

Skip Canfield

From: Jennifer Scanland
Sent: Tuesday, March 10, 2015 9:43 AM
To: Skip Canfield
Subject: Clearinghouse
Attachments: SF424 2014 exp fillable1.pdf; project narrative.docx

Hello Skip.

State parks is applying for a grant from the National Park service to replace three restrooms at Sand Harbor. I have attached the scope of work narrative and there is a photo with it. Also attached in the draft 424. Can you please submit this through the NV State Clearinghouse for comments to the project? Thanks so much!

Your message is ready to be sent with the following file or link attachments:

SF424 2014 exp fillable1
project narrative

Note: To protect against computer viruses, e-mail programs may prevent sending or receiving certain types of file attachments. Check your e-mail security settings to determine how attachments are handled.

The scope of work will include:

- Removal of the existing restroom buildings and directly related site improvements.
- Replacement of Comfort Station # 3, 7 & 8 and directly related site improvements.
- Installation of a new entrance lane and two new fee kiosks.

We are fast tracking design through construction on this project in hopes that we can have demo done and ground work completed before October 15th (TRPA required stop for major grade work. This would enable us to work through the winter framing and constructing the buildings, and hopefully complete them in the spring to early summer of 2016. Match for this project is State Funds.

Below is an aerial that shows the improvements we intend to do. The red line at the entrance is the new fee lane at the park entrance. The two red rectangles at the top of the image are comfort stations 8 & 7 (top down). The red rectangle at the bottom is Comfort Station #3.



APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY

1.a. Type of Submission:

- Application
 Plan
 Funding Request
 Other

Other (specify):

1.b. Frequency:

- Annual
 Quarterly
 Other

Other (specify):

1.d. Version:

- Initial Resubmission Revision Update

2. Date Received:**STATE USE ONLY:****3. Applicant Identifier:**

32

5. Date Received by State:**4a. Federal Entity Identifier:****6. State Application Identifier:****4b. Federal Award Identifier:****1.c. Consolidated Application/Plan/Funding Request?**

Yes No

7. APPLICANT INFORMATION:**a. Legal Name:**

Nevada Division of State Parks

b. Employer/Taxpayer Identification Number (EIN/TIN):

886000022

c. Organizational DUNS:

093814064

d. Address:**Street1:**

901 S. Stewart St. STE 5005

Street2:**City:**

Carson City

County / Parish:**State:**

Nevada

Province:**Country:****Zip / Postal Code:**

89701-5248

e. Organizational Unit:**Department Name:****Division Name:****f. Name and contact information of person to be contacted on matters involving this submission:****Prefix:****First Name:**

Jennifer

Middle Name:**Last Name:**

Scanland

Suffix:

Title: Alternate State Liaison Officer LWCF

Organizational Affiliation:**Telephone Number:**

7756842787

Fax Number:**Email:**

jscanland@parks.nv.gov

APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY

8a. TYPE OF APPLICANT:

State

Other (specify):

b. Additional Description:

9. Name of Federal Agency:

National Park Service

10. Catalog of Federal Domestic Assistance Number:

15-916

CFDA Title:

Land and Water Conservation Fund

11. Descriptive Title of Applicant's Project:

Sand Harbor Restroom Replacement

12. Areas Affected by Funding:

13. CONGRESSIONAL DISTRICTS OF:

a. Applicant:

2

b. Program/Project:

2

Attach an additional list of Program/Project Congressional Districts if needed.

Add Attachment

Delete Attachment

View Attachment

14. FUNDING PERIOD:

a. Start Date:

b. End Date:

15. ESTIMATED FUNDING:

a. Federal (\$):

440,000

b. Match (\$):

440,000

16. IS SUBMISSION SUBJECT TO REVIEW BY STATE UNDER EXECUTIVE ORDER 12372 PROCESS?

- a. This submission was made available to the State under the Executive Order 12372 Process for review on:
- b. Program is subject to E.O. 12372 but has not been selected by State for review.
- c. Program is not covered by E.O. 12372.

APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY

17. Is The Applicant Delinquent On Any Federal Debt?

Yes No

18. By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

** I Agree

** This list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix:

First Name:

Jennifer

Middle Name:

Last Name:

Scanland

Suffix:

Title:

Alternate State Liaison Officer

Organizational Affiliation:

Telephone Number:

7756842787

Fax Number:

Email:

jscanland@parks.nv.gov

Signature of Authorized Representative:

Date Signed:

Attach supporting documents as specified in agency instructions.

Add Attachments

Delete Attachments

View Attachments