# 2019 FHR PSN APPENDIX A: ON-LINE INSTRUCTIONS

This document will guide you through the California Department of Fish and Wildlife's (CDFW) FRGP Online Application Form. The forms in the online application itself have in-depth help text associated with them to provide further guidance.

For assistance with the application, please send an email to: <a href="mailto:commons.com">CDFWWebGrants@wildlife.ca.gov</a>. You will receive a response to your request within one full business day.

# **Registration Instructions**

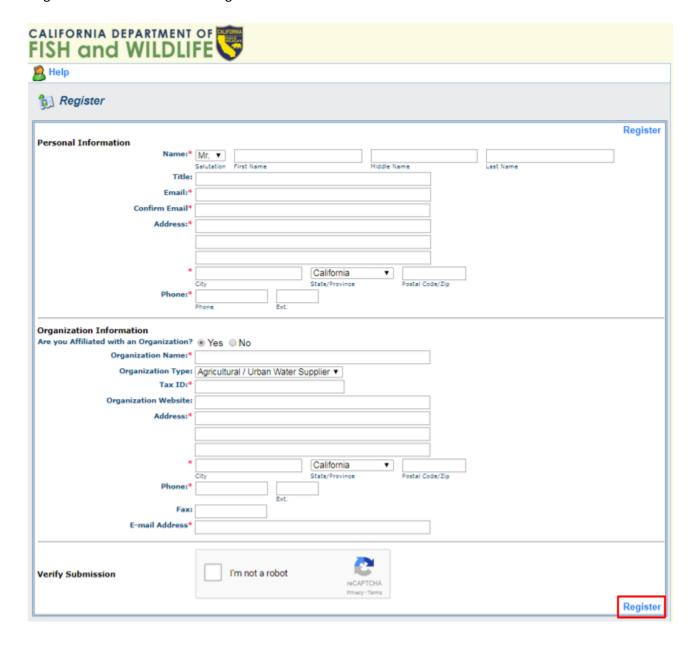
All external users must register to use WebGrants by going to the following link: watershedgrants.wildlife.ca.gov.

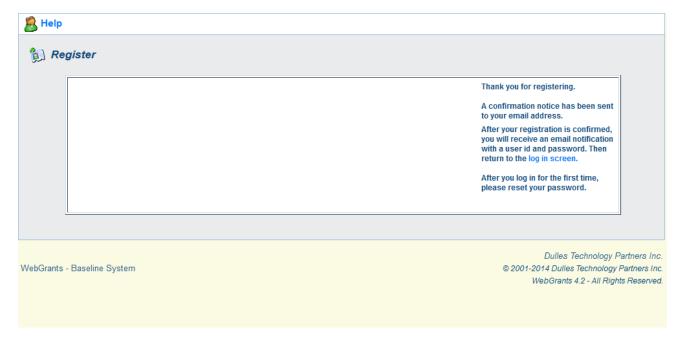
To Register, Click on Register Here



This screen is used for registering you and your organization as a WebGrants user.

Be sure to complete all required fields before you complete registration. Once all fields are complete, select the "Register" button at the bottom right of the screen.





After you register, you will receive two e-mails directing you to log-on and use the WebGrants system.

An example of the first e-mail you receive appears below:

Subject: WebGrants New User Registration

\*\*\*\* Do Not Respond to This Email \*\*\*\*

Dear [Jane Doe],

Message:

Thank you for registering. Your registration is currently under review, if approved, you will receive a confirmation email with your user id and password.

Thank you for your patience.

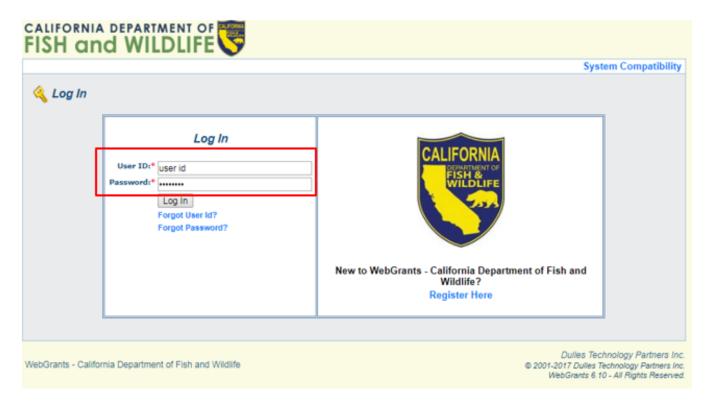
Once you have been approved to use the system, you will receive a second e-mail. An example of this e-mail appears below:

Subject: WebGrants Approved Registration

Message: \*\*\*\* Do Not Respond to This Email \*\*\*\*

| Dear [Jane Doe],   |
|--|
| Your new registration with the WebGrants grants management system has been Approved. Your user id and password are below:                  |
| User id: [User Id]   |
| Password: [Password]   |
|  |
| You may now log into the WebGrants system at the following location:   |
| http://www.watershedgrants.wildlife.ca.gov   |
|  |
| If you have any questions, please contact CDFW staff at <a href="mailto:CDFWWebGrants@wildlife.ca.gov">CDFWWebGrants@wildlife.ca.gov</a> . |

Once you have received the 2nd e-mail, you will return to the website and login as a Return User using your User ID and Password provided in the e-mail.



Note: Once approved to use the system, you do not have to register again. If you forget your password, click on 'Forgot Password' and the system will automatically generate an e-mail to the e-mail address you provided when you registered with your forgotten password.

# **Logging into the WebGrants System**

Sign into Web Grants

URL: watershedgrants.wildlife.ca.gov

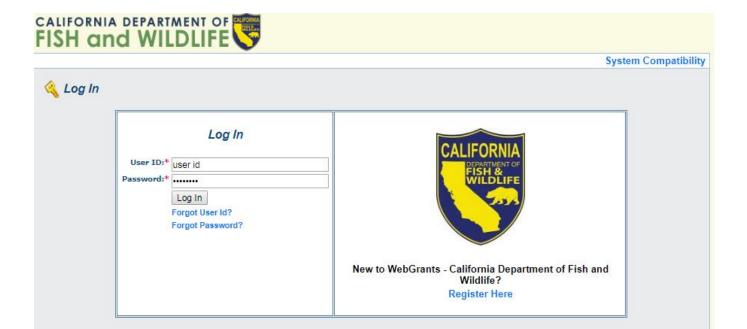
On the Front Page

Click on User ID on the left side of your page under Log In

Enter your User ID

**Enter your Password** 

Click on 'Log In'



Note: WebGrants is compatible with many different browsers; please feel free to use the browser of your choice.

Do not use the "Back" button in the browser window or the navigation menu to change pages, unless you have already clicked the "Save" button, or you will lose your data.

To complete any fields with lengthy text in the application, it is recommended that you compose your text using word processing software and then copy and paste the text into the application form. There may be some additional formatting of the text needed once you have pasted into the online application.

If you need to provide further explanation for a field that does not allow for additional text, you can submit the additional text as a supplementary document.

Some fields are limited in the number of characters which can be entered. This includes spaces and punctuation. Character limits are noted in the application.

Do not try to copy and paste charts or tables into the text boxes within the application; upload these charts or tables to the Supplementary Documents section.

Read the Instructions on the screen for navigating in the system.

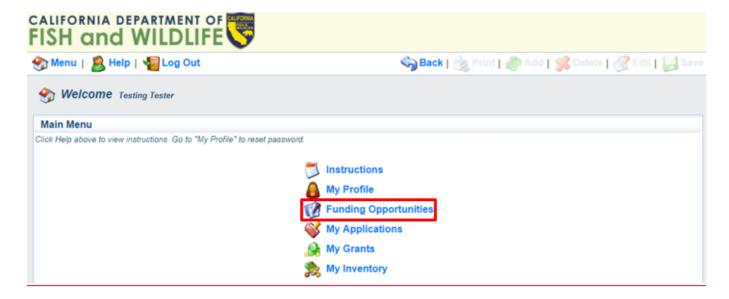
Required fields are indicated by the red \*(asterisk).

This application will not function using dial-up internet services. You need to have a high speed connection.

A version of the application (Appendix B) can be downloaded in Word format to use as a template for your online submission. If you create your proposal in Word first, then you can copy and paste your data into the online application. You can use Word to check your spelling and grammar, however if you have any special formatting it may be lost when you copy and paste into the online application. Using the Word version of the application will not automatically load anything into the online application web form system.

# **Application Instructions**

To begin your application, from the Main Menu click on 'Funding Opportunities.' This will take you to the Funding Opportunities page where you can select which opportunity you would like to apply to.



# **Funding Opportunity Page**

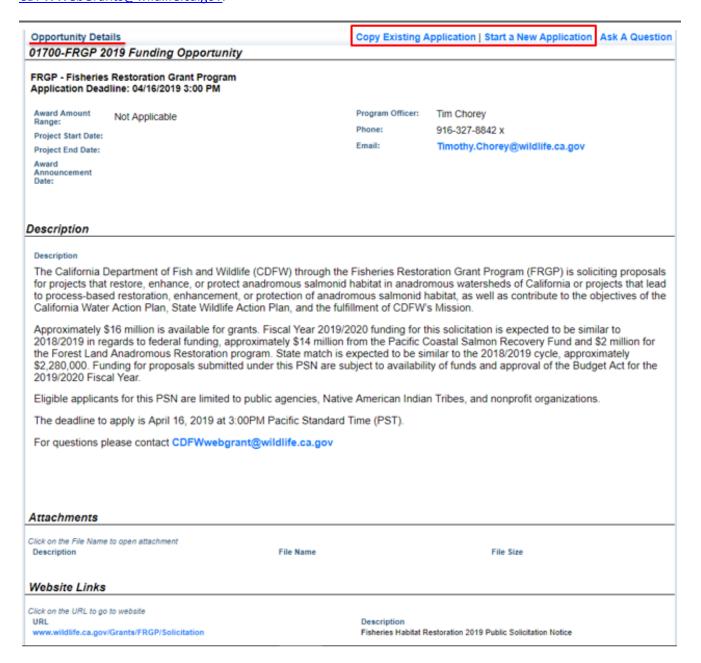
Click the 'Opportunity Title' you want to apply for. Select "FRGP 2018/19 Funding Opportunity" for the Fisheries Restoration Grant Program. Selecting the "FRGP 2018/19 Funding Opportunity" will take you to the Application page where you can copy an existing application or start a new one.



# **Application Page – Opportunity Details**

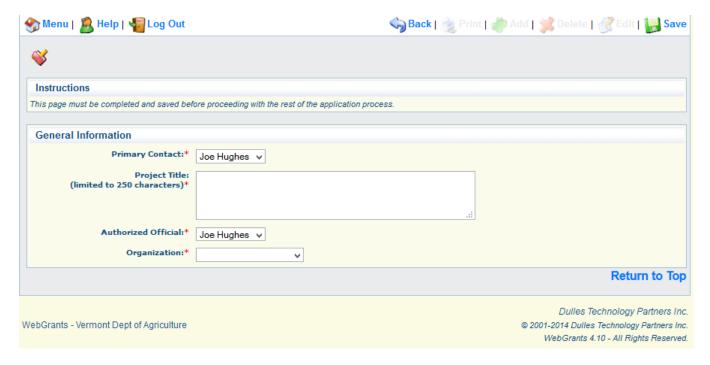
Select 'Start a New Application' under the "Opportunity Details" section to start a new application. If you have submitted an application in the past and would like to copy it to the current funding opportunity, select 'Copy Existing Application.' The 'Ask a Question' button can be used to ask a question to FRGP staff. But be warned that all questions

are viewable by every applicant. It is recommended that all applicants ask questions through the following email address CDFWWebGrants@wildlife.ca.gov.



# **General Information Page**

Once "Start a New Application" is selected the General Information Page will appear. This is a system page that pulls from the People and Organization database. The system identifies the user and the association with their Organization. This is identified when a user registers for access to WebGrants. Fill out each field and hit 'Save' at the top right of the screen to continue.



Primary Contact: This is the lead person to be contacted regarding the project.

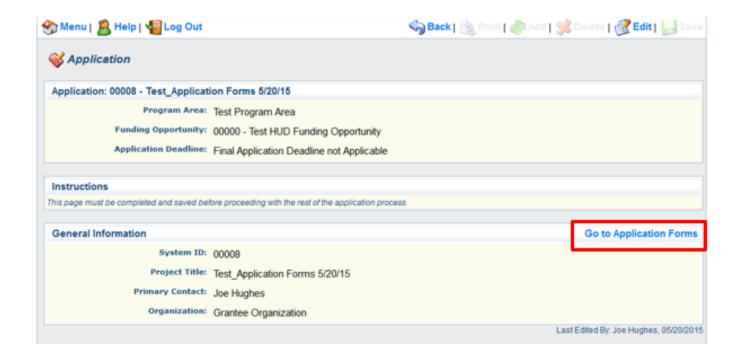
Project Title: Brief descriptive title for the project.

Authorized Official: Name of the person authorized to legally sign a grant agreement. This would be a member of the applicant's organization.

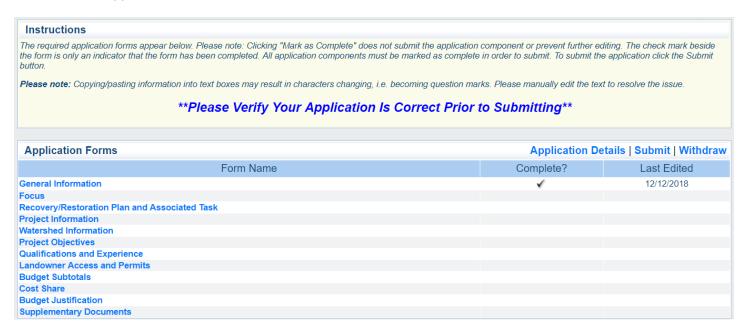
Organization: This is the company that the Primary Contact and Authorized Official work for.

Note: The system has created an application # as soon as the user clicked 'Save'. If a user logged out of the system at this point or any future point that they log out: THEY DO NOT CLICK ON START A NEW APPLICATION.

Click on 'My Applications' from the Main Menu or on Funding Opportunities to see your application in the top section. A view will show the completed form – Users have the option to click 'Edit' and edit their information and save again or click on 'Go to Application Forms,' as shown below, to start completing the application forms.



Below is a complete listing of all application forms on the Main Menu that are to be completed by the applicant in order to submit their application.



Note: All forms can be edited and saved as often as necessary but the system will require that ALL fields marked as required (red \*) MUST have entries and EVERY form must be 'Marked as Complete' to submit. Applicants will receive a pop-up message notifying them of this if they try to submit without completing these steps.

You will need to click on each form in the Application Forms listing In order to enter information.

Note: Most forms are editable by clicking 'Edit' at the top part of the page, however, some sections are only editable by clicking 'Add' on the section OR at the top of the page.

All information must be saved by clicking 'Save' on the forms. If you do not click 'Save' and you back out of the form or section of the form, your information will be lost.

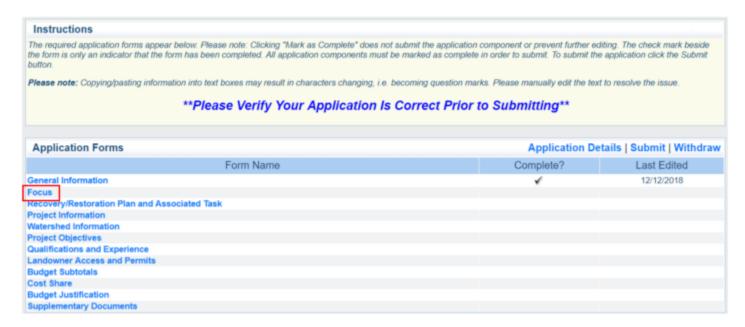
Once you have filled out all required fields and you have marked the form complete, you will submit your application.

Upon submission, you will receive a Confirmation Page confirming your application has been submitted. This will also confirm the Application number.

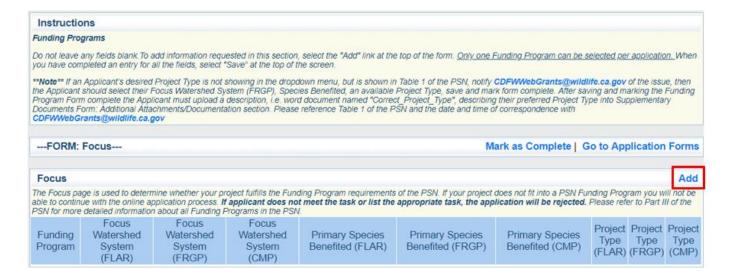
Once submitted, the application will not be editable for the applicant.

# **Focus Form**

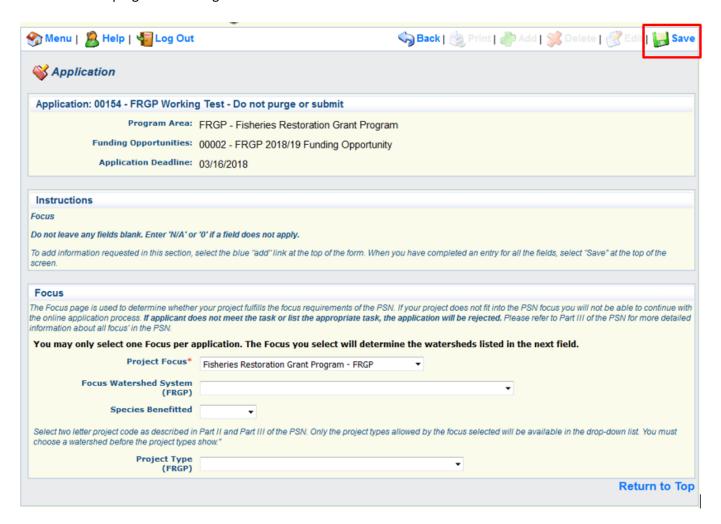
To add a Focus to your application select the "Focus" Form shown below:



Once the "Focus" Form is selected you will see the following screen. To add a Focus select the "Add" button at the right of the screen.



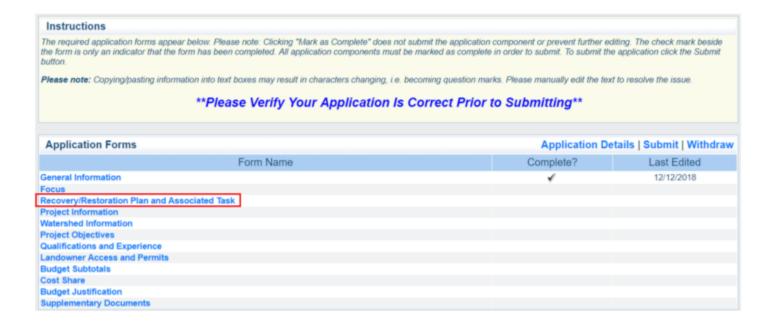
Once the "Add" button is selected the following screen will populate. Choose a "Project Focus" from the dropdown list in order for the other fields to populate ("Focus Watershed System," "Species Benefitted," and "Project Type"). Select "Save" at the top right after filling to save the information that was entered.



Once "Save" is selected you will see the following screen which summarizes your selections. Select "Mark as Complete" to complete this form. All forms must be marked as complete in order to submit an application.

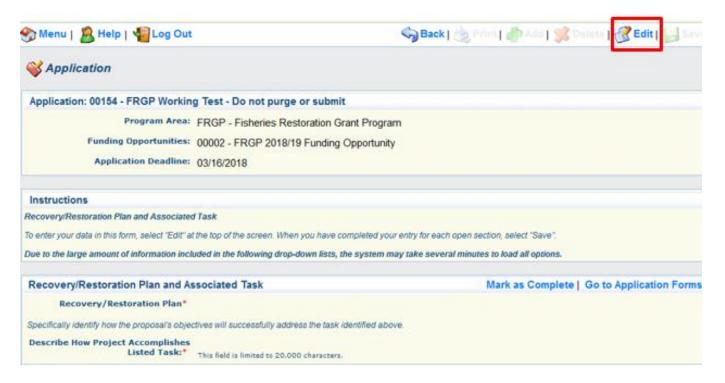


Once "Mark as Complete" is selected you will be directly sent to the Application Forms menu. From here you are able to fill out the rest of the application beginning with the "Recovery/Restoration Plan and Associated Task" Form. The instructions to complete the Focus Form apply to every form.

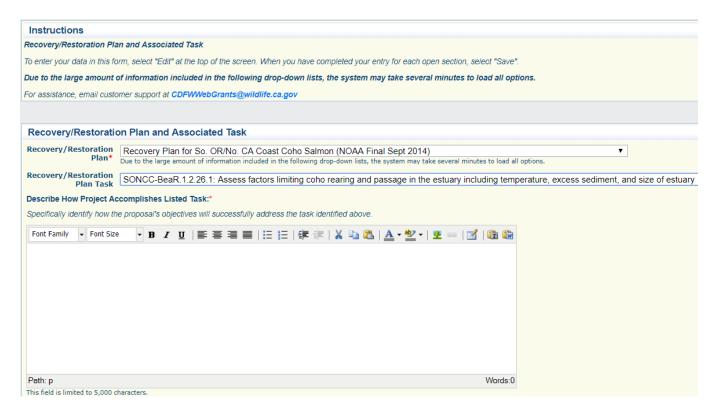


# Recovery/Restoration Plan and Associated Task Form

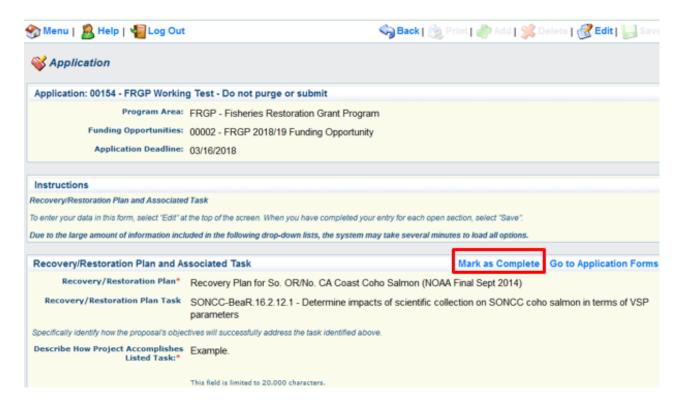
The screen below will populate when the "Recovery/Restoration Plan and Associated Task" Form link is selected. Select the "Edit" button at the top right of the page to add information.



Once the "Edit" button is selected you will be able to complete the "Recovery/Restoration Plan," "Recovery/Restoration Plan Task," and "Describe How Project Accomplishes Listed Task" fields. Note: the "Recovery/Restoration Plan Task" field will populate once a "Recovery/Restoration Plan" is selected. When all information is entered, select the "Save" button.

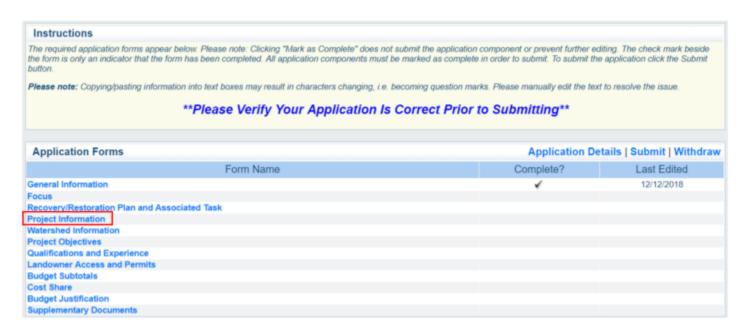


After the "Save" button is selected mark this form as complete by selecting the "Mark as Complete" button and once again you will be taken back to the Application Forms menu.



# **Project Information**

Select the "Project Information" Form link to enter the appropriate information. It is extremely important to read the Instructions in the application system before entering information.



The Project Information Form has seven components:

- Summary Information
- Organization Information
- Location Description
- Additional Species Information
- Project Location Information
- Worksite Information
- Licensed Professional
- Summary Information



Were Previous Parts of this Project Funded by FRGP (e.g. design)?: Enter the appropriate information if a predecessor to this project was partly or fully funded by the FRGP in the past. An example would be a design project that was funded and completed to produce design plans for this project.

**Project Category**: Choose a Project Category that best describes the work in the proposed project. You may only select one category; if the project addresses multiple categories, select the one that is the most important.

**Project Objectives**: Must identify specific end goals(s) that will be accomplished by the project. Summarize measurable objectives in a few sentences which can be included in the grant agreement if the proposal is funded. The specifics for how, when, where, and by whom these goals will be accomplished should be addressed in Project Description section. Be sure to include the type of work associated with this project (e.g. Installation of large woody debris, culvert removal, planting 100 trees, etc.). Maximum of 255 characters.

**Time Frame**: Provide estimated time line (start and end dates) for the project from project initiation to completion. (Depending on the Focus, duration of projects cannot exceed either four or two years.) This timeframe must include submission of final invoice and final report. All deliverables must be submitted within the project timeframe. You may enter a date using the calendar that pops up when you click in the date field or by typing a date in manually.

# **Organization Information**

| ORGANIZATION INFORMATION  |
|---|
| Eligible entities for awards are limited to public agencies, Native American Indian Tribes, and non-profit organizations. |
| Organization Type:*   |
| Is the organization a certified non-profit organization?  |
| Certified Non-Profit Organization*  |
| If yes, enter the state or federal non-profit organization number.  |
| Organization Number:*   |
| Does the organization have a Water Conservation and Efficiency program in place?  |
| Water Conservation and Efficiency  Program/Plan:*  This is required.  |

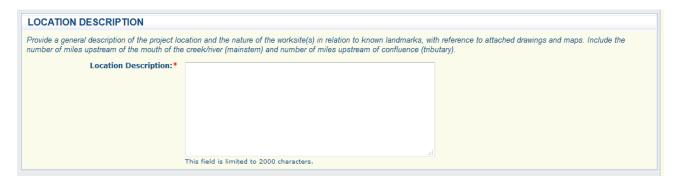
**Organization Type**: Eligible entities for awards are limited to public agencies, Native American Indian Tribes, and certified non-profit organizations.

Certified Non-Profit Organization: Is the organization a certified nonprofit organization?

**Organization Number**: If 'yes' is answered for the "Certified Non-Profit Organization" field, then enter the non-profit organization number. If 'no' was entered, then enter N/A.

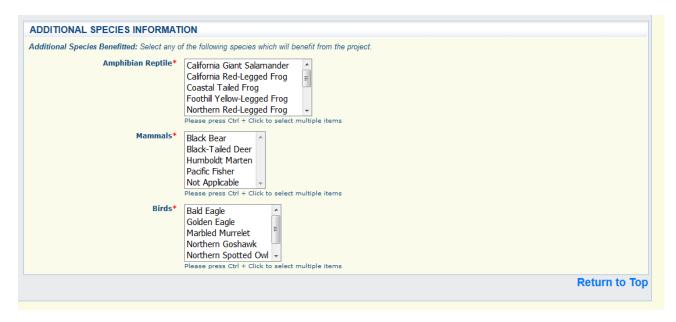
Water Conservation and Efficiency Program/Plan: Does the organization have a water conservation and efficiency program/plan in place? This is a mandatory requirement.

# **Location Description**



Location Description: Provide a general description of the project location and the nature of the work site in relation to known landmarks, with reference to attached drawings and maps. Include the number of miles upstream of the mouth of the creek/river (mainstem) and number of miles upstream of a confluence (tributary). Maximum 2000 characters.

# **Additional Species Information**



Amphibian Reptile/Mammals/Birds: Select any additional species that will benefit from the effects of the project.

# **Project Location Information**

Select the "Add" button in order to enter Project Location Information.

| PROJECT LOCATION INFORMATIO   | N  |   |               |                 |                 | Add             |
|---|--|---|---------------|-----------------|-----------------|-----------------|
| Are Your Proposed Locations across all FRGP Regions (Program-wide)?   | Is Your Proposed<br>Location in a Coastal<br>Zone? | Is Your Proposed Location in the Trinity River Basin? | County Stream | Tributary<br>To | HUC HUC<br>8 10 | Senate Assembly |
| Project Location Information  |  |   |               |                 |                 |                 |
| Are Your Proposed Locations across all  | ○ Yes ● No   |   |               |                 |                 |                 |
| FRGP Regions (Program-wide)?*   | - 165 - 140  |   |               |                 |                 |                 |
| County  | •  |   |               |                 |                 |                 |
| Stream  |  |   | ▼             |                 |                 |                 |
| Tributary To  |  |   |               |                 |                 |                 |
| нис в   |  | ▼   |               |                 |                 |                 |
| HUC 10  |  |   | •             |                 |                 |                 |
| Senate  | ▼  |   |               |                 |                 |                 |
| Assembly  | ▼  |   |               |                 |                 |                 |
| Coastal Zone: The Coastal Zone is a specific<br>and regulations in the County's Local Program<br>further information on the Coastal Zone, visit: (        | including the Coastal Elemen                       | it of the General Plan and Coastal Zo                 |               |                 |                 |                 |
| Is Your Proposed Location in a Coastal Zone?*   | ○ Yes ○ No   |   |               |                 |                 |                 |
| Proposals for restoration activities in the Trinity<br>such. This is necessary to ensure that state fur<br>of federal funds expended as required under fe | nds expended for salmon and :                      |   |               |                 |                 |                 |
| Is Your Proposed Location in the<br>Trinity River Basin?*   | ○ Yes ○ No   |   |               |                 |                 |                 |
| Is Your Proposed Location in the<br>Klamath River Basin?*   | ○ Yes ○ No   |   |               |                 |                 |                 |

Are Your Proposed Locations across all FRGP Regions (Program-wide)?: Does the project encompass all FRGP regions throughout the state? If 'yes' is selected then location specific information (County, Stream, Tributary To, etc.) is not required. If 'no' is selected then location specific information is required.

**County:** Name all counties in which the project work will take place. Use the drop down list provided; you may choose multiple counties. If the project is program-wide, please check the "Program-wide" box.

**Stream:** Name all streams which will be directly affected by the project. If the project is program-wide, please check the "Program-wide" box. Type in one stream at a time and hit Enter to add it to the list below.

**Tributary to:** Name all streams directly downstream of all affected streams. If the project is program-wide, please check the "Program-wide" box. Type in one stream at a time and hit Enter to add it to the list below.

**HUC 8:** Provide the 8-digit Hydrologic Unit Code (HUC) where the project will occur.

**HUC 10:** Provide the 10-digit Hydrologic Unit Code (HUC) where the project will occur.

**Senate:** Provide the Senate district(s) where the project will occur.

**Assembly:** Provide the Assembly district(s) where the project will occur.

**Coastal Zone:** Indicate if your proposal location is in the Coastal Zone by checking 'Yes' or 'No'. The Coastal Zone is a specific geographic area of varying width adjacent to the Pacific Ocean set forth in the California Coastal Act, which is subject to the policies and regulations in the County's Local Program, including the Coastal Element of the General Plan FHR 2019-2020 PSN

and Coastal Zoning Code. A Coastal Development permit may be required, for further information on the Coastal Zone, visit the California Coastal Commission's website at

**Trinity River Basin:** Indicate if your proposal location is in the Trinity River Basin by checking 'Yes' or 'No'. Proposals for restoration activities in the Trinity River Basin (from its confluence with Klamath River up to Lewiston Dam) must also be clearly identified as such. This is necessary to ensure that state funds expended for salmon and steelhead restoration in this basin may be accounted for separately and applied as part of the state match of federal funds expended as required under federal law. Identify your proposal location by indicating 'Yes' or 'No'.

**Klamath River Basin:** Indicate if your proposal location is in the Klamath River Basin by checking 'Yes' or 'No'. Proposals for restoration activities in the Klamath River Basin must also be clearly identified as such. This is necessary to ensure that state funds expended for salmon and steelhead restoration in this basin may be accounted for separately and applied as part of the state match of federal funds expended as required under federal law. Identify your proposal location by indicating 'Yes' or 'No'.

#### **Worksite Information**

| WORKSITE INFORMATION  |   |  |  |
|---|---|--|--|
| Provide exact project location, using multiple coordinates if necessary. If the project is not tied to a specific on-the-ground location, provide the coordinates for the headquarters of the organization. These coordinates need to be entered in NAD83; the following website can be used to convert coordinates: https://www.fcc.gov/media/radio/dms-decimal. The coordinates should look like: Latitude, 36,986746; Longitude,-121.569552. |   |  |  |
| worksite. For example, if there are two project leapart instead of 0.6, then one worksite needs to could be a "central" point location for the project.   | se place. If there are multiple worksites (spaced 1/2 contiguous miles or more apart) for the project, then coordinates are required for each ocations, one 0.6 miles downstream from the other, then two worksites will need to be reported. If the two project locations are 0.4 miles o be reported. For projects that apply to a large geographic scale (e.g., statewide), a single point lat/long will need to be reported. The point st; the lat/long of the city where the project staff conduct the work; or, a lat/long that designates the geographic area where most of the point location for a statewide project places the project within an FRGP Region. |  |  |
| Description of Coordinates: Provide a brief de  | escription of what the coordinates refer to, such as the downstream end of the project reach.   |  |  |
| Name of Site*   |   |  |  |
| Latitude*   |   |  |  |
| Longitude*  | 5 significant digits are required.  The "-" sign is automatically entered by the system. Only enter the coordinate (e.g. 121.12345). 5 significant digits are required.   |  |  |
| Provide a brief description of what the coordin   | ates refer to, such as the centerpoint of the project reach, or location of your organization's headquarters.   |  |  |
| Description of Coordinates*   |   |  |  |
|   | This field is limited to 250 characters.  |  |  |
|   | Return to Top   |  |  |
|   |   |  |  |

Name of Site: The location where the work will take place or is done. If there are multiple worksites (spaced a ½ mile or more apart) for the project, then location should be entered for each worksite. For projects that apply to a large geographic scale (e.g., statewide), a single point lat/long will need to be reported. The point could be a 'central' point location for the project; the lat/long of the city where the project staff conduct the work; or, a lat/long that designates the geographic area where most of the work is focused.

Latitude, Longitude for EACH work site (In decimal degrees, geographic, NAD83): Provide site name(s) and exact project location(s) for each work site. If the project is not tied to a specific on-the-ground location, provide the coordinates for the headquarters of the organization. These coordinates need to be entered in NAD83; the following website can be used to convert coordinates: <a href="https://www.fcc.gov/media/radio/dms-decimal">https://www.fcc.gov/media/radio/dms-decimal</a>. Make sure to indicate the direction in NAD83 format (ex: longitude in California should begin with a (-) to indicate its direction). The coordinates should look like this example: Latitude, 36.986746; Longitude, -121.569552.

**Description of Coordinates:** Provide a brief description of what the coordinates refer to, such as the downstream end of the project reach.

# **Licensed Professional(s)**



First and Last Name: Enter the first and last name of the licensed professional (e.g. John Doe).

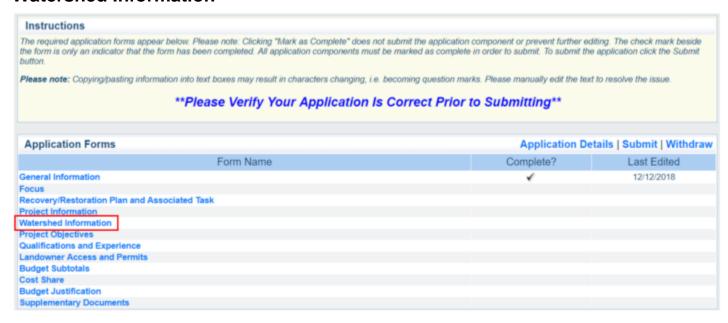
Affiliation (Organization): What organization is the licensed professional associated with?

**License Type/Code (e.g. Engineer, Geologist, etc.):** What type of license does the professional have?

**License Number:** What is the professional's license number?

Contact Phone #: What is the licensed professional's primary phone number?

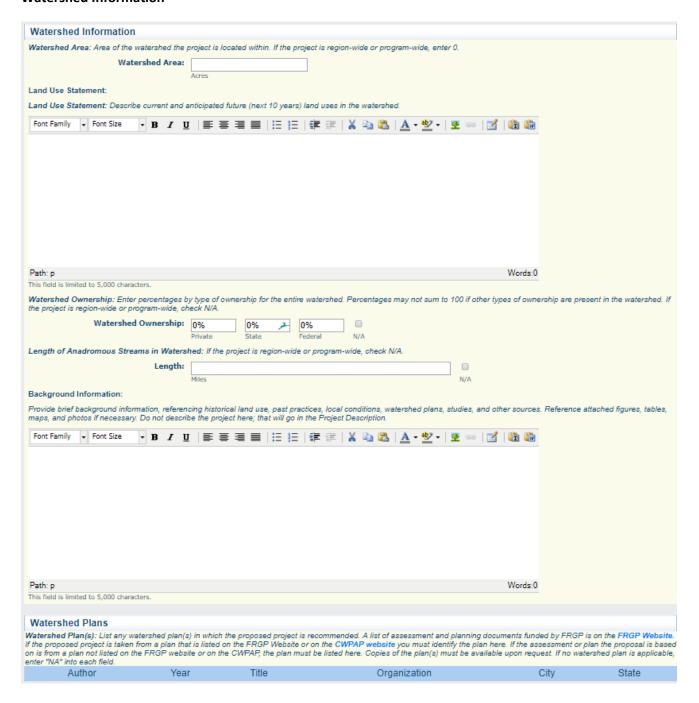
# Watershed Information



There are two sections in the Watershed Information Form that must be completed:

- Watershed Information
- Watershed Plans

#### Watershed Information



**Watershed Area (in acres):** Watershed area in acres within which the project is located. If the project is region-wide or program-wide, enter 0.

Watershed Area Directly Affected by the Proposed Project (acres): Acres of watershed affected by project. (This should be a subset of the Watershed Area above.) If the project is region-wide or program-wide, enter 0.

**Land Use Statement:** Describe current and anticipated future (next 10 years) land uses in the watershed. Maximum of 2,000 characters.

**Watershed Ownership:** Enter percentages by type of ownership for the entire watershed. Percentages may not sum to 100 if other types of ownership are present in the watershed. If the project is region-wide or program-wide, check N/A.

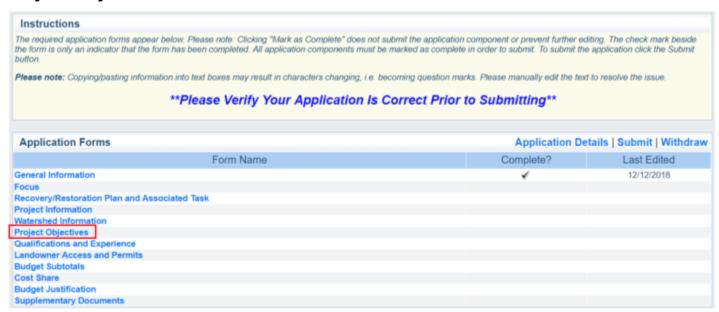
**Length of Anadromous Streams in Watershed (miles):** Length of anadromous streams in the watershed, in miles. If the project is region-wide or program-wide, check N/A.

**Background Information:** Provide background information, referencing historical land use, past practices, local conditions, watershed plans, studies, and other sources. Reference attached figures, tables, maps, and photos if necessary. Do not describe the project here; that will go in the Project Description section. Maximum of 10,000 characters.

Watershed Plan(s): List any watershed plan(s) in which the proposed project is recommended using the following format: Author, year, title, organization, city, and state. A list of assessment and planning documents funded by FRGP is in the FRGP Website. If the proposed project is taken from a plan that is listed on the website or on the CWPAP website (see PSN Part V), you must identify the plan here. If the assessment or plan the proposal is based on is from a plan not listed on the FRGP Website or on the CWPAP, the plan must be listed here. Copies of the plan(s) must be available upon request. If no watershed plan is applicable, enter a record with 'N/A' in the Author, Title, Organization, and City and State fields, and '0000' in the year field. DO NOT enter recovery plans here.

| WATERSHED PLANS                                  |   |
|--|---|
| If the proposed project is taken from a plan tha | in which the proposed project is recommended. A list of assessment and planning documents funded by FRGP is on the FRGP Website. It is listed on the FRGP Website or on the CWPAP website you must identify the plan here. If the assessment or plan the proposal is 2 website or on the CWPAP, the plan must be listed here. Copies of the plan(s) must be available upon request. If no watershed plan is |
| Author*  |   |
|  | Last, First (e.g. Doe, John)  |
| Year*  |   |
|  | If "NA," enter "0000."  |
| Title*   |   |
|  | Character Limit: 150  |
| Organization*                                    |   |
|  | Character Limit: 100  |
| City*  |   |
|  |   |
| State*   |   |
|  | Acronym (e.g. CA, OR, NV, etc.)   |
|  | Return to Top   |
|  |   |

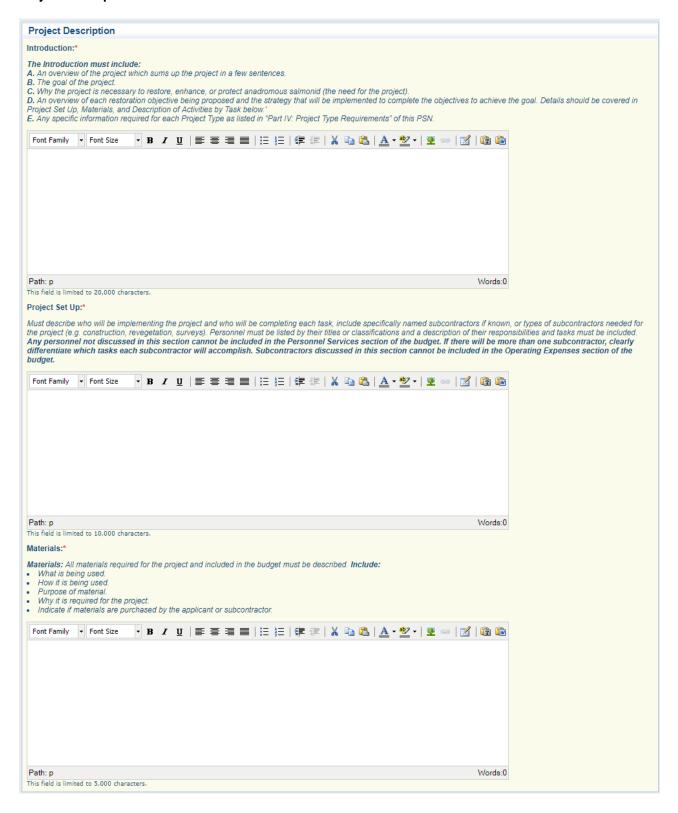
# **Project Objectives**



The Project Objectives Form contains four sections that must be completed:

- Project Description
- Protocols
- Primary Limiting Factor
- Description of Activities

# **Project Description**



# Introduction must include;

- An overview of the project which sums up the project in a few sentences;
- The purpose of the project;
- why the project is necessary;

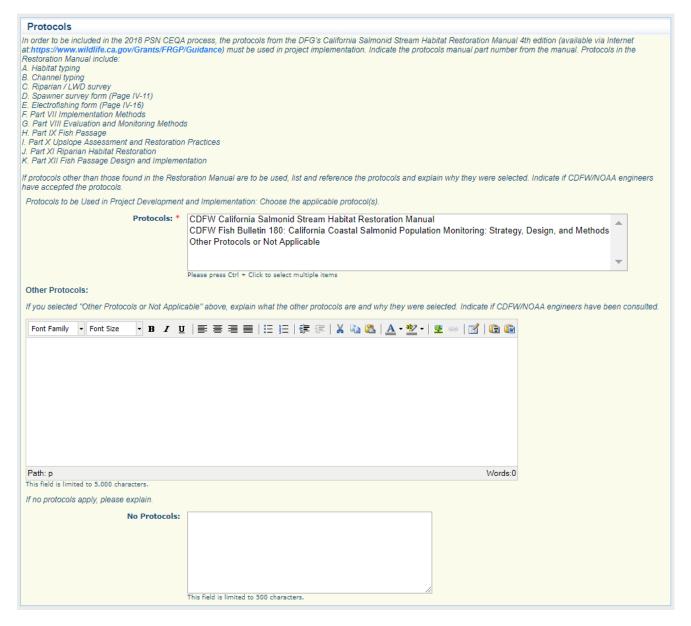
- Each restoration element being proposed and how each element will be implemented (e.g. methods/techniques used, materials and equipment used, dewatering, etc.),
- A clear understandable link of how the proposed project elements will address the current problem(s) at the appropriate scale,
- Any specific information required for each Project Type as listed in Part VI of this PSN.

**Project Set Up:** Must describe who will be implementing the project and who will be completing each task, include specifically named subcontractors if known, or types of subcontractors needed for the project (e.g. construction, revegetation, surveys). Personnel must be listed by their titles or classifications and a description of their responsibilities and tasks must be included. Any personnel not discussed in this section cannot be included in the Personnel Services section of the budget. If there will be more than one subcontractor, clearly differentiate which tasks each subcontractor will accomplish. Subcontractors not discussed in this section cannot be included in the Operating Expenses section of the budget.

Materials: All materials required for the project and included in the budget must be described. Include:

- What is being used;
- how it is being used;
- purpose of material and;
- why it is required for the project

#### **Protocols**



**Protocols:** Select one or more of the listed options in the Protocols box. If you select DFG California Salmonid Stream Habitat Restoration Manual, enter one or more Manual Part Numbers in the "Other Protocols" field. If you select Other Protocols or Not Applicable, please use the field that appears below to explain what the other protocols are and why they were selected. Indicate if CDFW/NOAA engineers have been consulted. If no protocols apply, please explain.

Other Protocols: Explain any other protocols other than the three listed in the Protocols field.

**No Protocols:** If no protocols are applicable for this project, explain why.

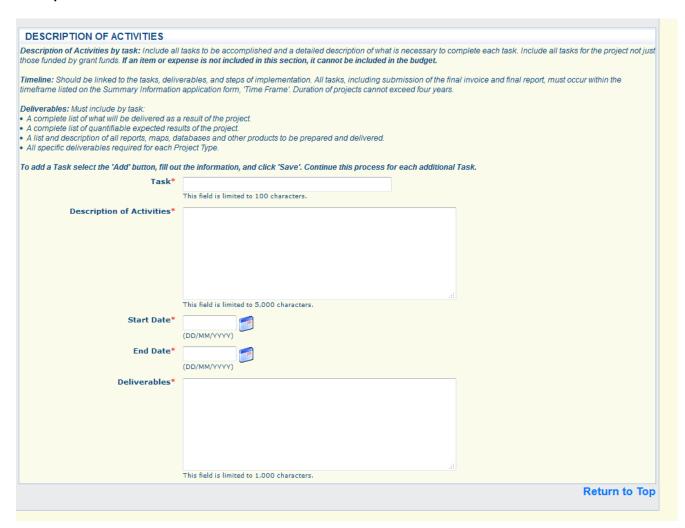
# **Primary Limiting Factor**



**Primary Limiting Factor:** Choose from the provided list of limiting factors that the project will remediate. You may only select one option. You may only select N/A if this project is MO, or PL. You will be required to provide an explanation for why a limiting factor is not applicable.

**How Does the Project Address the Primary Limiting Factor?:** Describe how the primary limiting factor will be remediated by the project.

# **Description of Activities**



**Task:** Title for each task to be accomplished by the project.

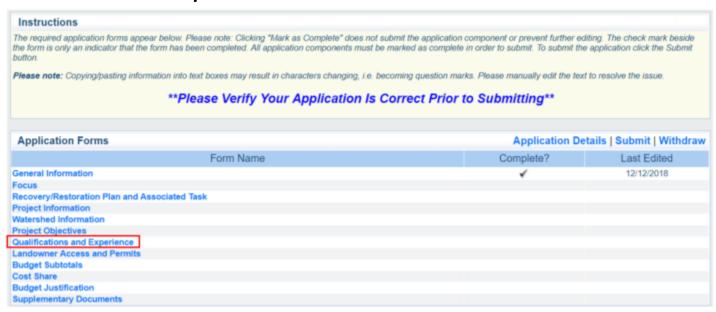
**Description of Activities:** Must include a list of all tasks to be accomplished and a detailed description of the activities required to complete each task. Include all tasks for the project not just those funded by grant funds. If an item or expense is not included in this section, it cannot be included in the budget.

**Start/End Date:** Should be linked to the tasks. The timeline must include estimated completion dates of all tasks, deliverables, and steps of implementation. At a minimum for each task in the timeline, provide annual benchmarks for multiply year projects and quarterly benchmarks for one year projects. All tasks, including submission of the final invoice and final report, must occur within the timeframe listed on the Summary Information page, Time Frame Box. Duration of projects must match the focus.

# Deliverables must include by task:

- A complete list of what will be delivered as a result of the project;
- A complete list of quantifiable expected results of the project;
- A list and description of all reports, maps, databases and other products to be prepared and delivered to FRGP;
- All specific deliverables required for each Project Type as described in Part VI;
- Periodic status reports, annual reports, and;
- A Final Report.

# **Qualifications and Experience**



There are four sections to the Qualifications and Experience Form:

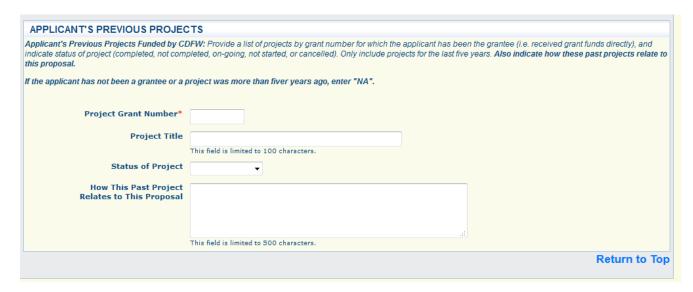
- Qualifications and Experience of Applicant
- Applicant's Previous Projects
- Professionals
- Subcontractors

#### **Qualifications and Experience of Applicant**



**Applicant's Qualifications and Experience:** Describe how the applicant or the organization is qualified to perform the proposed work.

# **Applicant's Previous Projects**



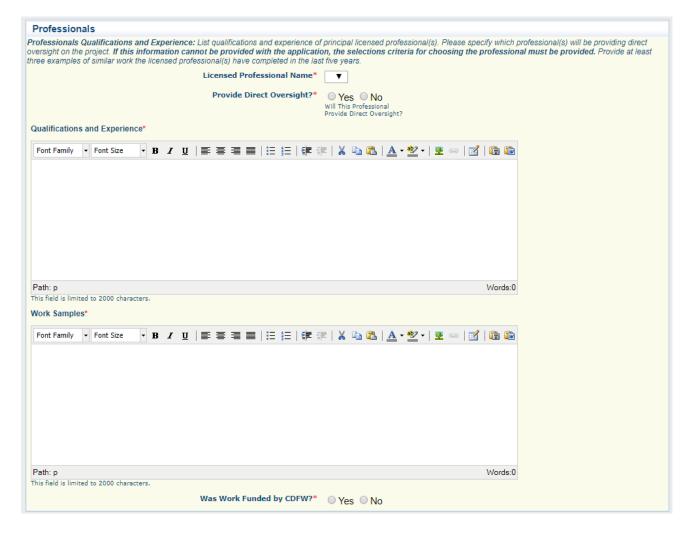
**Project Grant Number:** Provide the FRGP grant number(s) the applicant has been directly funded for.

**Project Title:** Title for the Grant Number provided.

**Status of Project:** Indicate status of project (completed, not completed, on-going, not started, and cancelled). Only include projects for the last five years.

**How This Past Project Relates to This Proposal:** Indicate how these past projects relate to this proposal.

#### **Professionals**



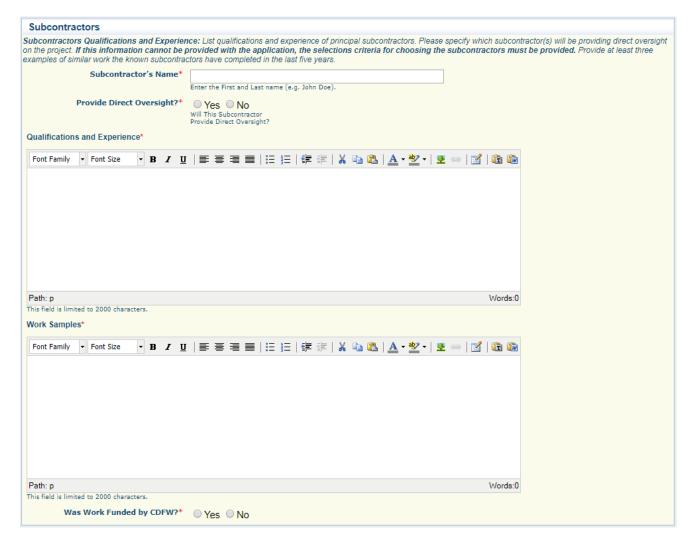
Licensed Professional Name: Select the name of the licenses professional.

Provide Direct Oversight?: Will this professional provide direct oversight of this project?

**Qualifications and Experience:** List qualifications and experience of principal licensed professional(s)/subcontractor. Please specify which professional(s)/subcontractor will be providing direct oversight on the project. If this information cannot be provided with the application, the selection criteria for choosing the subcontractors must be provided.

**Work Samples:** Provide at least three examples of similar work the licensed professional(s)/subcontractor has completed. Indicate if work was funded by FRGP.

#### **Subcontractors**



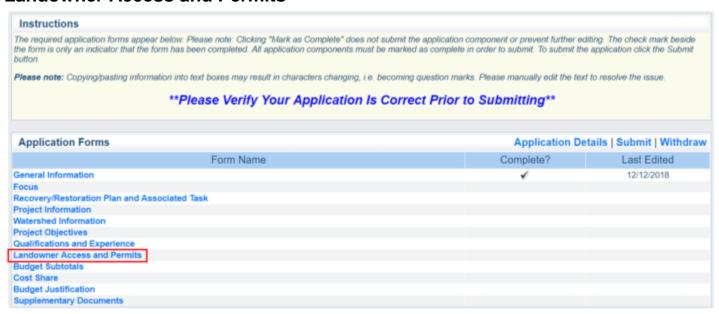
**Subcontractor's Name:** Enter the first and last name of the subcontractor.

Provide Direct Oversight?: Will this professional provide direct oversight of this project?

**Qualifications and Experience:** List qualifications and experience of principal licensed professional(s)/subcontractor. Please specify which professional(s)/subcontractor will be providing direct oversight on the project. If this information cannot be provided with the application, the selection criteria for choosing the subcontractors must be provided.

**Work Samples:** Provide at least three examples of similar work the licensed professional(s)/subcontractor has completed. Indicate if work was funded by FRGP.

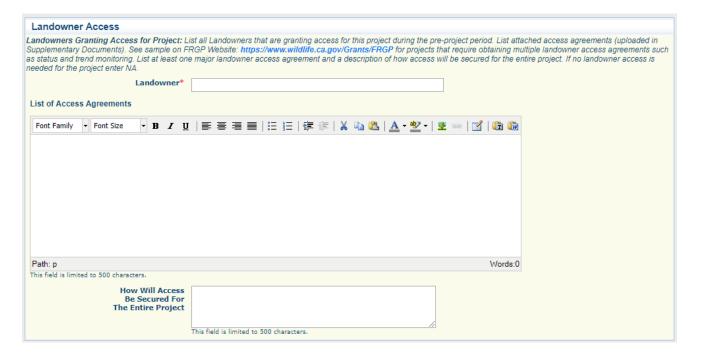
# **Landowner Access and Permits**



There are five sections in the Landowner Access and Permits Form:

- Landowner Access
- Landowner Information
- Permits
- CEQA
- Species

#### **Landowner Access**



Landowner: Name of the landowner (e.g. John Doe).

**List of Access Agreements:** List the access agreements required for this project.

How Will Access Be Secured For the Entire Project: Explain how access will be secured for the entire project.

#### **Landowner Information**

| LANDOWNER INFORMATION                         |  |
|---|--|
| Is the Applicant the Landowner?               | ⊚ Yes 		 No  |
| Is Landowner Access Needed for this Project?  | ⊚ Yes ⊚ No   |
| If no landowner access is needed for the pro- | ject, please enter a brief description of the reason. (for example, 'project not on-the-ground' or 'applicant owns property'). |
| Reason Access Not Needed:                     |  |
|   | This field is limited to 100 characters.   |

Is the Applicant the Landowner: Select either 'yes' or 'no.'

**Is Landowner Access Needed for this Project?:** If 'no' is selected than an explanation is required in the "Reason Access Not Needed" field. If 'yes' then be sure to upload the Landowner Access Agreement in the Supplementary Documents Form.

Reason Access Not Needed: Explain why landowner access is not needed for this project.

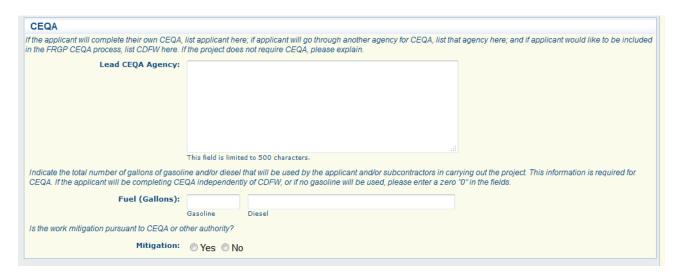
#### **Permits**

| PERMITS   |  |
|---|--|
| Choose all government permits known to be choose 'N/A'. | needed to complete this project. If permits are not applicable because your project does not involve on-the-ground work, please  |
| Government Permits:                                     | Section 404 of the Clean Water Act: Regional General Permit (12 and 78)  Clean Water Act Section 401 Water Quality Certification and Order  County permits (grading, encroachment, building)  CDFW Lake and Streambed Alteration Agreement  Coastal Development permit  Please press Ctrl + Click to select multiple items |
| Which Permits Will The Applicant<br>Secure?             | This field is limited to 500 characters.   |

**Government Permits:** List all government permits known to be needed to complete this project. Multiple permits may be selected by pressing the Ctrl + Click for each selection. If permits are not applicable because your project does not involve on-the-ground work, please check the N/A box.

Which Permits Will the Applicant Secure?: List which permits the applicant is going to secure on their own.

#### **CEQA**



**Lead CEQA Agency:** Lead CEQA agency for the project. If the applicant will complete their own CEQA, list applicant here; if applicant will go through another agency for CEQA, list that agency here; and if applicant would like to be included in the FRGP CEQA process, list CDFW here. If the project does not require CEQA, please explain. (Note: FRGP will not pay for outside CEQA compliance.)

**Fuel (Gallons):** Indicate the total number of gallons of gasoline and/or diesel that will be used by the applicant and/or subcontractors in carrying out the project. This information is required for CEQA. If the applicant will be completing CEQA independently of CDFW, if the project does not involve on-the-ground implementation, or if no gasoline or diesel will be used, please enter zeros in the fields.

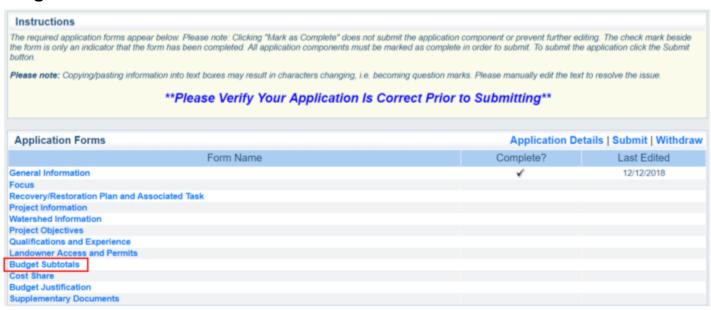
Mitigation: Is the work mitigation pursuant to CEQA or other authority?

#### **Species**

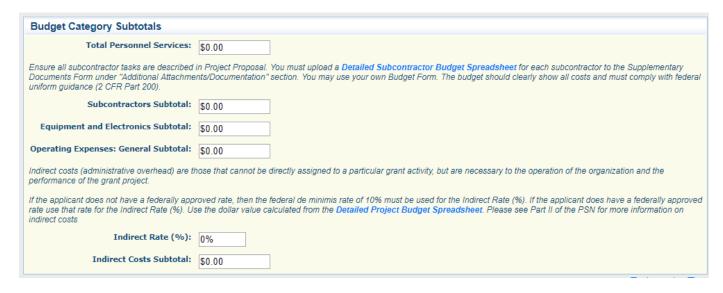


Listed Species: Indicate if any State or Federal listed species consultations or surveys are required. This is not limited to fish. If no consultation is required, please check N/A. For assistance determining whether there are listed species in the project area, refer to the California Natural Diversity Database: <a href="https://www.wildlife.ca.gov/Data/CNDDB/Maps-and-Data">https://www.wildlife.ca.gov/Data/CNDDB/Maps-and-Data</a>.

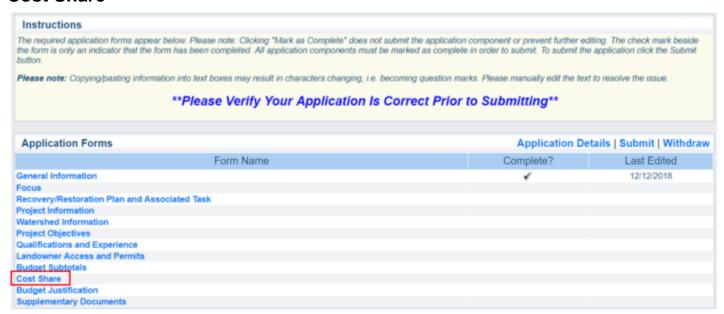
# **Budget Subtotals**



The Budget Subtotals are to be entered by the applicant via the Budget Form and appropriate budgetary spreadsheets.



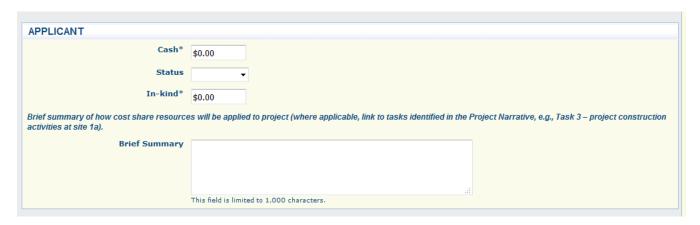
# **Cost Share**



There are four sections to the Cost Share Form:

- Applicant
- Other State Agency(ies)
- Federal Agency(ies)
- Other Sources, Including Project Partners

# **Applicant**



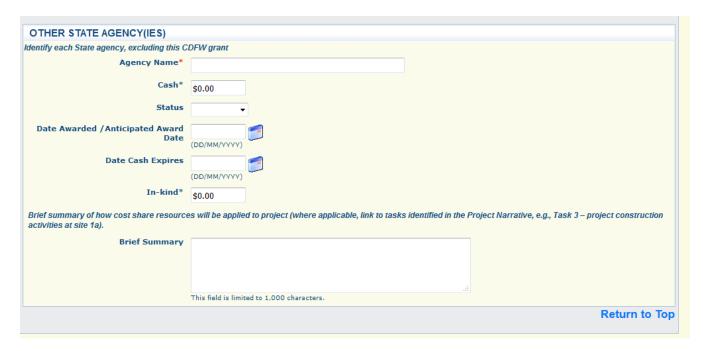
**Cash:** Enter the amount of Cash funding provided by each source. Do not leave the field blank; enter zero if not applicable.

Status: Describe the status of the funding (secured, pending, or unknown) by selecting from the drop-down list.

**In-kind:** Enter the amount of In-kind funding provided by each source. Do not leave the field blank; enter zero if not applicable.

Brief Summary: Describe where the funds will be applied to.

# Other State Agency (ies)



**Agency Name:** Name of the agency that provided the cost share.

**Cash:** Enter the amount of Cash funding provided by each source. Do not leave the field blank; enter zero if not applicable.

Status: Describe the status of the funding (secured, pending, or unknown) by selecting from the drop-down list.

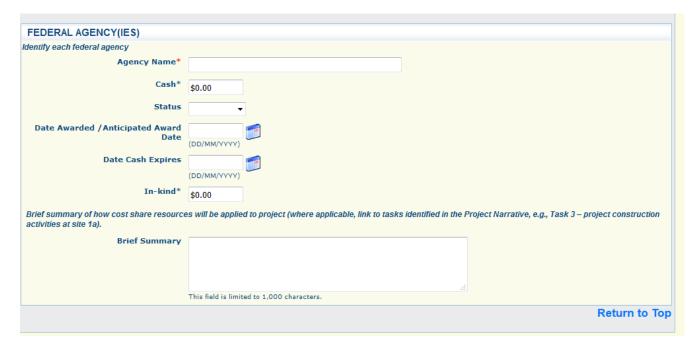
**Date Awarded/Anticipated Award Date:** Select the date range wherein you expect to receive notification that the funds have been awarded.

Date Cash Expires: Select the date

**In-kind:** Enter the amount of In-kind funding provided by each source. Do not leave the field blank; enter zero if not applicable.

**Brief Summary:** Describe where the funds will be applied to.

# Federal Agency (ies)



Agency Name: Name of the agency that provided the cost share.

**Cash:** Enter the amount of Cash funding provided by each source. Do not leave the field blank; enter zero if not applicable.

Status: Describe the status of the funding (secured, pending, or unknown) by selecting from the drop-down list.

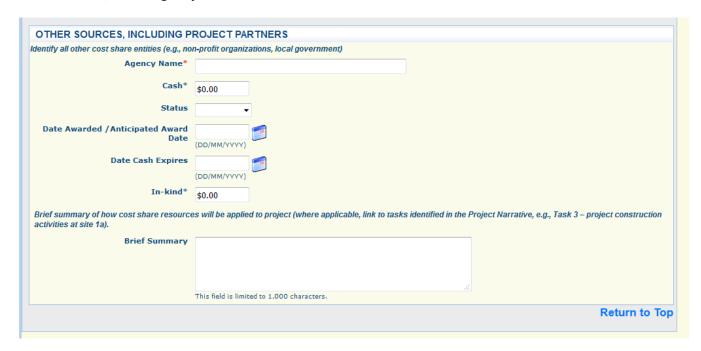
**Date Awarded/Anticipated Award Date:** Select the date range wherein you expect to receive notification that the funds have been awarded.

Date Cash Expires: Select the date

**In-kind:** Enter the amount of In-kind funding provided by each source. Do not leave the field blank; enter zero if not applicable.

Brief Summary: Describe where the funds will be applied to.

# **Other Sources, Including Project Partners**



Agency Name: Name of the agency that provided the cost share.

**Cash:** Enter the amount of Cash funding provided by each source. Do not leave the field blank; enter zero if not applicable.

Status: Describe the status of the funding (secured, pending, or unknown) by selecting from the drop-down list.

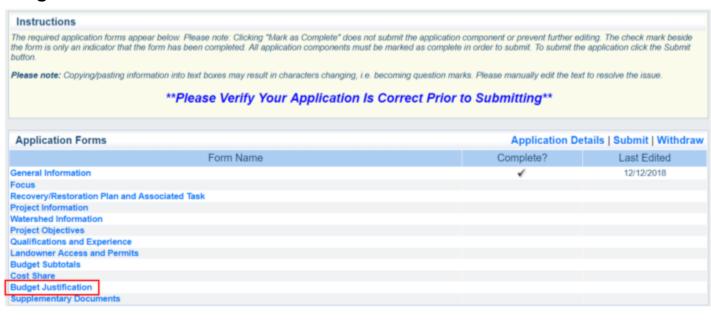
**Date Awarded/Anticipated Award Date:** Select the date range wherein you expect to receive notification that the funds have been awarded.

Date Cash Expires: Select the date

**In-kind:** Enter the amount of In-kind funding provided by each source. Do not leave the field blank; enter zero if not applicable.

**Brief Summary:** Describe where the funds will be applied to.

# **Budget Justification**



| BUDGET JUSTIFICATION   |  |  |  |
|--|--|--|--|
| Task Number/Name*  |  |  |  |
| Activity/Equipment/Subcontractor<br>/Travel*   |  |  |  |
|  | This field is limited to 250 characters. |  |  |
| Cost Per Unit*   | \$0.00                                   |  |  |
| Total Cost Share<br>(Non-CDFW Funds)<br>*  | \$0.00                                   |  |  |
| Total CDFW Requested Cost*   | \$0.00                                   |  |  |
| Justification - Please provide a short justification of budget item and cost, for CDFW Requested Cost and Cost Share |  |  |  |
| Justification*   |  |  |  |
|  |  |  |  |
|  |  |  |  |
| This field is limited to 1,000 characters.   |  |  |  |

Task Number/Name: Number/Name provided in the Project Objectives Form.

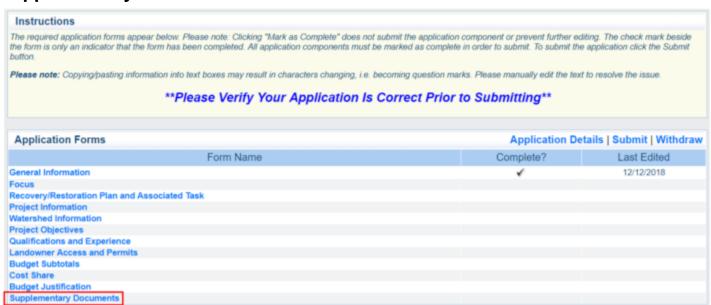
**Cost Per Unit:** Dollar amount for each unit purchased for the specific task.

**Total Cost Share (Non-CDFW Funds):** Total amount of cost share obtained.

Total CDFW Requested Cost: Total amount requested for this task.

**Justification:** Explain any unusual cost items or lump sum costs which will aid in the evaluation of the project. Applicants must justify project costs in the project description. Project cost analysis will be based on costs for similar projects that have been implemented as well as on an assessment of proposed costs by FRGP staff. If you are submitting more than 6 supplementary documents at the end of the application process.

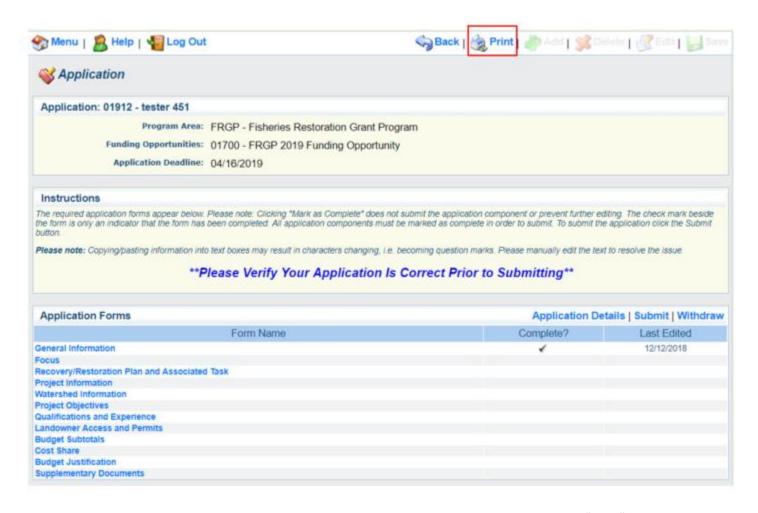
# **Supplementary Documents**





A 'yes' or 'no' must be answered for each Supplementary Document excluding the "Additional Documents" option. If a 'yes' is chosen then an upload button will appear. If 'no' is selected then an upload button will not appear.

# **Printing Your Application**



Once all Forms have been marked as Complete, you can print your application by selecting the "Print" button at the top of the page. This will open a new link with the printable version of the application. To print the application or save it as a pdf, right click and select "Print" as shown below. Note that the entire application is not shown below, only the top portion.



# Application

# 00002 - FRGP 2018/19 Funding Opportunity - Final Application

00154 - FRGP Working Test - Do not purge or submit FRGP - Fisheries Restoration Grant Program Status: Editing Submitted Date: Back Alt+Left Arrow Alt+Right Arrow Forward-Reload Ctrl+R Applicant Information Save as. Ctrl+P Print.. **Primary Contact:** Cast... Name:\* Dr. Salutation Testing Middle Name Translate to English Title: AdBlock Email: tester@test.com Buffer This Page Address: 1234 Street Road Ctrl+U View page source Inspect Ctrl+Shift+I Test California 12345 Phone: 555-555-5555 bst. Organization Information Organization Name:\* BaseLine Organization Organization Type: 503c Tax ID: 54-35245433 Organization Website: www.baselineorg.com Address: 578 Main st. 1st Floor 1 Main Street Stonesville cty Alaska 84111 555-555-0199 Phone: 456-538-8700 Fax: 801-538-8888 E-mail Address\* winter@example.com