



Board of County Commissioners Agenda Request

28
Agenda Item #

Requested Meeting Date: March 10, 2020

Title of Item: Pavilion Grant Resolution

<input type="checkbox"/> REGULAR AGENDA	Action Requested:	<input type="checkbox"/> Direction Requested
<input checked="" type="checkbox"/> CONSENT AGENDA	<input type="checkbox"/> Approve/Deny Motion	<input type="checkbox"/> Discussion Item
<input type="checkbox"/> INFORMATION ONLY	<input checked="" type="checkbox"/> Adopt Resolution (attach draft)	<input type="checkbox"/> Hold Public Hearing* <i>*provide copy of hearing notice that was published</i>

Submitted by: Rich Courtemanche	Department: Land
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Presenter (Name and Title): Rich Courtemanche - Land Commissioner	Estimated Time Needed:
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Summary of Issue:

Aitkin County desires to build a 40x40' Pavilion at the Campground on the Mississippi River in Aitkin.

The State grant application requires support for application from the local government unit and if awarded, Aitkin County supports accepting the award. Aitkin County Land Department will provide \$20,000 match (\$10,000 cash and \$10,000 in-kind)

Alternatives, Options, Effects on Others/Comments:

Recommended Action/Motion:

Approve motion of support for trail grant application.

Financial Impact:

Is there a cost associated with this request? Yes No

What is the total cost, with tax and shipping? \$ 160,000 (\$140,000 grant, \$20,000 match)

Is this budgeted? Yes No *Please Explain:*

Aitkin County Parks funds (21-520) and staff will meet the fund \$20,000 match. Will be budgeted in 2021 if awarded.

ATTACHMENT A - APPLICANT'S RESOLUTION

A copy of this approved resolution, with no wording changes, must be included with the application.

BE IT RESOLVED that Aitkin County act as legal sponsor for the project contained in the Outdoor Recreation grant application to be submitted on _____ and that Rich Courtemanche is hereby authorized to apply to the Department of Natural Resources for funding of this project on behalf of Aitkin County.

BE IT FURTHER RESOLVED that the applicant has read the Conflict of Interest Policy contained in the Outdoor Recreation Grant Program Manual and certifies it will report any actual, potential, perceived or organizational conflicts of interest upon discovery to the related to the application or a grant award to the State.

BE IT FURTHER RESOLVED that Aitkin County has the legal authority to apply for financial assistance, and financial capability to meet the match requirement (if any) and ensure adequate construction, operation, maintenance and replacement of the proposed project for its design life.

BE IT FURTHER RESOLVED that Aitkin County has not incurred any development costs and has not entered into a written purchase agreement to acquire the property described in the Cost Breakdown section on this application.

BE IT FURTHER RESOLVED that Aitkin County has or will acquire fee title or permanent easement over the land described in the site plan included in the application.

BE IT FURTHER RESOLVED that, upon approval of its application by the State, Aitkin County may enter into an agreement with the State for the above-referenced project, and that Aitkin County certifies that it will comply with all applicable laws and regulations as stated in the grant agreement including dedicating the park property for uses consistent with the funding grant program into perpetuity.

NOW, THEREFORE BE IT RESOLVED that THE LAND COMMISSIONER is hereby authorized to execute such agreements as are necessary to implement the project on behalf of the applicant.

I CERTIFY THAT the above resolution was adopted by the County Board of Aitkin County on _____.

SIGNED:

WITNESSED:

(Signature)

(Signature)

(Title) (Date)

(Title) (Date)

ITEM 1 - APPLICATION SUMMARY -2020 APPLICATION

Applicant Information

Name of applicant: **Aitkin County Land Department**

Name and title of contact: **Dennis Thompson, Assistant Land Commissioner**

Address: **502 Minnesota Avenue N**

City: **Aitkin** State: **MN** Zip Code: **56431**

Phone: **218-927-7364** Email: **dennis.thompson@co.aitkin.mn.us**

Park Information

Park Name: **Aitkin Campground**

Park Address: **814 4th Avenue NW**

City: **Aitkin** Nine Digit Zip Code: **56431-1265**

County: **Aitkin**

Existing Park Acres: **9.4**

Project Information

Type (Check all that apply to this project):

- Acquisition: Acres to be purchased: **Click to enter amount.**
- New Development/Construction
- Redevelopment/ Rehabilitation
- Replacement/ Demolition

Description: Provide a short narrative (less than 50 words) of your project proposal. You will describe the merits of your project in Item 2 and the detailed costs/dimensions in Item 3 below. Include only items that will be accomplished with this project. Do not include work to be accomplished in future phases.

The Aitkin County Land Department is seeking grant funds to build a 40' by 40' open pavilion/picnic shelter at the Aitkin Campground. Structure will be on a new floating concrete slab. Shelter will include overhead lights, lockable controls, and at least three 20-amp GFI receptacles.

Financial Information

The Applicant must provide a non-state match of at least 50% of the total cost. This match may consist of cash or the value of materials, labor and equipment usage by the local sponsor or donations or any combination of these. Applicants that provide at least 20% of the match from their own resources will receive additional consideration in the review criteria. The total cost shown below must equal the total costs shown in Item 3 – Cost Breakdown.

- Total Project Cost: **\$160,000.00**
- Grant Request: **\$140,000.00**
- Match Amount: **\$20,000.00**

Match Description: Provide source and type of match. Note if it is committed or pending.
Match is all committed and will be roughly %50 cash and %50 in-kind labor

CERTIFIED COPY OF RESOLUTION OF COUNTY BOARD OF AITKIN COUNTY, MINNESOTA

ADOPTED March 10, 2020

By Commissioner: xxxx

20200310-xxx

Pavilion Grant

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I CERTIFY THAT the above resolution was adopted by the County Board of Aitkin County on _____.

SIGNED:

WITNESSED:

(Signature)

(Signature)

(Title)

(Date)

(Title)

(Date)

Commissioner xxxx moved for adoption of the resolution and it was declared adopted upon the following vote

FIVE MEMBERS PRESENT

All Members Voting

STATE OF MINNESOTA}
COUNTY OF AITKIN}

I, Jessica Seibert, County Administrator, Aitkin County, Minnesota do hereby certify that I have compared the foregoing with the original resolution filed in the Administration Office of Aitkin County in Aitkin, Minnesota as stated in the minutes of the proceedings of said Board on the 10th day of March, 2020 and that the same is a true and correct copy of the whole thereof.

Witness my hand and seal this 10th day of March, 2020

Jessica Seibert
County Administrator