



## **SLF Mitigation Partnership Initiative Pilot Program**

The Ohio Department of Agriculture (ODA) is committed to strengthening our state's number one industry – food and agriculture. We are excited to announce a first-of-its-kind program to mitigate the impact of the invasive spotted lanternfly (SLF) and its invasive host – tree of heaven. We encourage your organization to take part in this initiative, as we work together to suppress populations of SLF in Ohio.

SLF, native to Asia, was first detected in Jefferson County, Ohio in 2020, and has since spread to additional areas across the state. SLF poses a serious threat to grapes, hops, stone fruits, and other economically significant crops. SLF primarily feeds on the tree of heaven (*Ailanthus altissima*), and access to tree of heaven has been tied directly to its spread.

Tree of heaven is an invasive plant that is not native to Ohio. Tree of heaven grows in all types of environments, including along transportation corridors like railroads and highways. It is widely known that these routes are a primary pathway for SLF to spread. Tree of heaven also produces a compound that suppresses germination and growth of many native plants, limiting its competition. Removal of tree of heaven is beneficial to native ecosystems and an effective way to control SLF populations.

Effective SLF management strategies depend on the insect's life stage and environmental conditions. ODA recommends implementing best management practices, including the removal of tree of heaven, destruction of egg masses, and responsible use of chemical treatments when necessary.

To support local efforts, a limited number of grants—up to \$15,000 each with an in-kind match of 10%—are available to organizations working to control SLF populations (universities and extension offices excluded). ODA will provide reimbursement after the project is completed and reports are submitted.

Eligible projects may include:

- Removal of tree of heaven.
- Application of herbicides to kill tree of heaven and prevent resprouting from roots or stumps.
- Application of chemical insecticides to kill nymphs and adults during their active periods (but after hosts are no longer flowering to prevent potential harm to pollinators).
- Egg mass identification and treatment.
- Organized community events focused on SLF control through swatting, squashing, or egg mass scraping, or other approved methods above.

## Spotted Lanternfly (SLF) Community Control Grant Application Instructions for Applicants

State and local government agencies, parks systems, and non-profit organizations such as cooperative weed management associations, land conservancies, etc. with a track record of success in invasive plant or pest management are invited to apply. Priority will be given to agencies working in the most infested areas.

Please complete all sections of this application. Incomplete applications may not be considered for funding. Before submitting, ensure that:

- All required fields are filled out clearly and accurately.
- Project activities align with SLF control goals (e.g., egg mass treatment, host plant removal, insecticide or herbicide treatment).
- Previous experience with related projects is described to demonstrate potential for successful completion of proposed projects.
- The budget is itemized and reflects realistic costs.
- Applicants provide a 10% match (either matching funds or in-kind match of labor, supplies, equipment, etc.).
- The application is signed and dated by an authorized representative.
- Recipients will need to register on sam.gov and have an AUI ID and also need to have an Ohio ID and be set up as a payee.

**There will be a reporting requirement to be completed 30 days after award end date**

**Submission Deadline:** January 30, 2026

**\*Current funding cycle runs through July 31, 2026**

**Submit completed applications to:** [plantpest@agri.ohio.gov](mailto:plantpest@agri.ohio.gov)

**Questions?** Contact Jonathan Shields, [Jonathan.Shields@agri.ohio.gov](mailto:Jonathan.Shields@agri.ohio.gov)

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### Applicant Information

- **Organization/Agency Name:** \_\_\_\_\_
- **Primary Contact Name:** \_\_\_\_\_
- **Title/Role:** \_\_\_\_\_
- **Phone Number:** \_\_\_\_\_
- **Email Address:** \_\_\_\_\_
- **Mailing Address:** \_\_\_\_\_

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## Project Overview

- **Project Title:** \_\_\_\_\_
- **Project Location(s):** \_\_\_\_\_
- **Proposed Start Date:** \_\_\_\_\_
- **Proposed End Date:** \_\_\_\_\_
- **Funding cycle runs through July 31, 2026**

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## Project Description

*Provide a brief summary of your proposed project, including previous experience with related projects, project goals, target areas, and expected outcomes. If accessing private landowner's property, documented authorization to access the landowner's property must be obtained prior to the commencement of any work and before acceptance of the proposal. Project updates are expected through participation in regular program meetings during the award period. A final report describing the project activities, participants, number of trees removed or treated, insects or egg masses addressed, expenses, and outcomes is required no later than 30 days following the end of the award period.*

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## Project Activities

*Check all that apply and provide a short explanation for each selected activity:*

☐ **Host Plant (Tree of Heaven) Removal**

*Description:* \_\_\_\_\_

☐ **Herbicide Application**

*Description:* \_\_\_\_\_

☐ **Insecticide Application**

*Description:* \_\_\_\_\_

☐ **Egg Mass Identification and Treatment**

*Description:* \_\_\_\_\_

☐ **Management Focused Community Events**

*Description:* \_\_\_\_\_

☐ **Other (please specify):** \_\_\_\_\_

*Description:* \_\_\_\_\_

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**Budget Estimate**

*Provide a breakdown of how the requested funds will be utilized. Please include a detailed budget for any equipment or supplies to be purchased, personnel costs, expenses, etc. anticipated to achieve project goals.*

**Total Amount Requested:** \$ \_\_\_\_\_

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**Partnerships (if applicable)**

*List any partners or collaborators involved in the project and their roles.*

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**Monitoring and Reporting**

*Describe how you will track progress and any metrics you will use to measure the success of your project.* \_\_\_\_\_

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**Authorization**

By signing below, I certify that the information provided in this application is accurate and that the organization agrees to comply with all grant requirements.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## Reviewer Scoring Rubric

Evaluation Criteria	Description	Points Available	Score Given	Reviewer Comments
Project Relevance	Clearly addresses SLF control through eligible activities.	20		
Project Description & Goals	Provides a clear, detailed summary with defined goals and expected outcomes.	15		
Feasibility & Timeline	Project is realistic and achievable within the proposed timeframe.	10		
Budget Justification	Budget is reasonable, well-detailed, and aligns with project goals.	15		
Community Engagement	Involves local stakeholders, volunteers, or public outreach efforts.	10		
Partnerships (if applicable)	Demonstrates collaboration with other organizations or agencies.	10		
Monitoring & Evaluation	Includes a plan to track progress and measure success.	10		
Innovation or Impact	Demonstrates creativity or potential for significant local impact.	10		
<b>Total</b>		<b>100</b>	<b>=</b>	