



Small System Equipment Assistance (SSEA) Application Form

Instructions:

- 1. Submit the following completed form and required attachments via email to DW.Equipment@biz.oregon.gov. Application submission deadlines are February 15th and August 15th each year. Incomplete applications will not be accepted.
- 2. The <u>Small System Equipment Assistance (SSEA) program</u> provides 100% forgivable loan awards to community and nonprofit non-community water systems for fund small scale additions or replacement of equipment and instrumentation needed by small water systems to ensure continued operation and protection of public health. The SSEA program is funded by the U.S. Environmental Protection Agency through Oregon's <u>Safe Drinking Water Revolving Loan Fund</u>. This program is co-administered by Business Oregon and Oregon Health Authority (OHA).
- 3. To be eligible, the water system must be:
 - a private or public community water system with 15 or more service connections used by year-round residents, or that regularly serves 25 or more year-round residents, or
 - a non-community public water system that regularly serves at least 25 people, only if the system is recognized under Oregon law as a nonprofit corporation.

NOTE: The SSEA program requires that all project activities must occur at an existing water system facility or on land that has been previously disturbed.

- **4**. Please see <u>SSEA overview document</u> for details on eligible activities prior to submitting an application.
- 5. After the application submission deadline, OHA will review projects for eligibility and rate them using program criteria. Funding under this program is limited, and priority will be given to systems with Disadvantaged Community status, systems with Safe Drinking Water Act (SDWA) compliance needs, and systems treating surface water sources. OHA will place eligible SSEA projects and funding recommendations on a Project Priority List and post for a 10-day public notice period prior to funding.
- 6. Following the comment period, Business Oregon will follow up with the applicants who were recommended for funding by OHA to receive a SSEA funding award. This process may take up to two months following the application deadline. It may take up to 6 months after the application deadline to receive a funding award and executed contract.
- 7. If you have questions on the program, ask your local <u>Business Oregon Regional Development</u> Officer.



Small System Equipment Assistance (SSEA): Application Form



For Office Use Only

SD Number: Date Received: Portfol Number:

Section 1: Water System / Entity Informati	on
Organization Name	Organization Type
Public Water System Name	
Water System Identification Number (PWSID)	County in which the Public Water System is located
Street Address of Public Water System (include Ci	ty/State/ZIP code)
Organization Mailing Address (Include City/State/	/ZIP code)
Main Phone Number/Office Phone Number	
Federal Tax ID Number	*Unique Entity Identifier (UEI)
System for Award Management (SAM.gov) web Government. There is no cost to obtain a UEI n	ed a Unique Entity Identification (UEI) number from the osite. SAM.gov is an official website of the U.S. number, and the applicant does not need to be registered in ov's entity registration page for more information. Secondary Contact
Name	Name
Title	Title
Organization	Organization
Email	Email
Phone	Phone





Section 2: Project Details

A. Project Name:	Provide a	short but	descriptive	title for the	project.
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B. Project Description: Provide a detailed scope of work for the project. (What work will be done, how it will be done, by whom, and within what timeframe.)





	round: Briefly explain why this project should take place in this community and what plicant aims to solve. Provide any relevant historical information as applicable.
D. Identify the o	ategory that best describes the type of equipment to be installed:
E. Is this a new	installation or a replacement?
F. Will this pure	chase replace an inoperable piece of equipment or instrumentation?
Yes	No
	nent or instrumentation required by OHA to address a SDWA requirement? If yes, attach OHA letter or order demonstrating non-compliance (Attachment D).
Yes	No
	nent or instrumentation needed for surface water treatment process(es) (including groundwater under the direct influence of surface water)?
Yes	No





Section 3: Summary of Connections

User Type	Current # of Connections
Residential	
Commercial	
Industrial	
Other	
Total	

Section 4: Project Location

A. Identify the specific location where the project will occur, as well as the current land use at the location: Provide a project site map, as an attachment, if available.

B. Will all project activities occur at an existing water system facility or on land that has been previously disturbed?

Yes No *If no, then this project is ineligible for funding.*

C. Required Service Area Map – Submit a PDF of a map of the boundary of the water system's service area with this application. The review team will use the map to determine disadvantaged community status (Attachment B).

As part of the project evaluation process, Oregon Health Authority will assess whether the water system's service area meets the state's definition for <u>"disadvantaged community"</u>. A disadvantaged community will receive additional points during the rating process, and will receive priority status in the program.

If available, submit GIS shapefiles of the water system service area boundary and/or distribution system, along with the required service area map, attached to this application as a compressed file (or "zip folder"). Shapefiles may allow OHA greater accuracy in determining whether the water system qualifies as disadvantaged.





D. Is the equipment located on water system owned property?

Yes No If no, provide documentation confirming that the water system has an easement or right-of-way access to the location where the installation will occur (Attachment E).

Section 5: Project Work Plan

F	A. Receiving a funding award and execution of a contract under the SSEA program can take up to 6
	months following the application submission deadline. Projects must be completed within 24 months
	of contract execution. Is the Applicant prepared to begin and complete the project within this
	timeframe?

Yes No If no, please explain:

B. List the general milestones, tasks, and/or phases planned to complete the project, and the anticipated completion dates to complete these milestones.

Project Activity Work Plan	Completion Date

Estimated





Section 6: Project Budget

Please review the program's <u>cost documentation guidance</u> to learn more about limitations to the procurement of materials and labor.

- **A. Required Pricing Bid Documentation:** Applicants must submit detailed pricing bid documentation with this application demonstrating the estimated cost of the equipment and labor (also known as a cost estimate and/or bid proposal). (Required: Attachment A).
 - **NOTE:** Before receiving a funding award, applicants should <u>not</u> initiate a complete procurement process (e.g., entering into a contract with a vendor). Pre-award costs are <u>not</u> eligible under this program.
- **B. Do you certify that all bid cost documentation submitted was sourced in accordance with applicable state and federal procurement laws and regulations?** If the applicant expects to include their match funds, increasing the project cost above \$20,000, be aware additional procurement requirements may apply. See the <u>Oregon Procurement Manual Open Market Methods</u>, or refer to legal counsel for more information.

Yes No If no, please explain:

C. Budget Table: List in the budget table below the breakdown of the project costs. The SSEA program can award up to \$20,000 maximum in forgivable loan per project.

Important Notes Regarding Budget Items:

- In-house water system staff may perform the work in conjunction with this project, but those payroll costs are not eligible for reimbursement under the program.
- To reduce administrative burdens and not trigger Davis-Bacon requirements under SSEA, the water system may not enter into a contract or subcontract related to the project that exceeds \$2,000, which includes costs for laborers and mechanics performing construction, alteration, or repair work, including installation of equipment.
- It is recommended that the applicant include contingency funds of 10% into the budget to account for changes in project cost over time.





Budget Table:

Budget Line Item	SSEA Funds	Other BizOR Funds	Non-BizOR Funds	Total
(Recommended 10% Contingency)				
Total Project Costs				

Provide details, as needed, about the budget:

Budget Prepared By:					
Name:	Title:				
Organization:	Date:				

D. Sources of Financing: All funding needed to complete the project must be committed prior to receiving a funding award. Please detail the sources of the funding needed to complete the project and the status of those sources. If other funding is necessary to complete the project, submit Letters of Commitment with the application. (Attachment C)

Source of Funds	Amount	Funding Status	Date Funds Committed or Expected
SSEA funding			
Applicant Funds			
Other Funds:			
Other Funds:			
Other Funds:			
Total			•





E. Are any of the project costs subject to the American Iron and Steel (AIS) Requirement?

Yes No

If YES to 6.E above, describe the item(s) subject to the requirement. Eligible equipment costs applicable to AIS must be certified as having been produced in the United States. For details on types of equipment subject to the AIS requirement see the <u>Cost Documentation Guidance document</u>.

Section 7: Federal Reporting

SSEA funding is sourced from a federal capitalization grant, issued through the U.S. Environmental Protection Agency to the state of Oregon. We use the information below in section 7.A to meet federal grant reporting requirements.

A. Please select <u>one</u> of the following compliance categories most applicable to the project's goal.

Project will return system to compliance Project will address a non-federally regulated

contaminant: (Note: in Oregon these would

most likely be PFAS, Manganese, or

Cyanotoxins.)

Project will assist system to maintain

compliance

Other/No compliance issues applicable to this

project

Project will assist system to comply with upcoming requirements

B. Does this project have a disaster resilience component?

Yes No

If yes, please select <u>one</u> of the following options:

If Other, **briefly explain**:





Section 8: Private Water Systems

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A. Public Utility Commission (PUC) regulation level (Choose one.):

Service Rates N/A

B. Type of Business: Select one

Non-Profit CorporationSole ProprietorshipCooperativeFor-Profit CorporationPartnershipAssociation

Limited Liability Corporation Other

If Other, **briefly explain**:

- **C.** Date Business was filed/formed:
- **D.** Date that present operations commenced:
- **E.** Are there any legal actions pending against the water system or principals?

Yes No If yes, provide details:

- **F.** Within the last seven years has the Applicant (or principals):
 - 1. formed a business which ceased to exist in less than two years from commencing operations?

 Yes No
 - 2. filed bankruptcy, experienced foreclosure, repossession, debt judgment, or criminal penalty?

 Yes No

If Yes to either or both, provide details:





G. For each prin	cipal in the busines	s, provide the following:	
Name	Title	Address	% Owned
Section 0: Dr	ıblic Disclosure	Total	
			- 0
Does the Applic	ant request any info	ormation in this Application be excluded from public disclosure	3.
Yes N	No.		
If yes, describe:			

Continue to Signature Page





Section 10: General Certification and Signature

I certify to the best of my knowledge that all information contained in this document and within the attached supplements is valid and accurate. I further certify that to the best of my knowledge:

- 1. The application has been approved by the governing body or is otherwise being submitted using the governing body's lawful process, and
- 2. Signature authority is verified. **Business Oregon will only accept applications with proper signature authority documentation provided.**

Check One:

Yes , I am the highest elected official. (e.g. May	or, Chair, President, Owner)
3	e attached documentation that verifies my authority to such as charter, resolution, ordinance, or governing (Attachment F)
Signature:	Printed Title:

Date:

Application Attachments

Required Attachments

Printed Name:

☐ Attachment B: System Service Map

Other Attachments - Provide as Applicable

□ Attachment C: Funding Letters of Commitment

☐ Attachment D: Compliance Documentation

□ Attachment E: Easement Information

□ Attachment F: Signature Authority Documentation