

**State Ortho Imagery Program 2005 - 2009**  
**Local/County/Regional Partnership Application Form**  
April 11, 2005

**I. Overview**

The State of Michigan (SOM) is administering a program to support statewide acquisition of imagery for its business use. State and Federal agencies are contributing to this program administered by the Michigan Center for Geographic Information (CGI). One track is to acquire imagery that can support base feature identification, interpretation, and conversion. The entire state will be covered with base imagery every five years. Where possible, the SOM intends to be a funding partner with existing local, county and regional ortho-imagery acquisition projects over the course of a five-year period. The goal is to leverage dollars between government agencies for common imagery products that meet the major business needs of all and yet protect the interests of all. For any area not covered under a partnership during the five-year cycle, the SOM will serve as project manager to acquire imagery in order to complete the balance of the state. The following minimum specifications for the program are established as a guide for the local partner to determine whether there are enough standards in common to begin partnership discussion. The first part of the process is to fill out the application form and send it and appropriate documentation to the Center for Geographic Information for funding consideration.

**II. Basic Terms and Conditions for Base Imagery Funding Partnership:**

**1. *Timeframe:***

**Fiscal year 2005 – Fiscal year 2009 (ongoing 5 year cycle is planned beyond FY09)**

**2. *Partnership Application Deadline (FY05-09 Program):***

**July 1, 2008**

**3. *Funding contributors to State Imagery Program:***

**State and Federal Agencies**

**4. *General MINIMUM imagery specifications (other details will be part of negotiation):***

- \_\_\_\_\_ a. **Leaf-off**
- \_\_\_\_\_ b. **2 foot or smaller pixel resolution**
- \_\_\_\_\_ c. **True color or black & white.**
- \_\_\_\_\_ d. **Ortho-rectified**
- \_\_\_\_\_ e. **Metadata compliant with the Federal Geographic Data Committee (FGDC) Standards**

**5. *Project management:***

**The Project must be managed by the local/county/regional partner agency(s).**

**6. *Eligibility:***

**The entity must be a governmental or regional agency in the State of Michigan.**

7. *Types of partnerships:*

**Primary Partnership** – SOM sits on the project team and helps set final project specifications and work plans. SOM also contributes to the project funding.

**Secondary Partnership** – SOM does not sit on project team, but does contribute to the project funding.

8. *Ownership/Distribution*

**An ownership/distribution agreement that originates from the local/county/regional partner must be established before partnership is established.**

**The State of Michigan will not require ownership or distribution rights to original product as a prerequisite to establish partnership.**

**The State of Michigan and the Federal Government (if applicable) does require ability to distribute a derivative product of the original. The final specifications of this product are subject to negotiation.**

**At a minimum, the agreement must address**

**Local/County Regional Partner ownership and distribution responsibilities  
State of Michigan (which includes all departments and third-party contractors) ownership and distribution responsibilities. For purposes of this contract, the federal agencies are treated as State of Michigan agencies.**

9. *Funding:*

**The SOM Imagery Program will fund between 10 – 20% of the final cost of the ortho-imagery acquisition project. If the ortho-imagery project is a part of a larger project, only the imagery portion will be considered for final funding calculation. The final percentage will be subject to negotiation and be based on partner need, priority of area to stakeholders, primary/secondary partnership status, the number of local partners being coordinated in one project, and other factors. Additional money may also be available with federal participation. Federal participation will be available based on availability of funding and priorities.**

10. *Requirements for Funding:*

1. **Completed partnership application signed by authorized representative**
2. **Signed ownership/distribution document between all partner agencies**
3. **Attached imagery project agreement between third party vendor and partner agency. At a minimum, this agreement should include:**
  - a. **Project work plan and deliverable specifications**
  - b. **Project management plan - including identified lead contact(s) within partner agency(s) and a detailed QA/QC process.**
  - c. **Budget details for project**
  - d. **Identified process for communicating status reports**
  - e. **Timeline for Deliverables**
  - f. **Identified payment schedule (a portion reserved for final successful product delivery)**

**II. Acceptance and Notification:**

A CGI representative will send a letter to applicant of acceptance or rejection of the application within 30 days of the receipt of the final application and materials. For all accepted applications, final state imagery program funding contribution and final specifications will be specified. Other details will be included in attached documents.

Please note that the State of Michigan payment of invoice is dependent on the Imagery passing Quality Assurance/Quality Control inspection by the State of Michigan agencies and the USGS.

**III. Application**

**Applicant Contact Information**

Organization or Agency Name: \_\_\_\_\_

Organization Address: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_ ZIP: \_\_\_\_\_

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

1. Do you plan to manage an ortho-image acquisition project in the near future?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, then when do you plan to start the project and acquire product?

\_\_\_\_\_

2. Do you already have an existing project agreement and plan in place?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If not, has an RFP been established?

\_\_\_\_\_ Yes \_\_\_\_\_ No

*(Please attach the corresponding RFP or Agreement/work plan to this application.)*

3. If the project has not yet been established, would you be interested in the state participating as one of the primary partners?

\_\_\_\_\_ Yes \_\_\_\_\_ No

4. What are the final image product specifications, if known?

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**5. Who are the current committed partners?**

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**6. Potential partners?**

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**7. What is the planned geographic coverage area for the imagery?**

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**8. Timeline – When do you plan to start the project?**

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**9. When do you plan to acquire the imagery?**

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**10. Project Management – Will your organization manage the project with the vendor?**

\_\_\_\_\_ Yes \_\_\_\_\_ No

**If not, who will?**

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**11. What is the total estimated project cost for the ortho imagery acquisition?**

\$ \_\_\_\_\_

**If project cost is not known, when will it be finalized?**

\_\_\_\_\_

**12. Do you have the funding support finalized?**

\_\_\_\_\_ **Yes** \_\_\_\_\_ **No**

**If not, when do you estimate the funding support plan will be complete?**

\_\_\_\_\_

**13. State will Contribute 10% - 20% of the total cost of the Imagery Project if a partnership is established. The state reserves the right to negotiate the final state contribution during the partnership negotiation process. If you know the final cost, how much do you request in assistance from the state?**

**\$** \_\_\_\_\_

**14. Are you interested in pursuing a partnership with the State of Michigan based on the current terms and conditions as described in section II above?**

\_\_\_\_\_ **Yes** \_\_\_\_\_ **No**

**If not, please provide additional comments.**

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Authorized representative (print):** \_\_\_\_\_

**Authorized signature:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Please sign and return application with requested documentation to:**

**State Imagery Program  
Michigan Center for Geographic Information \DIT  
111 S Capitol Ave, Lansing, MI 48913  
Attn: Rob Surber**

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