WASHINGTON STATE PARKS
1913

FUNDING REQUEST 2024-2025

Government • Ongoing • Trail Grooming
Report and request for continued funding

For State Parks Use Only							
Priority	2 nd , 3 rd yr						

Motorized	∐ Non-M	otorized		_
GROOMING AREA – TRAIL SYSTEM NA	GROOMING MILES (State Parks Use)	ALLOTTED		
TRUCK HAULING MILES REQUESTED	GROOMING MILES	REQUESTED	GROOMING FUNDS	S (STATE PARKS USE)
APPLICANT INFORMATION				
APPLICANT NAME		NAME OF REP	RESENTATIVE	
APPLICANT MAILING ADDRESS		TITLE		
CITY, STATE, ZIP		E-MAIL ADDRE	SS	
TELEPHONE NUMBER & EXTENSION		FAX NUMBER		
LOCAL GROOMING COUNCIL	INFORMATION			
NAME OF GROOMING COUNCIL				
VOLUNTEER GROOMING COUNCIL C	OORDINATOR	TELEPHONE	NUMBER	
MAILING ADDRESS		E-MAIL ADDR	ESS	
CITY, STATE, ZIP	WEBSITE			
IF MEETINGS ARE SCHEDULED, WHE	ERE IS THE MEETING	G HELD (location	name and address)	
IF MEETINGS ARE SCHEDULED, WHE		· 		

CURRENT CONTRACTOR INFORMATION

COMPANY NAME	NAME OF REPRESENTATIVE
MAILING ADDRESS	TITLE
CITY, STATE, ZIP	E-MAIL ADDRESS
TELEPHONE NUMBER & EXTENSION	FAX NUMBER

Detailed Season Summary

2023-2024 SEASON

1)	Based on last year's log "Trail Gro	ooming Season Totals", please	answer the following:	
	Date season started:	Date season ended:	Total hours groomir	ng:
	Total Miles traveled:	Preventative maintenance ho	urs: Repair hour	s:
	Administrative hours:	Total hours: G	as/Diesel Used (in Gallon	ns):
2)	At the end of last season, was the	re still snow? Wa	as the system still being u	sed?
3)	Estimate the number of visitor day	s and method used to track thi	s:	
4)	Please give approximate percenta	age of recreationists for each ca	ategory:	
_	% Nordic % Snowshoe _ % Other	% Skijoring %_Sled	ding % Snowmobilin	g % Snowbiking
	RAIL SYSTEM Total Trail map miles:			
2)	Actual groomed miles for last sea	son:		
	Were all trails identified in the app t groomed and the reason (wildlife			indicate the trails that were
	Were trails groomed that were no quency. Was permission to groom			ils name, number, miles and
5)	If authorized trails were not groom	ed as a result, please list those	trails. Attach map if nece	essary.
1)	QUIPMENT Provide date range(s) that groomi plemented?	ng was not conducted due to e	quipment down time. Wh	at back-up plan was
2)	Estimate the longevity of primary	machine. When will this machi	ne need replacing?	_
	JNDING Amount Spent \$ 2023-2024			
2)	If you did not spend the total appr	oved funding amount, why not?		
3)	For this project, please list volunte	eer hours and type of work (incl	ude pre-season hours):	
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Trails and Map Miles Summary for 2024-2025

1. Show actual grooming information for last winter season.

	p trucking miles for e		in road for	grooming	Trips pe	er		
Sno-Park Name or Trailhead Name	Map Miles	Trip Miles	Trips per	Week	Seaso		otal Miles	
TOTAL hauling snow gro	omer miles for areas i	listed above:		Actual 2	3-24		miles	
TOTAL personnel tran				Actual 2			mile	
				Actual 2	.0		11111	
TRAIL GROOMING MILES Based on a 1	6-week grooming seaso	<i>n, list the trail </i> Map	grooming n Trip	niles for ea Trips p		system groe Trips Per	omed. Total	
Trail Name or Road Number	6-week grooming seaso From which Sno-Par	Мар			per -			
		Мар	Trip	Trips p	per -	Trips Per	Total	
		Мар	Trip	Trips p	per -	Trips Per	Total	
		Мар	Trip	Trips p	per -	Trips Per	Total	
		Мар	Trip	Trips p	per -	Trips Per	Total	
		Мар	Trip	Trips p	per -	Trips Per	Total	
		Мар	Trip	Trips p	per -	Trips Per	Total	
	From which Sno-Par	Мар	Trip Miles	Trips p	per -	Trips Per Season	Total Miles	
	From which Sno-Par	Мар	Trip	Trips p	per -	Trips Per Season	Total	
Trail Name or Road Number	stems listed above: nd on https://parks.val errors, please pri	Map Miles	Trip Miles Actual :	Trips p Weel	groome	Trips Per Season	Total Miles	

Trails and Map Miles Plan for 2024-2025

The Government grooming formula: Government operated program (receive \$44.69 per mile groomed, \$2.38 per mile hauling snow groomer and \$0.69 per mile for personnel transport to snow groomer) Formula is based on 16 weeks X estimated miles traveled.

1. For budgeting purposes and to provide a grooming schedule – Estimate expenditures for a 16 week season.

a.	TRUCK MILES List below the round trip tr	ucking miles for	each trip to tra	il/road for groomi	ng trails.	
	Sno-Park Name or Trailhead Name	Map Miles	Trip Miles	Trips per Week	Trips per Season	Total Miles
				1		
	TOTAL hauling snow groome	er miles for areas	s listed above:	Proposed 24	-25	miles
	TOTAL personnel transpo	rt miles for areas	s listed above:	Proposed 24	-25	miles

b. TRAIL GROOMING MI	LES (16 week season)
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- List any grooming changes for next season.
- Total miles should not change. Use priority 5 Application for trail system increases.

 Grooming schedules will be required by Oc 	ctober 18, 2024.		1		1	
Trail Name or Road Number	From which Sno- Park	Map Miles	Trip Miles	Trips per Week	Trips Per Season	Total Miles
_						
					1	
TOTAL grooming miles for trail syst	ems listed above:	F	Proposed	d 24-25		miles

COST SUMMARY

FOR ONGOING TRAIL GROOMING AND HAULING TRUCK FUNDING ONLY

PROJECT TYPE Trail Grooming (& Hauling Truck)			AGENCY				TE (ELEPHONE NUMB	ER		
(A) TYPE OF COST – ITE (B) PROGRAM FUNDS B (C) NATURE OF MATCHIN (E) VALUE OF MATCHIN (E) SOURCE OF MATCH COUNTY/STATE GEN	BEING RI ING, CO IG, COS ING, CO	EQUESTE ST SHAR T SHARIN ST SHAR	ED – E ING OF IG OF	DOLLAR AM DR VOLUNTE R VOLUNTE FUNDS OR	OUNT FO TEER SER EER SERV VOLUNTE	R EACH VICES P ICES PR EER SER	COST TYP PROVIDED - OVIDED - E VICES PRO	E. · - EXPLAIN ESTIMATE O VIDED – IC	WHAT SUCH SE THE VALUE OF DENTIFY WHETI	SUCH S HER THE	ERVICES.
Type of Cost (A)	Fu Requ	oming inds uested (B)	Tru	dauling ck Funds equested (B)	Sha Volu	of Match ring Fur nteer So Provide (C)*	ervice		ue of (C) (D) *	Mato Sharir Volunt	ource of ching/Cost ng Funds or eer Service rovided (E)*
Operator Salary/Benefits	\$							\$			
Program Administration	\$							\$			
Postage/Telephone	\$							\$			
Snow Cat Maintenance/ Parts/Labor	\$							\$			
Hauling Truck Maintenance/Parts/Lab	\$		\$					\$			
Fuel, oil, grease	\$		\$					\$			
Gov't Fleet Miles	\$		\$					\$			
Storage (Rental)	\$							\$			
Trail Maintenance	\$							\$			
Signing	\$							\$			
Miscellaneous (explain)	\$							\$			
	\$							\$			
TOTALS (enter totals from Page 1)	\$;	\$				\$			
Any major snow cat breakdowns? Yes/No		Length of	f dow	n time?		Explai	n type of b	reakdown:			
What type(s) of snow g	roome	r(s) are	curre	ently being	used?						
Make		Model		, = =	Year		Season	Beg Hrs	Season En	d Hrs	Season Total Hrs
Make		Model			Year		Season	Beg Hrs	Season En	d Hrs	Season Total Hrs

AGREEMENT

In the event funding is recommended by the Snowmobile Advisory Committee for continued grooming of snowmobile trails, or by the Winter Recreation Advisory Committee for continued grooming of non-motorized trails, and approved by State Parks, either an existing agreement will be modified to reflect the approved budget, or a new annual agreement will be executed with the Applicant Agency.

with the Applicant Agency.		
The applicant certifies that, to tapplication is true and correct.	he best of his/her knowledge, the in	formation in this
Signature of Applicant	Printed Name and Title of Applicant	Date
Signature of Grooming Council Representative	Printed Name and Title of Grooming Council Rep.	 Date

List of Landowner Permission Documents

You are required to obtain written permission from all landowners for State Parks to provide winter recreational services on land which this activity will occur. The landowners must include approval of each groomed trail route and verification of the number of miles of groomed trails. Each landowner must complete the following *Winter Recreation Use Permit*. This must be submitted by **June 1, 2024.**

Land owner permission documents are attached from the following landowners:

Owners	Number of miles
1.	
2.	
3.	
4.	
5.	
6.	
7.	

I hereby certify that all appropriate landowners have been asked for their permission to use their land for winter recreation activities, and that their permission documents have been signed and they are attached with this application or will be received by June 1, 2024.

Signature of Authorized Representative
5
Printed Name and Title
Data

PLEASE NOTE:
COPY OF ORIGINAL DOCUMENTS MUST BE ATTACHED.
ALL DOCUMENTS MUST BE CURRENT.