



### DEPARTMENT OF PUBLIC WORKS

Michael G. Lewis Director

Michael G. Rushmer Superintendent Forestry Division

414/302-8811

414/302-8889 (Fax) Municipal Yards

6300 West McGeoch Avenue West Allis, Wisconsin 53219

www.ci.west-allis.wi.us

Candice Sovinski Wis. Department of Natural Resources Urban Forestry Grant Coordinator FR/4 101 S. Webster St., P.O. Box 7921 Madison, WI 53707-7921

Dear Ms. Sovinski:

Enclosed for your review and approval is the 2011 Urban Forestry Grant "West Allis – Emerald Ash Borer Readiness Plan" submitted by the City of West Allis. I used the 2008 Grant Form because we were unable to convert the PDF to a Word document. I used page 10 from the 2011 Grant Form because of the change in the signature format.

If you have any questions please contact me at 302-8826. Thank you.

Sincerely,

Michael G. Rushmer Superintendent of Forestry & Grounds

Enc.

mgr/mch

October 1, 2010

State of Wisconsin Department of Natural Resources

Form 8700-298 (R 7/07)

**Notice:** You are required to provide information requested on this form to apply for an Urban Forestry Grant, under U.S. Public Law 95-313, s. 6(b), Wis. Stats. 23.097, Wis Admin. Code, NR47. The Department will be unable to process your application unless you provide complete information as requested. Information will be used to determine grant award lists, provide statistical information and potentially to use as an example for other grant applicants. Personally identifiable information on this form is not intended to be used for other purposes. Information will also be made available to requesters as required under Wisconsin's Open Records Law [ss. 19.31-19.39, Wis. Stats.].

#### COMPLETE ALL QUESTIONS.

Grant is for calendar year 2011

Project Title: City of West Allis Forestry Division - Emerald Ash Borer Readiness Plan

- 1. Applicant Name(s): City of West Allis, Public Works Department, Forestry & Public Grounds Division
- 3. **Project Description: IMPORTANT! Describe the project and all individual components, using additional sheets if necessary.** The project must be related to urban forestry as defined on page 17 of the application guidelines. (See page 5 of guidelines, "Eligible Projects" for examples of components.)

For each project component check and describe: what will be developed, produced, performed and/or implemented?

Emerald Ash Borer Activities (inventory, plan, education, training)

Develop a readiness plan to guide the City in its preparation and response to the arrival of EAB.

1. Purpose and Scope of Plan:

The purpose of the plan is to reduce the impact of EAB on the City's urban forest, its economy, the environment and quality of life. The plan encompasses the City of West Allis.

- 2. Public ash tree assessment:
  - Identify and map the following:
  - High value ash trees for possible treatment

Size and species of ash trees to determine types of possible pesticide treatments Estimated dollar value of ash resource

- Staff training continue training for: EAB detection and control strategies Use of the soft and hardware in house by the City's Information Technology Department.
- 4. Management:

Prioritize treatments and preemptive removals based on condition and value of ash trees Develop contract specifications for removals

Develop mutual aid agreements with adjacent communities to share specialized equipment Locate areas for wood waste, utilization and storage

Determine if tree ordinances are applicable to EAB

Set interval to revise and update plan

Determine and map replacement tree species

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The plan will provide a brief history and biology of EAB. Other sources of information on EAB will be provided.

6. Communications:

Utilize the City's newsletter, website and events to continue to provide information about EAB in general

Promote the EAB readiness plan developed through the grant, including the Wisconsin DNR funding statement on all documents and maps

- 7. Definitions of technical terms
- 8. Summary of ash tree assessment, costs and recommendations

The following components are included above.

Management

Plan Development (management, strategic, storm response, pest response, planting)

Inventory

Ordinances

Public Awareness/Volunteer Development

Staff Training/Education

Operations (planting, pruning, removals, fertilization, storm damage mitigation, pest control, etc.)

Other

<u>Note:</u> Your Cost Estimate Worksheet on pages 5–6 of this application must include costs for all project components described above. Project components described but not included on the Cost Estimate Worksheet will be excluded from the evaluation and rating of your grant application.

4.	Applicant Authorized Representative
	$\boxtimes$ Mr. $\square$ Ms.
	Name: Michael Lewis
	Title: West Allis City Engineer/Director of Public Works
	Address: 6300 W. Mc Geoch Ave.
	City: West Allis State: WI Zip: 53219
	County: Milwaukee
	Phone: <u>414-302-8372</u> Fax: <u>414-302-8366</u>
	E-mail: mlewis@ci.west-allis.wi.us
5.	Project Manager (if different from Authorized Representative)
	$\boxtimes$ Mr. $\square$ Ms.
	Name: Michael Rushmer
	Title: Superintendent of Forestry & Public Grounds
	Address: 6300 W. Mc Geoch Ave.
	City: West Allis State: WI Zip: 53219
	County: Milwaukee
	Phone: <u>414-302-8826</u> Fax: <u>414-302-8889</u>
	E-mail: mrushmer@ci.west-allis.wi.us
6.	Total Project Cost: \$ 24,378
	(Fill in amount from box A on the Cost Estimate Worksheet, page 7 of the application)
7.	<b>Total Grant Request: \$</b> 12,189 (Fill in amount from box E on the Cost Estimate Worksheet, page 7 of the application)
	FOR THE FOLLOWING QUESTIONS, PLEASE USE ADDITIONAL SHEETS AS NEEDED.
8.	Is there any financial assistance from any other state or federal source(s) that have been, are, or may be involved in this project?

🗌 Yes 🛛 No

If yes, list all other state or federal financial assistance, the source(s) of each; and give the dollar amount of each.

9.	What is your organization's current level of urban forest program development and planning in the following areas? Please check and describe briefly.
	urban forestry planning ( strategic plan management plan response planting other)
	Please list title(s) and date adopted:
	Tree inventory (type/software Relational-database/Microsoft Access.
	tree board/committee (date established)
	Volunteer organizations/citizens groups who support trees (name Mayor's Beautification Committeee )
	<pre>     tree ordinances/policies (date adopted/code/chapter/internet link )www.ci.west-allis.wi.us municipal code     (on left) </pre>
	Section 6.03(10)(a), Removal of Diseased and Infected Trees; Section 11.03(14), Pruning of Trees over Streets; Section 11.07(7)(a), Pruning of Trees over Walks
	⊠ professional urban forestry staff* (□ municipal staff □ contracted forester)
	name and title Michael G. Rushmer - Superintendent of Forestry
	Certified Arborists: Anthony Blend, Steven Wasielewski, Patrick Pfohl & Richard Rognsvoog
	*professional is defined as having a degree, arborist certification and/or training
	⊘ other activities
	educational programs (list
	🖂 Arbor Day
	$\boxtimes$ staff training
	⊘ other (list
	Arbor Day - April 30, 2010 - Wilson School
	Staff Training - Forestry staff attended DNR/WAA Winter, Summer & Fall Conferences; entire staff attended DNR workshop on Tree Risk Assessment and EAB
	)
10.	Describe each of the following public awareness aspects of this project:
	<ul> <li>a. Citizen involvement in project planning, development and/or implementation None</li> </ul>

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- b. Public education (classes, tree walks, seminars, etc.)
   Display of actual EAB, beetle, larva and wood with exit holes at City function "Taste of West Allis"
- c. Public information (news articles, videos, brochure or flyer development/purchase, etc.)
   Continue to provide information on EAB
   Provide information on the City's approach to EAB once the readiness plan is completed

<u>Note:</u> Your Cost Estimate Worksheet on pages 5–6 of this application must include costs for any and all public awareness aspects that you've described above. Public awareness aspects described but not included on the Cost Estimate Worksheet will be excluded from the evaluation and rating of your grant application.

11. Will partners such as civic/business groups, other communities, neighborhoods, utilities, schools, developers, etc. be involved in *this* project? (funding, promoting, planning, implementation)

 $\boxtimes$  Yes  $\square$  No

If yes, please answer the following:

- a. What partners will be involved in this grant project? Please list.
   Develop mutual aid agreements with adjacent communities
- b. Specify whether each is a *new* or *existing* partnership. New
- c. *What* specific service, product, or role will each partner contribute to the project? Use of specialized equipment
- 12. How will you evaluate the success of this project.

This readiness plan should be an updateable working document. We should be able to identify values of ash trees and costs of the impact of EAB. These assessments should assist in formulating recommendations to deal with the impact of EAB.

13. Is your community, or the community where your project will be carried out, a Tree City USA? (Note: Tree City USA and Growth Awards are defined in Appendix B, page 17 of the grant application guidelines.)

Yes No

If yes, specify which Growth Award category and eligible activities this project will help satisfy, if any. (List activity codes.)

C4 -Tree inventory and Analysis

14. List any specific urban tree care or tree management training received or conferences attended by your organization's staff or volunteers during the past year. Include any training taken in preparation for undertaking this project.

Date	Course Title	Training Description	Provider	Attendees
5/2010	Pesticide Certification	Pesticide Use	UW - Ext.	Tony Blend, Pat Pfohl,

Steve Dobson, Steve Wasielewski

15. Describe any additional significant aspects or outstanding features of this project that you would like us to know about.

The plan should improve the public and local government awareness of the value of the Urban Forest. Once the potential impact of EAB is realized, stronger long term support for an Urban Forest Program may occur.

GRANT CALCULATION	Estimated Cost	Total Donation Value
A. Add the Subtotals in Box 3 for ALL PROJECT COMPONENTS. This is your TOTAL Project Cost. Enter this amount in Question 6.	24 ,378	
B. Add the estimated donation value from Box 2 for ALL PROJECT COMPONENTS:		0
C. Subtract Line B from Line A:	2	24,378
D. Multiply the amount on Line A x 50% (Don't enter more than \$25,000):		12,189
E. Enter the smaller of Line C or Line D above. This is your GRANT REQUEST. (Must be between \$1,000 and \$25,000.) Enter this amount in Question 7 in the grant application.		12,189
F. Subtract the amount on Line E from the amount on Line A. This is your MATCH.		12,189

#### CALCULATIONS

#### 17. Resolution for Urban Forestry Grant Program

Provide a signed resolution that has been adopted by the applicant's governing body which gives the name of the applicant, authorizes funding for the project, designates an authorized representative (position title) to act on behalf of the applicant and states that the applicant will provide documentation of work done and follow all relevant state and federal rules. A sample resolution is provided on page 29 of the grant application guidelines.

18. I hereby certify to the best of my knowledge, the information contained in this application and application attachments are correct and true. I understand and agree that any grant monies awarded as a result of this application shall be used in accordance with Chapter 23.097, Wis. Stats., and Chapter 47, Wis. Adm. Code.

SIGNATURE

\* Resolution shall be intrucheded to the Council on October 19th & actel upon that night.

PROJECT COMPONENT:	Estimated Cost	Donation Valu
Labor & Services (specify project tasks on lines below, as appropriate)		
Applicant's staff: Michael Rushmer Supt 240 hrs @ \$35.57 = \$8,537	8,537	
Fringe benefits: 48.45% (on all employees)	7,412	
Clerk II 40 hrs @ \$19.28 = \$771 Arborist 160hrs @ \$22.51 = \$3,602	4,373	
GIS Staff 80 hr @\$16.59 = \$1,327 GIS Coordinator 32 hr @ \$33.18 = \$ 1062	2,389	
Consultants/Contractors/other hired project labor:		
Volunteers/donated services:		
Laborer (\$6.50/hr):		
Other project workers (\$15.40/hr):		
	<b>新加速和新加速</b>	
<b>Equipment</b> (specify type of equipment and DOT class code on lines below, as appropriate) See page 13 of application guidelines for a list of commonly used equipment codes.		
Purchased:		
Rented or contracted:		
Provided by applicant: Pick-up DOT Class 101 120 hrs @ \$13.68 / hr = \$ 1,642	1,642	
Donated by third parties:		
Supplies (specify items on lines below, as appropriate)		
Purchased: Paper, binder, dividers	25	
Provided by applicant:		
Donated by third parties:		
Other (specify):		
Estimated Cost/Donation Value for THIS component:	1. 24,378	2.
SUBTOTAL — Add Box 1 and Box 2:	3. 24,378 -	

## **COMPONENT PAGE**

Two copies of this component sheet are included here. Please copy this sheet as necessary for additional project components.

PROJECT COMPONENT:	Estimated Cost	Donation Value
Labor & Services (specify project tasks on lines below, as appropriate)		
Applicant's staff:		
Fringe benefits:		
Consultants/Contractors/other hired project labor:		
Volunteers/donated services:		
Laborer (\$6.50/hr):		
Other project workers (\$15.40/hr):		
<b>Equipment</b> (specify type of equipment and DOT class code on lines below, as appropriate) See page 13 of application guidelines for a list of commonly used equipment codes.		
Purchased:		
Rented or contracted:		
Provided by applicant:		
Donated by third parties:		
Supplies (specify items on lines below, as appropriate)		
Purchased:		
Provided by applicant:		
Flovided by applicant.		
Donated by third parties:		
Donated by third parties.		
Other (specify):		
Estimated Cost/Donation Value for THIS component:	1.	2.
SUBTOTAL — Add Box 1 and Box 2:	3.	

### **COMPONENT PAGE**

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GRANT CALCULATION	Estimated Cost	Total Donation Value
A. Add the Subtotals in Box 3 for ALL PROJECT COMPONENTS. This is your TOTAL Project Cost. Enter this amount in Question 6.	24,378	
B. Add the estimated donation value from Box 2 for ALL PROJECT COMPONENTS:		0
C. Subtract Line B from Line A:		24,378
D. Multiply the amount on Line A x 50% (Don't enter more than \$25,000):		12,189
<ul><li>E. Enter the smaller of Line C or Line D above. This is your GRANT REQUEST. (Must be between \$1,000 and \$25,000.) Enter this amount in Question 7 in the grant application.</li></ul>		12,189
F. Subtract the amount on Line E from the amount on Line A. This is your MATCH.		12,189

### CALCULATIONS

## 17. Resolution for Urban Forestry Grant Program

Provide a signed resolution that has been adopted by the applicant's governing body which gives the name of the applicant, authorizes funding for the project, designates an authorized representative (position title) to act on behalf of the applicant and states that the applicant will provide documentation of work done and follow all relevant state and federal rules. A sample resolution is provided on page 31 of the grant application guidelines.

NOTE: Joint applicants—It is recommended that only one applicant act as fiscal agent. A resolution must be submitted by each applicant's governing bodies. Information above the dashed line in the sample resolution should be identical for all applicant's resolutions with the applicant acting as fiscal agent listed first. Information below the dashed line should be specific to the individual applicants.

18. As authorized representative of said applicant, I hereby agree to implement this project according to this application and attached cost estimate and to abide by provisions of the Wisconsin Administrative Code NR 47 for this program. To the best of my knowledge all information provided is true and correct.

SIGNATURE

DATE

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