216 - OHV Range Patrol Equipment & Supplemental Overtime - Copy

Application Details

Funding Opportunity: 25010-*SUPPLEMENTAL MOTORIZED*
Funding Opportunity Due Date: Dec 31, 2024 11:59 PM
Program Area: Supplemental Off-Highway Recreation Fund
Status: Editing
Stage: Final Application

Initial Submit Date:
Initially Submitted By:
Last Submit Date:
Last Submitted By:

Contact Information

Primary Contact Information

Name: Mr. (Salutation) SCOTT (First Name) E (Middle Name) ABERNATHY (Last Name)
Title: RANGE DEPUTY
Email*: scott.abernathy@pinal.gov
Address*: 971 JASON LOPEZ CIR

FLORENCE (City) Arizona (State/Province) 85132 (Postal Code/Zip)

Phone*: (520) 705-8821 Ext.
Phone
###-###-####
Fax: ###-###-####

Organization Information

Name*: Pinal County Sheriff's Office

Enter State Vendor Number. 1. If you do not have a vendor number please register now. 2. The last possible date to register in Procurement is 30 days after award has been approved by the Parks Board. 3. In order to be reimbursed your agency must be registered within the State Procurement system.

VENDOR NUMBER*: IV0000005573
https://app.az.gov or Help Desk @602-542-7600

Organization Type*: County Government

Remit Address is the address where Parks would send the payment to your agency.
The Remit Address must match what the AZ Procurement System has. If these addresses don't match reimbursement may be delayed weeks or longer.

ADDRESS CODE: REMITTANCE ADDRESS

Organization Website: https://www.pinalcountyaz.gov/SHERIFF/Pages/home.aspx

Address*:	PO Box 1348
	Florence Arizona 85132 City State/Province Postal Code/Zip
County:	Pinal County
Phone*:	(520) 866-5144 Ext. ###-###-####
Fax:	###-###-####
E-mail Address:	jen.hansen@pinal.gov

Supplemental OHV Applicant Information

SECTION I. GRANT APPLICATION

Please identify which Supplemental Grant you are applying for: Law Enforcement, Small Grant, Emergency/Mitigation You can only apply for one program each cycle.

Select Project Type:	Law Enforcement Project - Up to $100,000
PROJECT SPONSOR ADDRESS*:	971 N JASON LOPEZ CIRCLE
PROJECT SPONSOR NAME*:	PINAL COUNTY SHERIFF'S OFFICE
City*:	FLORENCE 85132 City Zip
WEBSITE*:	https://www.pinal.gov/772/Sheriff
PROJECT COORDINATOR*:	SCOTT ABERNATHY RANGE DEPUTY Title
E-MAIL*:	SCOTT.ABERNATHY@PINAL.GOV
PHONE*:	520-705-8821
CELL:	520-705-8821
SECONDARY PROJECT COORDINATOR*:	SEAN LENNON RANGE DEPUTY Title
E-MAIL*:	SEAN.LENNON@PINAL.GOV
PHONE*:	520-705-8583
CELL:	520-705-8583

For Small Grants or Emergency/Mitigation Repair Projects: Applicants are required to communicate project activities to the land manager's archaeologist prior to submitting the application.

Note: If you represent a non-profit group communication to the land manager's project coordinator will not suffice -the agency archaeologist must be part of the discussions.

AGENCY ARCHAEOLOGIST (IF APPLICABLE):	Title
E-MAIL:	
PHONE:	
CELL:	

Project Information

Provide nearest town/city to project location*:	FLORENCE
CONGRESSIONAL DISTRICT*:	4 Congressional/Legislative Districts

If project crosses over more than 1 congressional district enter additional district here.

ADDITIONAL CONGRESSIONAL DISTRICT:

AZ LEGISLATIVE DISTRICT*: 8

If project crosses over more than 1 legislative district enter additional district here.

ADDITIONAL LEGISLATIVE DISTRICTS ENTER HERE: PINAL

COUNTY*: Pinal County

Summarize the project proposal including scope and nature of what is to be accomplished. What will be accomplished with the funds that you will receive?

This field is limited to 1,750 characters.

Brief Description of Project*:

The newly formed Pinal County Sheriff's Office Range Unit was developed in July 2022 and has been a huge asset in educating the public and enforcing OHV uses in Pinal County riding areas. This past year Range Deputies have held events to educate the public about laws and safe OHV operations on public lands. Range Deputies have collaborated with AZGFD, BLM and USFS LE Officers on organized OHV Operations and during these operations, Range Deputies have learned in OHV problem area, supplemental overtime would help saturate these area so to educate the public on safe OHV operations and OHV enforcement.

With the help of the internet, the Range Unit have created two educational videos on the Pinal County Sheriff's Office's Youtube channel that has reached 250k views. The Range Deputy Unit is dedicated to a patrol area of approximately 1179 sq miles of Public Lands/OHVs and with the request of $100,000 will help fund supplemental overtime, which will help recruit patrol deputies to assist in large saturations patrols in OHV problem areas. Range Unit equipment will be used for the enforcement of OHV laws, capture those violators and help with prosecution.

This money will be used to purchase the following:

- Overtime Hours for Directed Patrolled OPS
- SXS A

Global Budget

Scope Item #1 Staff/Personnel Costs

Staff/Personnel Costs Breakdown	Quantity	Unit Type	Unit Cost	Total	Match/In-kind	Total Grant Request	State Date	End Date
Overtime OHV Patrols (Fully burdened rate)	1100.00	Hour(s)	$75.00	$82,500.00	$0.00	$82,500.00		
OHV Patrol Hours - FBR (MATCH)	300.00	Hour(s)	$50.00	$15,000.00	$15,000.00	$0.00		
				$97,500.00	**$15,000.00**	**$82,500.00**		

Scope Item #2 Equipment/Materials

Equipment Costs Breakdown	Quantity	Unit Type	Unit Cost	Total	Match/In-kind	Total Grant Request	State Date	End Date
SxS Accessories (Flip up windshield, storage, rifle mount/case, etc. Taxes, shipping, install inc.)	1.00	Each	$8,000.00	$8,000.00	$0.00	$8,000.00		
Enforcement Equipment (Trail Cams, etc. Taxes, Shipping, install included.)	1.00	Each	$4,500.00	$4,500.00	$0.00	$4,500.00		
LE Radio Upgrades SXS(Radio mics, mobile Starlinks, mounts, etc. Taxes, Shipping, install included.)	1.00	Each	$5,000.00	$5,000.00	$0.00	$5,000.00		
				$17,500.00	**$0.00**	**$17,500.00**		

Scope Item #3 Construction

Construction Costs Breakdown	Quantity	Unit Type	Unit Cost	Total	Match/In-Kind	Total Grant Request	State Date	End Date

No Data for Table

Scope Item #4 Land Acquisition

Parcel No.	Acreage	Estimated Date of Acquisition	Estimated Value of Land	Estimated Value of Improvements	Match In-Kind	Total Grant Request	State Date	End Date

No Data for Table

Scope #5 Engineering and Surveys

Engineering and Survey Costs Breakdown	Quantity	Unit Type	Unit Cost	Total	Match/In-kind	Total Grant Request	State Date	End Date

No Data for Table

Scope Item #6 Other

Other Costs Breakdown	Quantity	Unit Type	Unit Cost	Total	Match/In-kind	Total Grant Request	State Date	End Date

No Data for Table

Totals

Total Grant Request*: $100,000.00

Total Match/In-kind: $15,000.00

Total Cost: $115,000.00

Total Match Percentage: 13.04%

Budget Notes

Budget Notes:

Max 1000 Characters (Not required)

*CULTURAL CLEARANCE REVIEW FORM

Cultural Clearance Review Form: Section I. Attachments

1. At least two (2) legible, detailed and labeled maps:

a) Has a detailed map showing all project activities/other related project actions (e.g., staging areas, the location of riprap, new access roads, etc.)been uploaded?*: Yes

2. A copy of the cultural resources survey report(s) if a survey of the property has been conducted must be uploaded.

Survey report(s):

3. A copy of any comments regarding eligibility, findings of effect, and any conditions associated with findings made by the land managing agency/landowner and archaeologist (i.e. state, federal, county, municipal) on potential impacts of the project on archaeological and/or historical cultural resources.

A copy of any comments:

4. A copy of SHPO comments, if the survey report has already been reviewed by SHPO.

SHPO comments:

5. If applicable to the project, attach a current agency Decision Memo.

A copy of a Decision Memo:

ADDITIONAL DOCUMENTS Upload additional surveys and any other documents related to cultural resources here :

Section II.

Biggest Mistake Made: Failure to list all land managers within the project area.
Example: Applicant submits trail project and all trails exist within land owned by applicant except for a 1/4 mile section of one of the project trails. A small section crosses over a small parcel owned by ASLD (or Reclamation).
If an agreement allowing you to develop/maintain that ASLD-owned parcel exists between your agency and ASLD please attach document directly above (Additional Documents).
If no agreement is in place, or the agreement has expired, please stop working on the application and contact ASPT to discuss issue.
Projects must be shovel ready.*If you do not have permission from all land managers to conduct work, your project is not shovel ready.*

Current Land Owner/Manager(s)*:

"Education Project Only, No Ground Disturbance."

Project Location, including Township, Range and Section *:

"Education Project Only, No Ground Disturbance."

1. Total project area in acres (or total miles if trail): *0.00*

2. Does the proposed project have the potential to disturb the surface and/or subsurface of the ground?*: *Not Applicable-Education Project*

3. Project Description and Impacts:

a. Please provide a description (what, where, why, and how) of the proposed project, and specifically identify any surface and/or subsurface impacts that are expected.*:

"Education Project Only, No Ground Disturbance."

b. Provide measurements for anticipated surface (areal) and subsurface (depth) disturbances that will be part of the proposed project. *:

"Education Project Only, No Ground Disturbance."

c. Discuss both direct and indirect impact areas, such as staging areas and access routes that will be used as part of the project. *:

"Education Project Only, No Ground Disturbance."

4. Ground Surface Information

a. Describe the condition of the current ground surface within the entire project boundary area (for example, is the ground in a natural undisturbed condition, or has it been bladed, paved, graded, etc.).*:

"Education Project Only, No Ground Disturbance."

b. Estimate horizontal and vertical extent of existing disturbance*:

"Education Project Only, No Ground Disturbance."

5. Are there any known prehistoric and/or historical archaeological sites in or adjacent to the project area? *: *Not Applicable-Education Project*

If yes, please indicate where the sites are in respect to the project area. (e.g. The historic site is adjacent to the project area and is roughly 400 feet outside the project area). :

6. Has the project area been previously surveyed for cultural resources by a qualified archaeologist?*: *Not Applicable-Education Project*

If yes, please submit a copy of the survey report above in Section I. Please attach any comments on the survey report made by the land managing agency and/or SHPO:

If, no, please provide a rationale for survey not being necessary (e,g. previously disturbed).

7. Are there any buildings or structures (including mines, bridges, dams, canals, etc.) that are 50 years or older in or adjacent to the project area? *:

Not Applicable-Education Project

If YES, contact Parks staff to receive an Arizona Historic Property Inventory Form. The form will be provided in a Word version.

8. Is your project area within or adjacent to a historic district?*: *Not Applicable-Education Project*

If YES, name of district:

9. List type of equipment to be used (Foot Traffic and Hand Tools, Mechanized Equipment Only or Combination). *: *Not Applicable to Project*

If using equipment you may use this space to provide short description:

Section III

Purchase of trail maintenance equipment materials, and supplies (i.e., mowers, tractors, shovels, hammers, etc.)*: *No*

Trail Bridge rehabilitation or replacement*: *No*

Signs, kiosks, and markers replacement or installation*: *No*

Upgrading the trail and or parking lot from dirt to stone or woodchips, or stone or woodchips to a paved (asphalt, concrete, or other paved surface) or boardwalk surface;*: *No*

Fencing, guardrail, retaining wall, or berm replacement or installation*: *No*

Drainage*: *No*

Landscaping*: *No*

Compliance under the Americans with Disabilities Act (ADA) including the following:

a. Ramps;*: *No*

b. Railings;*: *No*

c. Resurfacing (to pavement or boardwalk);*: *No*

d. Parking and trail access;*: *No*

e. Signage;*: *No*

f. Portable Toilets*: *No*

Permanent installation of ancillary facilities such as port-a-potties, bike racks, lighting, benches, trash receptacles, and trail course design features (jumps, water hazards, par course equipment, picnic benches).*: *No*

Renovation and restoration of trails and trail access routes, in-kind within an established path or trail way*: *No*

Regrading of trail and/or parking areas within established trail way*: *No*

Striping and restriping*: *No*

Debris removal*: *No*

***Educational materials*:**	*No*
***Connector trails within boundaries of existing property*:**	*No*
***Repair of existing signs, kiosks markers, bridges, fences, guardrails, retaining walls, and berms*:**	*No*

If yes to any items from SECTION III please provide a short description of the work to be done.:

"Education Project Only, No Ground Disturbance."
This field is limited to 500 characters.

Signatures

Archaeologist Name:

Agency Archaeologist must provide a short statement, on agency letterhead, indicating support for the project. Archaeologist must sign the letter. ***Note: Non-profits must have the land manager's archaeologist complete this step.***

Archaeologist Approval Letter:

Application will not be processed and reviewed by Park staff, committees and Parks Board if a signed letter of approval from agency's archaeologist is not provided here.

Applicant Printed Name and Title Here:

2020 PROJECT MAPS, TRAILS, & PHOTOS

PROJECT AREA MAPS & PHOTOS

1. Please download the ***State Map*** *form & mark the location of your project area; when complete upload the State Map below.*

***State Map*:** *OHV TRAILS PINAL 1.pdf*

2. ***Provide a legible and detailed series of maps showing the project area in close detail. Please identify all project activities and any other related project actions including the location of signs, access roads, and staging areas. Please combine all maps into 1 file, convert to pdf and upload below. See instructions above on map support and recommendations using the Game & Fish map program.***

***Combined Maps*:** *OHV TRAILS PINAL 1.pdf*

3. ***Please upload at least eight (8) color photographs that show the project area, land acquisition or specific features.***

- ***Photographs should document as many of the proposed scope items as possible. Please provide a short, written description of each photo. Attach photos of project area to document condition, particularly of those areas that have experienced impacts.***
- ***If there any buildings or structures (including mines, bridges, dams, canals, etc.) that are 50 years or older in or adjacent to (within 100 yards) the project area please include photos of the building/structure and identify as such.***
- ***Submit all your pictures on one (1) PDF file, save to your computer and upload PDF here.***

Color Photographs*:** ***Pinal County Sheriff Photos 1.pdf

TRAIL INFORMATION TABLE

Trail Name/Number	*Uses Allowed*	*Length of work*	*Trail Work*	*Condition of Current Ground*	*Trail Location ?Township, Range, Section*	*Trail Map*

No Data for Table

KIOSKS, SIGNS & SUPPORT FACILITIES

Kiosk/ Facility Location Name (i.e. name of trail, trailhead, milepost, road where activity to take place)	*Township, Range, Section*	*Action*	*Condition of Current Ground*	*Will Original Footprint of disturbance change?*	*Upload Map*

No Data for Table

LAND MANAGER APPROVAL LETTER

Named Attachment	Required	Description	File Name	Type	Size	Upload Date
Completed Land Managing Agency Approval Letter						

* CERTIFICATION

Certification

Completed by*: Scott Abernathy (Name) Deputy (Title)

Date*: 11/05/2024

I acknowledge and understand that this grant program operates on a reimbursement basis. Reimbursement occurs only after an expense is paid.

Reimbursement Acknowledgment *: Yes

I acknowledge and understand that our agency will comply with all appropriate state and federal regulations, policies, guidelines, and requirements as they relate to the application.

Compliance Acknowledgement*: Yes

I acknowledge and understand that our agency has the required matching funds for each reimbursement.

Matching Funds Acknowledgement*: Yes

I acknowledge and understand that our agency is required to provide proof of liability insurance at the time of project signature.

Insurance Acknowledgement*: Yes

I hereby certify that the information in this application is true and correct and that our agency agrees to comply with all appropriate procedures, guidelines, and requirements established by Arizona State Parks & Trails.

Signature Here (Either type authorized official name here or hand-write signature and attach authorized signature below):

Scott Abernathy

Signature Page: Optional

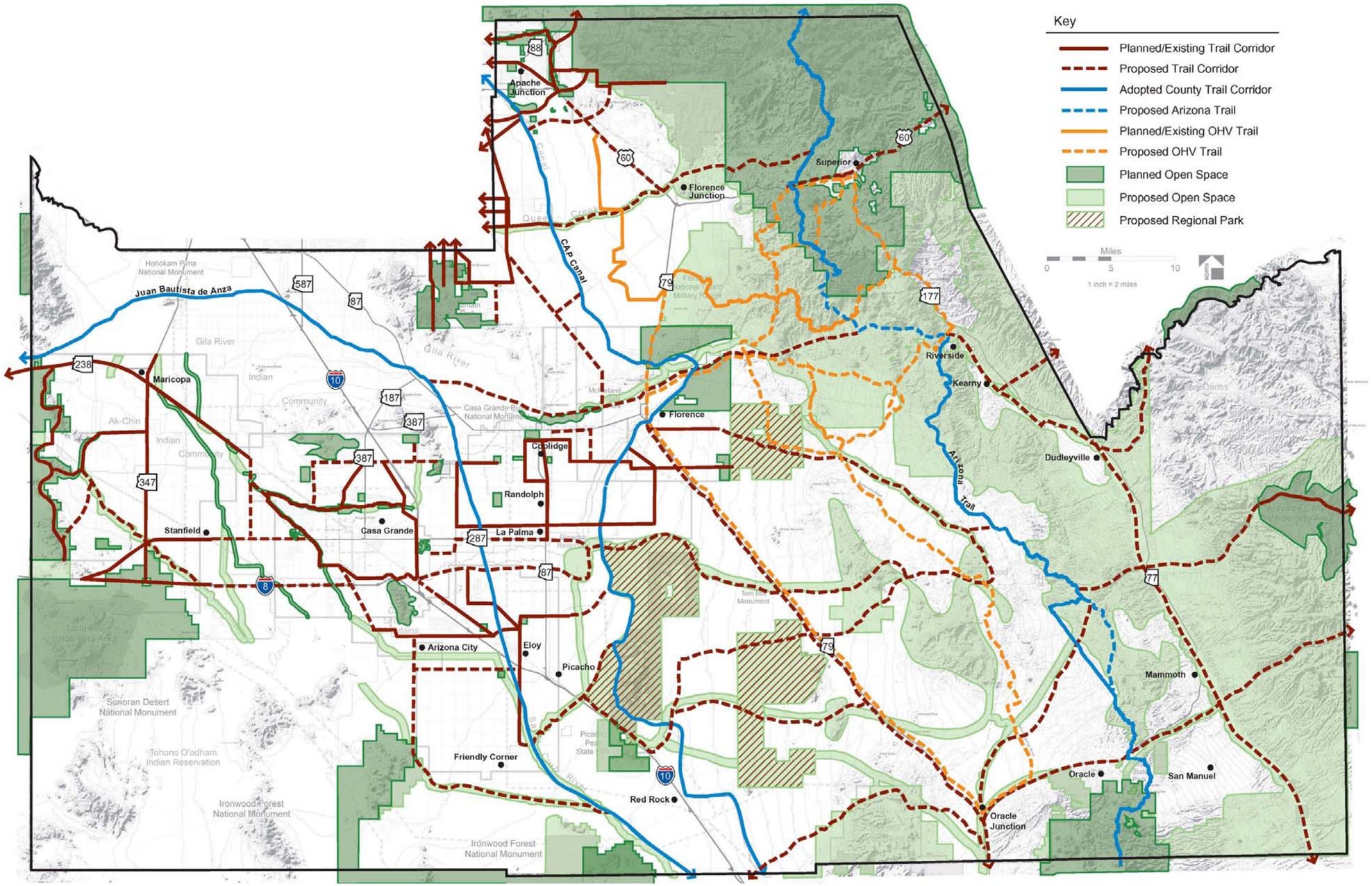


Figure 11. Preferred Conceptual Master Plan Alternative

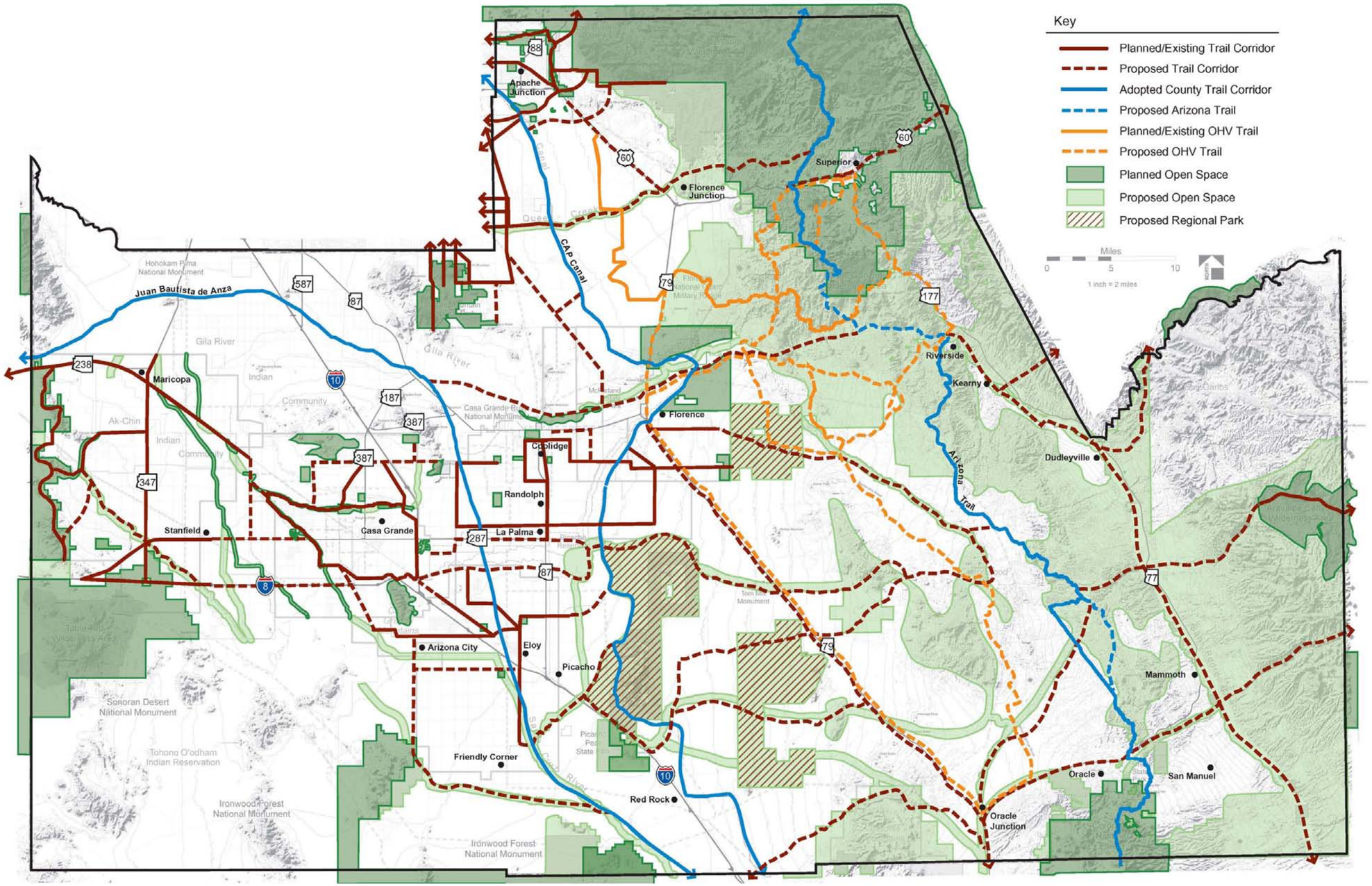


Figure 11. Preferred Conceptual Master Plan Alternative

Pinal County Sheriff's Office
Range Unit





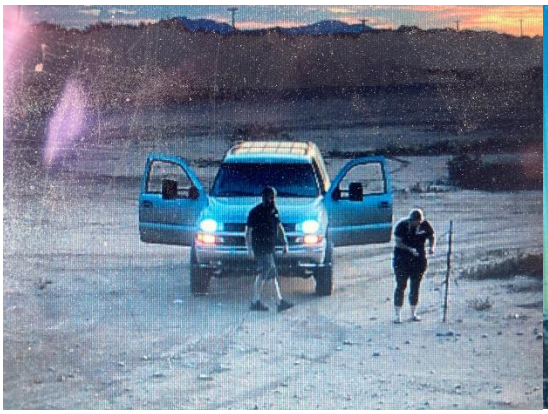


Pinal County Sheriff's Office

Trespassers / Fence Cutters

















Pinal County Sheriff's Office

Stolen Recovered / Drug Arrest









Pinal County Sheriff's Office

Resource Damage





