



SNOWMOBILE TRAIL GROOMING EQUIPMENT STATUS REPORT

This information is required by authority of Part 821 of Act 451 of 1994, as amended to receive funds.

I. TRAIL SPONSOR, AREA, FIELD OFFICE INFORMATION

Trail sponsor or Management Unit office name		Year	Local trail grant number
Trail miles assigned	Miles groomed last season		Hours groomed last season

II. GROOMER TRACTOR STATISTICS

Tractor #1	Make	Model		Year
Engine Make	Size (HP)	Odometer Reading (April 1)		Hour Reading (April 1)
Cost Share (circle) 60/40 75/25 100% Condition of Tractor (be specific):				
If eligible and funding available, would you like to replace? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Tractor #2	Make	Model		Year
Engine Make	Size (HP)	Odometer Reading (April 1)		Hour Reading (April 1)
Cost Share (circle) 60/40 75/25 100% Condition of Tractor (be specific):				
If eligible and funding available, would you like to replace? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Tractor #3	Make	Model		Year
Engine Make	Size (HP)	Odometer Reading (April 1)		Hour Reading (April 1)
Cost Share (circle) 60/40 75/25 100% Condition of Tractor (be specific):				
If eligible and funding available, would you like to replace? <input type="checkbox"/> Yes <input type="checkbox"/> No				

Tractor #4	Make	Model	Year
Engine Make	Size (HP)	Odometer Reading (April 1)	Hour Reading (April 1)
Cost Share (circle) 60/40 75/25 100% Condition of Tractor (be specific)			
If eligible and funding available, would you like to replace? <input type="checkbox"/> Yes <input type="checkbox"/> No			

III. GROOMING IMPLEMENT STATISTICS

Make	Size	Year
Cost Share (circle) 60/40 75/25 100% Condition of Drag (be specific)		
If eligible and funding available, would you like to replace? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Make	Size	Year
Cost Share (circle) 60/40 75/25 100% Condition of Drag (be specific)		
If eligible and funding available, would you like to replace? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Make	Size	Year
Cost Share (circle) 60/40 75/25 100% Condition of Drag (be specific):		
If eligible and funding available, would you like to replace? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Make	Size	Year
Cost Share (circle) 60/40 75/25 100% Condition of Drag (be specific)		
If eligible and funding available, would you like to replace? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Send completed status report to:

**FMFM UNIT CONTACT
MICHIGAN DEPARTMENT OF NATURAL RESOURCES**