



## Grants and Loans

Application

129039 - AGR Noxious Weed Trust Fund 2024 Local Cooperative- New

130102 - Test 24

AGR Noxious Weed Trust Fund

Status: Editing

Submitted Date:

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### Primary Contact

Name:\*

Ms.

Greta

Test

Salutation

First Name

Middle Name

Last Name

Title:

Email:

Greta.Dige@mt.gov

Alternate Email

Address:

302 N Roberts

\*

Helena

Montana

59620

City

State/Province

Postal Code/Zip

Phone:\*

406-444-7882

Phone

###-###-####

Ext.

Alternate Phone

Fax:

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### Organization Information

Name:

Carol B

Organization Type:

For-Profit - Privately Held

Organization Website:

Address:

302 N Roberts

\*

Helena

Montana

59620

City

State/Province

Postal Code/Zip

Phone:

406-444-7880

Ext.

Alternate Phone

Fax:

Email address

Alternate Email

Vendor ID

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## Project Information

*Enter the name of the person that will be giving the 15 minute presentation at the grant hearings.*

**Presenter for the Noxious Weed Trust Fund Hearings:**

**Brief Project Description:**

*350 characters max.*

*Applying For:*

**Special General Funding:**

**If Yes, then describe how the project meets the funding requirements:**

*Go to "**Help**" for more information on the funding requirements.*

*Applying For:*

**Cooperative Forestry Assistance Funding**

**If Yes, then describe how the project meets the funding requirements:**

*Go to "**Help**" for more information on the funding requirements.*

**Total Acres in the project:**

*Click on Help for information on how to use the <http://mtnhp.org/mapviewer> website to find the center Latitude and Longitude of your project.*

**Center location of the project in Decimal Degrees, WGS84 or NAD83:\***

Latitude (##.####)

Longitude (-###.####)

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## Project Overview - Local Coop

**Need for Action:**

*Explain why the project area needs assistance from the Trust Fund for noxious weed control.*

*3000 character max.*

Attach a project map with boundaries using google maps, the Montana Natural Heritage Program Map Viewer, or any other mapping resource. **Before you can add your map(s), you must complete all components of the Project Overview and click save.**

#### Project Map (w/ boundaries)

[Click here to add attachment.](#)

#### High Priority Noxious Weeds:

List the noxious weeds that are a high priority in the project and why management of these weeds is a priority for the state and/or project area within the county or counties.

2000 character max.

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## Cooperators

Cooperator Type

Cooperator's Name

Cooperator Commitment

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## Participation

Please indicate the percentage of landowners within the project boundary that are actively participating in this project (both receiving funding and not). Example: 20 landowners within in the project area and 10 are participating; enter as a decimal point 50 percent.

Landowner Participation

%

#### Description of Participation

Give a brief explanation of the percentage of participating landowners. Describe additional cooperation, working relationships, and support for this project. Example: The 10 participating landowners own 90% of project area.

2,000 character max.

Attach the project's signed cooperator interest form for all participating landowners. Please try to group letters into batches of 10 or more per file. If the file is too large or there are multiple files attach them in "Other Attachments". Here is a template of a Grant Cooperator Interest Form.

#### Signed cooperator interest form:

[Click on the above icon to attach a file.](#)

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## CWMA Background and Goals

#### Cooperative Weed Management Area (CWMA) Background

Describe the CWMA: how was it developed, how is the group organized, how are participants receiving information and education, what type of outreach was/or is being done, and which, if any, alternative funding sources were identified?

2000 character max.

#### CWMA Goals

Describe the CWMA goals, both short- and long-term, for the entire length of the project: Short-term (1-3yrs), Long-term (4-10yrs). Goals should explain how the project will create future healthy plant communities in the project area, and how the CWMA will become independent from grant funds in the future.

2000 character max.

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## Integrated Weed Management Tools

Row

Planned? Describe Use

Prevention (washing equipment, using weed seed free products, limiting disturbance, etc.):

Biocontrol Control (classic use of biocontrol agents):

Cultural Control (targeted grazing, tilling, hand pulling, burning, fertilization, revegetation, etc.):

Chemical Control (list anything not in herbicide worksheet):

Other (other methods being used):

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## Additional IWM Information

### Additional IWM Information

*If necessary, please describe any additional integrated weed management techniques being used, or expand on the selections in the table above.*

*2,000 character max.*

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## Monitoring Plan

### Annual Monitoring Plan:

*Describe your monitoring plan for tracking the activities of this project, both for the grant year and into the future. Explain how the plan will determine the effectiveness of the project's noxious weed treatments. At a minimum, local cooperative projects must have a before and after photo to submit in the final report.*

*2000 character max.*

### Mapping Methods:

*The Department of Agriculture utilizes the Early Detection and Distribution Mapping System West (EDDMapS West) to foster public noxious weed data sharing in all areas of the state. EDDMapS West is a web-based data management system for reporting, storing, mapping, and retrieving invasive species data in the Western US. Data sharing helps to monitor noxious weed movement and create sound management strategies. Noxious Weed Trust Fund grant participants are required to share mapping data from each project with EDDMapS West. For information on sharing data click the link: <https://www.eddmaps.org/tools/>.*

*Describe the methods used to map noxious weed infestations in the project area.*

*2000 character max.*

*Attach a map showing weed infestations in the project area. File types can be JPG, PDF, or multiple project maps in a Word document.*

### Upload a weed/infestation map for the project area:

*Click on the above icon to attach a file.*

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## Management Plans

### Weed Management Plans

[Click here to add attachment.](#)

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## Project Objectives

Time Period

Year

Activity Description

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## Education Events

Event Type

Planned? Describe Event

Landowner meeting(s):

Weed tours/floats:

Spray days:

News articles/Public information:

K-12 Students - weed education:

Conference/meeting presentations:

Other education events:

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## Herbicide - Private Applicator

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## Herbicide Tank Mix - Commercial Applicator

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## Totals

*If you have selected "Other-County Listed" as a weed to be treated in any of the sections above, click "Edit" (at top) and enter the name(s) of the County Listed weed(s) you are planning to treat. If more than one weed name is entered, separate each weed name with a comma.*

Other-County Listed Weeds:

Total Acres Treated:

Total 50% Share:

\$0.00

Contracted Services

\$0.00

Private Applicator

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## Revegetation - Private Applicator

Seed Mixture  
Description

Pounds per  
Acre

Seed Cost  
per Acre

Application  
Type

Acres  
Reseeded

Total  
Amount

50% Cost  
Share

0 \$0.00 \$0.00

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## Revegetation - Commercial Applicator

Seed Mixture Description	Pounds per Acre	Seed Cost per Acre	Application Type	Application Cost per Acre	Acres Reseeded	Total Amount	50% Cost Share
					0	\$0.00	\$0.00

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## Seed Labels:

Attach seed label or equivalent document.

[Click here to add attachment.](#)

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## Total Acres

Total Acres Reseeded:

Total 50% Share: \$0.00

*Contracted Services*

\$0.00

*Private Applicator*

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## Budget

Expense Category	Grant Funds	Grant Funds Narrative	Match Funds	Match Funds Narrative
Contracted Services - non-Herbicide	\$0.00		\$0.00	
Supplies & Materials - non-Herbicide	\$0.00		\$0.00	
Communications	\$0.00		\$0.00	
Travel	\$0.00		\$0.00	
Other Expenses	\$0.00		\$0.00	
<b>Totals</b>	<b>\$0.00</b>		<b>\$0.00</b>	

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## Herbicide - Private Applicator

Expense Category	Grant Funds	Match Funds
Supplies & Materials - Herbicide	\$0.00	\$0.00

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## Herbicide - Commercial Applicator

Expense Category	Grant Funds	Match Funds
Contracted Services - Herbicide	\$0.00	\$0.00

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## Revegetation - Private & Commercial Applicator

Expense Category	Grant Funds	Match Funds
Revegetation	\$0.00	\$0.00

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## Total Budget

Totals	Total Grant Funds	Total Match Funds
Total Budget	\$0.00	\$0.00

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## Additional Match Information

*If your Herbicide or Revegetation match is actually less than the 50% shown, explain why in the box below.*

*If your Herbicide or Revegetation match exceeds the 50% shown, add the additional match amount to the Other Expenses Match Funds and Match Funds Narrative in the budget section above.*

### Herbicide/Reveg Match Information:

*Provide a narrative describing planned additional and/or in-kind contributions for the project. Go to "Help" (at top) for more information.*

### Additional and/or In-Kind Contributions:

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## General Vegetation

### Environmental Summary Report Zip Folder:

*Click here to add attachment.*

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## Impact/Risk

Will any proposed project activities result in:	None	Minor	Potentially Significant	Can it be mitigated?
a. Changes to the diversity, productivity or abundance of plant species (including trees, shrubs, forbs and grasses)?				

- b. Adverse effects on any non-target plants?
- c. Any other likely impacts not addressed above?

### Mitigation

List vulnerable plant species in the area and describe mitigation strategies for any minor or potentially significant impacts. Mitigation may include creating a buffer, spot spraying instead of broadcasting, etc.:

*10,000 character max*

### Wildlife Habitat and TES Species

#### Impact/Risk (Fish & Wildlife Habitat)

Will any proposed project activities result in:	None	Minor	Potentially Significant	Can it be mitigated?
a. Alterations of critical fish or wildlife habitat?				
b. Changes in the diversity or abundance of game animals or bird species?				
c. Changes in the diversity or abundance of non-game species?				
d. Targeted grazing in areas associated with bighorn sheep or predators?				
4e. Any other likely impacts not addressed above?				

#### Impact/Risk (Threatended, Endangered, and Montana Species of Concern)

Will any proposed project activities result in:	None	Minor	Potentially Significant	Can it be mitigated?



- a. Alterations of critical habitat for TES species?
- b. Adverse effects on any TES species?
- c. Any other likely impacts not addressed above?

## Mitigation

Fish and Wildlife Habitat, Threatened, Endangered, Montana Species of Concern: Describe mitigation strategies for any minor or potentially significant impacts, as well as any additional impacts not addressed in the tables:

10,000 character max

## Soils, and Ground & Surface Water

### Soils Data Maps

Soil Data Maps:

Click on the above icon to attach a file.

Surface Water Map:

Click on the above icon to attach a file.

## Potential Risk

Active Ingredients	Runoff	Leaching	Drift	Toxic to Aquatic Life	Surface Water Restrictions
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## Active Ingredients - Other

1,000 character max.

Herbicide Label:

Click on the above icon to attach a file.

## Project Description

Does the proposed project contain:	Soil Erosion	Soil Compaction	Shallow Groundwater	Surface Water	Wells
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Project Site  
Description:

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## Mitigation

**Soils and Water:** Describe mitigation strategies (use herbicide labels) for any minor and potentially significant impacts, as well as any additional impacts not addressed in the tables:

*10,000 character max*

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## Air Quality

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### Impact/Risk

**Will any proposed  
project activities  
result in:**

**None**

**Minor**

**Potentially  
Significant**

**Can it be mitigated?**

- a. Emission of air pollutants or deterioration of ambient air quality?
- b. Creation of objectionable odors?
- c. Adverse effects on non-target plants due to drift?
- d. Any other likely impacts not addressed above?

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## Mitigation

Describe mitigation strategies for any minor or potentially significant impacts, as well as any additional impacts not addressed in the table.

*10,000 character max*

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## Historical and Archaeological Sites

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### Impacts/Risk

Will the proposed project impact any historical and/or archeological sites?

Describe mitigation strategies:

*10,000 character max*

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## Historical Site Letter

*Click on the icon to add the attachment.*

Montana Historical Society Letter

*Click here to add attachment.*

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## EA- Document Checklist

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### Document Checklist

Required Documents

Project Map (Project Overview Form)

EA Summary Report (zip or both PDF & EXCEL files)

Soil Maps (Ksat, KFactor, Wind Erodibility Group, pH,  
Depth to Water Table)

Surface Water Map (all water bodies labeled)

A 50-foot buffer (no spray zone) will be given to all  
well regardless of depth.

Letter from the Montana Historical Society or Cultural  
Records office

Photo(s) of the problem (optional)

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### Other Attachments