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**RESOLUTION ON ACQUISITION OR DEVELOPMENT FOR OUTDOOR RECREATION**

County: \_\_\_\_\_

WHEREAS, the \_\_\_\_\_ (City/County) is interested in acquiring lands or developing outdoor recreational facilities on the following described project for the enjoyment of the citizenry of

Site Name: \_\_\_\_\_ and the State Iowa.

Site Address: \_\_\_\_\_

Project Title: \_\_\_\_\_

Total Estimated Cost: \$ \_\_\_\_\_

Brief Description of Project:

AND, Land and Water Conservation Fund financial assistance is being sought for the acquisition or development of said outdoor recreational facilities,

NOW THEREFORE, be it resolved by the \_\_\_\_\_ that the project described above be authorized,

AND, be it further resolved that said \_\_\_\_\_ make application to the Iowa Department of Natural Resources to seek Land and Water Conservation Fund financial assistance from the National Park Service in the amount of \_\_\_\_\_ % of the actual cost of the project,

AND, be it further resolved that said \_\_\_\_\_ certifies to the following:

1. That it will accept the terms and conditions set forth in the NPS Grants-in-Aid Manual and which will be a part of the Project Agreement for any grant awarded under the attached proposal.
2. That it is in complete accord with the attached proposal and that it will carry out the acquisition and/or development in the manner described in the proposal and any plans and specifications attached thereto unless prior approval for any change has been received from the Iowa Department of Natural Resources.
3. That it has the ability and intention to finance its share of the cost of the project and that the project will be operated and maintained at the expense of said \_\_\_\_\_ for public outdoor recreational use.
4. That no financial assistance has been given or promised under any other federal program or activity with regard to the proposed project.
5. That it will not discriminate against any person on the basis of race, color, or natural origin in the use of any property or failure acquired or developed pursuant to this proposal, and shall comply with the terms and intent of the Title VI of the Civil Rights Act of 1964, P.L. 88-352 (1964), and of the regulations promulgated pursuant to such Act by the Secretary of the Interior and contained in 43 CFR 17.
6. That it will maintain adequate financial records on the proposed project to substantiate claims for cost-sharing.

THIS IS TO CERTIFY that the foregoing is a true and correct copy of a resolution duly and legally adopted by the

\_\_\_\_\_ at a legal meeting held on this \_\_\_\_\_ Day

of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(title)

\_\_\_\_\_  
(title)

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## MINORITY IMPACT STATEMENT

Pursuant to 2008 Iowa Acts, HF 2393, Iowa Code Section 8.11, all grant applications submitted to the State of Iowa which are due beginning January 1, 2009 shall include a Minority Impact Statement. This is the state's mechanism to require grant applicants to consider the potential impact of the grant project's proposed programs or policies on minority groups. **Please choose the statement(s) that pertains to this grant application. Complete all the information requested for the chosen statement(s).**

- The proposed grant project programs or policies could have a disproportionate or unique **positive** impact on minority persons.  
Describe the positive impact expected from this project

Indicate which group is impacted:

- |  |   |
|--|---|
| <input type="checkbox"/> Women                     | <input type="checkbox"/> Pacific Islanders        |
| <input type="checkbox"/> Persons with a Disability | <input type="checkbox"/> American Indians         |
| <input type="checkbox"/> Blacks                    | <input type="checkbox"/> Alaskan Native Americans |
| <input type="checkbox"/> Latinos                   | <input type="checkbox"/> Other                    |
| <input type="checkbox"/> Asians                    |   |

- The proposed grant project programs or policies could have a disproportionate or unique **negative** impact on minority persons.  
Describe the negative impact expected from this project

Present the rationale for the existence of the proposed program or policy.

Provide evidence of consultation of representatives of the minority groups impacted.

Indicate which group is impacted:  Women

- |  |   |
|--|---|
| <input type="checkbox"/> Persons with a Disability | <input type="checkbox"/> Pacific Islanders        |
| <input type="checkbox"/> Blacks                    | <input type="checkbox"/> American Indians         |
| <input type="checkbox"/> Latinos                   | <input type="checkbox"/> Alaskan Native Americans |
| <input type="checkbox"/> Asians                    | <input type="checkbox"/> Other                    |

- The proposed grant project programs or policies are **not expected to have** a disproportionate or unique impact on minority persons.

Present the rationale for determining no impact.

I hereby certify that the information on this form is complete and accurate, to the best of my knowledge:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

### Definitions

"Minority Persons", as defined in Iowa Code Section 8.11, mean individuals who are women, persons with a disability, Blacks, Latinos, Asians or Pacific Islanders, American Indians, and Alaskan Native Americans.

"Disability", as defined in Iowa Code Section 15.102, subsection 5, paragraph "b", subparagraph (1):

*b.* As used in this subsection:

- (1) "*Disability*" means, with respect to an individual, a physical or mental impairment that substantially limits one or more of the major life activities of the individual, a record of physical or mental impairment that substantially limits one or more of the major life activities of the individual, or being regarded as an individual with a physical or mental impairment that substantially limits one or more of the major life activities of the individual.

"*Disability*" does not include any of the following:

- (a) Homosexuality or bisexuality.
- (b) Transvestism, transsexualism, pedophilia, exhibitionism, voyeurism, gender identity disorders not resulting from physical impairments or other sexual behavior disorders.
- (c) Compulsive gambling, kleptomania, or pyromania.
- (d) Psychoactive substance abuse disorders resulting from current illegal use of drugs.

"State Agency", as defined in Iowa Code Section 8.11, means a department, board, bureau, commission, or other agency or authority of Iowa.

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**APPLICANT RISK ASSESSMENT QUESTIONNAIRE**

2 CFR 200.331 of the Federal Code requires pass-through entities to conduct a risk assessment of each sub-recipient. Please complete and return this section as part of your grant application. If questions arise while completing the questionnaire please contact the DNR Department Auditor at 515.725.8208.

- A. Was an audit performed in the prior fiscal year? If so, please provide a copy of your audit report with your application. No further information needed.
  
- B. If not, please answer the following questions. If the answer to any question is not yes, please provide a brief explanation of your entity's process.
  - 1. Are the accounting records maintained on a current basis?
  - 2. Are bank accounts reconciled by an employee who does not sign checks, handle or record cash?
  - 3. Are reconciliations reviewed and approved by a person who is not responsible for receipts and disbursements?
  - 4. Are inventory counts verified by persons independent of those in charge of the inventory records?
  - 5. Are capital assets tested periodically by an individual having no responsibility for the assets?
  - 6. Are capital expenditures authorized by appropriate officials and the governing body?
  - 7. Is a physical inventory taken periodically (at least annually) and reconciled to detailed capital asset records?
  - 8. Is a list of receipts prepared by the mail opener?
  - 9. Is an independent reconciliation of recorded receipts to the initial listing performed?
  - 10. Is a restrictive endorsement placed on each incoming check upon receipt?
  - 11. Are responsibilities for the disbursement/expenditure approval function segregated from those for the voucher preparation and purchasing functions?
  - 12. Are responsibilities for reconciling disbursements/ expenditures with the check/warrant register segregated from those preparing the vouchers?
  - 13. Is final approval for payment made by a different individual than the check/warrant signer?
  - 14. Are all disbursements/expenditures required to be supported by invoices or other documentation?
  - 15. Does the person reviewing the claims have sufficient knowledge of federal and state grant requirements, laws and regulations to determine cost allowability?
  - 16. Are supporting documents for claims effectively canceled at the time of approving the payment to prevent their reuse?
  - 17. Are controls maintained over the supply of unused and voided checks/warrants?
  - 18. Are salaries approved by the governing body for full-time and part-time employees?
  - 19. Are time sheets used and approved by appropriate personnel?
  - 20. Are financial reports reviewed and approved at appropriate levels of management?
  - 21. Is management committed to providing proper stewardship for property acquired with federal awards?
  - 22. Are accurate records maintained for all acquisitions and dispositions of property acquired with federal awards?
  - 23. Is a physical inventory of equipment periodically taken and compared to property records?
  - 24. Are procedures established to ensure the federal awarding agency is appropriately reimbursed for dispositions of property acquired with federal awards?
  - 25. If requested, could a certification from the donor be obtained or other procedures be performed to identify whether matching contributions are from non-federal sources?
  - 26. Have procedures been established to verify vendors providing goods and services under the award have not been suspended or debarred by the federal government?

Completed by: \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_