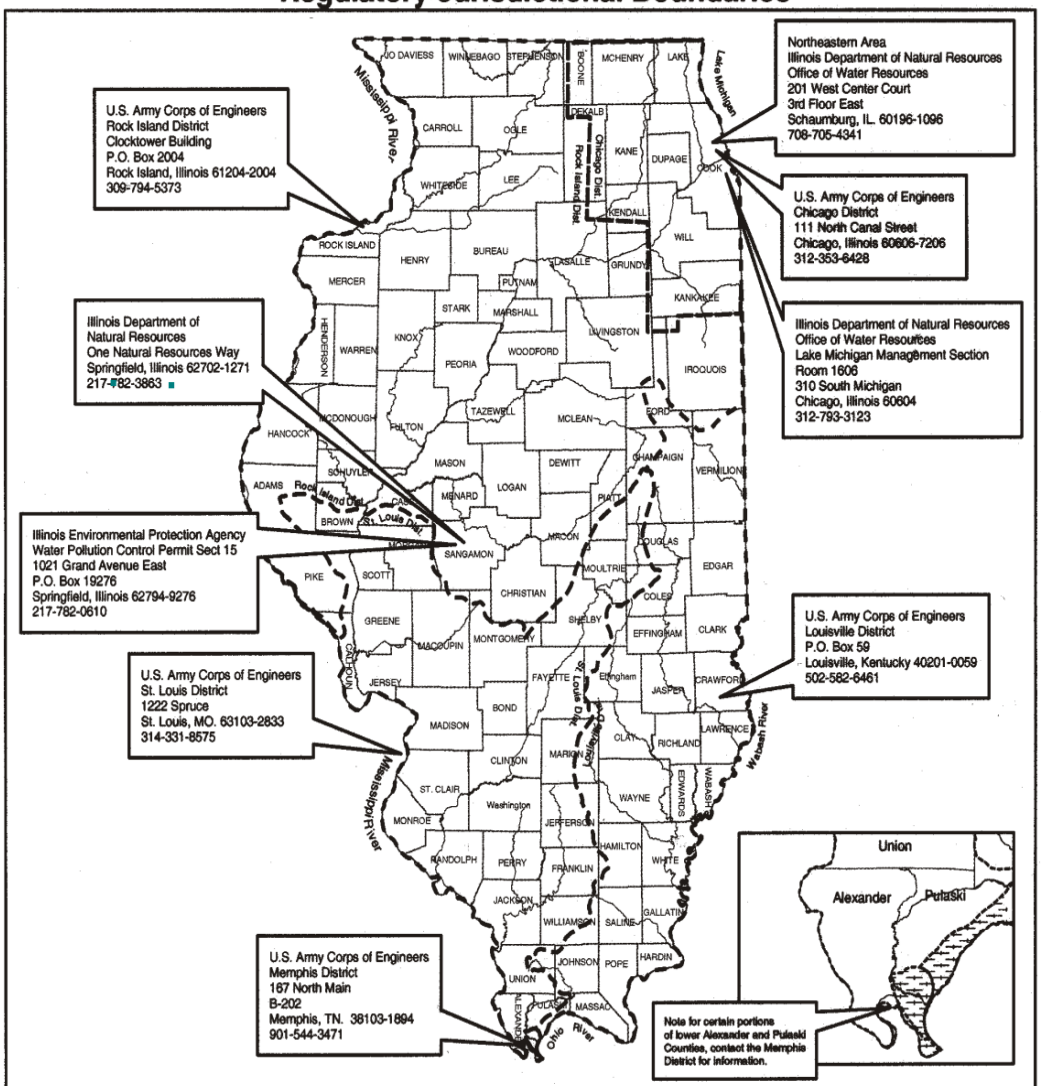
3. Number each parcel with the corresponding numbers assigned on DOC-2 <u>and</u> indicate Number each parcel with the corresponding numbers assigned on DOC-2 and indicate

INSTRUCTIONS: Attachment 5, Environmental Assessment Statement

1. Complete for the project the "Environmental Assessment Statement" (EAS) form provided. ACQUISITION PROJECTS are to complete the EAS addressing the impact of the acquisition and planned, future development of the site.

2. If the project involves any alteration of water resources (lake, stream, drainage way, wetlands, etc.) such as dredging, filling, channel improvements, impoundments, bridges, etc., both the U.S. Army Corps of Engineers (COE) and Illinois DNR, Division of Water Resources must be contacted to determine whether a permit is required (see map below for appropriate jurisdiction and offices). A copy of the permit(s) or letter(s) stating a permit is not required, should accompany the project application to IDNR Office of Grants Management and Assistance.

Regulatory Jurisdictional Boundaries



INSTRUCTIONS: Attachment 6

Commitment for Title Insurance, Deed or Lease Agreement

Acquisition Projects - Attach a copy of the Commitment for Title Insurance for each parcel to be acquired. Be advised, however, that Title Insurance is required at the completion of an approved acquisition project.
NOTE: For projects involving acquisition of property for existing park expansion, the local project sponsor must provide adequate proof of ownership (copy of deed, etc.) for the existing park site. (see "Development Projects" below for required documentation)

Development Projects - Attach a copy of the deed(s) for the property being developed and HIGHLIGHT the existence of any easements/encumbrances, etc. on the property that may affect/impact recreational use of the site in any manner. The deed(s) must, at a minimum, encompass the park area delineated on the project Plat Map (Attachment A-4) submitted with the grant application. **If the deed is less than "Warranty" or "Trustee", title insurance or an attorney's Opinion of Title is also required.**

NOTE: An Attorney's Opinion of Title may be submitted in lieu of the deed(s) if such documentation is voluminous AND the opinion lists and describes any easements, rights-of-way, liens or other encumbrances on the property.

If property to be developed is leased by the local project sponsor, a copy of the lease must be submitted. The lease cannot be revocable at will by the lessor and must include safeguards to ensure that the site is available for public outdoor recreation use for the time period specified by OSLAD requirements). If the lease does not contain such "public use safeguards", the applicant must provide assurance in the form of a duly adopted resolution that comparable replacement land in accordance with OSLAD regulations will be provided should the lease be terminated and the project site converted to non-public outdoor recreation use.

NOTE: If project has multiple parcels, code each parcel to correspond with the respective Deed, Title Commitment, Lease, etc.

Combination Projects - Attach a copy of the Commitment for Title Insurance for each parcel to be donated. Meeting this requirement shows good faith efforts and intentions by the local sponsor. Please note, Title Insurance and a recorded Deed (preferably warranty) for the donated property is required when the project is complete.

INSTRUCTIONS: Attachment 7, Flood Map

Attach a copy of the FEMA Flood Map with the project boundaries delineated.

Contact the Flood Map Distribution Center, FEMA, 6730 Santa Barbara Court, Elkridge, Maryland 21075, (800/358-9616), to request a copy of the map. Cost of a map is $4 plus shipping costs.
Web site address for the FEMA map center is http://msc.fema.gov

INSTRUCTIONS: Attachment 8, Project Justification by Local Plan

Please reference and submit appropriate pages, as well as the front cover/title page from a local Outdoor Recreation/Open Space Plan, Community Comprehensive Plan, Capital Development Plan, etc. that shows the proposed project is justified and consistent with priorities outlined in such plan(s). Be sure the date of the plan(s) is indicated on the material submitted.
DO NOT SUBMIT THE ENTIRE PLAN(S).

If a public hearing/meeting was held to solicit public input, submit a copy of the advertisement notice, sign-in sheet(s), and any relevant minutes or notes. This also pertains to a regular board meeting that listed the project proposal as a discussion item before or after the regular board's agenda.

Also, provide documentation from the plan(s) or other sources that describes or verifies the level of public input/involvement in the preparation of the plan(s) AND/OR the application project proposal.

NOTE: If local applicant has adopted a specific recreation acreage standard or goal, please submit appropriate reference from planning document(s) indicating the adopted standard or goal. (See page 17 of this manual for reference on how supply of existing open space & park acreage is used by the IDNR in the project evaluation process.

INSTRUCTIONS: Attachment 9, Appraiser Qualifications (Acquisition and Donation Projects only)

Provide the credentials/qualifications of at least two independent fee appraisers for review and approval by the IDNR.

The credentials must include, at a minimum, a history of the individual appraiser's education, **state license number (#553 preferred)** and experience in appraisal work including a listing of the appraiser's clientele.

IDNR approval on local appraisers must be obtained for each OSLAD/LWCF project in the manner described above, even though similar approval may have been received on previous projects.

INSTRUCTIONS: Attachment 9, Application Fee & Payment Form

Complete

- Applicant
- Project Title
- Total Project Cost
- Total Grant Assistance Request
- Initial Application Fee amount attached
- attach check to this form

PARC Grant Application Forms

NOTE: DO NOT bind the application being submitted to the IDNR with a permanent binding (e.g., spiral or glue binding)

(Use of a three-ring binder is recommended)

1) Only 1 copy of application needs to be submitted.

2) 3 copies of the CERP form need to accompany the application (including Attachment 3 Site Development plan, Topographic map, photo's of site.

3) Application *MUST* be received by 5:00 pm on the application due date.

ILLINOIS PARK AND RECREATION FACILITY CONSTRUCTION GRANT PROGRAM

APPLICATION CHECKLIST

PROJECT SPONSOR: _____

PROJECT TITLE: _____

- ☐ GATA Uniform Budget Template
- ☐ GATA Uniform Application for State Grant Assistance
- ☐ Form PARC/DOC-1 General Project Information
- ☐ Form PARC/DOC-2 Acquisition Data
- ☐ Form PARC/DOC-2a Acquisition History and Certification
- ☐ Form PARC/DOC-3 Resolution of Authorization
- ☐ Form PARC/DOC-4 Development Data
- ☐ Form PARC/DOC-5 Preliminary Relocation Plan
- ☐ Attachment A-1 Narrative Statement
- ☐ Attachment A-1a Swimming Pool Supplement
- ☐ Attachment A-2 Location Map
- ☐ Attachment A-3 Site Development Map
- ☐ Attachment A-3b Current Floor Plans
- ☐ Attachment A-4 Site Premise Plat Map
- ☐ Attachment A-5 Environmental Assessment Statement
- ☐ 3 Copies of CERP, Site Development Map, Topographic Map, Pictures of Existing Buildings/Structures
- ☐ Attachment A-6 Commitment for Title Insurance, Deed, or Lease Agreement
- ☐ Attachment A-7 Copy of FEMA Flood Map for Project Area
- ☐ Attachment A-8 Local master Plan Excerpts (Evidence of Public Input)
- ☐ Attachment A-9 Appraiser Qualifications (Acquisition Projects Only)
- ☐ Attachment A-10 Application Fee & Payment Form

GATA Uniform Application for State Grant Assistance		
Agency Completed Section		
1.	Type of Submission	☐ Pre-application ☒ Application ☐ Changed / Corrected Application
2.	Type of Application	☒ New ☐ Continuation (i.e. multiple year grant) ☐ Revision (modification to initial application)
3.	Date / Time Received by State	
4.	Name of the Awarding State Agency	Illinois Department of Natural Resources
5.	Catalog of State Financial Assistance (CSFA) Number	422-11-1165
6.	CSFA Title	Park and Recreational Facility Construction (PARC)
Catalog of Federal Domestic Assistance (CFDA) ☐ Not applicable (No federal funding)		
7.	CFDA Number	
8.	CFDA Title	
9.	CFDA Number	
10.	CFDA Title	
Funding Opportunity Information		
11.	Funding Opportunity Number	
12.	Funding Opportunity Title	
Competition Identification ☐ Not applicable		
13.	Competition Identification Number	FY2021PARC
14.	Competition Identification Title	Park and Recreational Facility Construction (PARC)

Applicant Completed Section		
Applicant Information		
15.	Legal Name	
16.	Common Name (DBA) **	
17.	Employer / Taxpayer Identification Number (EIN, TIN)	
18.	Organizational DUNS number	
19.	SAM Cage Code	
20.	Business Address	Street address City State, County Zip + 4
Applicant's Organizational Unit [If applicable]		
21.	Department Name **	
22.	Division Name **	
Applicant's Name and Contact Information for Person to be Contacted for *Program* Matters involving this Application		
23.	First Name	
24.	Last Name	
25.	Suffix **	
26.	Title	
27.	Organizational Affiliation (if different than 15. above) **	
28.	Telephone Number	
29.	Fax Number **	
30.	Email address	
Applicant's Name and Contact Information for Person to be Contacted for *Business/Administrative Office* Matters involving this Application		
31.	First Name	
32.	Last Name	
33.	Suffix **	
34.	Title	
35.	Organizational Affiliation (if different than 15. above) **	
36.	Telephone Number	
37.	Fax Number **	
38.	Email address	

** Optional

Areas Affected		
39.	Areas Affected by the Project (cities, counties, state-wide)	
40.	Legislative and U.S. Congressional Districts of Applicant	Legislative: _____ Congressional: _____
41.	Legislative and U.S. Congressional Districts of Program / Project	Legislative: _____ Congressional: _____ _____
Applicant's Project		
42.	Descriptive Title of Applicant's Project	
43.	Proposed Project Term	Start Date: _____ End Date: _____
44.	Estimated Funding (include all that apply)	☐ Amount Requested from the State: _____ ☐ Applicant Contribution (e.g., in kind, matching): _____ ☐ Local Contribution: _____ ☐ Other Source of Contribution: _____ ☐ Program Income: _____ $ 0.00 _____Total Amount

Applicant Certification:

By signing this application, I certify (1) to the statements contained in the list of certifications* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances* and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil or administrative penalties. (U.S. Code, Title 218, Section 1001)

(*) The list of certification and assurances, or an internet site where you may obtain this list is contained in the Notice of Funding Opportunity.

☐ I agree

Authorized Representative		
45.	First Name	
46.	Last Name	
47.	Suffix **	
48.	Title	
49.	Telephone Number	
50.	Fax Number **	
51.	Email Address	
52.	Signature of Authorized Representative	
53.	Date Signed	

** Optional

PARC Grant Program
General Project Data

Form PARC/DOC-1

1. **Applicant (Sponsor) Legal Name:** _____

2. **Project Title:** _____

3. **Applicant Executive Officer**

Name:	_____
Title:	_____
Address:	_____
City, State, Zip:	_____
Phone #:	_____
Email Address:	_____

Applicant Contact Person

Name:	_____
Title:	_____
Address:	_____
City, State, Zip:	_____
Phone #:	_____
Email Address:	_____

4. **Project Type (check all that apply):**

☐ **New Building Construction** ☐ **Rehabilitation/ Renovation** ☐ **Property Acquisition for a recreation building** ☐ **Property Acquisition for a park**

☐ **Site Demolition** ☐ **Park Development** ☐ **Utility Work** ☐ **Trail Construction**

Project Site Information

5. **County:** _____ **Township :** _____

6. **Federal Congressional District #** _____ **IL Senate Dist. #** _____ **IL Representative Dist. #** _____

7. **Population in Applicant's Jurisdiction:** _____
8. **Current "Equalized Assessed Valuation" Total for Local Sponsor Jurisdiction: $**_____
9. **Applicant's annual operational budget $**_____

10. **Concise Description of the Proposed Project:** **(USE ALLOCATED SPACE ONLY, DO NOT ATTACH ADDITIONAL SHEETS)**
(Be sure to indicate size/acreage of project site)

11. **(ACQUISITION PROJECT)**

		(estimated costs)
Acquisition Costs	$	
Relocation Costs	$	
Appraisal Costs	$	
Archaeological Survey Costs	$	
TOTAL ACQ. COSTS	$	0
Grant Amt. Requested (75% or 90%)	$	

($2,500,000 maximum)*
(round to nearest hundred)

12. **(DEVELOPMENT PROJECT)**

		(estimated costs)
Construction Costs	$	
A/E Design Fees	$	
Archaeological Survey Costs	$	
CPA Report Costs	$	
TOTAL DEV. COSTS	$	0
Grant Amt. Requested (75% or 90%)	$	

($2,500,000 maximum)*
(round to nearest hundred)

13. Source(s) of Local Matching Funds:

- ☐ **General Funds**
- ☐ **Non-Referendum Bonds**
- ☐ **Referendum Bonds** (date) _____
- ☐ **Donations** (specify) _____
- ☐ **Other** (specify) _____

14. Disadvantaged Community (*This will have no effect on scoring the project.)*

In accordance with 17 IL Admin Code 3070, IDNR has $2,500,000 designated to allow project sponsors that are classified as Disadvantaged Communities to receive 90% reimbursement. All projects will be scored on merit and sorted in rank order from the highest to the lowest merit score by IDNR staff. The highest-ranking Disadvantaged Community Projects will be approved to receive 90% reimbursement up to the $2,500,000 ceiling. Project sponsors should determine if they wish to receive 75% reimbursement if not approved to receive 90% reimbursement.

Please make selection below:

_____ If not approved for 90% reimbursement for PARC grant, sponsor **does NOT** wish to receive a grant.
_____ If not approved for 90% reimbursement for PARC grant, sponsor **wishes to receive 75%.**
_____ Not applicable. Sponsor does not qualify for Disadvantaged Community or doesn't wish to take 90%.

15. Federal Employer ID Number (FEIN) _____

16. Have you received PARC funding in the past? _____

17. Remodel/Rehabilitation/Renovation

Explain what is currently in the space and what will be in the space after the renovation? Example: Current space is a fitness center; will the fitness center be in the same location in the building? If no, what will be done in the area that is currently the fitness center? Include this information for each area of the remodel/rehabilitation/ renovation of the building. (Supply a current floor plan as attachment A-3b along with pictures.). If not applicable, leave blank or fill in N/A.

PARC Grant Program
Acquisition Data

Form PARC/DOC-2
(Acquisition and Combination Projects Only)

1. **Applicant (Sponsor) Legal Name:** _____

2. **Project Title:** _____

3. **Provide Summary of Existing Site Improvements** **If None, Check Here:** ☐
   (see instructions for completing the PARC/DOC-2 for details)

4. **As an attachment to PARC/DOC-2 provide details of how the estimated land costs were determined and include backup documentation such as an estimated market value analysis.**

5. **Acquisition Schedule:**
   As an attachment to PARC/DOC-2 provide details of how the estimated land costs were determined and include backup documentation such as an estimated market value analysis.

CODE *	PARCEL #	ACREAGE	ESTIMATED LAND COST	RELOCATION COSTS
	TOTALS	0	0	0

* CODE A) Anticipate Negotiated Purchase (willing seller) B) Possible Condemnation (may be unwilling seller) C) Donation

6. **Acquisition Status:**

		YES	NO
A.	All or part of the project site is in Condemnation (If yes, submit copy of petition to condemn)	☐	☐
B.	All or part of the project site is cover in a Purchase Contract (If yes, submit copy of contract	☐	☐
C.	All or part of the project site is covered in an Option Agreement (If yes, submit copy of Option)	☐	☐
D.	All or part of the project site is covered in a Lease Agreement (If yes, attach copy of lease)	☐	☐
E.	All or part of the project site is covered by any form of agreement other than those noted above that commits local project sponsor to acquire the property (If yes, submit copy of agreement)	☐	☐

7. Provide GPS (Global Positioning System) Coordinates for the site. Ideally, the reading should be taken near the proposed park entrance.

	Latitude	Longitude
GPS Coordinates (Deg./Min./Sec./Dir.)	_____	_____

PARC Grant Program
Acquisition Data

Form PARC/DOC-2

Budget Narrative and Cost Analysis

1. **Applicant (Sponsor) Legal Name:** _____

2. **Project Title:** _____

3. **Acquisition Cost Analysis:**

Parcel #	Acreage	Estimated FMV of Parcel	Estimated Value of Existing Non-Recreation Property Improvements (if applicable)*	Estimated Relocation Costs (if applicable)	Total Estimated Grant Eligible Purchase Price

Other Acquisition Expenses (include overmatching funds here)	Description	Estimated Costs
	PARC Cost Share	
	Sub-Grantee Cost Share	
	Total Acquisition Costs	

4. **Project Cost Narrative: (Refer to manual for instructions – backup to your costs must be provided.)**

PARC Grant Program
Acquisition History

Form PARC/DOC-2A

(Development Projects Only)

ACQUISITION HISTORY and CERTIFICATION

ACQUISITION HISTORY:

Parcel #	Date Acquired	Purchase Price	Acquisition Method (see code)	(CODE)
				a) Negotiate Price b) Condemnation c) Donation

GPS Coordinates (Deg./Min./Sec./Dir.) Latitude _____ Longitude _____

ACQUISTION CERTIFICATION:

I, _____ , _____ of the
(name) (title)

_____ , do hereby certify, to the best
(local agency)

of my knowledge and under penalty for willful misstatement, that the property for which this development grant assistance is being sought was either 1) acquired in general compliance with P.L. 91-646 (Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970) or the state's Displaced Persons Relocation Act (310 ILCS 40 et. seq.); OR 2) acquired prior to January 2, 1971; OR 3) at the time of its acquisition, no planning had been initiated or contemplated by this local agency to obtain State OSLAD development grant assistance.

_____
(signature)

_____
(date)

PARC Grant Program
Resolution of Authorization

PARC/DOC-3

1.ProjectSponsor:_____

2. Project Title: _____

The _____ hereby certifies and acknowledges that it has 100% of the funds
(local project sponsor)

necessary to complete the pending PARC project within the timeframes specified herein for project execution, and that failure to adhere to the specified project timeframe or failure to proceed with the project because of insufficient funds or change in local recreation priorities is sufficient cause for project grant termination which will also result in the ineligibility of the local project sponsor for subsequent Illinois DNR indoor or outdoor recreation grant assistance consideration in the next two (2) consecutive grant cycles following project termination.

ALL Projects

It is understood that the project should be completed within the timeframe established in the project agreement and the Final Billing reimbursement request must be submitted within one year of the expiration date. Failure to do so will result in the Project Sponsor forfeiting all project reimbursements, and relieves DNR from further payment obligations on the grant.

The _____ further acknowledges and certifies that it will comply with
(local project sponsor)

all terms, conditions and regulations of 1) the Park and Recreational Facility Construction Grant Program (PARC) (17 IL Adm. Code 3070) 2) the federal Uniform Relocation Assistance & Real Property Acquisition Policies Act of 1970 (P.L. 91-646) and/or the Illinois Displaced Persons Relocation Act (310 ILCS 40 et. seq.), as applicable, 3) the Illinois Human Rights Act (775 ILCS 5/1-101 et.seq.), 4) Title VI of the Civil Rights Act of 1964, (P.L. 83-352), 5) the Age Discrimination Act of 1975 (P.L. 94-135), 6) the Civil Rights Restoration Act of 1988, (P.L. 100-259) and 7) the Americans with Disabilities Act of 1990 (PL 101-336); and will maintain the project area in an attractive and safe condition, keep the facilities open to the general public during reasonable hours consistent with the type of facility, cease any farming operations, and obtain from the Illinois DNR written approval for any change or conversion of approved outdoor recreation use of the project site prior to initiating such change or conversion; and for property acquired with PARC assistance, agree to place a covenant restriction on the project property deed at the time of recording that stipulates the property must be used, in perpetuity, for public indoor or outdoor recreation purposes in accordance with the PARC programs and cannot be sold or exchanged, in whole or part, to another party without approval from the Illinois DNR.

BE IT FURTHER PROVIDED that the _____ certifies to the best of its knowledge that the information provided within the attached application is true and correct.

This Resolution of Authorization has been duly discussed and adopted by the _____ at a legal
(local project sponsor)
meeting held on the _____ day of _____, 20____.

_____
(Authorized Signature and Title)

ATTESTED BY:

_____
(Name and Title)

PARC Grant Program

Development Cost Estimate Data

Form PARC/DOC-4

1. **Applicant (Sponsor) Legal Name:** _____
2. **Project Title:** _____
3. **Acquisition** ____ **Development** ____

   Note: **Acquisitions Projects –** complete items #4 and #6 below as they pertain to future development.

4. DEVELOPMENT PROJECT COMPONENT	5. UNIT AMT.	6. ESTIMATED COSTS
CPA Report Cost		
A/E Design Fees (<15.25% of construction cost)		
Potential Archaeological Survey *		
TOTAL ESTIMATED COST:		

NOTE: Donated labor and material are not eligible for reimbursement.

(*) Projects approved for OSLAD funding may require the completion of an archaeological reconnaissance survey on the project site. Estimated cost for such a survey may be included in the project budget. The requirement of a survey will not be an allowable reason to extend any project ending date.

7. **Provide a quarterly expenditure schedule for the grant funds to the best of your knowledge or ability. Use quarterly time increments. Example: Year 1, Quarter 1 = $10K (engineering fees). The project sponsor is not bound to this schedule and revisions can be made during the course of the project as necessary.**

PARC Grant Program
Preliminary Relocation Estimate

Form PARC/DOC-5
(Acquisition Projects Only)

1. **Applicant (Sponsor) Legal Name:** _____
2. **Project Title:** _____
3. **Neighborhood Description:** (Comment on the characteristics of and the means of livelihood for those to be displaced. Comment on property values and type or kinds of improvements.) Attach additional sheet(s) if necessary.

4. **Approximate Number of Individuals to be Displaced:** _____
5. **Approximate Number of Families to be Displaced:** _____
6. **Approximate Number of Businesses to be Displaced:** _____
7. **Approximate Number of Farm Operations to be Displaced:** _____
8. **Approximate Number of Non-Profit Organizations to be Displaced:** _____

PARC Grant Program

Attachment A-1

Narrative Statement

Applicant (Sponsor) Legal Name: _____

Project Title: _____

Instructions:
Describe, at a minimum, the overall concept of the project, project funding, agencies involved, approach to implementation, project location, recreational amenities and/or trail mileage to be provided through the project, need for the project, anticipated benefits and the proposed schedule of operation (daily and/or seasonal hours of operation) for the project facility. Be thorough and explicit, this narrative should completely describe the project and expected outcome.

PARC Grant Program

Attachment A-1a

Narrative Statement

SWIMMING FACILITY PROJECT JUSTIFICATION ADDENDUM

Applicant (Sponsor) Legal Name: _____

Project Title: _____

Instructions: (Attach as addendum to project "Narrative Statement" Attachment A-1)

1. All items listed below MUST be addressed for projects involving renovation or new construction of a swimming facility/pool. Initial each box, as applicable, to verify item has been addressed.

RENOVATION PROJECTS (Renovation projects are restricted to pools/facilities 15 years old or more)

- ☐ Facility's original construction date (and prior major renovation dates, if applicable)
- ☐ Facility's construction material (existing and proposed)
- ☐ Maintenance impacts due to facility location (e.g., subsidence, unstable soils, flood plain, etc.)
- ☐ Operation/maintenance costs for past 7 years (detailed)
- ☐ Revenue for past 7 years and existing as well as proposed fee structure
- ☐ Service days/year and attendance/year for past 5 years
- ☐ Service area population
- ☐ IL Public Health Dept. reports pursuant to "IL Recreation Area Licensing Act")
- ☐ Engineering (Feasibility) Studies including a comparison of renovation vs. new facility construction

(If project scope is less than total renovation (i.e., filtration system, plumbing, pool basin or decking component only, etc.), the feasibility study must address life expectancy of components not being renovated)

NEW SWIMMING FACILITY CONSTRUCTION

- ☐ Service area population
- ☐ Other public & private swimming facilities in jurisdiction and/or service area
- ☐ Facility construction type (material)
- ☐ Engineering (feasibility) Studies
- ☐ Location factors (e.g., topography, water table, flood plain, soil suitability, area undermining)
- ☐ Fee structure, anticipated annual revenue and expected service days/year

2. Provide resume of project engineer specific to swimming pool facility experience, especially within past 5 years.

3. Indicate experience and training level of the swimming pool operator for the local project sponsor AND specify whether that person has attained either State or national "certification" as a swimming pool operator.

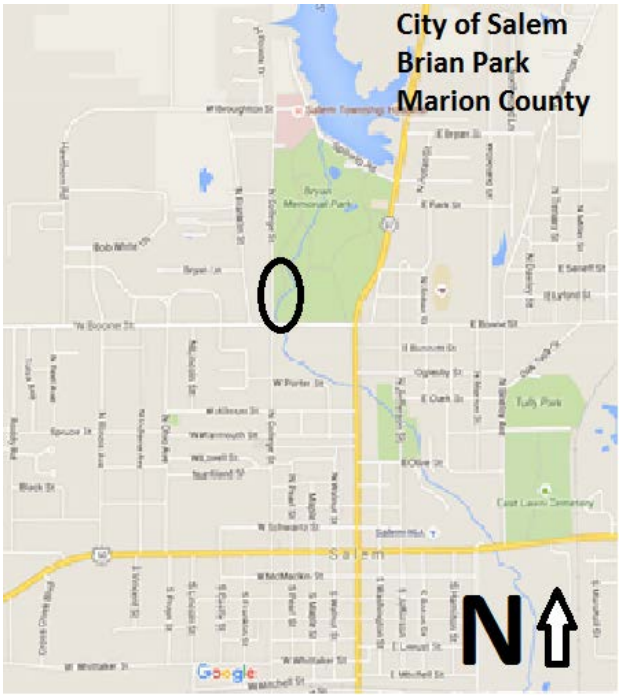
Applicant (Sponsor) Legal Name: _____

Project Title: _____

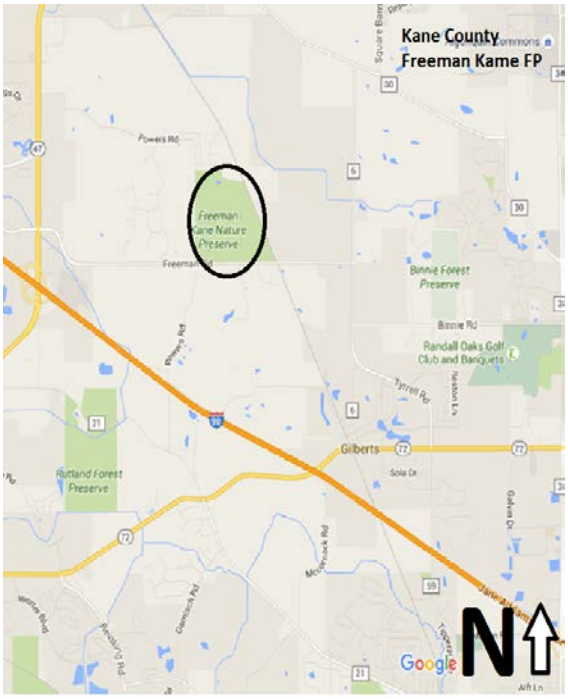
EXAMPLE

1. **Submit a highway, street, county, or other map that will clearly locate your project in relation to nearby streets, highways, towns, and other important landmarks. Be sure to indicate north on the maps. Label it as Attachment A-2: Site Location Map and include the Applicant (Sponsor) Legal Name and Project Title.**

Example: **Location Map (City)**

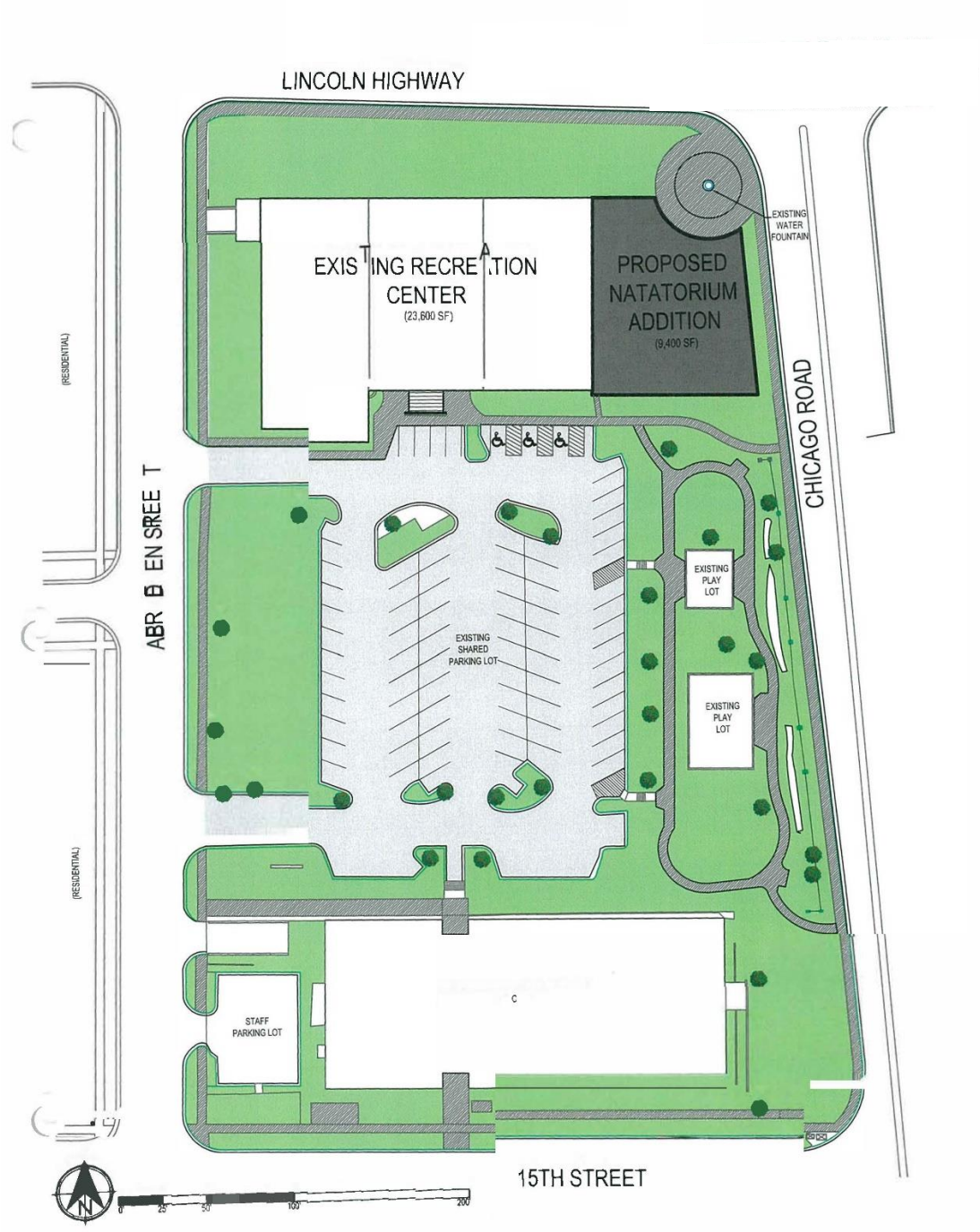


Example: **Location Map (Village)**



2. **Directions to project site: Provide directions to a logical project entry point to the project location.**

EXAMPLE


LINCOLN HIGHWAY
EXISTING RECREATION CENTER
(23,600 SF)
PROPOSED NATATORIUM ADDITION
(9,400 SF)
EXISTING WATER FOUNTAIN
CHICAGO ROAD
(RESIDENTIAL)
ABRAHAM LINCOLN STREET
EXISTING SHARED PARKING LOT
EXISTING PLAY LOT
EXISTING PLAY LOT
(RESIDENTIAL)
STAFF PARKING LOT
15TH STREET
N
0
25
50
100
200

INSTRUCTIONS: Attachement A-3a Preliminary Floor Plans & Elevation Drawings

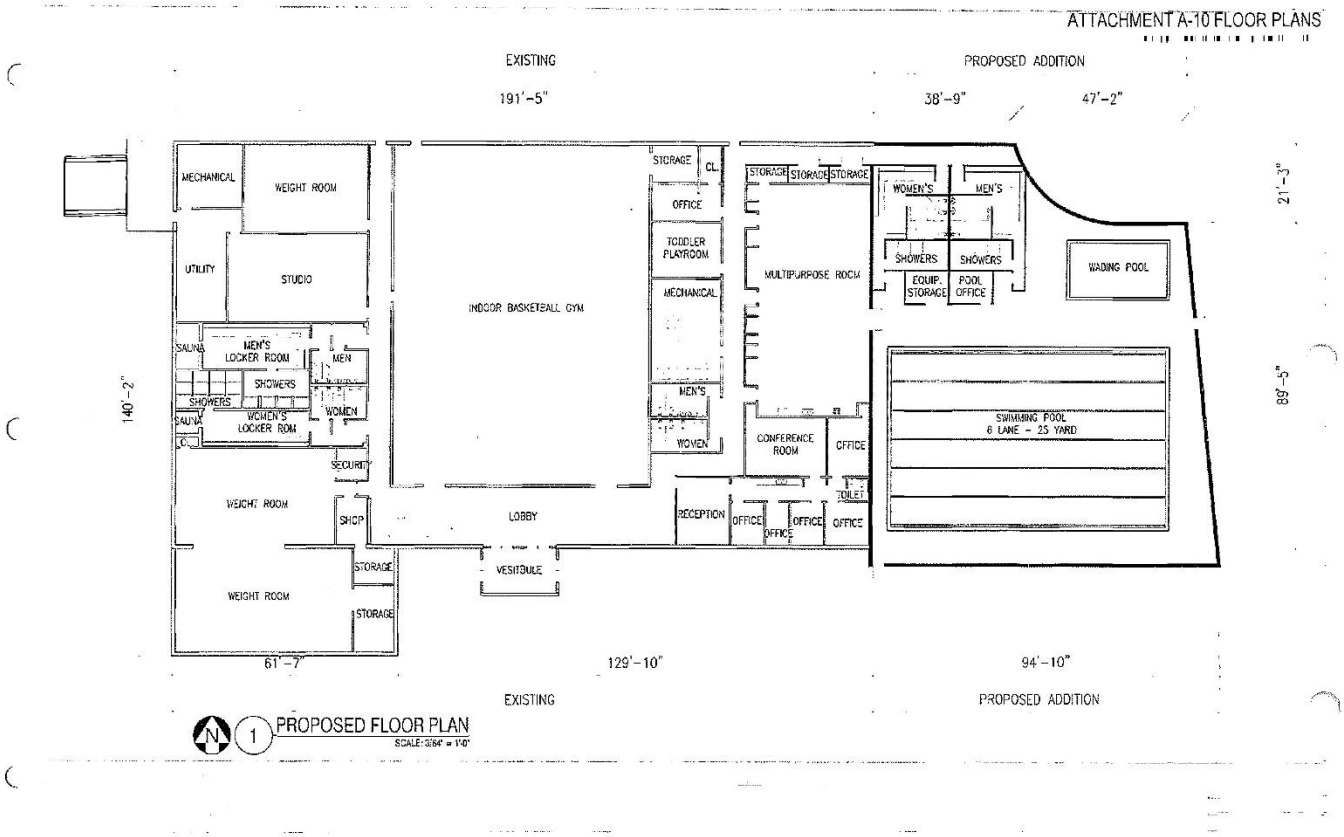
1. Type in upper corner of illustration: Attachment A-3a Drawings and/or Floor plans

   A. Local agency's name
   B. Project title

2. Plans should be 8 1/2" x 11", but 11" x 17" is acceptable.

NOTE: Local project sponsors that are proposing the construction or renovation of buildings can submit the best plans available to them at the time of application submittal. Conceptual plans may be the only documents available given the timelines involved. If a project is awarded grant funds, DNR requires that local sponsors proposing construction projects involving buildings secure a professional engineering firm for the project. (See item J, of the PARC Manual)

The design must comply with the Illinois Accessibility Code and/or accessibility guidelines of the Americans with Disabilities Act, whichever is more stringent.

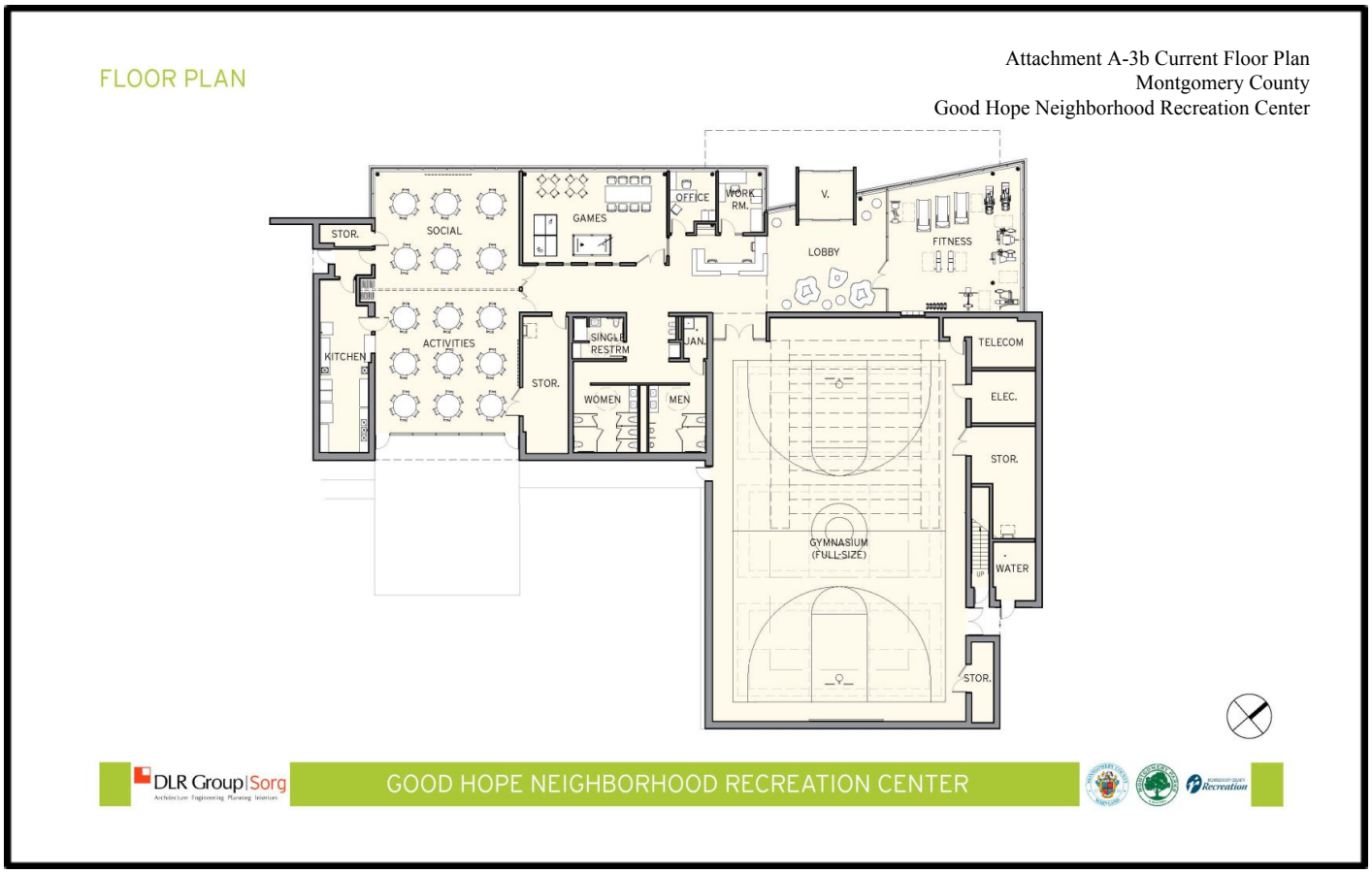


INSTRUCTIONS: Attachment A-3b Current Floor Plans & Photos

1. Current Floor Plans and current photos showing the spaces are required for all remodeling, renovation, and rehabilitation projects. Type the following in the upper corner of each illustration:
   - Attachment A-3b Current Floor Plan/ Current Photos
   - Local sponsor's name
   - Project title

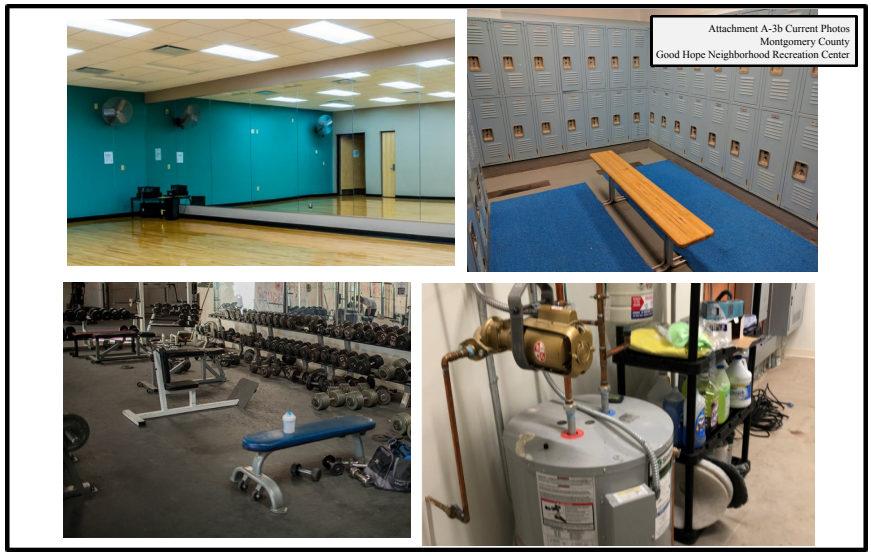
   Plans should be 8.5" x 11", but 11" by 17" is acceptable

Example: Current Floor Plan



Design Credit: https://www.montgomerycountymd.gov/DGS-BDC/EMC/720918.html

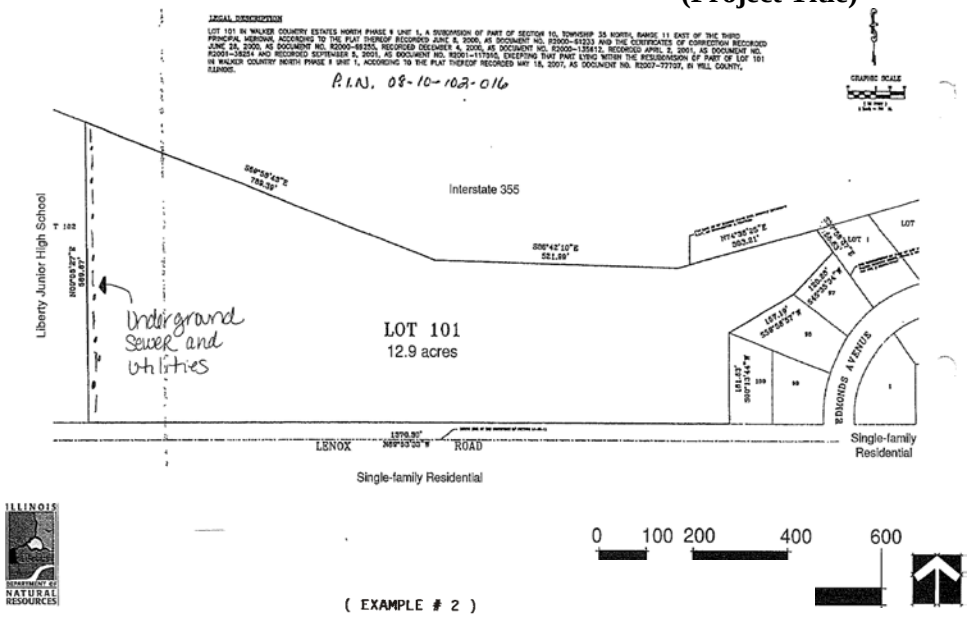
Example: Current Photos



EXAMPLES

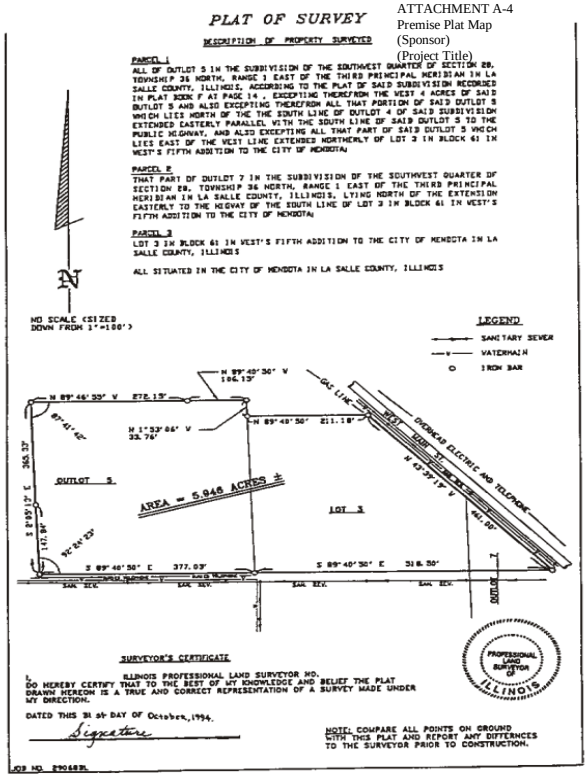
(EXAMPLE #1)

ATTACHMENT A-4
Premise Plat Map
(Sponsor)
(Project Title)



(EXAMPLE # 2)

ATTACHMENT A-4
Premise Plat Map
(Sponsor)
(Project Title)



PARC Grant Program

(Please Type or Print in Ink)

Attachment A-5

Environmental Assessment Statement (EAS)

Applicant (Sponsor) Legal Name: _____

Project Title: _____

Instructions:

1. Attach to this EAS checklist a concise (no more than 1 page) description of the project site including dimensions (size), physical characteristics (pay particular attention to unique features), and existing improvements on the property.
2. For each of the following environmental and social factors, indicate to the best of your knowledge whether the proposed project will have a Beneficial (B), Neutral (N), or Adverse (A) impact or is Not Applicable (NA). Consider both temporary (during construction) and long-term impacts.
3. For Adverse (A) impacts, explain in the Comment Section of this EAS the nature of the impact and whether 1) it can be minimized by mitigation measures OR 2) is unavoidable and cannot be positively addressed/mitigated.

FACTORS **Key to impacts:** **(B) Beneficial,** **(N) Neutral,** **(A) Adverse** **(NA) Not Applicable**

(Check only one box for each factor)

Socio-Economic Factors

		Type of Impact			
		B	N	A	NA
1.	Adjacent Land Use (describe):_____				
2.	Disruption of Neighborhood/Community Cohesion				
3.	Impact on churches, cemeteries, schools, healthcare facilities, elderly housing				
4.	Local economic/business impacts				
5.	Displacement / Relocation of residence(s) or business				
6.	Local Tax Base (i.e., property tax loss)				
7.	Land Use Change / Zoning (current zoning classification):				
8.	**Agricultural Activities / Prime Farmland Conversion (*)**				

(*) In compliance with the 1982 Illinois Farmland Preservation Act, it is MANDATORY that notification be sent to the IL Dept. of Agriculture (IDOA), Bureau of Land Water Resources, State Fairgrounds, Springfield, IL 62794-9281 (tele: 217/785-4458) regarding all land acquisition projects located **outside** municipal corporate limits regardless of the land's current use. Application material to be provided includes "copies" of: 1) project location map (attachment A-2) with project boundary **clearly** delineated, 2) project plat map (attachment A-4) with current zoning and adjacent land uses identified on the map, 3) county soil survey map with the project site boundary delineated (soil maps can be obtained from the County Soil & Water Conservation District office), and 4) completed application Narrative Statement (Attachment A-1). *Comments provided by the IDOA to the project sponsor must be submitted to the IDNR as part of the project application review process.*

☐ Project requires IDOA review. Date Sent: _____

☐ Project does not require IDOA review.

Physical Resource Factors

			Type of Impact			
			B	N	A	NA
9.	Wildlife / Wildlife Habitat:	Game Species				
		Non-Game Species				
10.	Fisheries					
11.	Soils (erosion, removal, contamination)					
12.	Air Quality					
13.	Noise					
14.	Energy Usage					

Environmental Assessment Statement (EAS)

Physical Resource Factors (cont.)

		Type of Impact			
		B	N	A	NA
15.	Water Usage				
16.	Mineral Resources				
17.	Tree Removal				
18.	Surface Waters (lakes, streams, drainageways, etc.)				
19.	Groundwater				
20.	Floodplains (percent of project area within 100 year floodplain): _____				
21.	Wetlands (*)				
22.	Threatened and Endangered species (*)				
23.	Archaeological Resources and Historic Sites/Districts (*)				

(*) See required "Cultural Resource, Endangered Species & Wetlands Review Report" form located at the end of this EAS report that must be completed (with the requested map attachments and photos, if applicable) and attached in duplicate (3 copies) to the EAS as part of the project application submitted to the DNR. *As part of the cultural resource review, an on-site archaeological reconnaissance survey may be required to determine the existence and/or significance of such resources and potential impacts to them. The cost of such a survey is the responsibility of the local applicant and is eligible for grant assistance IF included in the application project budget. You will be notified if such a survey is required.* **PLEASE NOTE that the survey, if required, does not need to be conducted until after IDNR grant approval.**

Other Factors

		Type of Impact			
		B	N	A	NA
24.	Public Roadway / Traffic / Public Transit / Railroad Impacts				
25.	Public Utilities / Transmission Facilities				
26.	Visual Impacts				
27.	Hazardous Waste / Materials				

28.	Consistency with Local Plans (if no, explain)	**Yes**		**No**	
29.	Known Project Controversy (if yes, explain)	**Yes**		**No**	
30.	Other Adverse Impact(s) (if yes, identify below)	**Yes**		**No**	

PARC Grant Program

(Please Type or Print in Ink)

Attachment A-5

Environmental Assessment Statement (EAS)

COMMENT SECTION for "Adverse Impacts" (Do not generalize or use vague/ambiguous terms in your comments.)

Describe each adverse impact in an objective and quantified manner and describe specifically HOW MITIGATION will be accomplished to minimize the adverse impact OR which impacts are unavoidable and cannot be positively addressed through mitigation measures. BE CONCISE.

Factor #	Comment

(Attach additional pages if necessary)

PROJECT PERMIT REQUIREMENTS:

Section 10 Navigation permits (COE)	**Yes**		**No**	
Section 404 Permit (COE)	**Yes**		**No**	
Illinois Rivers, Lakes, & Streams Permit (IL DNR)	**Yes**		**No**	
NPDES Permit (US/IL EPA)	**Yes**		**No**	

PERSON RESPONSIBLE FOR PREPARING THIS DOCUMENT:

Name & Title (printed or typed) _____ **Agency** _____

Signature _____ **Date** _____

Attach list (bibliography) of persons, agencies, references, etc. consulted in preparing this Environmental Assessment Statement

ILLINOIS
DEPARTMENT OF NATURAL RESOURCES

E.A.S. - CERP FORM

CERP #: **Due Date:**

CULTURAL RESOURCES, ENDANGERED SPECIES & WETLANDS REVIEW REPORT

Project Sponsor: _____

Project Title/Site Name: _____

Contact Person: _____

Address _____

Phone: _____ Date: _____

Email: _____

Indicate Grant Program Type

___	Bike Path	___	OLT	
X	PARC	___	OSLAD	___ LWCF
___	Line Item	___	RTP	
___	OHV	___	Snowmobile	

Check appropriate response: ☐ New Project Application (*not previously reviewed/considered by IDNR)*
☐ Application Resubmittal*

*If resubmittal, indicate the year(s) previously submitted: _____

Has project proposal changed in scope or design layout from previous submittal(s)? ☐ Yes ☐ No

If this is a development project was the property acquired with IDNR funds? ☐ Yes ☐ No

Project Location

Street Address and City: _____ **County:** _____

USGS Numeric Location Designation: **Township:** _____ **Range:** _____ **Section:** _____

Please attach: 1) project site development plan
2) topographic map
(Note: photocopy ONLY that portion of Topo map where project site is located. Copies should be no larger that 11" x 17".)

(Clearly delineate and identify the project site/park boundary on the map with a dashed black line)

Topographic maps may be obtained from:
Illinois State Geological Society
Champaign, IL
(217) 244-2414

Size of Project Site: _____ acres

Topographical maps may also be available from local and/or regional planning commissions.

Does the project include tree removal? ☐ Yes ☐ No If yes, anticipated number to be removed: _____

Concise Project Description: (Also, attach 2 sets of color phots of any existing buildings/structures on project site.)

DEPARTMENT USE ONLY	Approved	Approved w/ Restrictions*	Comments*	Grant Adm. ___
Cultural Resources				
T&E Species/NP/Natural Area/LWR				
Wetlands (Sec.404, see reverse side)				

* see attached letter/comments

OREP/RR&C/CERP Coordinator _____ Date _____

Signature indicated IDNR CERP sign-off for ONLY the project information included in this submittal. Any changes must be resubmitted for review.

3 COPIES OF THIS FORM AND THE SPECIFIED ATTACHMENTS MUST BE SUBMITTED WITH APPLICATION

PARC Grant Program
Application Fee

Attachment A-10

Application Fee

Park and Recreational Facility Construction Grant Program (PARC) Program applications require a non-refundable **Application Fee** which shall be calculated as ¼ of 1% (0.0025%) of the grant request with a minimum fee of $100 and a maximum fee of $300. The following exceptions apply:

- Grants for which the total value of the financial assistance being sought is less than $25,000
- Grants to the federal government; and
- Operational grants

This fee is **not** a reimbursable expense and **cannot** be included in the project budget.

EXAMPLES:

A $50,000 funding assistance request would require a $125 application fee
($50,000 x 0.0025 = $125)

A $200,000 funding assistance request would require a $300 application fee
($200,000 x 0.0025 = $500 which exceeds the $300 maximum)

The **Application Fee** shall be rounded up to the nearest whole dollar amount.

Applications submitted without the required Application Fee, or with an incorrect amount, will not be accepted by IDNR. Failure of an Initial Application Fee to clear the bank it is drawn against will result in the automatic denial and return of the application to the applicant without consideration.

Please submit this form with the project application and Initial Application Fee.

IDNR GRANT PROGRAM

APPLICANT: _____

PROJECT TITLE: _____

TOTAL PROJECT COST: _____

TOTAL GRANT ASSISTANCE REQUEST: _____
(Application fee based on this amount)

INITIAL APPLICATION FEE AMOUNT ATTACHED: _____
Must be in the form of a bank draft made payable to the "Illinois Department of Natural Resources"

NOTE: Grant application fees submitted with this grant application will not be refunded by IDNR to the grant applicant. Grant application fees are tendered for consideration of the application only and do not imply any promise of financial assistance by IDNR.

Please contact the IDNR Division of Grant Administration at 217-782-7481 or dnr.grants@illinois.gov if you have any questions.