



2025 Shooting Range Grant Application

APPLICATION DEADLINE: Friday, November 1, 2024

Funding Date

Grants are finalized by project in late summer through fall of 2025.
Federal grant funds are **reimbursement only**.

The Idaho Fish and Game (IDFG) range grant program will be open to applicants representing Idaho public ranges or affiliated clubs that are providing environmentally sound and safe projects for the public to learn, practice, and improve shooting skills. **IDFG will accept shooting range grant applications no later than November 1, 2024.**

Applications will be reviewed and recommended to the IDFG Director by the Citizen Advisory Committee in April 2025. The next steps include approval by the IDFG Commission and IDFG contracting process. **Applicants can expect to be notified if their project is intended for contracting by June 2025 and final contracts (funds) are not available until late summer or fall of 2025.** The majority of the grant funds available are reimbursement-by-invoice – cash advance grants have very limited availability.

Currently, IDFG awards up to \$555,000 in grant funding for public shooting ranges annually. The mix of funds includes federal manufacturer excise taxes collected from firearms, ammunition and archery equipment that the U.S. Fish and Wildlife Service manages as a Hunter Education grant to IDFG and other states' wildlife management agencies. Idaho's fund also includes fine and forfeiture monies remitted for wildlife crimes.

Organizations eligible to submit a grant application:

- Non-profit shooting organizations having as their purpose the promotion of firearm and/or archery safe handling and proper care, and improving shooting technique and marksmanship (e.g., rod and gun clubs, fish and game associations, sportsmen's clubs and firearm and archery ranges).
- Units of State or local governments that own and manage shooting ranges.

Grant recipients are **required** to provide reasonable public access during agreed-upon times. The standard for public access to ranges is a reasonable number of regularly scheduled days, continuing public shooting hours for recreational shooting or target practice. Public access does not have to be free, and ranges may restrict public access to other portions of the facility not benefiting from the work accomplished under the grant. Public access can also be by appointment only. A member of the public should not have to be enrolled in a class, purchase a membership to the club, be a guest of a club member, participate in an organized competitive event, or pay more than a modest fee to access the range facility to meet the reasonable public access criteria.

Please submit the application pages on pages 2 and 3 of this document by November 1, 2024, with completed W-9, IDFG SR-2 Form, range rules, range property ownership/lease and any supporting documentation. **PLEASE NOTE: Attached W-9 and IDFG SR-2 form are considered part of the application and MUST be completed and included with application form.**

**Idaho Department of Fish and Game
2022 Shooting Range Grant Application**

Application Deadline: November 1, 2024

Funded Dates: August 2025 - June 2027

Registered Range/Club Name	
Range Physical Address, City, Zip and County	
Grantee Contact Name (lead person)	
Grantee Mailing Address (must match W-9 form)	
Grantee Contact Email	
Grantee Contact Phone	
Public Use Availability of Range (Hours, Days of Week...)	
Public Use Fees (Day, Annual...)	
Legal Land Ownership Name, Contact Person Name, Address, Email & Phone	
What other funding or partnerships are involved in the project?	
Are there any potential negatively affected parties if this project is developed?	
How will this project create or enhance shooting opportunities in the region? Narrative can be attached separately.	

CHECKLIST	
Will range allow IDFG Hunter Education program to use the range free of charge for education/training?	
Your club is required to be registered through the Secretary of State, is this completed?	
Did you complete the W9 and SR-2 on this application?	
Did you attach documentation of the ownership or lease agreement of the land where the range resides?	
Did you include the amount of liability insurance currently in force and the insurance company name?	
Did you include the written range rules, standard operating practices and emergency procedures?	

PROJECT(S): BRIEF SUMMARY

REQUESTED PROJECTS Briefly title and describe each project separately and detail each project in the next section.	REQUESTED FUNDS \$	CLUB SHARE \$/labor
1.		
2.		
3.		
<i>Add additional rows if needed</i>		
TOTAL COSTS	\$	\$

PROJECT 1 DETAILS

Attach drawings, designs, construction/supply quotes, area photos and an aerial photo of the area with project outlined (as detailed as possible).

Project Title & Description:	
1. If your project involves a structure, a. Is a structure being improved, removed or built (new construction)?	Yes No
b. If this is an existing structure, what year was it built?	
2. Provide the latitude and longitude (or Section, township and range) of project location?	
3. Will there be any application of herbicides associated with the project?	Yes No
4. How many acres does the project area encompass? Include areas used for temporary vehicle access and equipment staging, building supplies storage, and soil or other fill materials.	
5. What is the environmental setting of the project location (gravel parking area, existing concrete pad, sagebrush, existing shooting range...)?	
6. List all supplies you will purchase with funds (lumber, electrical wiring supplies, security cameras, targets etc.).	
7. List the machinery that will be involved (dump truck, skid-steer loaders, compactors...).	
8. Will this project result in ANY ground disturbance from excavation required for foundation, footer, septic, utility or culvert installation? If yes, please explain.	
9. What contribution will your range/organization members make to this project (volunteer hours, supplies, etc.)?	

Additional information for Project 1 (Attach photos, diagrams, drawings or plans here):

PROJECT 2 DETAILS

Attach drawings, designs, construction/supply quotes, area photos and an aerial photo of the area with project outlined (as detailed as possible).

Project 2 Title & Description:	
1. If your project involves a structure, a. Is a structure being improved, removed or built (new construction)?	Yes No
b. If this is an existing structure, what year was it built?	
2. Provide the latitude and longitude (or Section, township and range) of project location?	
3. Will there be any application of herbicides associated with the project?	Yes No
4. How many acres does the project area encompass? Include areas used for temporary vehicle access and equipment staging, building supplies storage, and soil or other fill materials.	
5. What is the environmental setting of the project location (gravel parking area, existing concrete pad, sagebrush, existing shooting range...)?	
6. List all supplies you will purchase with funds (lumber, electrical wiring supplies, security cameras, targets etc.).	
7. List the machinery that will be involved (dump truck, skid-steer loaders, compactors...).	
8. Will this project result in ANY ground disturbance from excavation required for foundation, footer, septic, utility or culvert installation? If yes, please explain.	
9. What contribution will your range/organization members make to this project (volunteer hours, supplies, etc.)?	

Additional information for Project 2 (Attach photos, diagrams, drawings or plans here):

PROJECT 3 DETAILS

Attach drawings, designs, construction/supply quotes, area photos and an aerial photo of the area with project outlined (as detailed as possible).

Project 3 Title & Description:	
1. If your project involves a structure, a. Is a structure being improved, removed or built (new construction)?	Yes No
b. If this is an existing structure, what year was it built?	
2. Provide the latitude and longitude (or Section, township and range) of project location?	
3. Will there be any application of herbicides associated with the project?	Yes No
4. How many acres does the project area encompass? Include areas used for temporary vehicle access and equipment staging, building supplies storage, and soil or other fill materials.	
5. What is the environmental setting of the project location (gravel parking area, existing concrete pad, sagebrush, existing shooting range...)?	
6. List all supplies you will purchase with funds (lumber, electrical wiring supplies, security cameras, targets etc.).	
7. List the machinery that will be involved (dump truck, skid-steer loaders, compactors...).	
8. Will this project result in ANY ground disturbance from excavation required for foundation, footer, septic, utility or culvert installation? If yes, please explain.	
9. What contribution will your range/organization members make to this project (volunteer hours, supplies, etc.)?	

Additional information for Project 3 (Attach photos, diagrams, drawings or plans here)::

Questions or applications can be directed to the Statewide Shooting Range Manager, or your regional representative listed below:

Attn: Sarah VanAcker
208.287.2848
Sarah.vanacker@idfg.idaho.gov
600 S. Walnut, Boise, ID 83712

Idaho Fish and Game Regions:

Panhandle Region

Attn: Heidi Knapp
heidi.knapp@idfg.idaho.gov
2885 W. Kathleen Ave., Coeur d'Alene, ID 83815

Clearwater Region

Attn: William Seybold Email:
william.seybold@idfg.idaho.gov
3316 16th St., Lewiston, ID 83501

Southwest Region

Attn: Derek Fong Email:
derek.fong@idfg.idaho.gov
15950 N Gate Blvd, Nampa, ID 83687

Magic Valley Region

Attn: TanaRae Alberti Email:
tanarae.alberti1@idfg.idaho.gov
324 South 417 East - Suite 1, Jerome, ID 83338

Southeast Region

Attn: Tessa Atwood Email:
tessa.atwood@idfg.idaho.gov
1345 Barton Road, Pocatello, ID 83204

Upper Snake Region

Attn: Gerren Steel Email:
gerren.steel@idfg.idaho.gov
4279 Commerce Circle, Idaho Falls, ID 83401

Salmon Region

Attn: Krystal Dawn Smith Email:
krystaldawn.smith@idfg.idaho.gov
PO Box 1336, Salmon, ID 83467



IDAHO DEPARTMENT OF FISH AND GAME

P.O. Box 25
Boise, ID 83707
(208) 334-3781

Instructions: Complete the Audit Status Certification, Subrecipient Questionnaire, and signature sections below. Once complete, scan and email this document and any required attachments to the form originator and contracts@idfg.idaho.gov.

AUDIT STATUS CERTIFICATION

Subrecipient Name: _____

Subrecipient Address: _____

- 1) Where is your organization located?
 - Domestic (U.S.A.)
 - Foreign (Outside of U.S.A.)

- 2) Which of the following best describes your organization?
 - Government/University
 - Non-Profit Organization
 - For-Profit Entity
 - Indian Tribe/Other
 - Foreign (Non-U.S.A.) Entity

- 3) Did you expend more than \$750,000 in Federal awards during the past fiscal year?
 - Yes
 - No
 - If yes, provide date of last single audit per 2CFR 200 Subpart F

 - If no, skip to question 4

- 4) Have you been audited in the last 1-5 years?
 - Yes (Please attach)
 - No

Subrecipient Questionnaire

Please answer all of the questions below with the most accurate answer provided. Please feel free to use the space provided at the bottom of this form (or attach a separate sheet) to explain any answers that you feel need further explanation.

- 1) How long has your organization been in existence?
 - More than 10 years
 - 5 to 10 years
 - 0 to 5 years

- 2) Please mark each of the following for which you have established and written policies and procedures:
 - Cash handling
 - Procurement/Purchasing
 - Tracking Fixed Assets (Including separate tracking of assets for individual awards)
 - Financial Accounting and Internal Controls (Including budget to actual comparisons)
 - Tracking and Accounting for Individual Federal Awards

- 3) Describe the maturity of your accounting systems that document the items in #4 above.
 - Established an average of more than 10 years ago
 - Established an average of between 5 and 10 years ago
 - Established an average of between 0 and 5 years ago

- 4) What is the average tenure of employees who will manage this award?
 - Average tenure of more than 10 years
 - Average tenure of 5 to 10 years
 - Average tenure of 0 to 5 years

- 5) Describe your staff's experience in administering grants and subawards?
 - Extensive experience (Numerous grants and subawards)
 - Some previous experience (A few grants and subawards)
 - No previous experience

- 6) Does your organization have a federally negotiated indirect cost agreement?
 - Yes – we have a federally approved indirect cost rate agreement (Attach)
 - We do not have a federally approved indirect cost rate agreement.

- 7) Do you have a financial statement for the previous year (or two)?
 - Yes (Attach)
 - No

8) Is there any other relevant audit or financial information that was not disclosed in either the Audit Status Certification or this Subrecipient Questionnaire that if disclosed would impact our agencies risk assessment?

- All relevant information has been disclosed in the aforementioned documents.
- Additional relevant information should be considered (Please address here or on a separate sheet that will be submitted with this form):

Please attach the following items: (Hard copy or provide URL link)

- Financial statements, Audited or Unaudited (Most recent year completed)
- Federally Negotiated Indirect Cost Rate Agreement (If #6 above = “Yes”)

I certify that the information provided above in this Audit Status Certification and Subrecipient Questionnaire is true and correct for the organization of which I am a representative. I further certify that all relevant disclosures contained in our Single Audit Report (if applicable) have been referenced.

(Name/Title/Department)

(Signature) (Date)

(Address)

(City, State, Zip)

(UEI)*

(EIN No.)

***The State of Idaho cannot enter into a subaward agreement unless UEI is provided.**

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
requester. Do not
send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1	Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)	
	2	Business name/disregarded entity name, if different from above.	
	3a	Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	
	3b	If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	<i>(Applies to accounts maintained outside the United States.)</i>
	4	Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____	
	5	Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)
	6	City, state, and ZIP code	
7	List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number									
				-					
or									
Employer identification number									

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person	Date
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they