



**ROUND 2
NYS WATER INFRASTRUCTURE IMPROVEMENT
ACT GRANT APPLICATION
CLEAN WATER**

A. APPLICANT

Name of Applicant: _____ County: _____
 Federal I.D. Number: _____ DUNS Number: _____
 Authorized Representative: _____ Phone Number: _____
 Title: _____ Email Address: _____
 Daily Contact Name: _____ Phone Number: _____
 Title: _____ Email Address: _____
 Company: _____

B. GENERAL INFORMATION

Project Name: _____
 Project Location: _____
 Service Area: _____
 Population of Project Area: _____

Legislative Districts (you may include two districts)		
US	NY	NY
Congress	Senate	Assembly
_____	_____	_____

Estimated Flow for Project Area Served (average daily flow, mgd): _____
 Treatment Works Permitted Flow (mgd): _____
 SPDES Permit Number: _____
 Treatment Works Receiving Waterbody: _____
 Receiving Waterbody affected by project, if different than above: _____
 Location of discharge to Rec. Waterbody: _____ Latitude _____ Longitude _____
 Total Estimated Project Cost: \$ _____

Design Start Date: _____ Environmental Review Completion Date: _____
 Construction Start Date: _____ Construction End Date: _____
 Select "T" for a target date and "A" for an actual date



C. PROJECT INFORMATION

1. Provide a brief description of your project:

2. Is the project currently listed on the 2016 Intended Use Plan (IUP) Annual CWSRF Project Priority List or are you interested in CWSRF loan financing?

- Yes, we are currently on the IUP. CWSRF Project Number: _____
- No, but we intend to list our project on the 2017 IUP
- No, we are not interested in CWSRF financing and are applying for a NYS Water Grant only

3. Is this project required by an executed enforcement instrument or required by a SPDES permit to be undertaken (e.g. consent order, judicial order, compliance schedule, DEC-approved Long Term Control Plan, etc)?

- No Yes If yes, indicate the type, date of execution and reason for enforcement action as it relates to the project. Please submit an executed copy of the enforcement instrument to EFC.



4. Does your project address a combined sewer overflow (CSO) and/or sanitary sewer overflow (SSO) issue in the existing system? If so, indicate which type below.

Overflow Type: CSO SSO Both No

5. How many documented untreated sewage discharges have been reported to DEC in the last year (as per Part 750-2.7 - Incident Reporting?)

Number of documented discharges 1/1/15 to 6/1/2016: _____

Date of last documented discharge: _____

Specify receiving waterbody and location:

6. In the event of a CSO or SSO overflow event, are there any critical community resources (e.g. hospitals, schools, etc), sensitive environmental habitats (e.g. wetlands, shellfish habitat, etc), or other areas where a public health threat could be created (e.g. neighborhoods, playgrounds, parks, recreational facilities) that are affected by the overflow event?

No Yes If yes, please describe:



7. Will your project reduce flood damage risk and vulnerability or enhance resiliency to rapid hydrologic change, sea level rise, storm-related wave action, tidal influence, or a natural disaster at a treatment works?

No Yes If yes, please describe:

8. Is the project located in a flood zone and vulnerable to damage or loss of treatment in the event of a flood?

No 100 yr 500 yr

If yes, attach a copy of a FEMA Flood Map, clearly identifying the location of your treatment works, including conveyance system, with your application and describe how the scope of the proposed project will reduce or eliminate the risk of damage to the treatment works and associated system due to flooding, sea level rise, storm surges or storm damage:



9. Has the treatment works and the associated system been affected by a federally Declared National Disaster (2010 to current) that resulted in disruption of service of the operation of the treatment plant or sanitary sewer system due to flooding, storm surge, or storm related damages?

No Yes If yes: FEMA Disaster No.: _____ Year: _____

If yes, specify loss of treatment, duration, damaged infrastructure and measures taken to restore service (i.e. repairs, replacement or temporary measures). Include information on the noted impacts to the receiving waterbody affected if/when there was loss of treatment, and SPDES permit number:

10. If the project is located in an area that has been subject to flooding or may be subject to flooding as a result of sea-level rise, it must be designed to the most protective (highest elevation) of the criteria presented below. This design criterion increases the flood resiliency of the treatment works to promote uninterrupted operation of units constructed through the grant during the next severe storm or natural disaster. Critical equipment are defined as equipment critical to the ongoing operation of the plant and that cannot be easily and quickly replaced if it is exposed to water, wave action, or salt.

Baseline Standard for grant funds	Critical Equipment (exposed to sea level rise)	Critical Equipment (not exposed to sea level rise)
100-year + 2 feet	100-year + 5 feet	100-year + 3 feet
Highest recorded flood level + 1 foot	Highest recorded flood level + 4 feet	Highest recorded flood level + 2 feet
500-year	500-year	500-year

Does the project meet the minimum baseline elevation standards?

No Yes NA - If N/A, please explain



11. In the event of a treatment works loss of operation from a flood, storm surge, or natural disaster, could the proposed project protect critical community resources (e.g. hospital, school, community center, nursing home, etc), sensitive environmental habitats (e.g. wetlands, shell fishing beds, barrier islands, etc), or other areas where a public health threat could be created (e.g. neighborhoods, playgrounds, etc) from potential contamination?

No Yes

If yes, list the at-risk resources/habitat below, providing an explanation as to why they are critical to the community/environment and how they may be affected, and how the project is expected to protect them:

12. Is the project adjacent to waterbodies subject to sea level rise, tidal influence or wave action?

No Yes If yes, describe:



D. TOTAL PROJECT BUDGET

Please add line items to the budget as needed. Note, if you are submitting a CWSRF financing application with the NYSWG Application, you do not need to complete the table below. Refer to the Instructions for an explanation of the need to submit signed contracts or agreements prior to release of CWSRF disbursements. If you have additional questions, please call EFC or refer to the Intended Use Plan.

COST CATEGORY	COLUMN A Total Project Costs	COLUMN B Ineligible Costs and/or Costs to be Paid by Sources other than CWSRF
1. Total Construction Costs	\$	\$
2. Engineering Costs (Firm Name and Date)	\$	\$
	\$	\$
	\$	\$
	\$	\$
3. Other Expenses		
a) Local Counsel	\$	\$
b) Bond Counsel	\$	\$
c) Work Force		
- Technical	\$	\$
- Administrative	\$	\$
d) Fiscal Services	\$	\$
e) Net Interest	\$	\$
f) Miscellaneous (please describe)		
	\$	\$
	\$	\$
	\$	\$
4. Equipment	\$	\$
5. Land Acquisition	\$	\$
6. Contingencies	\$	\$
7. Subtotal - Project Costs	\$	\$
8. Less: Other Sources	\$	
9. Subtotal – Project Costs to be Financed	\$	
10. Issuance Costs (if applicable)		
a) Direct Expenses ¹	\$	
b) State Bond Issuance Charge ²	\$	
11. SUBTOTAL Issuance Costs (sum of 10.a & b)	\$	
12. TOTAL (sum of Project Costs and Issuance Costs Subtotals; 9&11)	\$	

1. Direct Expenses (10 a) equal 1.0% of Subtotal - Project Costs to be Financed (9).

2. The State Bond Issuance Charge (10 b) of up to 0.84% applies to the total Bonds issued by EFC. For planning purposes, the Applicant should estimate this charge at 0.84% of the sum of (9) (Subtotal-Project Costs to be Financed) and (10 a) (Direct Expenses). The issuance charge applies only to leveraged and bond guarantee pool financings.



E. REQUIRED DOCUMENTS

The following documents are required and must be submitted with the application

Enclosed	Previously Submitted to EFC	Not Applicable
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Project Listing through PLUS *(new listings only for projects seeking CWSRF financial assistance)*

PLUS must be used for projects that are not currently on the CWSRF Intended Use Plan (IUP) and are interested in receiving CWSRF financial assistance. Refer to the current IUP for details on how to list a project for CWSRF assistance.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Engineering Report

An approvable engineering report for your project must be submitted with the NYS Water Grant application or previously submitted to EFC. The report must follow the CWSRF Engineering Report Template available in the 2016 IUP.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Smart Growth Assessment Form

Projects applying for a NYS Water Grant are subject to the State Smart Growth Public Infrastructure Policy Act. In order to comply with the Act, EFC requires that applicants submit a Smart Growth Assessment for all projects when submitting an engineering report. This form is located on the EFC website at www.efc.ny.gov/nyswatergrants.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Plan of Finance

Projects that are applying for a NYS Water Grant and are not seeking CWSRF financial assistance will be required to submit a Plan of Finance. A copy of the Plan of Finance is available in Exhibit 1.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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CWSRF Financing Application

Projects that are applying for a NYS Water Grant and are seeking CWSRF financial assistance will be required to submit a complete CWSRF financing application as described in the 2016 IUP. The CWSRF financing application and instructions are located on the EFC website.



Enclosed	Previously Submitted to EFC	Not Applicable
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Bond Resolution (Certified)

A Bond Resolution must be adopted establishing the legal authority to issue debt for the project and submitted along with proof of publications of permissive referendum (if applicable) and estoppel notice).

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Sewer District, District Extension Formation or Other OSC Approvals

A sewer district must be established or expanded, or the maximum amount to be expended for such district increased, and Office of State Comptroller (OSC) approval obtained, if required (this is only applicable to towns and counties).

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Environmental Review Determination

Projects will need to comply with the State Environmental Quality Review (SEQR) Act and the State Environmental Review Process (SERP) as appropriate.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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SHPO Project Review Determination Letter

Projects will need to solicit a letter from Office of Parks, Recreation, and Historic Preservation (OPRHP) indicating that a suitable State Historic Preservation Office (SHPO) review of potential impacts on historic properties and resources has been initiated or completed.



F. ACKNOWLEDGEMENTS

1. Upon submission of this application, you acknowledge your community's responsibility to comply with New York State Executive Law, Article 15-A with respect to MWBE and to the State Smart Growth Public Infrastructure Policy Act. By checking this box, you acknowledge that you are aware of these obligations and that you are authorized to make this acknowledgment on behalf of the applicant.

MWBE goals with CWSRF financial assistance - 23%
MWBE goals for Grant-Only applicants - 30%

Acknowledged

2. In order to receive financing assistance through the CWSRF, you will need to meet various other New York State and federal requirements. These requirements include, but are not limited to, Davis-Bacon and related acts, and American Iron and Steel requirement. Recipients of SRF financial assistance will be required to perform certain actions to verify the compliance and ensure certain provisions are contained in all contracts and subcontracts. By checking this box, you acknowledge that you are aware of this requirement and that you are authorized to make this acknowledgment on behalf of the applicant.

Acknowledged

Please refer to the current IUP for your responsibilities under these programs.



G. SIGNATURE FOR GRANT FORM

CERTIFICATION: On behalf of the applicant, and in accordance with the Resolution by

_____ (governing body of municipal applicant)

authorizing me to do so, I apply for NYS Water Grant assistance for the project described in this application. By signing this application, I certify and agree on behalf of the applicant and its governing body that all of the information contained in this application, in other statements and exhibits attached hereto or referenced herein, and in all statements, data and supporting documents which have heretofore been made or furnished for the purpose of receiving NYS Water Grant Assistance for the project described herein, are true, correct and complete to the best of my knowledge and belief.

I further agree on behalf of the applicant that, if CWSRF Assistance is provided for the project described in this application, the applicant shall comply with all applicable provisions of the Federal Water Pollution Control Act, 33 U.S.C. 1251 et. Seq. Chapter 565 of the Laws of New York of 1989, as amended, 6 NYCRR Part 649 and 21 NYCRR Part 2602, as amended, regarding CWSRF Assistance.

I further agree that the applicant will comply with the provisions of the Minority and Women’s Business Enterprise – Equal Employment Opportunity requirements of Article 15-A of the New York State Executive Law and other requirements as prescribed by the Environmental Facilities Corporation by providing opportunities for MBE/WBE participation, and will maintain such records and take such actions necessary to demonstrate such compliance throughout the construction of the project.

Further, I acknowledge that offering a written instrument knowing that the written instrument contains a false statement or false information, with the intent to defraud the State or any political subdivision, public authority or public benefit corporation of the State, with the knowledge or belief that it will be filed with or recorded by the State or any political subdivision, public authority or public benefit corporation of the State, constitutes a crime under New York State Law.

_____ (Signature of Authorized Municipal Representative)

_____ (Date)

_____ (Name and Title)

_____ (Applicant)



Environmental Facilities Corporation

625 Broadway
Albany, New York 12207-2997
(518) 402-6924 (p)
(518) 402-6954 (f)
NYSWaterGrants@efc.ny.gov
www.efc.ny.gov/nyswatergrants

EXHIBIT 1 PLAN OF FINANCE



NYS WATER INFRASTRUCTURE IMPROVEMENT ACT PLAN OF FINANCE INSTRUCTIONS ROUND 2

1. PLAN OF FINANCE AND FUNDING SOURCES

A Plan of Finance must be completed by Applicants that are applying for a NYS Water Grant only but are not interested in seeking CWSRF financial assistance, and should reflect all known or anticipated sources of funding.

If you have previously issued any debt associated with this project(s), EFC will contact you for specific information to document such project debt. EFC will also work with you to obtain, and assist in the development as necessary, of a long-term plan of finance.

2. INTERFUND BORROWINGS

An interfund borrowing occurs when an applicant temporarily borrows available money in one fund for another fund purpose with the intent to repay the money from future proceeds. Generally, the applicant must adopt a resolution pursuant to General Municipal Law, Section 9, or have authorization in a bond resolution to reimburse the money from the proceeds of BANs or bonds.

Interfund borrowing reimbursements may be subject to certain limitations under applicable tax regulations. EFC staff will work with you and your bond counsel to determine if there are any restrictions which may affect such reimbursement.

Indicate if reimbursement is requested for Interfund Borrowings. If yes, please provide a copy of the municipal authorizing resolution and cost documentation for the interfund borrowing.

3. INTERMUNICIPAL OR OTHER AGREEMENTS

Please provide a copy of existing or proposed Intermunicipal Agreements or other contracts, if any, relating to the project, the district or the system for the ownership, construction, payment, use, operation or management. Including agreements with any local, state or federal agency (i.e. State Department of Corrections), or regional water or sewer authority.

A copy of any draft agreement critical to the project will also need to be provided to EFC before a short-term financing can be closed. The expiration date of any significant intermunicipal agreement should be the same as the term of a CWSRF long-term financing. An intermunicipal agreement is significant to the project, if it is necessary for the continued operation of the project (i.e. an agreement for water use) or relates to the financial viability of the project (i.e. payments received).

4. PLANNED DEBT ISSUANCE

This information is available from the applicant's Chief Fiscal Officer. If the applicant has a current capital plan, including a comprehensive fiscal performance plan (associated with the AIM state aid program), please submit that plan to EFC if requested.



NYS WATER INFRASTRUCTURE IMPROVEMENT ACT GRANT PLAN OF FINANCE

Applicant _____
 Project Name: _____

This form is required for Applicants that are applying for a NYS Water Grant only and are **not** seeking CWSRF financial assistance. The Plan of Finance should reflect all known or anticipated sources of funding. Please complete a separate form for each project.

1. PLAN OF FINANCE AND FUNDING SOURCES

Amount

Total Project Costs: \$ _____
 (Should equal the project budget)

NYS Water Grant Request: \$ _____

Other Funding Sources

1. Grants (list separately)

_____ \$ _____
 _____ \$ _____
 _____ \$ _____

2. Municipal Contribution

\$ _____

3. Long-Term Loans

SRF

Other (list source)

\$ _____
 \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____

4. Short-Term Loans

(expected to be retired with funds from 1, 2 or 3 above)

\$ _____
 \$ _____
 _____ \$ _____

Status (provide dates)

Applied Approved Received

Have you issued any debt with respect to this project? Yes No Amount Outstanding: \$ _____

Note: "Loans" above may include funds borrowed from banks or other lenders, in the form of Notes, Bonds or other debt.



2. INTERFUND BORROWINGS

Will this financing reimburse an interfund borrowing? Yes No

If yes, please provide a copy of the municipal authorizing resolution and cost documentation for the interfund borrowing.

3. INTERMUNICIPAL OR OTHER AGREEMENTS

Has the applicant entered into, or is the applicant contemplating entering into, any agreement(s) between itself and any other municipality (or municipalities) or any other entity regarding the sharing of responsibility for ownership, construction, payment, use, operation or maintenance of the project?

Yes No

If yes, please name the parties below, the term (in years of the agreement) and include a copy of any and all such agreement(s) with the application submission.

4. PLANNED DEBT ISSUANCE

Describe current plans for debt issuance for the next three years. (Please include any authorized debt which is not project-related).