

Mat-Su Valley Streambank Habitat Rehabilitation and Protection Cost-Share Program • 2025 Project Application

Contact Information:

Landowner Name: _____

Mailing Address: _____

Phone: _____

Alternate Phone: _____

Email: _____

Alternate Email: _____



Illustrated by Shelly Marshall with ShellART Studio

Parcel Information:

Waterbody Name: _____ **Mat-Su Borough Parcel ID:** _____

Physical Address: _____

Latitude: _____ **Longitude:** _____

We recommend communicating with program staff when developing your application, and ideally, meeting program staff at your site to discuss your goals, your site, and ways to improve your application. Note, this is a competitive program, and all applications are ranked based on their value to fish habitat and streambank health. The program typically receives more applications than it is able to fund.

1. Have you received assistance from the Mat-Su Cost-share program in the past? Yes No Unsure
 If so, when did you receive financial assistance and for what activities?

** Past projects may be ineligible depending on what activities took place and when the project was completed. **

2. What best management practice(s) are you applying for currently? (check all that may apply)

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Brush Layer | <input type="checkbox"/> Trenched Willows | <input type="checkbox"/> Vegetative Mat | <input type="checkbox"/> Hydroseeding |
| <input type="checkbox"/> Willow Bundles | <input type="checkbox"/> Live Staking | <input type="checkbox"/> Grass Rolls | <input type="checkbox"/> Potted Plantings |
| <input type="checkbox"/> Rootwads | <input type="checkbox"/> Elevated Walkways | <input type="checkbox"/> Cabled Spruce Trees | |
| <input type="checkbox"/> Other or unsure (please describe): _____ | | | |

**Note: The Cost-share program does not fund floating docks or walkways out to floating docks. **

3. Describe your property, your project goals, and the fish habitat problem(s) you wish to address:

4. How long is the project area (in feet?) _____
5. On average, how wide of an un-landscaped vegetative buffer are you willing to dedicate to the project?
 Less than: 15 ft 15-25 ft 25-50 ft 50 ft +
Width is determined beginning at the shoreline going landward. If funded, you will be required to maintain an un-landscaped vegetation buffer to protect the project and provide fish habitat.
6. Are you aware of any invasive species on your property? Yes No Unsure
 If so, which one(s), and would you be willing to address the issues as part of your project? _____
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7. How did you hear about this program? (check all that apply)
- Online Radio Flyer River Center
 Social Media Word of Mouth Employer
 Other (please describe): _____
8. The program selects a subset of projects to monitor project success and plant progression over time. If funded, would you be willing to have your project be a monitoring site? Yes No
9. Are you interested in attending a workshop related to streambanks and fish habitat on your property?
 Yes No **Workshops are typically held in the spring of each year.**
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Applications, cost-estimates, and project photos are due by **September 30, 2024**.

The program will not reimburse any activities completed or purchases made prior to a project being accepted into the program. A signed Private Landowner Agreement and all applicable permits must also be in place. Projects will be selected by spring 2025.

Your signature below reflects that you understand the information described above and are interested in applying for cost-share funds for projects to be implemented in the spring/summer of 2025.

 Signature

 Date

Please send your application to one of the program staff below (email is preferred.) Please reach out with any questions and thank you for your interest in fish habitat and streambank health.



Alaska Dept. of Fish and Game
 Phone: 907-267-2146
 Email: DFG.DSF.StreambankRehab@alaska.gov



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