Trail Management Objectives (TMO)

Area: _____ **Park Unit:** _____ **District:** _____

Trail Name: _____ **Trail ID:** _____

Trail Beginning Termini: _____ **Beg. Milepost:** _____

Trail Ending Termini: _____ **End. Milepost:** _____

Trail Inventory Length: _____ Miles **Trail Mileage Source:** ☐ Wheel ☐ GPS ☐ Map ☐ Unknown

TMO Trail Section (if applicable)

Section Beg. Termini: _____ **Beg. Milepost:** _____

Sec.# _____ **Section End. Termini:** _____ **End. Milepost:** _____

Designed Use Objectives

Trail Type
(Check one)
- ☐ Terra Trail
- ☐ Snow Trail
- ☐ Water Trail

Trail Class
(Check one)
- ☐ 1 (Primitive/Undeveloped)
- ☐ 2 (Simple/Minor Development)
- ☐ 3 (Developed/Improved)
- ☐ 4 (Highly Developed)
- ☐ 5 (Fully Developed)

Difficulty Rating
(Check one)
- ☐ Easiest (white circle)
- ☐ Easy (green circle)
- ☐ Intermediate (blue square)
- ☐ Difficult (black diamond)
- ☐ Most Difficult (dbl diamond)
- ☐ _____

Elevation Chg
☐ + or - Feet

Level of Use
- ☐ Low (0-10 per day)
- ☐ Moderate (10-100 / day)
- ☐ High (100+ per day)

☐ Est ☐ Act ☐ Counter

Designed Use
(Check one)
- ☐ Hiker / Pedestrian
- ☐ Pack & Saddle
- ☐ Bicycle
- ☐ Wheelchair (ADA stds)
- ☐ Motorcycle
- ☐ All Terrain Vehicle (ATV)
- ☐ _____
- ☐ Cross-Country Ski
- ☐ Snowmachine
- ☐ Snowshoe
- ☐ Dog Sled
- ☐ Skijoring
- ☐ Watercraft - Non Motorized
- ☐ Watercraft - Motorized
- ☐ _____

Design Parameters
(Fill in all that apply)
- ☐ Basic Tread Width, inches
- ☐ Clearing Width, feet
- ☐ Clearing Height, feet
- ☐ Backslope: 1/1, 2/1, 1/2
- ☐ Target Grade, % (>90% of trail)
- ☐ Max. Sustainable Grade, % for distance (ft) _____
- ☐ Turn Radius Min, ft
- ☐ _____

Target Frequency
Maintenance per Year
(Fill in all that apply)
- ☐ Trail Opening
- ☐ Tread Repair
- ☐ Drainage Cleanout
- ☐ Logging Out
- ☐ Brushing
- ☐ Snow Trail Grooming
- ☐ Condition Survey
- ☐ _____

Trail Management Objectives (TMO) Part 2

Trail Use Strategies

Managed Use — Season

(Fill in all that apply)

Managed Use	From (mm/dd)	To (mm/dd)
☐ Hiker / Pedestrian		
☐ Pack & Saddle		
☐ Bicycle		
☐ Wheelchair		
☐ Motorcycle		
☐ All Terrain Vehicle (ATV)		
☐ _____		
☐ Cross-Country Ski		
☐ Snowmobile		
☐ Dog Sled		
☐ Skijoring		
☐ _____		
☐ Watercraft - NonMotorized		
☐ Watercraft - Motorized		

Prohibited Use

(Check if applicable)

Prohibited Use	From Date (mm/dd)	To Date (mm/dd)
☐ All Motorized Use		

(Or, fill in all that apply)

	From Date (mm/dd)	To Date (mm/dd)
☐ Hiker / Pedestrian		
☐ Pack & Saddle		
☐ Bicycle		
☐ Wheelchair		
☐ Motorcycle		
☐ All Terrain Vehicle (ATV)		
☐ _____		
☐ Cross-Country Ski		
☐ Snowmobile		
☐ Dog Sled		
☐ Skijoring		
☐ _____		
☐ Watercraft - NonMotorized		
☐ Watercraft - Motorized		

Other Use

(Optional: Check any that apply)

Other Use	Accept	Discourage	Eliminate
☐ Hiker / Pedestrian	☐	☐	☐
☐ Pack & Saddle	☐	☐	☐
☐ Bicycle	☐	☐	☐
☐ Wheelchair	☐	☐	☐
☐ Motorcycle	☐	☐	☐
☐ All Terrain Vehicle (ATV)	☐	☐	☐
☐ _____	☐	☐	☐
☐ Cross-Country Ski	☐	☐	☐
☐ Snowmobile	☐	☐	☐
☐ Dog Sled	☐	☐	☐
☐ Skijoring	☐	☐	☐
☐ _____	☐	☐	☐
☐ Watercraft - NonMotorized	☐	☐	☐
☐ Watercraft - Motorized	☐	☐	☐

Special Considerations

(Check any that apply. Underline appropriate clarifier in parenthesis. Provide specifics and reference information below.)

- ☐ Accessible per Current Agency Guidelines
- ☐ Mechanized Tools or Equipment Prohibited
- ☐ Threat, Endang or Sens Species (Plant / Wildl)
- ☐ Cultural Resource Present
- ☐ Easement across Non-Park Land (Existing / Needed)
- ☐ Existing Permit or Agreement (Trail-Specific / Area)
- ☐ _____

Remarks / Reference Information

(Use continuation sheet if needed.)

Completed by: _____ Title: _____ Date:_____

Approved by: _____ Title: _____ Date:_____

Trail Management Objectives

Trail Name: [blank]   **Trail ID:** [blank]

Remarks / Reference Information (Continuation Sheet)

(Type notes over this message. To insert spaces between lines of text in Excel, press Alt and Enter.)