



Ohio Department of Natural Resources
Division of Watercraft



Navigational Aids Grant Request

The Division of Watercraft is interested in providing navigational aids in partnership with political subdivisions to mark Ohio's waterways. The areas to be marked would be controlled navigational areas for recreational boating. The navigational aids are in strict accordance with the Uniform State Waterway Marking System (USWMS). Before navigational aids are provided, it is necessary for the agency to enter into a cooperative agreement with Division of Watercraft. The terms of the agreement are as follows:

1. Navigational aids will conform to the requirements prescribed in section 1547.08 of the Ohio Revised Code.
2. Cooperating agencies will provide maps or charts of the waters involved showing placement and type of each proposed navigational aid.
3. The Division of Watercraft reserves the right to limit the number of navigational aids.
4. The cooperating agency agrees to place and maintain the navigational aids.
5. The Division assumes the cost of navigational aids, but not anchors, fastenings, or maintenance items.
6. Obligations of the state are subject to section 126.07 of the Ohio Revised Code.
7. When delivery is made, the agency will forward a signed copy of the receipt or a letter stating the order was received.

NOTE: Navigational Aids placed on Federal Navigable Waters (Muskingum River, Ohio River, Lake Erie, etc.) first require consent or approval from the U.S. Coast Guard. See form CG-2554 available from the US Coast Guard web site (http://www.uscg.mil/forms/cg/CG_2554.pdf). Provide an approved copy of the form and include it with your ODNR Navigational Aids Grant Request. For more information concerning CG-2554, contact Nick Gould (216-902-6074) or Doug Sharp (216-902-6070) for questions.

Send completed form to: ATTN: PATON Private Aids Rm 2083
 Command OAN 9th Coast Guard District
 1240 East 9th Street
 Cleveland, OH 44199-2060

Buoy and sign requests will take approximately 6 to 8 weeks for delivery once all the terms of the agreement have been met.

Information required with this completed application:

- Maps or charts of the waters involved showing placement and types of each proposed navigational aids
- Resolution from jurisdictional sponsor city, township, county
- For federally navigable waters: U.S. Coast Guard Private Aids to Navigation Application (CG-2554)
- For replacement navigational aids: A copy of the original documentation from the Division of Watercraft allowing placement of navigational aids

Information required after grant application has been approved:

- Two signed Cooperative Agreements

ODNR Division of Watercraft Navigational Aids Grant Request

Instructions for filling in the form

SECTION A. Under the “Requesting Agency” heading, fill out the information about the public agency that is requesting the navigational aids. This information includes who the contact person is, their mailing address, city, state and zip code. Also include a telephone and fax number where we can contact them. If you have an E-mail address, including it may assist us with communications. Under “Agency Providing Placement & Maintenance,” fill in the contact information indicated for the agency that will place and maintain the navigational aids.

SECTION B. Indicate if this request is for new navigational aids or replacement of existing navigational aids. If this request is for replacement navigational aids, attach a copy of the original permission documentation from ODNR Division of Watercraft to the application. For all requests, write a brief explanation of the problems or issues you will be addressing by placing/replacing the navigational aids.

SECTION C. Supply the name of the body of water where the aids will be placed (e.g. Lake Erie/Sandusky Bay) as well as the longitude and latitude in decimal degrees (North American Datum 1983 or WGS84). Indicate whether the body of water where the navigational aids will be placed is federally defined as “navigable” (Lake Erie, Muskingum or Ohio Rivers, etc.) or Ohio waters (non-navigable). Also include the county of the placement. If you can, give an estimated depth of water for the placement site and the anchoring method so the buoys will be made with the proper ballast. Information should include whether you will be using cable, chain, or rope and the size and type of anchor.

SECTION D. Provide the appropriate information in the available blanks of each question. These answers will be used as scoring criteria when we evaluate each application.

SECTION E. Check the boxes to indicate which items are applicable to your request and are included in your application packet.

SECTION F. Select the symbol type (center) and mark the buoy type (left) that you are requesting. Then indicate the quantity and the message that you want. (right)

SECTION G. If you are requesting signage, fill in the quantity and how you would like your sign to look with your selected words. Include a copy of the estimated cost quote from your vender. If you are requesting another type of navigational aid not already addressed in the application, fill in the quantity and give a description of the items you are requesting.

SECTION H. If you have additional requests or comments, use this space.

SECTION I. The contact person for the agency making this request should sign and date the application.

Send the completed application to: ATTN: Butch Grieszmer
 Navigational Aids Program
 ODNR Division of Watercraft
 2045 Morse Road, Building A-2
 Columbus, OH 43229-6693



Ohio Department of Natural Resources
Division of Watercraft



Navigational Aids Grant Request

A. Requesting Agency:

Agency Providing Placement & Maintenance:

Agency: _____

Agency: _____

Contact Person: _____

Contact Person: _____

Address: _____

Address: _____

City: _____

City: _____

State & Zip: _____

State & Zip: _____

Tel #: (_____) _____

Tel #: (_____) _____

E-mail: _____

E-mail: _____

B. Justification

- New Replacement

C. Location

Body of Water: _____ County: _____

Water Depth: _____ Anchor Method: _____

Proposed Navigational Aid Placement Site Coordinates in Decimal Degrees

Latitude: _____ Longitude: _____

- Federal Waters (Navigable) Lake Erie, Muskingum or Ohio River, etc.
 Ohio Waters

D. Required Information

- _____ How many public access launch ramps are on this body of water or within 5 miles of the navigational aids placement sites?
- _____ How many public access docks are on this body of water or within 5 miles of the navigational aids' placement sites?
- _____ What is the surface acreage of the body of water where the navigational aids will be placed?
- _____ What is the horsepower limit on the body of water where the navigational aids will be placed?
- _____ Can the general public access and use the body of water where the navigational aids will be placed?

E. Checklist of Documentation Submitted


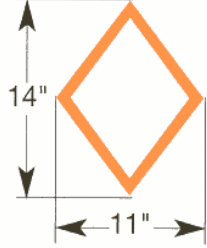
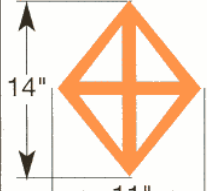
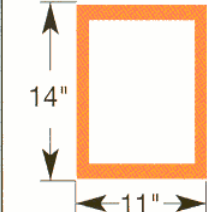
Required:

- This application, completed, signed and dated (DNR 8369)
- Chart showing location and types of navigational aids
- Resolution from jurisdictional sponsor city, township, county

If Applicable:

- Approved U.S. Coast Guard Private Aids to Navigation Application (CG-2554)
- Signed documentation from ODNR Division of Watercraft permitting original buoys
- Cost quote for signage

F. Standard Inland Symbols and Messages

<p><u>Buoy Types</u></p> <p><input type="checkbox"/> X Heavy Duty Regulatory</p> <p><input type="checkbox"/> Float Collar Cans</p> <p><input type="checkbox"/> Other:</p>	<p>CONTROLLED AREA SYMBOL</p>  <p>12" 2" band width</p>	<p><u>QTY</u> <u>Message</u></p> <p>___ SLOW 5 MPH</p> <p>___ SKI AREA</p> <p>___ NO SKI</p> <p>___ SLOW 10 MPH</p> <p>___ SPEED ZONE</p> <p>___ NO WAKE IDLE SPEED</p> <p>___ BOAT SWIM AREA</p>
<p><u>Buoy Types</u></p> <p><input type="checkbox"/> X Heavy Duty Regulatory</p> <p><input type="checkbox"/> Float Collar Cans</p> <p><input type="checkbox"/> Other:</p>	<p>HAZARD WARNING SYMBOL</p>  <p>14" 11" 2" band width</p>	<p><u>QTY</u> <u>Message</u></p> <p>___ ROCK</p> <p>___ DANGER</p> <p>___ RAPIDS</p> <p>___ SHOAL</p> <p>___ STUMP</p> <p>___ SHALLOW AREA</p> <p>___ HAZARD AREA</p> <p>___ DANGER DAM</p> <p>___ BOAT SWIM AREA</p>
<p><u>Buoy Types</u></p> <p><input type="checkbox"/> X Heavy Duty Regulatory</p> <p><input type="checkbox"/> Float Collar Cans</p> <p><input type="checkbox"/> Other:</p>	<p>RESTRICTED AREA SYMBOL</p>  <p>14" 11" 2" band width</p>	<p><u>QTY</u> <u>Message</u></p> <p>___ SWIM AREA</p> <p>___ KEEP OUT</p> <p>___ NO BOATS</p> <p>___ BOATS KEEP OUT</p> <p>___ CLOSED AREA</p> <p>___ NO BOATING</p> <p>___ DANGER DAM</p>
<p><u>Buoy Types</u></p> <p><input type="checkbox"/> X Heavy Duty Regulatory</p> <p><input type="checkbox"/> Float Collar Cans</p> <p><input type="checkbox"/> Other:</p>	<p>INFORMATION SYMBOL</p>  <p>14" 11" 2" band width</p>	<p><u>QTY</u> <u>Message</u></p> <p>___ REST ROOM 1 MILE</p> <p>___ STATE PARK AHEAD</p> <p>___ MARINA ENTRANCE</p> <p>___ FISH ATTRACTOR</p>

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G. Sign Request

Qty	Signage Draft Text	Dimensions	Material
		Height: _____ Width: _____	<input type="checkbox"/> Metal <input type="checkbox"/> Plastic <input type="checkbox"/> Wood

H. Notes or Comments:

I. Signature

Signature: _____ Date: _____