

**Office of Land Survey**  
**Department of Licensing and Regulatory Affairs**  
P.O. Box 30254, Lansing, MI 48909

**2016 Grant Application Instructions**

**General Information**

1. Under MCL 54.274(1)(a) the Grant Application must be filed with the Department by **December 31, 2015.**
2. Mail sent to the post office box may take over a week to reach our office, and you may wish to use a Courier Service for the street address listed; **there is no U.S. postal service to the street address.**
3. Complete the Grant Application in its entirety; no cell should be left blank. If the category does not apply to your county, please enter either a "0" or "NA."
4. Please instruct your county's accounting office at the beginning of the grant year that all revenues and expenses must be transacted through the restricted line item for the Remonumentation grant, and back-up documentation (invoices, salary/wage printouts, journal entries, etc.) must be sent with the Progress and Completion reports.
5. The financial accounting detail must include, at a minimum, the payee's name, and some identification to link it to the invoice being paid.
6. Any expense not approved in the Grant Application or in compliance with the grant agreement will **not** be reimbursed.

**Contacts**

1. Enter the county name in the upper right cell.
2. Enter the applicable name, address, telephone and fax numbers, and e-mail addresses for the County Grant Administrator and County Representative.
3. Enter the County's Address for Payments registered with the State.

**2016 Grant Requested**

1. Enter the recommended 2016 State Grant Award for your county as provided herein.
2. Enter the amount of the grant the county wishes to use as Reimbursement for Expedited Expenditures, if any.
3. The Total Annual Budget will automatically calculate.

## Signature

The County Grant Administrator appointed by the County Board of Commissioners **must** sign and date the grant application and submit the **original signature to OLSR**; the grant agreement **cannot be issued** without an original signature on the Grant Application. This certification includes the request for the 40 percent start-up payment that OLSR will initiate upon receipt of a signed grant agreement from the county.

## Surveying Services and Supplies Items A, B, C and D

### Items A and B

1. Counties operating under MCL 54.268(2)a, i.e., **monumentation or remonumentation plan** will complete the table under **Item A – Remonumentation Services**.
2. Counties operating under MCL 54.268(2)d, i.e., perpetual monument maintenance **plan** will complete the table under **Item B – Monument Maintenance Services**.
3. **Columns A – D**: Please attach a report for the work proposed. The report must include a corner list for the work proposed under Item A or Item B itemizing each column by Town, Range, and Corner Code; do not list corners by municipality. For all corners, identify when a corner/monument location has more than one corner code associated with it, i.e., common corner codes, and identify all corner codes filed for that corner/monument location.
  - a. **Column A**: is for corners that have not been perpetuated through the county's program and are being contracted for by the county under the grant.
  - b. **Column B**: is for corners that are not being contracted for by the county but are anticipated to be completed by others, i.e., USFS, MDNR, MDOT, private surveyors, etc. The corner list should identify who is proposing to complete the work.
  - c. **Column C**: is for corners that have already been perpetuated through the county's program but are in need of being rehabilitated. The corner list should identify why the corners are to be proposed revisited.
  - d. **Column D**: May only be included if they have been approved by the department, acting in consultation with the commission.

**Note:** The numbers enter under Columns A through D are for a singular physical corner to be perpetuated. For a corner, that has two or more corner codes, identify each corner code on the corner list.

4. The **Total Number of Corner Records Proposed** is equivalent to the number of database records that are proposed to be submitted. It includes all of the corners noted in Columns A, B, C, and D **plus** any common corner codes identified on the corner list.
5. Geodetic coordinates, i.e. latitude and longitude, are required to be filed for every corner at the time it is monumented, remonumented or maintained. The State Survey and Remonumentation Program requires that these values be reported to an accuracy of 0.01 seconds of arc, which is equivalent to approximately one-foot.
6. The Register of Deeds recording fees for Land Corner Recordation Certificates must be accounted for under this item.

### **Item C – Remonumentation Supplies and Materials**

Provide a detailed, itemized listing of the specific expenditures for the items proposed to be purchased as Remonumentation Supplies and Materials.

**Note:** This item is for “remonumentation supplies and materials,” e.g., markers, monuments, caps, and corner accessories, only and does **not** include geodetic control maintenance or operation, the purchases of computers, printers, software, etc., recording fees, vehicle maintenance or supplies, safety equipment or general office supplies, batteries, etc. If you are not sure, whether an item qualifies as a program expense or how to report the item, please contact our office of assistance.

### **Item D – Geodetic Control Maintenance and Operations**

Provide an estimate of the anticipated costs for the maintenance and operation of the station(s) and an explanation on how the costs were determined. Also, identify each station by its National Geodetic Survey PID.

### **Surveying Services and Supplies Subtotal**

This total **must be a minimum of 80 percent** of the Total Annual Budget.

1. These items will auto-fill based upon the numbers entered in Items A through D.
2. The Percent of Budget will auto-fill by dividing the subtotal for the Field Survey Services and Supplies by the Total Annual Budget on page 1. Please verify that these numbers are correct and make any revisions necessary.

## **Administrative Services and Supplies Items E, F, G, H and I**

### **Items E, F, G and H**

1. Eligible expenditures for the Grant Administrator, County Representative, and Peer Review Group include all costs for the performance of the duties defined in the Act, General Rules for Survey and Remonumentation, County Plan and annual grant agreement. Any additional duties proposed must be supported with a description of the duties and why they are proposed to be assigned.
2. If there have been any recent changes in the Grant Administrator or County Representative, or Peer Review Group appointments, please attach, as proof of appointment, a copy of the Board of County Commissioners' resolution or meeting minutes confirming the new appointment.
3. **Item G – Additional Administrative Staff Fees/Wages** any additional staff must be identified by name and supported with a description of the duties and why they are proposed to be assigned.
4. **Item H – Peer Review Group Fees/Wages**
  - a. No Grant Administrator, County Representative, or Additional Administrative Staff costs are to be accounted for or reported under this Item.
  - b. The function of a Peer Review Group is to review corners presented before the county accepts them for filing. Review of group research, workload planning, proposed laws, administrative rules, county plans, etc. are not appropriate expenses incurred under this Item.
  - c. All efforts should be taken to maximize the use of the peer review group, i.e., convening the group to review only a few corners is not typically considered an effective use of the group's time.

### **Item I – Administration Supplies and Indirect Costs**

Include estimates for purchases of county supplies and overhead or indirect costs that are incurred as a direct result of the Remonumentation Program. If these costs would be incurred by the county even if the Remonumentation Program were not operating, then they are not a direct result of the Program.

**Note:** We recommend that the county consider charging a predetermined indirect cost to cover all the anticipated miscellaneous office supplies and overhead costs rather than track multiple receipts and monthly invoices and statements.

### **Total Administrative Services and Supplies Expenditures**

This total **must be less than or equal to 20 percent** of the Total Annual Budget.

1. These items will auto-fill based upon the numbers entered in Items E through I.
2. The Percent of Budget will auto-fill by dividing the subtotal for the Total Administrative Services and Supplies by the Total Annual Budget on page 1. Please verify that these numbers are correct and make any revisions necessary.

### **Annual Budget**

Each item will auto-fill based on the numbers entered in Items A through I. Please verify that these numbers are correct and make any revisions necessary.

### **Submitting the Application and Thereafter**

1. All grant applications must be received by OLSR no later than 5:00 p.m. on December 31, 2015.
2. When the grant application is approved by OLSR, an annual grant agreement is prepared and sent to the Department's procurement team to process and be signed by the Department Director. After it is signed, the annual grant agreement is returned to the Office of Land Survey to forward to the county to process and sign.
3. The 40 percent start-up payment is processed to the county upon the Office of Land Survey's receipt of the executed contract from the county.
4. The signed Grant Agreement must be returned to OLSR **no later than August 31, 2016** in order to meet the State's purchasing guidelines.

If you have any questions, please contact our office at (517) 241-6321 or e-mail [bccolsr@michigan.gov](mailto:bccolsr@michigan.gov).

**Office of Land Survey**  
**Department of Licensing and Regulatory Affairs**  
 U.S. Mail: P.O. Box 30254, Lansing, MI 48909

**2016 Recommended Survey & Remonumentation Grants Award**

COUNTY	City/State	2016 GRANT
ALCONA	Harrisville, MI	\$ 33,752
ALGER	Munising, MI	\$ 42,371
ALLEGAN	Allegan, MI	\$ 67,209
ALPENA	Alpena, MI	\$ 31,943
ANTRIM	Bellaire, MI	\$ 31,350
ARENAC	Standish, MI	\$ 22,146
BARAGA	L'Anse, MI	\$ 40,415
BARRY	Hastings, MI	\$ 48,935
BAY	Bay City, MI	\$ 73,133
BENZIE	Beulah, MI	\$ 20,784
BERRIEN	St. Joseph, MI	\$ 63,951
BRANCH	Coldwater, MI	\$ 31,269
CALHOUN	Marshall, MI	\$ 72,580
CASS	Cassopolis, MI	\$ 30,226
CHARLEVOIX	Charlevoix, MI	\$ 29,886
CHEBOYGAN	Cheboygan, MI	\$ 38,974
CHIPPEWA	Sault Ste. Marie, MI	\$ 89,698
CLARE	Harrison, MI	\$ 34,526
CLINTON	St. Johns, MI	\$ 43,245
CRAWFORD	Grayling, MI	\$ 32,314
DELTA	Escanaba, MI	\$ 70,903
DICKINSON	Iron Mountain, MI	\$ 39,027
EATON	Charlotte, MI	\$ 70,612
EMMET	Petoskey, MI	\$ 32,040
GENESEE	Flint, MI	\$ 110,071
GLADWIN	Gladwin, MI	\$ 30,765
GOGEBIC	Bessemer, MI	\$ 50,866
GR. TRAVERSE	Traverse City, MI	\$ 49,353
GRATIOT	Ithaca, MI	\$ 37,435
HILLSDALE	Hillsdale, MI	\$ 36,665
HOUGHTON	Houghton, MI	\$ 51,237
HURON	Bad Axe, MI	\$ 48,055
INGHAM	Mason, MI	\$ 87,454
IONIA	Ionia, MI	\$ 39,157
IOSCO	Tawas City, MI	\$ 32,335
IRON	Crystal Falls, MI	\$ 53,149
ISABELLA	Mt. Pleasant, MI	\$ 47,392
JACKSON	Jackson, MI	\$ 65,144
KALAMAZOO	Kalamazoo, MI	\$ 82,190
KALKASKA	Kalkaska, MI	\$ 27,621
KENT	Grand Rapids, MI	\$ 106,839
KEWEENAW	Mohawk, MI	\$ 23,859

COUNTY	City/State	2016 GRANT
LAKE	Baldwin, MI	\$ 29,862
LAPEER	Lapeer, MI	\$ 49,343
LEELANAU	Leland, MI	\$ 25,096
LENAWEE	Adrian, MI	\$ 56,709
LIVINGSTON	Howell, MI	\$ 78,227
LUCE	Newberry, MI	\$ 40,416
MACKINAC	St. Ignace, MI	\$ 58,230
MACOMB	Mt. Clemens, MI	\$ 245,898
MANISTEE	Manistee, MI	\$ 31,501
MARQUETTE	Marquette, MI	\$ 93,066
MASON	Ludington, MI	\$ 29,784
MECOSTA	Big Rapids, MI	\$ 34,795
MENOMINEE	Menominee, MI	\$ 50,819
MIDLAND	Midland, MI	\$ 42,736
MISSAUKEE	Lake City, MI	\$ 29,691
MONROE	Monroe, MI	\$ 58,667
MONTCALM	Stanton, MI	\$ 88,510
MONTMORENCY	Atlanta, MI	\$ 27,972
MUSKEGON	Muskegon, MI	\$ 41,170
NEWAYGO	White Cloud, MI	\$ 55,763
OAKLAND	Pontiac, MI	\$ 367,395
OCEANA	Hart, MI	\$ 31,628
OGEMAW	West Branch, MI	\$ 32,574
ONTONAGON	Ontonagon, MI	\$ 57,900
OSCEOLA	Reed City, MI	\$ 39,656
OSCODA	Mio, MI	\$ 27,816
OTSEGO	Gaylord, MI	\$ 34,788
OTTAWA	West Olive, MI	\$ 55,099
PRESQUE ISLE	Rogers City, MI	\$ 33,236
ROSCOMMON	Roscommon, MI	\$ 43,595
SAGINAW	Saginaw, MI	\$ 74,267
ST. CLAIR	Smiths Creek, MI	\$ 68,009
ST. JOSEPH	Centreville, MI	\$ 41,736
SANILAC	Sandusky, MI	\$ 55,428
SCHOOLCRAFT	Manistique, MI	\$ 52,934
SHIAWASSEE	Owosso, MI	\$ 51,423
TUSCOLA	Caro, MI	\$ 49,578
VAN BUREN	Paw Paw, MI	\$ 61,283
WASHTENAW	Ann Arbor, MI	\$ 107,424
WAYNE	Detroit, MI	\$ 566,787
WEXFORD	Cadillac, MI	\$ 33,313
<b>Total</b>		<b>\$ 5,125,000</b>

## 2016 SURVEY AND REMONUMENTATION GRANT APPLICATION

### Attachment A To Annual Grant Agreement

Authority: MCL 54.273

This application must be filed on or before December 31 of the calendar year immediately preceding the year in which the grant is made.

<p style="text-align: center;"><b>Office of Land Survey</b>                  Bureau of Construction Codes                  Department of Licensing and Regulatory Affairs  <b>Overnight Courier Service:</b> 1st Flr., 611 W. Ottawa St., Lansing, MI 48933  <b>U.S. Mail:</b> PO Box 30254, Lansing, MI 48909                  Telephone: (517) 241-6321 Facsimile: (517) 241-6301                  Email: <a href="mailto:bccolr@michigan.gov">bccolr@michigan.gov</a>  <a href="http://www.michigan.gov/sbc">www.michigan.gov/sbc</a></p>	<p><b>APPLICANT (County):</b> _____</p> <hr/> <p><b>Grant #: BCC-16-</b> _____</p> <p><b>MAIN Mail Code:</b> _____</p> <p><b>P.O. #:</b> _____</p>
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Grant Administrator	County Representative	Address for Payments
Name: _____	Name: _____	Name: _____
Address: _____	Address: _____	Address: _____
City: _____	City: _____	City: _____
State, Zip: _____	State, Zip: _____	State, Zip: _____
Telephone: _____	Telephone: _____	Telephone: _____
Fax: _____	Fax: _____	
Email: _____	Email: _____	

2016 GRANT REQUESTED		
2016 State Grant	Reimbursement for Expedited Expenditures under MCL 600.2567a(4) (≤ 50% of State Grant)	2016 Total Annual Budget (State Grant - Reimbursement = Total Budget)
\$ _____	\$ _____	\$ _____

I certify the information in this grant application is correct and request a 40% Start-Up Payment upon approval of an Annual Grant Agreement.

\_\_\_\_\_  
 Signature of County Grant Administrator (Original Signature Required)

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Chris Beland, P.S., Director (Original Signature Required)  
 Office of Land Survey and Remonumentation

\_\_\_\_\_  
 Date

**2016 SURVEY AND REMONUMENTATION GRANT APPLICATION**  
**Attachment A to Annual Grant Agreement**

County of: \_\_\_\_\_

**Surveying Services and Supplies**  
 Total Surveying Services and Supplies (Items A or B, C and D)  
 Must be a Minimum of 80% of the Total Annual Budget

**Item A - Remonumentation Services**

Includes all requirements under **MCL 54.268(2)a**, i.e., **monumentation or remonumentation plan** includes the filing of a land corner recordation certificate and geodetic coordinates.

Column A	Column B	Column C	Column D	Total Item A
Number of Original and Protracted PLSS Corners Completed by Applicant	Number of Original and Protracted PLSS Corners Completed by Others	Number of Original and Protracted PLSS Corners Revisited	No. of Property Controlling Corners under MCL 54.262(h)(ii)	
				\$

Please attach a report for the work proposed. The report must include a corner list for the work proposed under Item A itemizing each column by Town, Range and Corner Code; do NOT list corners by municipality. For all corners, identify when a corner/monument location has more than one corner code associated with it, i.e., **common corner codes**, and identify all corner codes filed for that corner/monument location. For **Column B**, identify who is proposing to complete the work, and for **Column C**, identify why the corners are to be proposed revisited. Attach additional pages as necessary.

**Total No. of Corner Records proposed** (A+B+C+D+common corner codes identified on the attached corner list): \_\_\_\_\_

**Item B - Monument Maintenance Services**

Includes all requirements under **MCL 54.268(2)d**, i.e., **perpetual monument maintenance plan**, including the filing of a land corner recordation certificate and geodetic coordinates.

Column A	Column B	Column C	Column D	Total Item B
Number of Original and Protracted PLSS Corners Completed by Applicant	Number of Original and Protracted PLSS Corners Completed by Others	Number of Original and Protracted PLSS Corners Revisited	No. of Property Controlling Corners under MCL 54.262(h)(ii)	
				\$

Please attach a report for the work proposed. The report must include a corner list for the work proposed under Item B itemizing each column by Town, Range and Corner Code; do NOT list corners by municipality. For all corners, identify when a corner/monument location has more than one corner code associated with it, i.e., **common corner codes**, and identify all corner codes filed for that corner/monument location. For **Column B**, identify who is proposing to complete the work, and for **Column C**, identify why the corners are to be proposed revisited. Attach additional pages as necessary.

**Total No. of Corner Records proposed** (A+B+C+D+common corner codes identified on the attached corner list): \_\_\_\_\_

**Item C - Remonumentation Supplies and Materials**

Identify items and estimated expenses for each item. Attach additional pages as necessary.

No. of Markers: _____ x \$ _____ each = \$ _____	<b>Total Item C</b>
No. of Caps: _____ x \$ _____ each = \$ _____	
Other: _____ x \$ _____ each = \$ _____	
	\$

**Item D - Geodetic Control Maintenance and Operations**

Identify items and estimated expenses for each station. Attach additional pages as necessary.

Station PID: _____ \$ _____	Station PID: _____ \$ _____	<b>Total Item D</b>
Station PID: _____ \$ _____	Station PID: _____ \$ _____	
Station PID: _____ \$ _____	Station PID: _____ \$ _____	
		\$
<b>Subtotal Items A or B+C+D</b>		<b>Subtotal</b>
		\$
		<b>Percent of Budget</b>

## 2016 SURVEY AND REMONUMENTATION GRANT APPLICATION

County of: \_\_\_\_\_

### Administrative Services and Supplies

Total Administrative Services and Supplies (Items E, F, G, H, and I)  
Can be no greater than 20% of the Total Annual Budget

#### Item E - Grant Administrator Fees/Wages

Attach additional pages as necessary.

Hours _____ x Rate \$ _____ = \$ _____ or Fixed \$ _____	<b>Total Item E</b>
Comments:	\$ _____

#### Item F - County Representative Fees/Wages

Attach additional pages as necessary.

Hours _____ x Rate \$ _____ = \$ _____ or Fixed \$ _____	<b>Total Item F</b>
Comments:	\$ _____

#### Item G - Additional Administrative Staff Fees/Wages

Attach additional pages as necessary.

Hours _____ x Rate \$ _____ = \$ _____ or Fixed \$ _____	<b>Total Item G</b>
Identify staff by name and identify the delegated duties and responsibilities.	\$ _____

#### Item H - Peer Review Group Fees/Wages

Attach additional pages as necessary.

Number of Members _____ x Fee \$ _____ x Number of Meetings _____ = \$ _____ or Fixed \$ _____	<b>Total Item H</b>
Comments:	\$ _____

#### Item I - Administrative Supplies and Indirect Costs

Identify items and estimated expenses for each item, or identify a flat overhead rate. Attach additional pages as necessary.

_____ \$ _____	<b>Total Item I</b>
_____ \$ _____	
_____ \$ _____	\$ _____

	<b>Percent of Budget</b>	<b>Subtotal</b>
<b>Subtotal Items E+F+G+H+I</b>		\$ _____

### Annual Budget

Item A - Remonumentation Services	\$	_____
Item B - Monument Maintenance Services	\$	_____
Item C - Remonumentation Supplies and Materials	\$	_____
Item D - Geodetic Control Maintenance and Operations	\$	_____
Item E - Grant Administrator Fees/Wages	\$	_____
Item F - County Representative Fees/Wages	\$	_____
Item G - Additional Administrative Staff Fees/Wages	\$	_____
Item H - Peer Review Group Fees/Wages	\$	_____
Item I - Administrative Supplies and Indirect Costs	\$	_____
<b>Total MUST EQUAL "Total Annual Budget" on Page 1</b>	\$	_____