

# North Carolina Water/Wastewater Common Application Form

For use by ARC, CWMTF, DENR, DOC, and Rural Center applicants.

Agency Use Only

In an effort to streamline the application process, North Carolina funding agencies created this common application form for applicants to utilize when requesting water/wastewater grant/loan funds. Additional material required by each funding agency can be found in the appendices.

## Guidelines:

- Fully complete each section of this application form
  - Be sure to include all additional information requested by involved funders (found in appendices)
- Please refer to appendices for the number of copies required by each agency.
  - If a project is requesting CWMTF and Rural Center funds, the fully executed common application form should be sent to both CWMTF and the Rural Center. In addition to the common application form, each agency should receive its additional requested material only. See individual agency guidelines for other material needed for each application.

## Descriptive Project Title:

(Title should stay consistent with each agency request.) \_\_\_\_\_

## Indicate the status of this application:

- NEW APPLICATION  
 REVISION  
 RESUBMITTAL

- Former project title: \_\_\_\_\_

## Select organization(s) involved in this request (check all that apply)

- ARC [Appalachian Regional Commission](#)  
Date submitted \_\_\_\_\_
- CWMTF [Clean Water Management Trust Fund](#)  
Date submitted \_\_\_\_\_
- DENR-CW [NC Dept. of Environment and Natural Resources \(Clean Water\)](#)  
Date submitted \_\_\_\_\_
- DENR-DW [NC Dept. of Environment and Natural Resources \(Drinking Water\)](#)  
Date submitted \_\_\_\_\_
- DOC [NC Dept. of Commerce](#)  
Date submitted \_\_\_\_\_
- [CDBG \(DCA\)](#)  
 [CDBG-ED \(CFC\)](#)  
 [IDF \(CFC\)](#)
- NCREDC [NC Rural Economic Development Center](#)  
Date submitted \_\_\_\_\_

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## GENERAL INFORMATION

**Legal Name of Applicant / Unit:** \_\_\_\_\_ **County:** \_\_\_\_\_

**Name of Chief Elected Official:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Name of Authorized Representative (if different from above):** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**Primary Telephone(s):** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Federal Tax ID #:** \_\_\_\_\_

**Type of Applicant (check those that apply):**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Municipality                 | <input type="checkbox"/> Water / Sewer District       | <input type="checkbox"/> Joint Agency Pursuant to G.S. 160A-20 |
| <input type="checkbox"/> County                       | <input type="checkbox"/> Metro Water / Sewer District | <input type="checkbox"/> Joint Agency Pursuant to G.S. 63-56   |
| <input type="checkbox"/> Non Profit Water Corporation | <input type="checkbox"/> Water / Sewer Authority      | <input type="checkbox"/> Sanitary District                     |
| <input type="checkbox"/> Other (be specific): _____   |   |  |

**Application Prepared by:**

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Primary Telephone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Name of Engineering Firm:** \_\_\_\_\_

**Name of Engineer:** \_\_\_\_\_

**Mailing Address (if other than above):** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**Primary Telephone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Federal Tax ID #:** \_\_\_\_\_

**PROJECT TYPE**

Check all that apply:

- DRINKING WATER**
- Drinking Water Source
  - Drinking Water Treatment
  - Drinking Water Transmission/Distribution
  - Drinking Water Storage
  - Other: explain in project description   
(Including green projects)

- WASTEWATER**
- Wastewater Treatment
  - Wastewater Collection
  - Water Reclamation or Land Application facilities
  - Sewer System Rehab
  - Other: explain in project description   
(Including green projects)

**Projected Construction START Date:** \_\_\_\_\_ **County(s) Served:** \_\_\_\_\_

**# of NEW customers (connections)  
TO BE SERVED by project**

	Water	Wastewater
Residential		
Business		
<b>Total(s)</b>		

**# of customers (connections) CURRENTLY served**

	Water	Wastewater
Residential		
Business		
<b>Total(s)</b>		

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**PROJECT STATISTICS** Applicants must fill out this section completely as project statistics are used to score the application. For assistance with completing this section please visit the Rural Center [website](#).

<u>Poverty Rate:</u> _____	<u>Median Household Income</u> <u>(2000 census—Rural Center Only):</u> _____	<u>Ability To Pay:</u> _____
<u>Population:</u> _____	<u>Median Household Income</u> <u>(updated):</u> _____	<u>County Tier #:</u> _____

## Project Description

Please provide a description of the project specifically addressing the details of each major activity (i.e. who, what, where, why and how). Indicate if this will be a phased construction project.

Rationale: (1 paragraph max)

- Problems and/or compliance issues that project will alleviate
- Local, regional and/or state need for project
- Critical circumstances or emergency situations that compel project to be funded

Benefits: (1 paragraph max)

- Results and accomplishments to be derived from project
- Other non-quantifiable benefits (e.g. partnership, improved standard of living, etc.)

Performance Measurement:

- Outputs (i.e. 1,000 LF of 8-inch PVC pipe)
- Outcomes (i.e. fully functioning line)
- Number of jobs created (see agency guidelines)

(Detail all quantifiable measures, including leveraged private investment resulting from the project.)

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## PROJECT BUDGET

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Complete the project budget addressing the categories provided in the table below *(insert rows/columns as needed)*.

NOTE: Engineering costs shall be held to the USDA or EPA fee curve, depending on the funding partner.

Cost Description	ARC	CWMTF	DENR	DOC	Rural Center	Local	Other	Total Cost Amount
Construction costs should be indicated by line item. Example: linear feet of different sized lines								\$0.00
								\$0.00
								\$0.00
								\$0.00
								\$0.00
Construction Sub -Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Contingency								\$0.00
Engineering Design								\$0.00
Permitting								\$0.00
Land Surveying Costs								\$0.00
Easement Preparation								\$0.00
Closing Fee (if applicable)								\$0.00
Construction Administration/Observation								\$0.00
Grant and/or Loan Administration								\$0.00
Legal Costs								\$0.00
Other (specify)								\$0.00
Administration Sub-Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
								\$0.00
<b>TOTAL PROJECT COST</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>Status of Funding</b> (pending or secured)								

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## CERTIFICATION BY CHIEF ELECTED OFFICIAL/AUTHORIZED REPRESENTATIVE

The attached statements and exhibits are hereby made part of this application and the undersigned representative of the applicant certifies that the information in this application and the attached statements and exhibits is true, correct, and complete to the best of his/her knowledge and belief. He/She further certifies that:

- 1 as Authorized Representative, he/she has been authorized to file this application by formal action of the governing body;
- 2 that the governing body agrees that if a grant and/or loan is awarded, the applicant will provide proper and timely submittal of all documentation requested by the Grantor Agency;
- 3 that the governing body agrees to provide for proper maintenance and operation of the approved project after its completion;
- 4 that the applicant has substantially complied with or will comply with all federal, state and local laws, rules and regulations and ordinances as applicable to this project; and
- 5 that the applicant will adopt and place into effect on or before the completion of the project a schedule of fees and charges which will provide for the adequate and proper operation, maintenance, administration and repayment of all principle and interest on loans of the project.
6. that the applicant has followed proper accounting and fiscal reporting procedures, as evidenced by the applicant's most recent audit report, and that the applicant is in substantial compliance with provision of the general fiscal control laws of the State.
7. that the (Town or County), North Carolina is organized and chartered under the laws of North Carolina. All officials and employees are aware of, and in full compliance with NCGS 14-234, "Director of public trust contracting for his own benefit, participation in business transaction involving public funds; exemptions." (For units of local governments only.)

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SIGNATURE OF CHIEF ELECTED OFFICIAL/AUTHORIZED REPRESENTATIVE

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TYPED NAME

TYPED TITLE

DATE

**Please note: ORIGINAL signatures are required for each agency application.**