



# Rules Governing Reimbursement

## Trees for Nebraska Towns Program (TNT)

*Following are the rules governing reimbursement of projects funded through the Trees for Nebraska Towns Program (TNT). These rules must be followed and proper documentation submitted before reimbursement can be made.*

**PLEASE NOTE: Project costs must be incurred after NSA grant award to be eligible.**

### **A. Eligible Reimbursable Costs** (subject to the limitations noted):

1. Trees and Companion Plants: Costs of purchasing trees and appropriate companion plants (shrubs, perennials, ornamental grasses and/or groundcovers planted in association with trees for massing purposes and general project benefit). **At least 80% of grant funds** must go toward the cost of materials and installation of large maturing trees (trees that have the potential to grow at least 40' tall and at least 30' wide for deciduous trees and 20' wide for evergreens). Additional tree planting requirements:
  - The average **direct cost of trees should not exceed \$250** (not including planting fee) per tree without prior approval of NSA.
  - Size range limitations for new plantings: **Deciduous Tree** stock should not exceed 1.5" trunk caliper (measured at 12" above the ground) and be well branched. **Evergreen Tree** stock should not exceed 6' tall and be well branched. Note: Anything larger shall require prior approval.
2. Plant Installation: Costs associated with installing plant material, including mulching (organic) and staking. Installation costs should not exceed 50% of plant material costs (limit does not apply if using bareroot plants).
3. Site Preparation: Activity and materials necessary to prepare the project site for planting including removal of dead or dying trees (removal of healthy, desirable trees IS NOT eligible), brush or other plants; minor soil improvement (including compost and/or topsoil); or minor grading or land forming necessary for proper site drainage. All grading work must be approved in advance by NSA to be eligible for reimbursement.

### **B. Eligible Matching Costs** (costs not eligible for reimbursement but eligible for local match):

1. Eligible Grant Funded Costs: All eligible costs listed in item A above, when their total exceeds grant amount, automatically qualify for matching costs.
2. Project Design & Planning: Reasonable costs of planning, designing and preparing for the project AFTER grant funding is awarded.
3. Watering Supplies: The reasonable cost to purchase watering hoses, sprinklers, low-output irrigation supplies, etc. to get water to plant material. Turf irrigation materials are not eligible.
4. Signage: The cost of signage indicating tree species or other related educational information. To qualify, such costs must be reviewed and approved in advance by NSA.
5. Educational activities: The costs associated with educating project representatives and/or caregivers about proper tree care and landscape stewardship practices. Costs cannot exceed 20% of total matching funds.
6. Initial Maintenance: The reasonable cost to properly care for trees and associated plantings for up to one year after planting. Eligible care activities include watering, weed control, re-mulching and removal of staking materials. Maintenance must be provided by city personnel, trained

volunteers or a business normally involved in landscape care. A billing and/or activity summary must be submitted at the end of the first-year maintenance period.

- C. Cash requirement:** 50% of the required match amount must be cash (eligible materials or services paid with local funds).
- D. In-kind Labor:**
1. Value: For grant matching purposes the value of donated (non-skilled) labor cannot exceed \$29.95/hour for adult help and \$10.00/hour for youth (under age 18). **Documentation to support any volunteer labor expense must be included to be eligible.** Volunteer logs are provided by TNT and must be accurately completed and submitted. In-kind donations of skilled or professional labor can be valued at the actual local rate, but must be verified by receipt.
  2. Reasonable hours: Maximum of three hours allowed per tree for planting prep, planting, staking, watering and mulching.
- E. Ineligible Costs:** The following costs are **not eligible** for reimbursement or matching purposes.
1. Tools and Equipment: All costs associated with purchase of tools and equipment, except those listed under watering supplies
  2. Property: Any costs related to the purchase of real property
  3. Non-organic mulches: Rock or other non-organic material used as mulch around plants
  4. Plastic edging and weed barriers are not a reimbursable expense and should not be used in the project.
  5. Rubber weed mats: Plastic or rubber weed mats placed at the base of trees
  6. "Traditional" lawns: High input turfgrasses
- F. Reimbursement Timing:** Reimbursement will occur only after completion of the entire project or after completion of a significant phase. **A project will not be reimbursed in more than 2 phases.**
- G. Reimbursement Request:** Reimbursements must be requested by preparing and submitting to NSA the online Reimbursement Request Form and associated documentation.
- H. Receipt Requirements:** Only costs verified by receipt or invoice will be considered for reimbursement. **Receipts for ALL portions of the project shall be submitted, including the project match. In-kind donations need to be verified by letter or receipt.**
- Note:** Each receipt/invoice must contain the name and address of the vendor, an itemized list of services or goods, and the dates of delivery. Plant material receipts **must itemize all plants** used in the project, detailing species, size and quantity.
- I. Reimbursement checks** will be made payable only to the project sponsor, governmental unit or organization suitable to act as an agent for the project. The **reimbursement will not be made payable to any individual or businesses.**



# Project Reimbursement Request Form

## Trees for Nebraska Towns Program (TNT)

Project Name & Town: \_\_\_\_\_

Name of Contact Person: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

(Note: The reimbursement check will be mailed to this address unless noted otherwise.)

Make reimbursement check payable to: \_\_\_\_\_

(Note: The reimbursement check cannot be made payable to any individuals or businesses).

Is the grant funded portion of the project completed? (yes or no) \_\_\_\_\_

Federal Tax I.D. Number: \_\_\_\_\_

1. Total project (or phase) value: \_\_\_\_\_

(Include all matching and in-kind values)

2. Total matching contributions value: \_\_\_\_\_

**3. Total amount requested for reimbursement** \_\_\_\_\_

(line 1 - line 2, not exceeding grant award):

- Reimbursement cannot exceed 50% of total project value.
- All reimbursed expenses must be verified by original invoice.

As the project coordinator or an agent of the project sponsor, I hereby claim reimbursement from the Nebraska Statewide Arboretum for the attached and itemized expenses. I certify that this report is correct and just; that all expenses were necessary expenses of the project and were incurred in accordance with the approved grant agreement, including any amendments thereto; and that progress of the work and services under the grant contract is satisfactory and consistent with the amount billed.

\_\_\_\_\_  
Signature of Project Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name typed or printed

\_\_\_\_\_  
Title

## Trees for Nebraska Towns Program

### Summary of Expenses Submitted for Reimbursement

Please summarize below all project expenses. List expenses anticipated to be reimbursed by grant funds in the top of the table and show matching and in-kind values in the lower part of the table. A separate line should be used for each item. Invoice totals can be split between categories if necessary. Add expenses to indicate requested reimbursement sub-total, match sub-total and total project value on appropriate lines.

Grant Reimbursable Expenses (total should not exceed grant amount or 50% of Total Project Value)	Vendor/Source	Value
<b>Total requested reimbursement</b>		
Project Cash & In-Kind* Expenses (Match)	Vendor/Source	Value
<b>Total reported match</b>		
<b>Total Project Value (Reimbursement plus match)</b>		

Please submit appropriate documentation to support all reported expenses.  
Attach additional pages if necessary.