## TECHNICAL ASSISTANCE APPLICATION FOR A DRINKING WATER PROJECT

**Technical Assistance Application** 

## 1. APPLICANT AND CONTACT INFORMATION

1.1	Utility Information		
	Name:		
	Address: City: State: Zip: Cou	unty:	
1.2	Utility Representative to be Contacted Regarding Ap	plication	
	First Name: Last Nam	ne:	
	Title:		
	Address: City, Stat	e & Zip:	
	Phone: Fax:		
	E-Mail:		
			)
1.3	Median Household Income: \$ 0.00	4	
	Median household income was obtained from Ameri Census Bureau information.	act Finder ( <u>http:/</u>	//factfinder2
. SYST	EM INFORMATION		
2.1	ADEQ system identification nul		
2.2	Number of connections to system		
2.2	Number of connections to system		
2.3	Population served by the system		
2.4	Monthly residential fee (base + use) for 7,500 gallon	s \$ 0.00	
2.5	Existing debt (principal only) payable by system user	o.00	
2.6	System Compliance		
	O Notice of violations and/or consent orders from r	egulatory agency (*	*must mail c
	documents)		
	○ In compliance		
2.7	Is the system ACC regulated?	○ Yes  No	
2.8			

	Is the system registered with the $\underline{\text{E-Verify}}$ Program? $\bigcirc$ Yes $\bigcirc$ No Applicants are required to provide proof of participation prior to the execution of a loan or technical assistance agreement.	
3. PROP	OSED PROJECT INFORMATION	
3.1	Project Name:	
3.2	Select county in which project is located:	
3.3	These technical assistance funds are intended to solve system problems or make system improvements.	
a.	Tell us about the problem that the project will solve. Be specific.	
		<b>^</b>
	To support your answer, please reference and <u>upload</u> supporting documentation including, but not limited to: photographs, system evaluations, maps, schematics, inspector reports, ADEQ Notices of Violation or Consent Orders, lab analyses, ACC findings, engineer's proposa	
b.	What solution or improvements are you proposing this application to solve the above referenced problem for your system, if awarded technical assist funds?	
		<b>^</b>
3.4	Technical assistance is competituely definitional funding is limited. From a financial perspective, tell us why your system/community is in necessity technical assistance. Please be specific.	
3.5	Green projects are those in which the primary focus is water or energy efficiency. Please describe any green components of your project. Include an explanation of estimated water or energy savings once the project is constructed or implemented. If your project does not include these components, skip to question section 3.6. See the WIFA Applicant's Guide and Request for Applications for more information on green projects.	;
3.6		

WIFA technical assistance funds are awarded to hire an engineer/contractor. Who are the key personnel that would be involved in the project, and what will be the nature of their participation? Include the contractor and in-house staff roles in the project. *** Note: In-house staff costs may be funded only through the local match share of the project.		
OPE OF WORK AND WORK PRODUCTS/DELIVERABLES		

## 4. SC

- 4.1 To evaluate your project for award, WIFA needs to understand the tasks and costs to ed.
  - a. Scope of Work

nplete. Do NOT include Describe the major project tasks that the engineer/contractor and applicant w construction tasks and costs. More detailed descriptions will allow better evaluafor funding. You may also upload a scope of work/proposal.



b. Budget with Tasks

Provide a budget for your tasks in the tab. w. WIFA technical assistance can fund no more than 60% of project planning/design costs, up to 5,000. The applicant will be responsible for 40% of the by expenses beyond WIFA's maximum funding limit. project planning/design costs and

Task Description	Total Cost	WIFA Funded	Applicant Funded	
	\$	\$	\$	
	0.00	0.00	0.00	save task
Totals:	\$0.00	\$0.00 (0%)	\$0.00 (0%)	

\*Green projects **r.ay** qualify for an applicant match funding waiver. Determination of qualifying green projects and waiver of applicant match funding is at WIFA's discretion. It is important to commit to match funding to ensure eligibility in the event the project does not qualify as green. If you do not want to accept the technical assistance unless it qualifies for a match waiver, you may leave the match column blank in the table above.

Explain how the applicant match will be provided. List sources of funding and amounts. In-kind services may serve as the match, but must be described and assigned an approximate dollar amount. Note: Federal funds (directly or indirectly) cannot be used to fund the match portion of your project. See the Applicant's Guide for examples of acceptable match, including in-kind services.

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4.3	At the end of the technical assistance project, you and your contractor will submit a final work product (s)/deliverable(s). Describe the final work product(s) associated with this project (e.g. Preliminary Engineering Report, other reports, maps, engineering plans, etc.).			
		^ ~		
4.4	Is the project ready to proceed if selected for a technical assistance award? O Yes O No			
	If yes, give an estimated start date below. If no, explain why additional time w. eeded to begin the project.			
		^		
<ul><li>4.5 Next Steps. Please address the following:</li><li>a. What will be the next phase of work once your technic stance project is complete?</li></ul>				
		^ ~		
b.	How do you plan to fundnstion/implementation of your project?  Click here if you'd like mo prmation on WIFA's design/construction loan program.			
	Click <u>Here</u> if you d like more similation on with a design/construction loan program.			
		<b>~</b>		
5. REQU	JESTED AMOUNT AND CERTIFICATION/APPROVAL			
5.1	Estimated Date WIFA Funding Required:			
5.2	Technical Assistance Costs			
	Project Costs Percentage			

	Amount funded locally (at least 40% of total):	\$	0%			
		0.00				
		\$				
	Amount Requested from WIFA (no more than 60%):	0.00	0%			
		\$				
	Total:	0.00				
5.3	The undersigned hereby offers and agrees to perform in compliance with all terms, conditions, specifications, and scope in this technical assistance application. Signature certifies understanding and compliance with the application attached hereto. WIFA may approve the application with modifications to scope, methodology, and schedule, final projects, and/or budget.					
	First Name Last Name	Title				
	File Attachments:		Added D.			
	Reference Name Document Name		Added By			
	No fee To	Tourid.				
Aut	chorized Signature:	Date:				
the app fulfi	applicant in conducting all official siness relating to lication package certifies that the applicant has authority	the individual legally authors the project. Signing this to enter into the agreement is required to read WIWIFA.	form and submitting a ent, accept funding, and			
	parer's Information (enter the nume and title of the person lication)	, if different from Section 1	2, who completed the			
Nar	me: WIFA Test Title: President	Phone:				
	Please mail it to Water Infrastructure Finance Au 1110 West Washington, Suite 290, F	uthority of Arizona				