

**State of California - The Resources Agency
DEPARTMENT OF PARKS AND RECREATION
Division of Off-Highway Motor Vehicle Recreation
(OHV Form A)**

**APPLICATION FOR STATE OFF-HIGHWAY MOTOR VEHICLE RECREATION (OHMVR)
LOCAL ASSISTANCE GRANTS OR COOPERATIVE AGREEMENTS PROGRAM**

(State's Use Only) PROJECT NUMBER: OR - _____

Application Year: FY2007

1. Applicant: BLM, Barstow Field Office

Address: 2601 Barstow Road

2. City: Barstow	County: San Bernardino	State: CA	Zip: 92311
3. California State Senate District: 34, 36	California State Assembly District: 18	United States Congressional District: 41	

4. GRANT OR PROJECT AGREEMENT TYPE(S): (Select one or more)

<input type="checkbox"/> Acquisition	<input checked="" type="checkbox"/>	Facilities Operation and Maintenance (FO&M)	<input checked="" type="checkbox"/>	Restoration
<input checked="" type="checkbox"/> Conservation	<input checked="" type="checkbox"/>	Law Enforcement		Scientific Research
<input checked="" type="checkbox"/> Development	<input checked="" type="checkbox"/>	OHV Safety and/or Education	<input checked="" type="checkbox"/>	Trail Maintenance,
<input checked="" type="checkbox"/> Equipment		Planning		

<p>GRAND TOTAL AMOUNT REQUESTED (For all Project Types) Note: Minimum of \$5,000 for each project type \$ 4,494,000 (Rounded to the nearest \$1,000)</p>
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5. APPLICANT'S AUTHORIZED REPRESENTATIVE AND CONTACT PERSON (S):

Authorized Representative: Roxie Trost	Project Administrator: Mike Ahrens
Title: Field Manager	Title: OHV Coordinator
Telephone: 760 252 6000	Telephone: 760 252 6047
Fax: 760 252 6099	Fax: 760 252 6099
E-mail: Roxie_Trost@ca.blm.gov	E-mail: Mike_Ahrens@ca.blm.gov

6. AUTHORIZING SIGNATURE

Under penalty of perjury, I certify that all statements made in this application are complete and accurate to the best of my knowledge and that the project(s) proposed in this application is/are consistent with applicable planning documents. I am the authorized to obligate the applicant to the contractual terms of this application. I authorize representatives of the Off-Highway Motor Vehicle Recreation Division to verify the accuracy of the information contained in this application as needed.

X
SIGNED

DATE