**APPENDIX A: Local Agency Application Form**

**CDOT Permanent Water Quality Mitigation Pool**

**Applicant Information**

|  |  |  |
| --- | --- | --- |
| Lead Organization Name |  | |
| County Municipality Watershed Group Non-profit (place an x next to the lead organization’s type) | | |
|  | | |
| Project Name |  | |
| Amount Requested |  | Application Submission Year: |

CDOT will only discuss application issues with contacts listed below.

|  |  |  |
| --- | --- | --- |
| **Project Manager/ Technical Contact** | | |
| Name of Project Manager | |  |
| Title | |  |
| Address | |  |
| E-mail | |  |
| Phone Number | |  |
| **Alternative Contacts Information**  (in absence of Project Manager– add additional contacts, as needed) | | |
| Name | |  |
| Title or Position |  | |
| E-mail |  | |
| Phone Number |  | |

|  |  |
| --- | --- |
| **Governmental Fiduciary Sponsor/ Responsible Agent that Provides Authorized Signature**  (applicable only for non-CDOT, non-government applicants) | |
| Agency |  |
| Point of Contact: |  |
| Title |  |
| Address |  |
| E-mail |  |
| Phone Number |  |

**Project Information**

|  |  |
| --- | --- |
| **Project Location/ Ownership** | |
| CDOT Region |  |
| Drainage Basin (name and description, and if known, HUC number) |  |
| Parcel Address or Number (if known) |  |
| Description of Location – e.g., street address, intersection, and/or latitude and longitude (show detail on required map) |  |
| Description of Property Ownership |  |

**Threshold (Minimum) Criteria**

Respond to the following questions. Detailed directions are provided in the application guidance Part 4: Project Selection - Threshold (Minimum) Criteria.

1. Describe the **scope for the Control Measures** and how the project **meets the requirements of CDOTs MS4 permit and NDRD Interim Program.** Describe the project and include key components, as outlined in the NDRD Interim Program Guidance. Respond to the following questions.

1a. Are requested funds for design, acquisition of ROW and/or construction of Control Measure(s)?

\_\_\_\_ Yes \_\_\_\_ No

1b. Will a portion of CDOT MS4 area be treated?

\_\_\_\_ Yes \_\_\_\_ No

1c. Will treatment occur prior to entering Waters of the State and will Control Measure(s) meet CDOT PWQ Design Standards?

\_\_\_\_ Yes \_\_\_\_ No

1d. Do you acknowledge that Control Measure(s) will be surveyed and certified per CDOT specifications?

\_\_\_\_ Yes \_\_\_\_ No

1. The project must be **consistent with a long-term plan for water quality treatment and land use**. List the agency plan(s) and applicable years of the plan(s)
2. **Project readiness**:
   1. Describe the expected schedule, assuming the project is funded. Include expected timeframes for milestones, such as environmental clearances (e.g., NEPA), final design, ROW acquisition (if applicable), and construction. Any assumptions that were used to develop the schedule should be included.
   2. List which environmental clearances and surveys have been completed and which are likely to be required.
3. **Sustainable maintenance plan** – Describe the maintenance plan and include key components, as outlined in the guidance.
4. Do local agency applicants and/or local agency partners on CDOT applications agree to **comply with CDOT Intergovernmental Agreement and 2 CFR 200 requirements** as consistent with CDOT Local Agency and MS4 permit requirements? This must be completed prior to assignment of any Mitigation Pool funds.

\_\_\_\_ Yes \_\_\_\_ No

1. **Resources are available** – A person with authority must certify that funds outlined in the cost estimate will be available by signing the application form. This person must have the authority to commit funds and resources to the project. This criterion is not relevant to CDOT Advertised Projects.

**Evaluation Criteria for Proposals**

Respond to the following components in the Part 4 - Evaluation Criteria for Proposals section of the application guidance that have not been described elsewhere in the application form. The numbers correspond to the guidance where more detailed directions are provided.

1. **Matching resources:** Reminder – in addition to listing matching resources, letters of support from partners provided matching resources are required.
2. **Partnerships**
3. **Local watershed priority**

**Map and/or Location and Aerial Photos**

Attach a map and/or onsite and aerial photos. The following must be shown on the map and/or onsite and aerial photos:

* Components listed in the treatment area table below, except for percentages
* CDOT’s MS4 boundary and all other MS4 boundaries
* Approximate location, type, size and shape of Control Measures
* Drainage basin delineation including a North arrow and scale
* Any narrative clarification that may be needed

**Treatment Area Table**

Fill in and attach the treatment area table in the application Excel spreadsheet, which is available on the [CDOT PWQ Program Local Agency Call for Projects website](https://www.codot.gov/programs/environmental/water-quality/permanent-water-quality-call-for-projects). Rows can be added at the bottom of the table, if applicant wants to provide additional information. Include assumptions so that CDOT can verify that the information is accurate.

**Cost Estimate**

Fill in and attach the cost estimate table in the application Excel spreadsheet, which is available on the [CDOT PWQ Program Local Agency Call for Projects website](https://www.codot.gov/programs/environmental/water-quality/permanent-water-quality-call-for-projects), or attach a separate cost estimate that includes this information, at a minimum. Include assumptions so that CDOT can verify that the cost estimate is accurate. Also, describe benefits that make more expensive projects worthwhile.

**Check List of Information Required**

\_\_ Completed application form. Application forms must be signed and dated by a person with authority to certify that funds will be available. This person must have the authority to commit funds and resources to the project.

\_\_ Attached map and/or location and aerial photos describing the project

\_\_ Attached treatment area table

\_\_ Attached cost estimate

\_\_ Letter certifying maintenance responsibility (required if applicable). If the applicant is taking on maintenance responsibility, a letter from a person with fiduciary authority is required to certify that funds and resources will be available.

\_\_ Letters of support from CDOT Regions or other partners in which ROW, access, or other approvals will need to be acquired (required if applicable)

\_\_ Letters of support from partners providing matching funds or in-kind services to the project (required if applicable). Applicants are also encouraged, but not required, to include letters of support from partners that have a role in the project, but are not providing matching funds.

**Signature of Responsible Agent**

As the authorized/responsible agent for the [insert application name] project, I certify that funds and resources outlined in the application will be available. All information in this application is true and correct to the best of my knowledge. I understand this application will be rated on the basis of information submitted and that incorrect data can result in this application being withdrawn for consideration for funding.

I understand and agree that if our application is accepted funding is contingent upon entering into an Intergovernmental Agreement with CDOT, and that funding will not be provided for any activities prior to the IGA execution date. I acknowledge that our Project Team must meet the following requirements, and failure to do so may result in CDOT withdrawing funds and/or requiring funds be returned.

* Meet requirements of CDOTs MS4 permit and NDRD Interim Program - I understand that CDOT may request review of design, planning and construction documents and may verify requirements are met during site visits
* Meet all federal and/or state funding requirements
* Meet the requirements of SuperCircular - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200; and
* Follow CDOT’s Local Agency Manual.

If the proposed project is not constructed or the Control Measure(s) are not compliant with CDOT’s MS4 permit, we may have to reimburse payments made for design and ROW. Any cost overruns of the funding amount requested from CDOT, as defined in the IGA, are our responsibility.

Signature, Title/Organization Date