# Template Last Updated 03/08/2024

An adjustment to a Facilities record is needed if there is a change to the facility, including an administrative adjustment, a capital improvement, disposal of the facility, or disposal of a facility component. If more than one adjustment occurs, each adjustment is entered, and approved, separately. It is important to note that an adjustment can only be added when the original (base) record, and any subsequent adjustments, are in the ‘final approved’ status.

# Adjustment Information

1. Date of Adjustment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Adjustment Type (check one and fill out the appropriate section below):
	* Administrative
	* Capital Improvement to Facility
	* Component Disposal
	* Disposal of Facility

***For Administrative***

1. Administrative Adjustment Comments (check one)
	* Not Applicable
	* If applicable, enter the statement below

|  |
| --- |
|  |

1. Useful Life – Does this adjustment change the useful life of this facility?
	* No
	* Yes, fill out useful life below:

Useful Life Duration in Years \_\_\_\_\_ and Months \_\_\_\_\_ Useful Life Start Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***For Capital Improvement to Facility***

1. Capital Improvement Type (check one)
	* Additions to Facility
	* Renovations to Facility
2. Improvement Federal and Match

|  |  |
| --- | --- |
| ***Source*** | ***Amount*** |
| Federal Share | $ |
| Match Share | $ |
| Additional Funds | $ |

1. Date Improvement Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Capital Improvement Comments (check one)
	* Not Applicable
	* If applicable, enter the statement below

|  |
| --- |
|  |

1. Useful Life – Does this adjustment change the useful life of this facility?
	* No
	* Yes, fill out useful life below:

Useful Life Duration in Years \_\_\_\_\_ and Months \_\_\_\_\_ Useful Life Start Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***For Component Disposal***

1. Disposal Instructions (check one)
* Retain component after compensating Federal awarding agency
* Sell component and compensate Federal awarding agency
* Transfer component to another Federal awarding agency / 3rd party and receive compensation
1. Disposal Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Component Disposal Compensation: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Component Disposal Comments (check one)
	* Not Applicable
	* If applicable, enter the statement below

|  |
| --- |
|  |

1. Useful Life – Does this adjustment change the useful life of this facility?
	* No
	* Yes, fill out useful life below:

Useful Life Duration in Years \_\_\_\_\_ and Months \_\_\_\_\_ Useful Life Start Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***For Disposal of Facility***

1. Disposal Instructions (check one)
* Retain facility after compensating Federal Awarding agency
* Sell facility and compensate Federal awarding agency
* Transfer facility to another Federal awarding agency / 3rd party and receive compensation
1. Disposal Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Disposal of Facility Compensation: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Disposal of Facility Comments (check one)
	* Not Applicable
	* If applicable, enter the statement below

|  |
| --- |
|  |

1. Useful Life – Does this adjustment change the useful life of this facility?
	* No
	* Yes, fill out useful life below:

Useful Life Duration in Years \_\_\_\_\_ and Months \_\_\_\_\_ Useful Life Start Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Components

*Skip this section for “Disposal of Facility” Adjustment Type or if the components have not been updated*

*Skip this section for the following Facility Types (no components):*

* *Aquatic Barriers*
* *Fish Passage Facilities*
* *Fish Screening and Related Facilities*
* *Wildlife Passage Facilities*
* *Wildlife Propagation Facilities*
* *Program Support Facilities*
* *Public Access Facilities*

For all other component types, update the following – if applicable:

1. Component Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Component Type (check one based on the Facility Type selected on previous page):

Shooting Ranges

* Archery ranges
* Rifle ranges
* Pistol ranges
* Shotgun (trap or skeet) ranges
* Office building/program support facilities

Fish Hatcheries

* Residence buildings/program support facilities
* Aquaculture ponds
* Fish rearing buildings/program support facilities
* Other

Education Centers

* Aquatic Education
* Hunter Education
* Wildlife Education
* Other

Recreational Boating Facilities

* Access roadways
* Carry-down access
* Docks - Enter the following (required): # linear feet \_\_\_\_\_\_\_ # slips \_\_\_\_\_\_\_ (see [job aid](https://wsfrtraining.fws.gov/pluginfile.php/406/mod_page/content/62/Recreational%20Boating%20Facility%20with%20Dock%20Job%20Aid.pdf))
* Fish cleaning stations
* Fuel stations
* Gangways
* Hoist launch systems
* Launch ramps - Enter the following (required): # launching lanes \_\_\_\_\_\_\_\_
* Laundry facilities
* Moorings - Enter the following (required): # physical tie-ups \_\_\_\_\_\_\_\_
* Parking Areas
* Restrooms
* Shade structures
* Wave attenuation/breakwater

Boat Pump Out / Dump Stations

* Dump stations
* Floating restrooms
* Pump out boats
* Pump out stations

Recreational Fishing Facilities

* Fishing piers/platforms
* Parking areas
* Restrooms
* Fish cleaning stations
* Other

Recreational Wildlife Facilities

* Parking areas
* Restrooms
* Campgrounds/shelters
* Viewing platforms
* Other

Water Management Structures

* Wildlife recreation water management structures
* Fisheries recreation water management structures
* Other
1. Useful Life Duration in Years \_\_\_\_\_ and Months \_\_\_\_\_ Useful Life Start Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Description of Component:
	1. Not Applicable
	2. If applicable, enter the statement below

|  |
| --- |
|  |

**Fill out Section II Components and the associated questions for each additional component (copy and paste section II again here, as many times as needed to capture each component)**

#  Location

1. Geographic Location: Update the Shape in TRACS if applicable (draw a polygon, point, or import a shapefile)
2. Is this location sensitive?
* No
* Yes
1. Describe your location (optional):

|  |
| --- |
|  |

1. Pictures of Facility (optional) - attach files and add a comment below:

|  |
| --- |
|  |

1. Facility Web Page (optional): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_