

### #3 Vilas 8.1 miles of new trail

State of Wisconsin  
 Department of Natural Resources  
[dnr.wi.gov](http://dnr.wi.gov)

### Motorized Recreation Off-Highway Motorcycle Grant Application

Form 8700-159M (R 4/19)

**Due Date: May 1**

**Notice:** Completion of this form is required under Wisconsin Statute 23.335. Failure to complete this form will result in denial of financial assistance. Personally identifiable information found on this form is not intended to be used for any other purpose. The Department of Natural Resources (DNR) may provide this information to requesters as required by Wisconsin's Open Records law (ss. 19.31 – 19.39, Wis. Stats.).

**Instructions:** Submit one copy of all forms and attachments. See Page 2 for necessary attachments. Send applications to your [Community Services Specialist](#).

DNR Use Only	
Category	Number

Section 1: Applicant Information					
Applicant / Organization Name Vilas County Parks & Recreation			Check Recipient: Individual other than authorized individual to act on behalf of the applicant. <input type="checkbox"/> Select if the same as applicant.		
Individual Authorized to Act on Behalf of Applicant per Resolution Dale Mayo			Check Recipient Name (Name to Appear on Check) Vilas County Parks & Recreation		
Title Administrator			Title		
Address 330 Court Street			Address		
City Eagle River	State WI	ZIP Code 54521	City	State	ZIP Code
Telephone Number (715) 479-5160		Email Address damayo@vilascountywi.gov			

Section 2: Project Information Required for all Projects						
Project Title						
Vilas OHM Phase 3						
County Vilas	Township 42 N	Range 9	Section 25	¼ ¼ N2	¼ NE	GPS Coordinates: Lat. 46.104269 Long. -89.308876

**Project Description Summary**

Vilas County proposes to construct Phase 3 by adding an additional 8.5 miles of experienced rider skill level that would provide a woods trail experience that will contain not only a narrow tread path winding through hardwoods, pine tree plantations and changing elevations in terrain. It will also give the rider the options of testing their skills on features such as rock boulder formations and engineered fallen tree piles placed along the trail system are some examples of trail features.

Unlike The Tamaracks Phase 1 & 2 trail builds, Phase 3 will have a minimum of overall soil disturbance and tree removal in the construction of this section. This is possible because of the rocky soil types and the lack of deep duff found at this location. This section will be flagged and then brushed mostly by hand tools. Once complete Motorcycles will be used to establish the trail flow. This will determine what trail tread ground methods are required build a sustainable trail. Use of a Micro Excavator will be kept to a minimum mainly used to build trail features and clearing of heavily falling trees in one section of an old logging operation.

Estimated Cost		
Development \$4,324.00	Trail Rehab.	Total Estimated Cost \$4,324.00

Applicant Certification	
Printed Name of Authorized Official Dale Mayo	Official's Title Parks & Recreation Administrator

As the applicant's authorized official, I certify that, to the best of my knowledge, the information in this application is true and correct.

  
 Signature of Authorized Official

6-26-20  
 Date Prepared

<b>Checklist for Maintenance and Projects</b>	
<b>OHM</b>	
<input checked="" type="checkbox"/>	Project resolution by grant applicant authorizing participation ( <a href="#">sample resolution</a> )
<input checked="" type="checkbox"/>	Project is on public land and I will be applying for RTP funds for this project. \$
<b>Trail Rehab Reroute or Development – Must complete Appendix B</b>	
<input type="checkbox"/>	Quality photos showing need for rehabilitation
<input checked="" type="checkbox"/>	County wide trail map showing the segment proposed for rehabilitation on the funded trail
<input checked="" type="checkbox"/>	Aerial, wetland, topo, and plat maps with the trails overlaid
<input checked="" type="checkbox"/>	Cost Estimate Worksheet – <a href="#">Form 8700-014</a> (Itemize gravel costs)
<input type="checkbox"/>	Depth and location of gravel to be used
<input type="checkbox"/>	Identify season - Summer, Winter, Year-Round (Winter include rules)
<b>Intensive Use Area</b>	
<input type="checkbox"/>	County, plat, wetland, topo maps showing project boundaries, trails, and elements
<input type="checkbox"/>	Site plans showing any existing facilities along with proposed new construction including trails, riding courses, bridges, culverts, shelters, parking lots and toilets
<input type="checkbox"/>	Preliminary construction plans for new trails, major grading, buildings, bridges, etc.
<input type="checkbox"/>	Cost Estimate Worksheet – <a href="#">Form 8700-014</a>
<b>New Support</b>	
<input type="checkbox"/>	Campgrounds, shelter, etc. Please provide detailed information.
<input checked="" type="checkbox"/>	Cost Estimate Worksheet – <a href="#">Form 8700-014</a>

**Appendix B – Required for Trail/Qualified Troute Rehab, Reroute, or Development**

Trail Rehab     New Trail     Trail Reroute (Mandatory or Discretionary)

County	Township	Range	Section	¼ ¼	¼	GPS Coordinates: Lat. Long.
	N					
			<input type="radio"/> E <input type="radio"/> W			

Funded Trail Name or Number	Has this trail ever received development or rehabilitation funds in the past? <input type="radio"/> Yes <input type="radio"/> No    Year: _____ \$ _____
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Trail is located on: <input type="radio"/> Private property <input type="radio"/> Public property	Length of Easement or Landowner Use Agreement _____ years	Expiration Date
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Landowner Where Trail is Located	Telephone Number
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What other recreational trail uses are planned for this trail?

If there are other Recreational uses planned, how much of the trail development/rehab. cost will be paid for by other users?

How many miles would be affected if this project is not funded?	Will this result in closure of a trail? <input type="radio"/> Yes <input type="radio"/> No
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Is this a critical section to the overall trail system? <input type="radio"/> Yes <input type="radio"/> No	Is there a reasonable alternative?
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Does any section of this trail contain a bridge? <input type="radio"/> Yes <input type="radio"/> No	Will this bridge require rehabilitation now or in the next few years? <input type="radio"/> Yes <input type="radio"/> No	What is the weight of your puller & drag/grading equipment? _____ lbs.
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- Yes     No    Have you contacted your local [DNR Water Management Specialist \(WMS\)](#) regarding a permit?
- Yes     No    Is a permit needed? (Please provide any written correspondence from WMS.)
- Yes     No    Will this project be located near or cross any intermittent or perennial waterway? [Surface Water Data Viewer](#)
- Yes     No    Will this project be located near or cross any wetland?
- Yes     No    Will this project involve land disturbance – including clearing and grubbing – of 1 acre or more of land? (Less than 4/10th mile for a typical trail) [DNR Storm Water Contact List](#)

**Trail Project Detailed Description**

