

Species at Risk Stewardship Program

**Application 2019/20** 

Send completed application form to:

Ministry of Environment, Conservation and Parks

Species at Risk Branch

Attention: **Allison Marinich** Telephone: 705 755-5649

E-mail: SAR.stewardship@ontario.ca

*Ministry Use Only*Application Number

Date Submitted (yyyy/mm/dd)

Please refer to the 2019/20 Species at Risk Stewardship Program (SARSP) Guidelines when filling out this application form.

Applications must be received electronically at <u>SAR.stewardship@ontario.ca</u>

You will receive a confirmation email upon submitting your application. If you do not receive an email within two full business days, please contact us at 705-755-5649.

All applicants will be notified of the proposal evaluation outcome in writing.

Incomplete applications will not be considered for funding (i.e., all sections should be completed fully to be considered).

Before submitting an application, all applicants must refer to the Legal Authorizations section of the 2019/20 SARSP Guidelines.

The final date to submit all final reporting and financial documentation will be February 29, 2020.

Freedom of Information and Protection of Privacy Notice of Collection: Personal information collected on the application form will be used for the proper administration of the SARSP.

When filling out the application please do not add additional personal information (beyond what is requested) about yourself or another individual. Personal information will only be used or disclosed in accordance with the *Freedom of Information and Protection of Privacy Act*.

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Previous Fu	ınding
	eceived funding from the Species at Risk Stewardship Fund (SARSF) or Species at Risk Research ario (SARRFO) in previous years, please select the years you were funded.
2007/08 2015/16	<ul> <li>☐ 2008/09 ☐ 2009/10 ☐ 2010/11 ☐ 2011/12 ☐ 2012/13 ☐ 2013/14 ☐ 2014/15</li> <li>☐ 2016/17 ☐ 2017/18 ☐ 2018/19 ☐ N/A</li> </ul>
-	de the tracking number(s) of the project(s) funded by SARSF or SARRFO as indicated in the sfer Payment Agreement(s):
If this new p	proposed project builds on past work funded by SARSF or SARRFO, please explain how:
<b>Project Titl</b>	e
Please provi	de a descriptive title of the proposed project. (300 characters maximum)
Proposed P	roject Timeline
Start Date (F	Ex. June 1 2019): End Date (Ex. January 30 2020):
Brief Projec	ct Summary
	provided, briefly describe your proposed project. This summary may be used on websites, news ents and communication materials regarding the SARSP. (450 character maximum)
Priorities	
	ate which priority category (ies) this proposal addresses. Refer to the 2019/20 SARSP Guidelines n each priority category.
<b>Priority Ca</b>	tegories
	1. Species Specific Priorities
	2. Filling Knowledge Gaps
	3. Stewardship Projects that address the threats and needs for Species at Risk outlined in Priority 3 of 2019/20 SARSP Guidelines.
	4. Landscape/Ecosystem Priorities

# **Applicant Information**

Name of Person, Business and/or Organization, as applicable (Please indicate legal name of business or organization. The name must correspond to the name to be used on any cheques if the application is approved. Applicant **must** be an incorporated entity or individual).

Lead Applicant								
First Name			Last Name					
Position								
Signing Authority (if differ	ent from above)							
Mailing Address Full Legal Name of Organi	zation (if applicab	ole)						
Unit No. Street No.	Street Name				PO Box			
Region/County	City/T	own		Province	Postal Code			
Telephone No. (incl. ext.)	Mobile	e Phone No.	(incl. ext.)	Fax No.				
Is the mailing address same								
<b>Business Address</b>	T							
Unit No. Street No.	Street Name				PO Box			
Region/County	City/T	/Town		Province	Postal Code			
Telephone No. (incl. ext.)	Mobil	e Phone No.	(incl. ext.)	Fax No.				
Email Address (Email addr	ess is critical for r	notification p	urposes)	Language  English	French			
Website (if applicable)								
Type of Organization (pleas	e choose one)							
Aboriginal Organization	n/Community	Industr	y Organization					
Academic Institution			vner or Farmer					
Conservation Authority			nment					
Environmental Non-Go	vernment	☐ Municipal and Local Government ☐ Non-Government Organization or Non-Profit Organization						
Organization  Individual Business		Other (please specify):						

## **Species Expert Contact**

It is recommended that applicants contact species experts to receive advice and direction during proposal development.

Please provide the names (maximum of 3) and contact information of the professionals who you contacted with respect to this project.

PLEASE NOTE: this section is not intended to identify support for your proposal.

Species Expert	Organization / Position	Email Address	Telephone No.	
Target Species				

### Target Species

Please list species at risk targeted by this project and their provincial status. Please limit your list to **only** SAR that will directly benefit (or most benefit) from your proposed activities; listing several SAR will not directly result in a higher chance of funding. Project proposals should target provincially Extirpated (EXT), Endangered (END), Threatened (THR), and/or Special Concern (SC) species that have been assessed and are listed in O. Reg. 230/08 (Species at Risk in Ontario List). For provincial status, please refer to the Species at Risk in Ontario List found at: https://www.ontario.ca/page/species-risk-ontario

Common Species Maine		Is this a Primary Target Species in the project proposal?	<b>Provincial Status</b>		
	□Y □N	□ Y □ N	☐ EXT ☐ END ☐ THR ☐ SC		
	□ Y □ N	□ Y □ N	☐ EXT ☐ END ☐ THR ☐ SC		
	□ Y □ N	□ Y □ N	☐ EXT ☐ END ☐ THR ☐ SC		
	□ Y □ N	□ Y □ N	☐ EXT ☐ END ☐ THR ☐ SC		
	□ Y □ N	□ Y □ N	☐ EXT ☐ END ☐ THR ☐ SC		
	□ Y □ N	□Y □N	☐ EXT ☐ END ☐ THR ☐ SC		
	□ Y □ N	□ Y □ N	□ EXT □ END □ THR □ SC		

Project Lo	cation					
			phic information in relation to the le. Please provide all reques			
☐ Land Te ☐ First Na ☐ Crown ☐ Municip	ntion Reserve	Fe	ivate		l Park (please speciease speciease specify):	fy):
Property Na			Shiper various reperive	1101055 01	Ttu 10	
Property Si	ze (hectares)					
Property Ci	ivic Address					
Unit No.	Street No.	Street	Name			PO Box
County			City/Town	Provinc	ce	Postal Code
UTM Coor	dinates		Easting:	Northing:		UTM Zone:
	cate whether GPS th or topographica		ns set to NAD83 or WGS84	or whether	coordinates were e	estimated off
Nearest Cit	y or Town					
Human Re	esource requirem	ents				
List the peo	ople who will be w	orking	on the project and a brief de	escription of	of their related expe	rience.
Position/Po	erson		Job Description		Job Experience	

# **Project Approach or Methods**

Approach or methods (including detailed description of sampling or monitoring techniques or protocols) (25 line maximum):

# **Measuring Success**

How will you measure the success of your project? Describe any performance measures, evaluations or follow-up monitoring that will be used to assess the effectiveness of the proposed activities. (2000 character maximum):

#### **Workplan 2019-2020**

Please identify and describe each activity, detailing key actions, associated milestones for each activity, the timing required to complete the project by **February 28, 2020** and the estimated percentage amount of the total budget request from the SARSP.

- For detailed information pertaining to each of the eligible activity categories, please refer to the 2019/20 SARSP Guidelines.
- If funded, content listed in 'Milestone of Activity' column will be used in the Transfer Payment Agreement and referenced during interim and final reporting periods to ensure the milestones have been accomplished so that payment can be issued.

Using the following Activity Categories; please describe how you will accomplish your proposed project in the table below:

1. Direct Threat Mitigation

- 4. Habitat Management/Restoration
- 6. Outreach and Education

2. Research

- 5. Survey, Inventory, and/or Monitoring
- 7. Other

3	Local	ľ	Traditional	l E	co	logica	ıl b	<b>Snow</b>	led	ge

Describe Specific Activity in Detail	Milestone of Activity	Activity Category	Proposed Start Date dd-mm-yy	Proposed End Date dd-mm-yy	Estimated % of total SARSP budget request
Example: Survey of Blanding's Turtle	Example: An interim report which may	Example:	Example:	Example:	Example:
population to be conducted in location X using mark and recapture techniques.	include a summary of preliminary results, survey techniques used or actions taken.	2	18-06-19	18-08-19	25%

Describe Specific Activity in Detail	Milestone of Activity	Activity Category	Proposed Start Date dd-mm-yy	Proposed End Date dd-mm-yy	Estimated % of total SARSP budget request

Describe Specific Activity in Detail	Milestone of Activity	Activity Category	Proposed Start Date dd-mm-yy	Proposed End Date dd-mm-yy	Estimated % of total SARSP budget request

# **Threats and Knowledge Gaps**

Explain in the table below how your project activities (from your work plan) address specific threats and/or knowledge gaps identified in Government Response Statements (GRS), Recovery Strategies (RS), Management Plans or Status Reports.

Species	Threats and Knowledge Gaps Describe the specific threat(s) or knowledge gap(s) stated within a Government Response Statement, Recovery Strategy, or Status Report that will be addressed by the project.	Endorsed Actions/Activities What actions/activities do the Government Response Statement Recovery Strategy, or Status Report endorse to address the threat(s) or knowledge gap(s)? (include only the actions that will be addressed by this project).	Proposed Activities How will your proposed activities address the endorsed threat(s) or knowledge gap(s)? Describe the proposed activities in relation to your work plan).
Example: Deerberry	Example: Erosion and Soil Slumping	Example: Government Response Statement: 5. Investigate techniques used successfully in the past to reduce erosion and implement actions to mitigate this threat where possible.	Example: Conduct assessment of various techniques and use technique 'x' in target location to reduce further slumping.

Species	Threats and Knowledge Gaps	<b>Endorsed Actions/Activities</b>	Proposed Activities

#### **Budget**

Complete the following budget breakdown specifying the costs associated with your project. Please remember to relate these costs to the activities outlined in the Workplan table above. Include matching funds (cash or in-kind), and indicate how much funding is sought from the SARSP.

Consult the 2019/20 SARSP Guidelines for eligible costs and matching funds, and the Agreement and Payment section for details on reporting requirements for payment.

### **Eligible Expense Categories:**

- a) **Human Resources:** includes wages and mandatory benefits (as required by law) for human resources that will be directly involved in the implementation of the project. Project management costs are excluded from Human Resources. Please provide the position title, rate of pay, length of contract, total and source for each position. For example,
  - Project Biologist \$26/hour x 24 week= \$24,960 (in-kind)
  - Field Tech \$18/hour x 16 weeks= \$11,520 (SARSP)
  - Outreach assistant \$18/hour x 8 weeks= \$5,760 (\$2,880 from SARSP, \$2,880 match)
  - Licensed pesticide contractor, \$15000/week x 2 weeks= \$3,000 (SARSP)
- b) Administrative includes office supplies, phone, computer, fax and photocopy costs, as well as any project management expenses (e.g. project management, planning and logistical positions, and accounting). Administration costs cannot exceed 10% of the total funding requested.
- c) **Equipment:** includes the lease and/or rental of equipment required for the completion of the project. In some cases, equipment purchase may be considered with proper justification.
- d) Materials and Supplies: includes materials other than equipment (e.g., trees for planting).
- e) Vehicle Rental, Travel and Fieldwork: includes accommodations, meals, vehicle leases, operational costs (e.g., fuel, insurance) or mileage. Mileage rate cannot exceed \$0.41/km. Costs must be reasonable for activities proposed. Following the formal review and approval of applications, proponents may be asked to ensure that costs associated with rentals and leases over \$5,000 have gone through a competitive process (e.g., sought out quotes for rentals and leases).
- f) **Publication Design, Printing and Distribution:** includes print material, signs, mailing, French translation costs. Describe what is being produced, how many units and at what cost per unit.

BUDGET REQUEST -	YEAR 2019-2020		Kisk Stewardsii	ip Funa 2019/20
Project Expenses (Detailed descriptions for each expense are required)	Amount requested from SARSP	Matching Funds: In-kind amount	Matching Funds: Cash amount	Total Cost (= amount requested + matching funds columns)
Human Resources expenses (please provide the position title, rate of pay and length of contract for each employee):				
Administrative expenses (describe and list expenses):				

BUDGET REQUEST – YEAR 2019-2020					
Project Expenses (Detailed descriptions for each expense are required)	Amount requested from SARSP	Matching Funds: In-kind amount	Matching Funds: Cash amount	Total Cost (= amount requested + matching funds columns)	
Equipment and its lease or rental expenses (describe and list expenses):					
Materials and supplies and associated expenses (describe and list expenses):					

BUDGET REQUEST – YEAR 2019-2020					
Project Expenses  (Detailed descriptions for each expense are required)	Amount requested from SARSP	Matching Funds: In-kind amount	Matching Funds: Cash amount	Total Cost (= amount requested + matching funds columns)	
Vehicle rental, travel and fieldwork expenses (describe travel expenses and identify how many people will be traveling):					
Design, printing and distribution expenses (describe what is being produced, how many units and the cost per unit):					
	Total funding requested from SARSP	*Total in-kind matching funds	*Total cash matching funds	Total project cost	
TOTAL:  (Please ensure correct calculations)  *Total Amount of in kind and each Matching Funds in Pudget table show	\$	\$	\$	\$	

<sup>\*</sup>Total Amount of in-kind and cash Matching Funds in Budget table should correspond to the total Partnership Support in table below.

# Partnership Support

Please list the names of all partnering individuals or organizations that will be in this project. Partners may be contacted to confirm their support and/or participation in this project.

Note: if any in-kind or cash amounts are identified in the budget request tables above, they should also be identified in the following table.

Partner	Contact Information (primary contact name, e-mail, phone)	Description of Partner Involvement	Cash Amount \$	In-kind Amount \$	Confirmed? (yes/no)
					□Y □N
					☐ Y ☐ N
					☐ Y ☐ N
					Y N
					☐Y ☐N
			TOTAL		
		(Please ensure cor			

\*Total Amount in Partnership Support should correspond to Total Matching Funds in Budget table above.

#### Agreements and Signatures

Signing Authority Signature						
Charitable, non-profit (other than a university) or for-profit organization applications must be accompanied by a signature of an authorized officer of that organization.						
☐ I hereby declare that the information being included in this SARSP application is complete and accurate, and I am aware that providing incomplete, false or misleading information may make this application ineligible or result in it not being considered by the Ministry.						
☐ I hereby agree to all conditions and requirements, including those related to eligibility and acquiring appropriate authorizations outlined in the 2019/20 SARSP Guidelines.						
Please check this box if you are interested in future communication opportunities with the Ministry. Please note, we will follow-up on this at an appropriate future time.						
Name (if different from above)	Title/Position	Date (yyyy/mm/dd)				
Legal Authorizations						
I hereby declare that the proposed activity (ies) are not being undertaken to fulfill legal requirements/conditions identified in an ESA permit, authorization or regulation.						
Do any proposed project activities require a Fish and Wildlife Conservation Act authorization?						
☐ Yes ☐ No						
Do any proposed project activities involve a species listed as Extirpated, Endangered, Threatened under the ESA?						
☐ Yes ☐ No						
If yes, please indicate which of the following applies:						
A notice of activity under ESA regulation 242 activity;	/08 (S23.17) will be submitted before und	ertaking the funded				
An ESA 17(2)(b) permit is required and will be obtained before undertaking the funded activity; or						

#### IMPORTANT INFORMATION BEFORE SUBMITTING AN APPLICATION

The proposed activity does not require an authorization under the ESA

As an applicant to the SARSP, it is your responsibility to obtain any necessary authorizations required in order to begin and/or complete the project. For example; an Ontario Parks authorization, an authorization under the ESA and/or a license under the *Fish and Wildlife Conservation Act* may be required for your project.

If your project involves a species listed as Extirpated, Endangered or Threatened under the ESA, please contact <u>SAROntario@ontario.ca</u> to determine whether an authorization under the ESA may be required.

Please refer to the Legal Authorizations Section in the 2019/20 SARSP Guidelines for further details on this and other MECP and federal authorizations that may be required.

Failure to apply for all relevant authorizations will jeopardize your project.