



**Clean Vessel Assistance Program
Operations and Maintenance
LETTER OF INTENT
2016**

Re: *Owner Name:* _____

Facility Name(s):* _____

Project Name(s):* _____

***Please provide the name of each Facility (marina) and Project (pumpout/dump facility) for which you intend to request funding. Please attach a separate page if necessary.**

This Letter of Intent (LOI) is to notify the New York State Environmental Facilities Corporation (EFC) of our intent to participate in the Clean Vessel Assistance Program (CVAP) Operation & Maintenance (O&M) Grant Program (Program).

The level of anticipated O&M funding requested for 2016 (January 1, 2016 – December 31, 2016) is:
\$ _____ (Maximum \$5,000 per pumpout boat/\$2,000 per land-based pumpout/dump station)

- Please check if a pumpout fee is collected (not to exceed \$5 per pumpout).**
- Please check if requesting costs associated with pumpout boat support.**

I hereby certify that I am an Authorized Representative of the above-named Owner or municipality and am authorized to conduct business on its behalf, including the authority to execute all contracts and agreements, and submit for reimbursement under the Program. I understand that specific requirements must be met in order to receive available funding under the Program, and that records documenting costs must be maintained and provided to the Corporation for the year in order to receive reimbursement under the Program. I understand that by submitting this LOI, the above facility(s) and project(s) will be given priority for funding, based upon the availability of Program funds and submission of a complete reimbursement package as detailed in the O&M Guidance. If applicable, I have authorized the individual identified below to act as a daily contact, to answer general questions and provide requested documentation.

Name of Authorized Representative: _____ *Title:* _____

Signature: _____ *Date:* _____

Address: _____

Telephone: _____ *Fax:* _____ *E-mail:** _____

***The Agreement will be e-mailed to the address provided. Please contact EFC if this will be an issue.**

Name of Daily Contact

Title

Telephone & Email