



**WATER SUPPLY REVOLVING LOAN ACCOUNT
(WSRLA) NOMINATION FORM FOR HARMFUL ALGAL BLOOM (HAB)
INFRASTRUCTURE IMPROVEMENTS**

IMPORTANT: Funding is limited to HAB related infrastructure improvements including avoidance mechanisms at surface water treatment public water systems. Nominations must include all required information, including the required attachments listed in Section VIII, to be scored, ranked on the project priority list and considered for funding. See instructions.

QUESTIONS: Please refer to the instructions for more information on completing this form and for the telephone number of your local Division of Drinking and Ground Waters district office loan coordinator.

I. SYSTEM INFORMATION		
Water System Name:		DUNS#
Project Name:		
PWS ID#:	Population Served:	County:
Water System Owner:		
Applicant (if other than owner):		

II. PROJECT INFORMATION		
Project Address – If an address is not available, please provide the street and nearest cross street to the project.		
Street:		
Cross Street:		
Village/Town:		Zip code + 4:
A. What does the project entail? <i>(Check boxes as applicable)</i>		Project Description <i>Describe the work planned for each component type checked. Attach additional pages as needed.</i>
Type of Work:	Component Type:	
<input type="checkbox"/> New	Source <input type="checkbox"/> Intake Structure	
<input type="checkbox"/> Replacement	Treatment <input type="checkbox"/> Water Plant <input type="checkbox"/> Treatment Process(es) <i>(specify):</i> <input type="checkbox"/> Structure/building	
<input type="checkbox"/> Repair	Distribution <input type="checkbox"/> Water Storage <input type="checkbox"/> Interconnection	
<input type="checkbox"/> Upgrade		
<input type="checkbox"/> Rehabilitate		
<input type="checkbox"/> Other <i>(specify):</i>	Other <i>(specify):</i>	

II. PROJECT INFORMATION - Continued

<p>B. How does this project relate to HABs? (Check boxes as applicable, if any)</p> <p><input type="checkbox"/> Source</p> <p style="padding-left: 20px;"><input type="checkbox"/> Lake Erie</p> <p style="padding-left: 20px;"><input type="checkbox"/> Lake Erie Basin Surface Water</p> <p style="padding-left: 20px;"><input type="checkbox"/> Other Surface Water w/HAB Occurrence</p> <p style="padding-left: 20px;"><input type="checkbox"/> All Other Surface Water</p> <p><input type="checkbox"/> Additional Source</p> <p><input type="checkbox"/> Surface Water Intake</p> <p><input type="checkbox"/> Storage</p> <p><input type="checkbox"/> Regionalization</p> <p><input type="checkbox"/> HAB Treatment</p>	<p><i>Please describe how the project will address HABs in basic terms below for all checked boxes. Attach documentation for all loans: describe the checked boxes in detail.</i></p>
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III. CONTACT INFORMATION

Attach additional pages if needed. Please designate the best contact for questions about the project.

Public Water System Owner	Name:		Best contact? <input type="checkbox"/> Y <input type="checkbox"/> N	
	Title:			
	Telephone:		E-mail Address:	
	Mailing address:			Zip code +4:
Applicant (if not owner)	Name:		Best contact? <input type="checkbox"/> Y <input type="checkbox"/> N	
	Title:		Employer:	
	Telephone:		E-mail Address:	
	Mailing Address:			Zip code +4:
Operator	Name:		Best contact? <input type="checkbox"/> Y <input type="checkbox"/> N	
	Title:		Employer:	
	Telephone:		E-mail Address:	
	Mailing Address:			Zip code +4:
Engineer	Name:			
	Title:		Employer:	
	Telephone:		E-mail Address:	
	Mailing Address:			Zip code +4:
Other (specify):	Name:		Best contact? <input type="checkbox"/> Y <input type="checkbox"/> N	
	Title:		Employer:	
	Telephone:		E-mail Address:	
	Mailing Address:			Zip code +4:

PWS Name: _____ Project: _____

IV. GENERAL AND DETAILED ENGINEERING PLAN APPROVAL INFORMATION			
Has a general plan been submitted to Ohio EPA?	<input type="checkbox"/> Y <input type="checkbox"/> N	If Y, Date:	
Have detailed plans been submitted to Ohio EPA?	<input type="checkbox"/> Y <input type="checkbox"/> N	If Y, Date:	
Has Ohio EPA approved detailed plans?	<input type="checkbox"/> Y <input type="checkbox"/> N	If Y, Date:	Plan App. #:

V. PROPOSED PROJECT SCHEDULE		
<i>Provide a completion date for each of the listed tasks. Ensure the minimum time frames for each task are met.</i>		
Task	Date (mm/dd/yy)	
1	Submit Approvable Project Planning Information-including any proposed scale or bench studies	
2	Submit Complete Detail Plans for Approval - includes detailed plans, review fee, contract documents, and specifications (240 days prior to task 9 for a plant construction projects or 150 days prior to task 9 for distribution-related projects)	
3	Submit Complete Capability Assurance Plan – includes technical, managerial, and financial sections (at least 90 days prior to task 9)	
4	Submit Complete Loan Application, Water Rate Ordinance and Water System Regulations/Ordinances (at least 90 days prior to task 9)	
5	Advertise for construction bids (at least 90 days prior to task 9)	
6	Open construction bids (at least 30 days prior to task 9 – be sure to allow for a minimum of 60 days to award contracts)	
7	Submit bid information (at least 21 days prior to task 9)	
8	Submit signed loan documents (at least 7 days prior to task 9)	
9	Request a loan award by (1 st of month in which the Loan is awarded) <i>*This date must be no later than June 2017</i>	
Are you nominating other drinking water project(s) concurrently with this project?		<input type="checkbox"/> Y <input type="checkbox"/> N
If Y, do you plan to complete construction of any other(s) concurrently with this project?		<input type="checkbox"/> Y <input type="checkbox"/> N
If Y, identify the concurrent project(s):		

VI. FUNDING INFORMATION				
Type of project?	Estimated Total Cost	Estimated Amount Requested from WSRLA	Estimated Amount Requested from Other Sources*	Estimated Date of WSRLA Loan Award (month/year)
Planning	\$	\$	\$	
Design	\$	\$	\$	
Construction	\$	\$	\$	
*List all other potential funding sources and specify amount requested from each.				

PWS Name: _____ Project: _____

VII. WATER AND SEWER RATE INFORMATION	
Please attach a copy of the WATER Rate Ordinance, Resolution, current rates and user charges. Be sure to specify the basis (e.g. cu. ft. or 1,000s of gallons) as well as the billing period (e.g. monthly or quarterly).	
If water users are not charged, explain:	
A. Is SEWER SERVICE currently provided to residents in the proposed project's service area?	<input type="checkbox"/> Y <input type="checkbox"/> N
If Y, attach a copy of the SEWER Rate Ordinance, Resolution, current rates and user charges. Be sure to specify the basis (e.g. cu. ft. or 1,000s of gallons) as well as the billing period (e.g. monthly or quarterly).	
If sewer users are not charged, explain:	

VIII. REQUIRED ATTACHMENTS	
<i>This nomination form is not complete unless all required documentation has been attached. Please note that <u>all</u> required documentation must be submitted with <u>each</u> project nominated regardless of the submission of previous or concurrent nominations.</i>	
Documentation attached?	Type of Documentation
<input type="checkbox"/> Y <input type="checkbox"/> N/A	Ohio EPA-Approved General Plan or Project Planning Documentation <i>Required for all design and/or construction loans. See instructions.</i>
<input type="checkbox"/> Y <input type="checkbox"/> N/A	Water Rate Ordinance, Resolution, current rates and user charges (Section VII.) <i>This information MUST be attached.</i>
<input type="checkbox"/> Y <input type="checkbox"/> N/A	Sewer Rate Ordinance, Resolution, current rates and user charges (Section VII.A.) <i>If users are charged for sewer services, this information MUST be attached.</i>

IX. SIGNATORY AUTHORITY	
<i>By signing below, I certify that I am a representative of the owner of the subject public water system and am fully authorized to enter into and legally bind contracts for the public water system. I certify that I have personally examined and am familiar with the information submitted in this nomination and all attachments and that, based on my inquiry of those persons responsible for obtaining the information contained in the form, I believe the information is true, accurate, and complete. I certify that I have read and understood the instructions provided with this form and have attached all required supporting documentation listed in Section VIII.</i>	
Name:	Title:
Signature:	Date:

Email the completed form and one file of the required documents to: SWPWSfunding@epa.ohio.gov. **IMPORTANT:** If you use the FTP option to submit a HAB Nomination Form with large attachments do not use the SWPWSfunding email address, it will not go through. Enter kevin.spurbeck@epa.ohio.gov for the email address when using the FTP option.