DISCLAIMER: The contents of this guidance document does not have the force and effect of law and is not meant to bind the public in any way. This document is intended only to provide clarity to the public regarding existing requirements under the law or agency policies.

## UNITED STATES DEPARTMENT OF AGRICULTURE Rural Utilities Service

## RUS BULLETIN 1778-2 RD-GD-2014-75

SUBJECT: Water Programs Emergency and Imminent Community Water Assistance Grants Transmittal Memorandum to Request Funds

TO: State Directors, Rural Development

**ATTN:** Community Programs - Program Directors

**EFFECTIVE DATE**: Date of approval

**OFFICE OF PRIMARY INTEREST**: Assistant Administrator, Water and Environmental

Programs

**INSTRUCTIONS:** This bulletin replaces the September 26, 2003, version.

**AVAILABILITY**: This Bulletin is available on the Internet at

http://www.rurdev.usda.gov/RDU Bulletins Water and Environmental.html

**PURPOSE**: To provide the transmittal memorandum used to request funds from the National Office for ECWAG grants.

JACQUELINE M. PONTI-LAZARUK

Assistant Administrator

Water and Environmental Programs

1/27/2014

Date

## 1 PURPOSE

The purpose of this bulletin is to provide a format for requesting funds from the National Office for the Water Programs Emergency and Imminent Community Water Assistance Grant (ECWAG) program. For Grant Applications that are not eligible for the simplified application process, complete and attach Exhibit A of this bulletin to the front of Exhibit A of RUS Bulletin 1778-1 and submit to the National Office. For Grant Applications that are eligible for the simplified application process, complete and attach Exhibit B of this bulletin to the front of Exhibit A of RUS Bulletin 1778-1 and submit to the National Office.

TO: Administrator, RUS Washington, DC 20250 STOP: 1578 Washington, DC 20250							
State							
Name of Applicant							
Total project costs							
Amount of grant requested							
Is the population of area served less than 5,000?	Yes	No					
Is the amount of grant limited to \$500,000?	Yes	No					
Is the amount of grant limited to \$150,000?	Yes	No					
Description of proposed facility and emergency it Administrator assign discretionary points, a compattachment. The justification must include the nat will correct. You should include such information residents to haul water or contaminate levels that swater. If additional space is needed, attach separa	are and date of the ement as decline in quantity the severely affect the quality the sheet.	rgency that the project hat causes rural by of the drinking					
Official Date		_ State Program					
FOR USE BY NATIONAL OFFICE							
Administrator's Discretionary Points							
Total Project Score							

Washington, DC 20250 Name of Applicant \_\_\_\_\_ Total project costs \_\_\_\_\_ Amount of grant requested \_\_\_\_\_ Is the population of area served less than 5,000? Yes \_\_\_\_\_No\_\_\_\_ Is the amount of grant limited to \$500,000? \_\_\_\_\_ Yes \_\_\_\_ No\_\_\_ \_\_\_\_\_ Yes \_\_\_\_ No\_\_\_ Is the amount of grant limited to \$150,000? Description of proposed facility and emergency it will correct. If you recommend that the Administrator assign discretionary points, a complete written justification must accompany this attachment. The justification must include the nature and date of the emergency that the project will correct. You should include such information as decline in quantity that causes rural residents to haul water or contaminate levels that severely affect the quality of the drinking water. If additional space is needed, attach separate sheet. Evidence of Financial Need. Briefly describe how the applicant has demonstrated financial need below.

TO: Administrator, RUS

STOP: 1578

Washington, DC 20250

RUS Bulletin 1778-3 Exhibit B Page 2

Certification:
I hereby certify that the above applicant and project are eligible for grant funding pursuant to 7 CFR 1778. I also certify that I have reviewed the applicant's financial documents and determined that the applicant has demonstrated a bona fide need for the grant funding. I further certify that the applicant's proposed project does not contain costs that are covered by the applicant's insurance or eligible for FEMA funding. Documentation sufficient to demonstrate that project costs are covered by neither insurance nor FEMA has been entered in CPAP.

Program Director			
State Director			
FOR USE BY NATIONAL OFFICE			
Administrator's Discretionary Points			
Total Project Score			