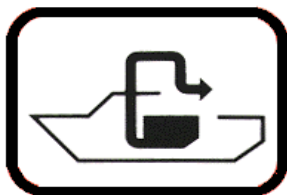




**Connecticut Department of
Energy & Environmental Protection**
Bureau of Outdoor Recreation
Boating Division



**Clean Vessel Act – Opportunity for
Funding the Construction, Installation,
Purchase, Operation & Maintenance of
Marine Sewage Disposal Facilities (MSDF)**



Funded Through the Federal Clean Vessel Act

Application Form

All applicants must complete the entire application with the exception of Parts V, VI and VII. Complete Part V for funding of Operation and Maintenance Costs Associated with a Land-Based MSDF, complete Part VI for Operation and Maintenance Costs Associated with a Pumpout Vessel, and complete Part VII for Construction/Purchase/Installation of a New MSDF or Repair or Upgrade of an Existing MSDF (including purchase or repair/upgrade of a Pumpout Vessel). Please complete this form in accordance with the [instructions](#) (DEEP-BOATING-CVA-INST-001). Be sure to read the instructions to complete each line item in this application correctly.

Part I: Applicant Information

1. Applicant Name:		
Contact Person:		Relationship to Facility:
Mailing Address:		
City/Town:	State:	Zip Code:
Business Phone:	ext.	
E-mail:		
2. Federal Employer Identification or Social Security Number:		

Part II: Eligibility and Application Type

1. Eligibility Checklist
a. Will the MSDF be available for use by all recreational vessels in need of such facilities? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, your project is not eligible to receive funding, with the exception of Pumpout Vessel off loading stations which are eligible to receive funding.
b. Will the use of the MSDF be offered for free? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, your project is not eligible to receive funding.
c. Is the installation of a proposed MSDF, a result of a state or federal enforcement action? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, your project is not eligible to receive funding.
2. Application Types - Check all that apply:
<input type="checkbox"/> Operation and Maintenance Costs Associated with a Land Based MSDF
<input type="checkbox"/> Operation and Maintenance Costs Associated with a Pumpout Vessel
<input type="checkbox"/> Construction/Purchase/Installation of a New MSDF or Repair or Upgrade of an Existing MSDF (including purchase or repair/upgrade of a Pumpout Vessel)

Part III: Facility Information

1. Facility Name (if different from applicant name):

Location Address:

City/Town:

State:

Zip Code:

2. Latitude: Longitude:

3. Name of Waterbody Location(s) Served (e.g., Long Island Sound, CT river, etc.):

4. Does the facility currently have operational MSDFs? Yes No

If yes, specify the types and number of each MSDF facility:

stationary: # cart-style: # boat: #

central vacuum system: # dump station: #

Other (specify type and number):

5. Provide an estimate of how many pumpouts will be conducted by the existing and/or proposed MSDF in a calendar year. (provide estimate based on prior year data, if available)

6. If the applicant is seeking funding for Operation and Maintenance or repair/upgrade of an existing MSDF, please provide a description of the existing facility or Pumpout Vessel (include age and condition; include photographs as Attachment E to this application).

Part IV: Proposal Information

1. Operating months, days and hours of the MSDF.

Please be specific. This information will be posted on the DEEP website and the Boater's Guide.
(Example: *May 15 through October 30, 7 days per week, 7:00 a.m. – 7:00 p.m.*):

2. If the applicant is seeking both Operation and Maintenance **and** Construction/Purchase/Installation of a New MSDF or Repair or Upgrade of an Existing MSDF (including purchase or repair/upgrade of a Pumpout Vessel) funding, describe the planned start and end date for this phase of the project.
(Example: March 1 through April 15)

Project Completion Timeframe:

3. Specify the type and number of MSDFs for which you are requesting Operation and Maintenance funding:

- Stationary: # Cart-style: # Boat: #
 Central vacuum system: # Dump station: #
 Other (specify type and number):

4. Does the facility have a fuel dock? Yes No
If Yes, is the MSDF located on the fuel dock? Yes No

5. What is the proximity of the MSDF to the dock-mounted fuel dispenser, in feet:

6. At the location of the MSDF, what is the approximate depth of water, in feet, during low tide, in relation to the mean low water elevation:

7. Identify the proximity, in feet or nautical miles, of the MSDF closest to the nearest Federal Navigational Channel or Fairway:

8. Provide the following for boaters to contact the MSDF:

- a. Hailing frequency:
- b. Contact phone number:
- c. Website address:

Part V: Budget Information for Operation and Maintenance Costs Associated with a Land-Based MSDF

Please complete this section.

Enter the following information:			
	Description		Total
	Hourly rates	Estimated time	\$
1. Personnel Types Administration Program			\$
2. Contractual			\$
3. Operating			\$
4. Equipment (including repairs and upgrades/purchases)			\$
5. Sewage Waste Removal			\$
6. Supplies			\$
7. Other (specify)			\$
8. Total Eligible O&M Costs			\$
9. Funding Requested = 75% of Total O&M Costs (multiply line 8 X 0.75)			\$

Attach additional sheets if needed.

Part VI: Budget Information for Operation and Maintenance Costs Associated with a Pumpout Vessel

Please complete this section.

Total Funding Requested **cannot exceed \$45,000** per vessel.

Enter the following Information:

		Description	Total
1.	Personnel Types Administration Program	Hourly Rates Estimated time	\$
2.	Contractual		\$
3.	Operating		\$
4.	Boat Expenses		\$
5.	Equipment (including repairs, purchases, and upgrades)		\$
6.	Sewage Waste Removal		\$
7.	Supplies		\$
8.	Other (specify)		\$
9.	Total Eligible O&M Costs <i>(Total Costs from above)</i>		\$
10.	Funding Requested = 75% of Total O&M Costs <i>(multiply line 9 X 0.75)</i> <i>(Funding requested from Pumpout Vessel budget above)</i>		\$

Attached additional sheets if needed.

For pumpout vessel programs with detailed budgets and costs, please attach a separate spreadsheet to document anticipated expenses and label "Attachment C" .

Part VII: Budget Information for Construction/Purchase/Installation of a New MSDF or Repair or Upgrade of an Existing MSDF (including purchase or repair/upgrade of a Pumpout Vessel)

Please complete this section.

Enter the following Information:	
Description	Total
1. Equipment Upgrade/Purchase (specify):	\$
2. Construction/Installation Costs include Plumbing, Electrical and Site Work (specify):	\$
3. Supplies (specify)	\$
4. Total Construction/Purchase/Installation/Repair Upgrade (<i>Total of lines 1 through 3</i>)	\$
5. Funding Requested = 75% of Total Costs (<i>multiply line 4 X 0.75</i>)	\$

Attach additional sheets if needed.

Part VIII: Total Budget Information

Total Costs: \$ _____ **Funding Requested** (75% of Total Costs): \$ _____
(Part V, line 8 + Part VI, line 9 + Part VII, line 4) (Part V, line 9 + Part VI, line 10 + Part VII, line 5)

Match (Dollar Value) to be Provided by Applicant (25% of Total Costs): \$ _____
(Total Costs X 0.25) Please see Part VIII of the instructions for further details about match requirements.

Projects which provide more than 25% match will be more competitive.

Part IX: Supporting Documents

Check the applicable box below for each attachment being submitted with this application form. When submitting any supporting documents, please label the documents as indicated in this part (e.g., Attachment A, etc.) and be sure to include the applicant's name as indicated on this application form.

- Attachment A: *[Applicant Compliance Information Form](#) (DEEP-APP-002)
- Attachment B: For Construction/Purchase/Installation/ of a New MSDF or Repair or Upgrade of an Existing MSDF, submit as Attachment B, the design of the proposed or existing MSDF which contains specific design or upgrade components - use Appendix A of the of the [instructions](#) as a guide.)
- Attachment C: Mobile Pumpout Vessel Operation and Maintenance Budget: Submit as Attachment C, a Mobile Pumpout Vessel Operation and Maintenance Budget, if applicable, as identified under Part VI of the Application Form.
- Attachment D: If you are **not** currently a vendor registered with the State Of Connecticut Comptroller's office you must also include a completed Agency Vendor Form. This form may be downloaded at: [www.das.state.ct.us/Purchase/Info/Vendor_Profile_Form_\(SP-26NB\).pdf](http://www.das.state.ct.us/Purchase/Info/Vendor_Profile_Form_(SP-26NB).pdf). You may download the W9 form and instructions at: www.irs.gov/pub/irs-pdf/fw9.pdf.
- Attachment E: *Photographs of Existing MSDFs or Pumpout Vessels; digital or color prints only. Black and white or color photocopies will **NOT** be accepted.

* Required for all applications.

Part X: Applicant Certification

The applicant *and* the individual(s) responsible for actually preparing the application must sign this part. An application will be considered incomplete unless all required signatures are provided. If the applicant is the preparer, please mark N/A in the spaces provided for the preparer.

Funding provided through this grant program is provided by the U.S. Fish and Wildlife Service, Clean Vessel Act Program and is administered through Connecticut's Department of Energy and Environmental Protection – Boating Division. Funds awarded through this grant application process are to be used solely for allowable costs and expenses as identified within the application instructions and any contract between the grantee and the State of Connecticut.

Any funding provided through any subsequent State Contract is subject to audit and investigation by the U.S. Office of the Inspector General (OIG) and the State of Connecticut Attorney General's Office (AG), as well as Connecticut's Department of Energy and Environmental Protection (DEEP). Any instances of potential fraud, waste, theft or abuse will be reported by DEEP to the OIG and the AG's office for investigation and prosecution.

False statement(s) in the submitted information is punishable as a criminal offense pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute or regulation.

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief.

I understand that a false statement in the submitted information is punishable as a criminal offense, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute or regulation.

I certify that this application is on complete and accurate forms as prescribed by the commissioner without alteration of the text.

I further certify, upon submission of this application, all of the following:

- a) The application form and associated materials are complete and accurate;
- b) All requested costs and expenses shall be used solely for allowable costs and expenses;
- c) All requested costs and expenses shall be supported with original receipts, invoices or other supporting documentation; and
- d) There shall be no instances of fraud, theft, waste, abuse, mismanagement or misconduct regarding the funds provided through this grant application process."

Signature of Applicant

Date

Printed Name of Applicant

Title (if applicable)

Signature of Preparer

Date

Printed Name of Preparer

Title (if applicable)

Check here if additional signatures are required. If so, please reproduce this sheet and attach signed copies to this sheet. You must include signatures of any person preparing any report or parts thereof required in this application (i.e., marine architects, professional engineers, surveyors, consultants, etc.)

Note Please submit this completed Application Form and supporting documents to:

Sara Ganzer
Department of Energy and Environmental Protection
79 Elm Street, 6th Floor
Hartford, CT 06106



**Connecticut Department of
Energy & Environmental Protection**

Applicant Compliance Information

DEEP ONLY
App. No. _____
Co./Ind. No. _____

Applicant Name:		
Mailing Address:		
City/Town:	State:	Zip Code:
Business Phone:	ext.:	
Contact Person:	Phone:	ext.
*E -mail:		
If you answer yes to any of the questions below, you must complete the Table of Enforcement Actions on the reverse side of this sheet as directed in the instructions for your permit application.		
A. During the five years immediately preceding submission of this application, has the applicant been convicted in any jurisdiction of a criminal violation of any environmental law?		
<input type="checkbox"/> Yes <input type="checkbox"/> No		
B. During the five years immediately preceding submission of this application, has a civil penalty been imposed upon the applicant in any state, including Connecticut, or federal judicial proceeding for any violation of an environmental law?		
<input type="checkbox"/> Yes <input type="checkbox"/> No		
C. During the five years immediately preceding submission of this application, has a civil penalty exceeding five thousand dollars been imposed on the applicant in any state, including Connecticut, or federal administrative proceeding for any violation of an environmental law?		
<input type="checkbox"/> Yes <input type="checkbox"/> No		
D. During the five years immediately preceding submission of this application, has any state, including Connecticut, or federal court issued any order or entered any judgement to the applicant concerning a violation of any environmental law?		
<input type="checkbox"/> Yes <input type="checkbox"/> No		
E. During the five years immediately preceding submission of this application, has any state, including Connecticut, or federal administrative agency issued any order to the applicant concerning a violation of any environmental law?		
<input type="checkbox"/> Yes <input type="checkbox"/> No		

Table of Enforcement Actions

(1) Type of Action	(2a) Date Commenced	(2b) Date Terminated	(3) Jurisdiction	(4) Case/Docket/ Order No.	(5) Description of Violation

Check the box if additional sheets are attached. Copies of this form may be duplicated for additional space.

ATTACHMENT E-PHOTOS OF EXISTING MSDFS OR PUMPOUT VESSELS