



STATE OF MAINE
DEPARTMENT OF AGRICULTURE, CONSERVATION AND FORESTRY
BUREAU OF PARKS AND LANDS
SNOWMOBILE PROGRAM
22 STATE HOUSE STATION
AUGUSTA, MAINE 04333-0022

CAPITAL EQUIPMENT GRANT-IN-AID PROGRAM
Application
Year _____ to _____

Snowmobile Club/Municipality _____

Contact Person _____

Email _____ Phone _____

Mailing Address _____

City _____ Zip _____ Total trail miles _____ ITS miles _____

1a. Has this club participated in the Capital Equipment Grant before? Yes No					
If yes, what was the year of the clubs last approved grant? _____					
1b. In the past 3 consecutive years have you been denied a request for a Capital Equipment Grant? Yes No					
If yes, in what year(s)? _____					
2a. How many pieces of power equipment /groomers did the club own and operate this last grooming season? _____ How many drags? _____					
2b. List all grooming equipment the club owns and operates? In the case of a drag only, how old is it?					
					Was this unit purchased with CEG funds?
Equipment Type	Year	Make	Model	Hours OR Miles	Yes No
(1)					Yes No
(2)					Yes No
(3)					Yes No
(4)					Yes No
3. Will you be replacing any of this equipment? Yes No					
3a. If yes, which one(s)? _____					
Please provide a description of the reasons why the club is replacing or adding to the fleet this piece(s) of equipment. (add more sheets as necessary) _____					

4. How many total **active** groomer operators does the club have? _____

How many **active** groomer operators are certified through DACF? PLEASE PROVIDE LIST _____

5. How/where is the equipment stored during the summer? Undercover/garage Outdoors

6. Has this club provided the Maine Snowmobile Program with GPS data of **all** current trail locations? Yes No

If yes, what year was this done? _____

7. How many weeks on average, after Dec. 15th, over the past 5 years, did you **groom**? _____

8. Describe the equipment you seek to purchase:

Equipment Type _____

Make _____

Model _____

Year _____

Serial Number _____

HP _____

Provide the hours/miles on any used equipment that you seek to purchase? _____

Seller _____

Purchase price (excluding sales tax) _____

Why has the club decided on this piece of equipment?

Why do you think this is appropriate equipment for the club?

9. Have you already purchased the new or used equipment? Yes No

If yes, date of purchase? _____

10. How much of the purchase was or will be financed? \$ _____ Years _____

*Note: Any equipment wider than 10 feet is not eligible for this grant program. Any money or value received for equipment that is traded in or sold will be deducted from purchase price and any other grants or funding for the new or used replacement equipment if that amount is not already reflected in the purchase agreement.

YOU MUST ATTACH A PRICE QUOTE or PURCHASE AGREEMENT WITH THIS APPLICATION

By signing this application I am stating that the information provided is true and correct.

Date

Snowmobile Club Name or Municipality

Print Name and Title

Club President or Town Representative's Signature

Witness Signature

Contact Person's Signature