

Water and Wastewater Program

INITIAL APPLICATION GUIDE

Committed to the
future of rural
communities

United States
Department of Agriculture
Rural Development
New York



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Follow the steps shown in this guide to complete an initial application package under USDA Rural Development's Water and Wastewater Programs.

APPLICABLE PROGRAMS

This application guide is designated for the following programs:

- **Water and Waste Disposal Loan and Grant Program**

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Cortland	Christina Cerio
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DEADLINES

Applications can be submitted at any time and will be processed based on funding availability.

INITIAL APPLICATION GUIDE

Applicants are encouraged to contact USDA Rural Development early in the project development process to discuss project financing on an informal basis. USDA Rural Development will typically conduct a site visit with the applicant to discuss the project. After initial discussion with USDA Rural Development Staff, the municipality will submit an initial application package including a Preliminary Engineering Report (PER), Environmental Report (ER), construction budget and list of short lived assets for the facility. For assistance, please contact the office that serves the county where the project is located. See “Find a Rural Development Office” on the New York Rural Development website at <http://www.rurdev.usda.gov/NYHome.html> for a complete list of offices.

Upon receipt of an initial application, USDA Rural Development will complete an overall review of the financial, environmental, and engineering components of the project. This includes an evaluation of the applicant for eligibility, ability to obtain credit elsewhere and an evaluation of the proposed project. An environmental review will be conducted to determine what environmental impacts the proposed project will have, if any. During this stage of the project, the preliminary engineering and environmental components are heavily emphasized as they are critical to development of the application and normally take the most time to complete. USDA Rural Development advises against taking any actions or incurring any obligations which would either limit the range of the alternatives to be considered or have an adverse effect on the environment.

If the initial application is complete and funding is available, USDA Rural Development (RD) will issue a Preliminary Funding Estimate (PFE) to the applicant outlining the estimated funding package. If funding is not available, Rural Development will notify the applicant of this and indicate when funds may be available.

There are three levels of interest rates available (poverty, intermediate, and market) each on a fixed basis. Eligibility for these different interest rates is determined by the median household income (MHI) of the area being served and the type of project. Poverty rate is based on **documented** health and/or sanitary violations. This documentation should come from a regulatory agency.

Loan repayment terms may not exceed the useful life of the facility or a maximum of 38 years.

For loans USDA RD will require the applicant to obtain interim financing to complete the project. Applicant and other leveraged funds are used first, and then USDA RD Loan funds, and finally, USDA RD grant funds.

USDA RD loan payments must be made by automatic debits (electronic funds transfer) from the borrowers account. **RD loans have no pre-payment penalties and if the borrower would like to make extra payments they are free to do so.**

The borrower is subject to routine periodic servicing actions – review of financial records, civil rights compliance reviews, and security inspections throughout the life of the loan.

All loans are subject to graduation reviews. If it appears that the borrower can obtain financing at reasonable rates and terms in the future, without causing user rates to rise beyond what is reasonable for similar communities, the borrower **may be** required to refinance their debt through other credit.

INITIAL APPLICATION CHECKLIST

Send **TWO copies (unless otherwise noted)** of the initial application items to the RD office that serves the county where the project is located.

A **complete** Rural Development initial application consists of the following items:

- Completed Standard Forms (SF) 424, 424-C, 424-D - Application for Federal Assistance, construction budget and assurances, see pages 5-14.**

NOTE: in block 10 of SF 424, insert the appropriate Catalog of Federal Domestic Assistance (CFDA) number as follows:

Water and Waste Disposal Loan and Grant Program -	10.760
Emergency and Imminent Community Water Assistance Grant -	10.763

- DUNS and CAGE Code Number:** in block 5 of SF 424, DUNS stands for “Data Universal Numbering System.” It is a unique nine-character number that identifies your organization. It is a tool of the Federal government to track how Federal money is distributed. Most large organizations that receive Federal funds already have a DUNS number. If your organization does not have a DUNS number, call 866-705-5711 or use the following Dun & Bradstreet (D&B) online registration web link to receive one free of charge at: <http://fedgov.dnb.com/webform/displayHomePage.do>.

In addition to having a DUNS, applicants must be registered in the System for Award Management (SAM) prior to submitting an application. Registration information can be found at <https://www.sam.gov/portal/public/SAM> . Completing the SAM registration process takes up to five business days, and applicants are strongly encouraged to begin the process early. Once registered, the applicant will receive a CAGE (Commercial and Government Entity) Code Number.

The SAM registration must remain active, with current information, at all times during which an entity has an application under consideration by an agency or has an active Federal Award. To remain registered in the SAM database after the initial registration, the applicant is required to review and update information on an annual basis.

- Water and Waste Eligibility Certification – RUS Bulletin 1780-22.** To qualify, applicants must be unable to obtain the financing from other sources at rates and terms they can afford and/or from their own resources – see page 15.
- Existing Debt Information** – see page 16
- Ethnic Information** for the residents, completed on Form C - see page 17.
- User Information Sheet, Form A.** Complete to determine the number of Equivalent Dwelling Units (EDU’s) for the proposed project. See page 18. **Contact the local office for an automated copy.**
- Copy of the most recent Annual Update Document** submitted to New York State Audit and Control. If an audit has been done, we can accept that in place of the Annual Update Document.

- CURRENT Balance Sheet** – within the last 90 days. Applicants may use own form or Form RD 442-3, found at <http://www.rurdev.usda.gov/regs/formstoc.html>. Balance sheet must be signed.

- A statement from the municipality** advising if any major civil rights impact is likely to result when the proposed project is implemented. If so, give specifics.

- A Fact Sheet** listing all contact information – see page 19.

- Estimated Project Budget completed on Form E**, “Project Budget/Cost Certification”. Complete only column 1. See page 20. **Contact the local office for an automated copy.**

- Six (6) copies of the Preliminary Engineering Report (PER). Ensure the following are included in the report.** Instructions can be found at: http://www.rurdev.usda.gov/RDU_bulletins_water_and_environmental.html.
 - **Information on health or sanitary factors.** Attach copies of any regulatory agency (NYS DOH or DEC) comments documenting existing health or sanitary issues or concerns.
 - **Information on what percentage of users are full-time users, part-time users?**
 - **Information on usage** – number of EDUs – Equivalent Dwelling Units
 - **Legal description and/or location (address) of project, including map(s).**
 - **A schedule of Short Lived Assets** (useful life of 15 years or less) **related to facility being financed. Include a recommended annual cost to fund replacement of short lived assets. Only include items not covered under O & M.**
 - **Information on land to be purchased, rights-of-way or easements to be obtained and associated costs.**
 - **Copy of rules of operation, current rate schedule (all fees charged for all services), date of last rate change and amount of last rate change.**

- Information on how the consulting engineer was selected.**

- Three copies of the Environmental Report completed in accordance with RUS Bulletin 1794A-602, Guide for preparing the Environmental Report for Water and Waste Projects.** The environmental assessment classification is a categorically excluded proposal. The RUS Bulletin can be found at the following address: http://www.rurdev.usda.gov/RDU_Bulletins_Water_and_Environmental.html
Additional environmental information can also be found at: <http://www.rurdev.usda.gov/NYHome.html>

RUS Instruction 1780 and the bulletins are available on-line at http://www.rurdev.usda.gov/RDU_regulations_utilities.html and http://www.rurdev.usda.gov/RDU_bulletins_water_and_environmental.html, respectively.

Forms are available on-line at the following site: <http://www.rurdev.usda.gov/regs/formstoc.html>.

INSTRUCTIONS FOR THE SF-424

Public reporting burden for this collection of information is estimated to average 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503. **PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.**

This is a standard form (including the continuation sheet) required for use as a cover sheet for submission of preapplications and applications and related information under discretionary programs. Some of the items are required and some are optional at the discretion of the applicant or the Federal agency (agency). Required items are identified with an asterisk on the form and are specified in the instructions below. In addition to the instructions provided below, applicants must consult agency instructions to determine specific requirements.

Item	Entry:	Item	Entry:
1.	Type of Submission: (Required): Select one type of submission in accordance with agency instructions. <ul style="list-style-type: none"> • Preapplication • Application • Changed/Corrected Application – If requested by the agency, check if this submission is to change or correct a previously submitted application. Unless requested by the agency, applicants may not use this to submit changes after the closing date. 	10.	Name Of Federal Agency: (Required) Enter the name of the Federal agency from which assistance is being requested with this application.
		11.	Catalog Of Federal Domestic Assistance Number/Title: Enter the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested, as found in the program announcement, if applicable.
2.	Type of Application: (Required) Select one type of application in accordance with agency instructions. <ul style="list-style-type: none"> • New – An application that is being submitted to an agency for the first time. • Continuation - An extension for an additional funding/budget period for a project with a projected completion date. This can include renewals. • Revision - Any change in the Federal Government's financial obligation or contingent liability from an existing obligation. If a revision, enter the appropriate letter(s). More than one may be selected. If "Other" is selected, please specify in text box provided. A. Increase Award B. Decrease Award C. Increase Duration D. Decrease Duration E. Other (specify)	12.	Funding Opportunity Number/Title: (Required) Enter the Funding Opportunity Number and title of the opportunity under which assistance is requested, as found in the program announcement.
		13.	Competition Identification Number/Title: Enter the Competition Identification Number and title of the competition under which assistance is requested, if applicable.
		14.	Areas Affected By Project: List the areas or entities using the categories (e.g., cities, counties, states, etc.) specified in agency instructions. Use the continuation sheet to enter additional areas, if needed.
3.	Date Received: Leave this field blank. This date will be assigned by the Federal agency.	15.	Descriptive Title of Applicant's Project: (Required) Enter a brief descriptive title of the project. If appropriate, attach a map showing project location (e.g., construction or real property projects). For preapplications, attach a summary description of the project.
4.	Applicant Identifier: Enter the entity identifier assigned by the Federal agency, if any, or applicant's control number, if applicable.		
5a.	Federal Entity Identifier: Enter the number assigned to your organization by the Federal Agency, if any.	16.	Congressional Districts Of: (Required) 16a. Enter the applicant's Congressional District, and 16b. Enter all District(s) affected by the program or project. Enter in the format: 2 characters State Abbreviation – 3 characters District Number, e.g., CA-005 for California 5 th district, CA-012 for California 12 th district, NC-103 for North Carolina's 103 rd district. • If all congressional districts in a state are affected, enter "all" for the district number, e.g., MD-all for all congressional districts in Maryland. • If nationwide, i.e. all districts within all states are affected, enter US-all. • If the program/project is outside the US, enter 00-000.
5b.	Federal Award Identifier: For new applications leave blank. For a continuation or revision to an existing award, enter the previously assigned Federal award identifier number. If a changed/corrected application, enter the Federal Identifier in accordance with agency instructions.		
6.	Date Received by State: Leave this field blank. This date will be assigned by the State, if applicable.		
7.	State Application Identifier: Leave this field blank. This identifier will be assigned by the State, if applicable.		
8.	Applicant Information: Enter the following in accordance with agency instructions: a. Legal Name: (Required): Enter the legal name of applicant that will undertake the assistance activity. This is the name that the organization has registered with the Central Contractor Registry. Information on registering with CCR may be obtained by visiting the Grants.gov website.	17.	Proposed Project Start and End Dates: (Required) Enter the proposed start date and end date of the project.
	b. Employer/Taxpayer Number (EIN/TIN): (Required): Enter the Employer or Taxpayer Identification Number (EIN or TIN) as assigned by the Internal Revenue Service. If your organization is not in the US, enter 44-4444444.		
	c. Organizational DUNS: (Required) Enter the organization's DUNS or DUNS+4 number received from Dun and Bradstreet. Information on obtaining a DUNS number may be obtained by visiting the Grants.gov website		
	d. Address: Enter the complete address as follows: Street address (Line 1 required), City (Required), County, State (Required, if country is US), Province, Country (Required), Zip/Postal Code (Required, if country is US).		
	e. Organizational Unit: Enter the name of the primary organizational unit (and department or division, if applicable) that will undertake the		
		18.	Estimated Funding: (Required) Enter the amount requested or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines, as applicable. If the action will result in a dollar change to an existing award, indicate only the amount of the change. For decreases, enclose the amounts in parentheses.
		19.	Is Application Subject to Review by State Under Executive Order 12372 Process? Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the

	assistance activity, if applicable.		State intergovernmental review process. Select the appropriate box. If "a." is selected, enter the date the application was submitted to the State																								
	f. Name and contact information of person to be contacted on matters involving this application: Enter the name (First and last name required), organizational affiliation (if affiliated with an organization other than the applicant organization), telephone number (Required), fax number, and email address (Required) of the person to contact on matters related to this application.	20.	Is the Applicant Delinquent on any Federal Debt? (Required) Select the appropriate box. This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans and taxes. If yes, include an explanation on the continuation sheet.																								
9.	Type of Applicant: (Required) Select up to three applicant type(s) in accordance with agency instructions.	21.	Authorized Representative: (Required) To be signed and dated by the authorized representative of the applicant organization. Enter the name (First and last name required) title (Required), telephone number (Required), fax number, and email address (Required) of the person authorized to sign for the applicant. A copy of the governing body's authorization for you to sign this application as the official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.)																								
	<table border="1"> <tr> <td>A. State Government</td> <td>M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education)</td> </tr> <tr> <td>B. County Government</td> <td>N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education)</td> </tr> <tr> <td>C. City or Township Government</td> <td>O. Private Institution of Higher Education</td> </tr> <tr> <td>D. Special District Government</td> <td>P. Individual</td> </tr> <tr> <td>E. Regional Organization</td> <td>Q. For-Profit Organization (Other than Small Business)</td> </tr> <tr> <td>F. U.S. Territory or Possession</td> <td>R. Small Business</td> </tr> <tr> <td>G. Independent School District</td> <td>S. Hispanic-serving Institution</td> </tr> <tr> <td>H. Public/State Controlled Institution of Higher Education</td> <td>T. Historically Black Colleges and Universities (HBCUs)</td> </tr> <tr> <td>I. Indian/Native American Tribal Government (Federally Recognized)</td> <td>U. Tribally Controlled Colleges and Universities (TCCUs)</td> </tr> <tr> <td>J. Indian/Native American Tribal Government (Other than Federally Recognized)</td> <td>V. Alaska Native and Native Hawaiian Serving Institutions</td> </tr> <tr> <td>K. Indian/Native American Tribally Designated Organization</td> <td>W. Non-domestic (non-US) Entity</td> </tr> <tr> <td>L. Public/Indian Housing Authority</td> <td>X. Other (specify)</td> </tr> </table>	A. State Government	M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education)	B. County Government	N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education)	C. City or Township Government	O. Private Institution of Higher Education	D. Special District Government	P. Individual	E. Regional Organization	Q. For-Profit Organization (Other than Small Business)	F. U.S. Territory or Possession	R. Small Business	G. Independent School District	S. Hispanic-serving Institution	H. Public/State Controlled Institution of Higher Education	T. Historically Black Colleges and Universities (HBCUs)	I. Indian/Native American Tribal Government (Federally Recognized)	U. Tribally Controlled Colleges and Universities (TCCUs)	J. Indian/Native American Tribal Government (Other than Federally Recognized)	V. Alaska Native and Native Hawaiian Serving Institutions	K. Indian/Native American Tribally Designated Organization	W. Non-domestic (non-US) Entity	L. Public/Indian Housing Authority	X. Other (specify)		
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Application for Federal Assistance SF-424*** 1. Type of Submission:**

- Preapplication
 Application
 Changed/Corrected Application

*** 2. Type of Application:**

- New
 Continuation
 Revision

* If Revision, select appropriate letter(s):

* Other (Specify):

* 3. Date Received:

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier:

State Use Only:

6. Date Received by State:

7. State Application Identifier:

8. APPLICANT INFORMATION:

* a. Legal Name:

* b. Employer/Taxpayer Identification Number (EIN/TIN):

* c. Organizational DUNS:

d. Address:

* Street1:

Street2:

* City:

County/Parish:

* State:

Province:

* Country:

 USA: UNITED STATES

* Zip / Postal Code:

e. Organizational Unit:

Department Name:

Division Name:

f. Name and contact information of person to be contacted on matters involving this application:

Prefix:

* First Name:

Middle Name:

* Last Name:

Suffix:

Title:

Organizational Affiliation:

* Telephone Number:

Fax Number:

* Email:

Application for Federal Assistance SF-424

*** 9. Type of Applicant 1: Select Applicant Type:**

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

*** 10. Name of Federal Agency:**

11. Catalog of Federal Domestic Assistance Number:

CFDA Title:

*** 12. Funding Opportunity Number:**

* Title:

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

Add Attachment

Delete Attachment

View Attachment

*** 15. Descriptive Title of Applicant's Project:**

Attach supporting documents as specified in agency instructions.

Add Attachments

Delete Attachments

View Attachments

Application for Federal Assistance SF-424

16. Congressional Districts Of:

* a. Applicant

* b. Program/Project

Attach an additional list of Program/Project Congressional Districts if needed.

Add Attachment

Delete Attachment

View Attachment

17. Proposed Project:

* a. Start Date:

* b. End Date:

18. Estimated Funding (\$):

* a. Federal	<input type="text"/>
* b. Applicant	<input type="text"/>
* c. State	<input type="text"/>
* d. Local	<input type="text"/>
* e. Other	<input type="text"/>
* f. Program Income	<input type="text"/>
* g. TOTAL	<input type="text"/>

*** 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

- a. This application was made available to the State under the Executive Order 12372 Process for review on .
- b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- c. Program is not covered by E.O. 12372.

*** 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)**

Yes No

If "Yes", provide explanation and attach

Add Attachment

Delete Attachment

View Attachment

21. *By signing this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**

** I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix: * First Name:

Middle Name:

* Last Name:

Suffix:

* Title:

* Telephone Number: Fax Number:

* Email:

* Signature of Authorized Representative:

* Date Signed:

INSTRUCTIONS FOR THE SF-424C

Public reporting burden for this collection of information is estimated to average 180 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0041), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

This sheet is to be used for the following types of applications: (1) "New" (means a new [previously unfunded] assistance award); (2) "Continuation" (means funding in a succeeding budget period which stemmed from a prior agreement to fund); and (3) "Revised" (means any changes in the Federal Government's financial obligations or contingent liability from an existing obligation). If there is no change in the award amount, there is no need to complete this form. Certain Federal agencies may require only an explanatory letter to effect minor (no cost) changes. If you have questions, please contact the Federal agency.

Column a. - If this is an application for a "New" project, enter the total estimated cost of each of the items listed on lines 1 through 16 (as applicable) under "COST CLASSIFICATION."

If this application entails a change to an existing award, enter the eligible amounts approved under the previous award for the items under "COST CLASSIFICATION."

Column b. - If this is an application for a "New" project, enter that portion of the cost of each item in Column a. which is not allowable for Federal assistance. Contact the Federal agency for assistance in determining the allowability of specific costs.

If this application entails a change to an existing award, enter the adjustment [+ or (-)] to the previously approved costs (from column a.) reflected in this application.

Column c. - This is the net of lines 1 through 16 in columns "a." and "b."

Line 1 - Enter estimated amounts needed to cover administrative expenses. Do not include costs which are related to the normal functions of government. Allowable legal costs are generally only those associated with the purchases of land which is allowable for Federal participation and certain services in support of construction of the project.

Line 2 - Enter estimated site and right(s)-of-way acquisition costs (this includes purchase, lease, and/or easements).

Line 3 - Enter estimated costs related to relocation advisory assistance, replacement housing, relocation payments to displaced persons and businesses, etc.

Line 4 - Enter estimated basic engineering fees related to construction (this includes start-up services and preparation of project performance work plan).

Line 5 - Enter estimated engineering costs, such as surveys, tests, soil borings, etc.

Line 6 - Enter estimated engineering inspection costs.

Line 7 - Enter estimated costs of site preparation and restoration which are not included in the basic construction contract.

Line 9 - Enter estimated cost of the construction contract.

Line 10 - Enter estimated cost of office, shop, laboratory, safety equipment, etc. to be used at the facility, if such costs are not included in the construction contract.

Line 11 - Enter estimated miscellaneous costs.

Line 12 - Total of items 1 through 11.

Line 13 - Enter estimated contingency costs. (Consult the Federal agency for the percentage of the estimated construction cost to use.)

Line 14 - Enter the total of lines 12 and 13.

Line 15 - Enter estimated program income to be earned during the grant period, e.g., salvaged materials, etc.

Line 16 - Subtract line 15 from line 14.

Line 17 - This block is for the computation of the Federal share. Multiply the total allowable project costs from line 16, column "c." by the Federal percentage share (this may be up to 100 percent consult Federal agency for Federal percentage share) and enter the product on line 17.

Budget Information -- Construction Programs

NOTE: Certain Federal assistance programs require additional computations to arrive at the Federal share of project costs eligible for participation. If such is the case, you will be notified.

COST CLASSIFICATION	a. Total Costs	b. Costs not Allowable for Participation	c. Total Allowable Costs (Columns a-b)
1. Administrative and legal expenses			
2. Land, structures, rights-of-way, appraisals, etc.			
3. Relocation expenses and payments			
4. Architectural and engineering fees			
5. Other architectural and engineering fees			
6. Project inspection fees			
7. Site work			
8. Demolition and removal			
9. Construction			
10. Equipment			
11. Miscellaneous			
12. SUBTOTAL (sum of lines 1-11)			
13. Contingencies			
14. SUBTOTAL			
15. Project (program) income			
16. TOTAL PROJECT COSTS (subtract #15 from #14)			
FEDERAL FUNDING			
17. Federal assistance requested, calculate as follows: (Consult Federal agency for Federal percentage share.) Enter the resulting Federal share	Enter eligible costs from line 16	Multiply X	%

ASSURANCES – CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the assistance; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will not dispose of, modify the use of, or change the terms of the real property title, or other interest in the site and facilities without permission and instructions from the awarding agency. Will record the Federal interest in the title of real property in accordance with awarding agency directives and will include a covenant in the title of real property acquired in whole or in part with Federal assistance funds to assure nondiscrimination during the useful life of the project.
4. Will comply with the requirements of the assistance awarding agency with regard to the drafting, review and approval of construction plans and specifications.
5. Will provide and maintain competent and adequate engineering supervision at the construction site to ensure that the complete work conforms with the approved plans and specifications and will furnish progress reports and such other information as may be required by the assistance awarding agency or State.
6. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
7. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
8. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
9. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
10. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse

and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).

11. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal and federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.

16. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

12. Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

17. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).

13. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333) regarding labor standards for federally-assisted construction subagreements.

18. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."

14. Will comply with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.

19. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

15. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	*TITLE
*APPLICANT ORGANIZATION	*DATE SUBMITTED

**WATER AND WASTE
ELIGIBILITY CERTIFICATION**

Certification for commercial credit and outstanding judgments

The undersigned certifies, to the best of their knowledge and belief, that:

1. The organization is unable to finance the proposed project from its own resources or through commercial credit at reasonable rates and terms.
2. No outstanding judgment has been obtained and recorded by the United States of America in a Federal Court (other than in the United States Tax Court).

Name of Organization

Name of Authorized Official

Signature

Date

EXISTING DEBT INFORMATION

1. Provide the following information for all existing long-term debt (bonds, notes, contracts) on the facility:

Lender: _____

Original Principal: _____ Original Date: _____

Current Principal Balance: _____

Interest Rate: _____ Original Term: _____

Annual Payment: _____ (principal and interest)

Lender: _____

Original Principal: _____ Original Date: _____

Current Principal Balance: _____

Interest Rate: _____ Original Term: _____

Annual Payment: _____ (principal and interest)

Lender: _____

Original Principal: _____ Original Date: _____

Current Principal Balance: _____

Interest Rate: _____ Original Term: _____

Annual Payment: _____ (principal and interest)

Lender: _____

Original Principal: _____ Original Date: _____

Current Principal Balance: _____

Interest Rate: _____ Original Term: _____

Annual Payment: _____ (principal and interest)

ETHNIC INFORMATION FOR TOWNS

Town of: _____

Name of proposed project: _____

For Villages: include the population of all residents within the Village and any outside the Village residents that will receive services from the proposed project.

For Towns: include the population of all residents in the proposed water or sewer district.

No. of White, not of Hispanic Origin _____

No. of Black, not of Hispanic Origin _____

No. of American Indian or Alaskan Native _____

No. of Hispanic _____

No. of Asian or Pacific Islander _____

No. of Other _____

TOTAL _____

DATE

NAME

TITLE

USDA RURAL DEVELOPMENT

FORM A – USER INFORMATION SHEET

Applicant: _____

Project: _____

In order for USDA - Rural Development (RD) to determine a funding package for a Municipality, the number of EDUs (Equivalent Dwelling Units) that will pay debt service for the project must be determined.

1 EDU = 1 Typical Residential Household

Village - EDU count must include the entire Village.

Town - EDU count only includes services within the proposed District.

RD calculates a Municipality's EDU count based on flow. In order for RD to compare similar system costs across the state, all EDU calculations must use this method of calculation. If a municipality has calculated their EDUs previously, or uses an existing EDU count for billing purposes, RD cannot accept that EDU calculation.

- | | |
|--|-------|
| 1. Number of residential services (hook-ups) in proposed system | _____ |
| 2. Number of users outside the Village or proposed District | _____ |
| 3. Residential flow per month from typical residential user | _____ |
| 4. Number of commercial / business / industrial services (hook-ups) in proposed system | _____ |
| 5. Monthly commercial /business / industrial flow (actual or est) in proposed system | _____ |
| 6. Number of vacant parcels | _____ |

Bulk Users (Water Only) - Wholesale purchasers, not large volume commercial or residential (attach an additional page if needed for more Bulk Users)

Name _____	Name _____
Bulk Cost (per 1,000 gallon or cubic ft) _____	Bulk Cost (per 1,000 gallon or cubic ft) _____
Bulk User Description _____	Bulk User Description _____
Volume used per month _____	Volume used per month _____

Operation & Maintenance for proposed system (Annual Costs)

Administration	
Cost to treat or purchase	
Salaries and Benefits	
Supplies	
Utilities	
Other (specify)	
TOTAL	

Certification - I certify to the best of my knowledge the information provided above is correct and accurate

Applicant/Title

Engineer

PUBLIC BODY

TAX ID # _____ DUNS # _____ CAGE Code # _____

Date Expires:

Name	Address	Telephone Number	Email Address
Mayor or Supervisor:			
Town/Village Clerk:			
Architect/Engineer:			
Attorney:			
Bond Counsel:			
Contact Person:			

FORM E

RURAL DEVELOPMENT (RD) PROJECT BUDGET/COST CERTIFICATION

Project Name: Date: Report No.:
 Actual:
 Estimate:

Funding Source(s)	Amount	Other Funding Source(s)	Amount
RD Loan	<input type="text"/>	Other Source:	<input type="text"/>
RD Loan	<input type="text"/>	Other Source:	<input type="text"/>
RD Grant	<input type="text"/>	Other Source:	<input type="text"/>
RD Grant	<input type="text"/>		
SUB TOTAL:	\$0.00	SUBTOTAL:	\$0.00
		TOTAL:	\$0.00

ITEM	APPROVED BUDGET	MODIFIED BUDGET	PREVIOUS EXPENDITURES	EXPENDITURES THIS PERIOD	EXPENDITURES TO DATE	BALANCE REMAINING
A. ADMINISTRATIVE						
1. Legal					\$0.00	\$0.00
2. Bonding					\$0.00	\$0.00
3. Net Interest					\$0.00	\$0.00
4. Fiscal Coordination					\$0.00	\$0.00
5. Bookkeeping & Reporting					\$0.00	\$0.00
6. Lands & Rights of Way					\$0.00	\$0.00
7. Single Audits					\$0.00	\$0.00
8. Miscellaneous					\$0.00	\$0.00
Total A. Administrative	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
B. TECHNICAL SVCS.						
1. Engineering						
a. Preliminary Engineering Services					\$0.00	\$0.00
b. Design Phase					\$0.00	\$0.00
c. Contract Administration					\$0.00	\$0.00
d. Resident Inspection					\$0.00	\$0.00
e. Additional Engineering Services					\$0.00	\$0.00
Total B. Technical Svcs.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
C. CONSTRUCTION						
1. Construction Contracts						
a. Contract 1					\$0.00	\$0.00
b. Contract 2					\$0.00	\$0.00
c. Contract 3					\$0.00	\$0.00
d. Contract 4					\$0.00	\$0.00
e. Contract 5					\$0.00	\$0.00
2. Direct Expenditures					\$0.00	\$0.00
a.					\$0.00	\$0.00
b.					\$0.00	\$0.00
c.					\$0.00	\$0.00
Total C. Construction	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
D. CONTINGENCY						
1. Contingency	\$0.00	\$0.00				
Total D. Contingency	\$0.00	\$0.00				\$0.00
TOTAL PROJECT COST	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

I certify to the best of my knowledge and belief that the billed costs or disbursements are in accordance with the terms of the project and that the reimbursement represents the Federal share due, which has not been previously requested and that an inspection has been performed and all work is in accordance with the terms of the award.

Applicant _____ Title _____ Engineer/ Architect _____

Reviewed By _____ Date Reviewed _____

(revised 12/1/2005)

DISABILITY EMPLOYMENT PROGRAM MANAGER:

Linda Hayes
The Galleries of Syracuse
441 South Salina Street, Suite 357, 5th Floor
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Fax: 855-477-8536
Duty Station: Syracuse State Office
E-mail: linda.hayes@ny.usda.gov

FEDERAL WOMEN'S EMPLOYMENT PROGRAM MANAGER:

Mariann Cavanaugh
2530 State Route 40
Greenwich, NY 12834-9627
Telephone: 518-692-9940 Ext. 124
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Duty Station: Greenwich Area Office
E-mail: mariann.cavanaugh@ny.usda.gov

LESBIAN, GAY, BISEXUAL AND TRANSGENDER (LGBT) EMPLOYMENT PROGRAM MANAGER:

Alan Gregory
9025 River Road
Marcy, NY 13403-2301
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Fax: 855-558-7596
Duty Station: Marcy Area Office
E-mail: alan.gregory@ny.usda.gov

HISPANIC EMPLOYMENT PROGRAM MANAGER:

Chris Stewart
The Galleries of Syracuse
441 South Salina Street, Suite 357, 5th Floor
Syracuse, NY 13202-2425
Telephone: 315-477-6436
Fax: 855-477-8536
Duty Station: Syracuse State Office
E-mail: christopher.stewart@ny.usda.gov

VETERAN EMPLOYMENT LIAISON:

Vera Rasmussen
21168 NYS RT 232
Watertown, NY 13601
Telephone: 315 782-7289 Ext. 124
Fax: 855-889-1635
Duty Station: Watertown Area Office
E-mail: vera.rasmussen@ny.usda.gov

TDD phone number for all Agency contacts: (315) 477-6447

Summary of Responsibilities

State Civil Rights Manager (SCRM)

The State Civil Rights Manager serves on the State Director's staff. Civil Rights encompass all aspects of equal opportunity and nondiscrimination in employment, and federally assisted and federally conducted programs. The SCRM is responsible for planning, coordinating and directing the Agency's policies and training for civil rights, and conducting preliminary investigations of borrower/applicant discrimination complaints.

Special Emphasis Program Managers (SEPMs) and Veteran Employment Liaison (VEL)

These positions are collateral duty positions on the State Director's Staff. The SEPMs and VEL are an integral part of the overall civil rights, human resource and program delivery functions. The SEPMs and VEL are responsible for advising management on the unique concerns of and barriers to equal opportunity for a particular under-utilized group, analyzing employment/program data and recommending actions to increase representation in these groups, and coordinating and performing outreach and assisting in providing recruitment sources for these under-utilized groups.

(Revised May 2015)