



MISSOURI DEPARTMENT OF NATURAL RESOURCES
 WATER PROTECTION PROGRAM
DRINKING WATER STATE REVOLVING FUND LOAN APPLICATION

FOR OFFICE USE ONLY	
DATE RECEIVED	
PROJECT NUMBER	
PRIORITY POINTS	

This application is for a Drinking Water State Revolving Fund Loan described in Missouri Regulation 10 CSR 60-13.020.
Submit to: Missouri Department of Natural Resources, Financial Assistance Center, P.O. Box 176, Jefferson City, MO 65102-0176. Please type or print legibly.

1. APPLICANT INFORMATION

PUBLIC WATER SUPPLY NAME		PUBLIC WATER SUPPLY ID NO.	
PUBLIC WATER SUPPLY OWNER		DUNS NO.	
PUBLIC WATER SUPPLY CONTACT PERSON FOR THIS DRINKING WATER STATE REVOLVING FUND LOAN PROJECT			TITLE
MAILING ADDRESS		EMAIL ADDRESS	
CITY	STATE	ZIP CODE + FOUR	COUNTY
TELEPHONE NUMBER WITH AREA CODE Ext.		FAX NUMBER WITH AREA CODE Ext.	

2. ARCHITECTURAL AND ENGINEERING CONSULTANT INFORMATION

CONSULTING FIRM'S NAME		CONSULTANT'S NAME	
CONSULTANT MAILING ADDRESS		EMAIL ADDRESS	
CITY	STATE	ZIP CODE + FOUR	
CONSULTANT TELEPHONE NUMBER WITH AREA CODE Ext.		CONSULTANT FAX NUMBER WITH AREA CODE	

3. GENERAL INFORMATION

POPULATION SERVED	MEDIAN HOUSEHOLD INCOME FOR THE SERVICE AREA	
CURRENT AVERAGE MONTHLY WATER BILL FOR A TYPICAL HOUSEHOLD, PER 5,000 GALLONS		
ESTIMATED AVERAGE MONTHLY WATER BILL FOR A TYPICAL HOUSEHOLD, PER 5,000 GALLONS, FOLLOWING COMPLETION OF THIS PROJECT		
ANTICIPATED TERM OF THE LOAN (YEARS)		
EXISTING CUSTOMERS		ESTIMATED CUSTOMERS AT PROJECT COMPLETION
WHAT IS YOUR COLLECTION DELINQUENCY RATE? percent		ARE YOU CURRENTLY FUNDING DEPRECIATION? <input type="checkbox"/> Yes <input type="checkbox"/> No
OUTSTANDING DEBT SERVICE \$	ANY DEBT HELD BY USDA RURAL DEVELOPMENT? <input type="checkbox"/> Yes <input type="checkbox"/> No	WHEN WAS THE LAST TIME USER-FEES WERE REVIEWED?
EXISTING ANNUAL DEBT SERVICE \$	WHEN WAS THE LAST TIME USER-FEES WERE INCREASED?	
REVENUE LESS (MINUS) OPERATING EXPENSES FOR THE LAST FISCAL YEAR EQUALS = \$		
FROM A FINANCIAL STANDPOINT, DO YOU HAVE A COMBINED WATER AND SEWER SYSTEM? <input type="checkbox"/> Yes <input type="checkbox"/> No		
U.S. CONGRESSIONAL DISTRICT NUMBER	STATE SENATE DISTRICT NUMBER(S)	STATE REPRESENTATIVE DISTRICT NUMBER(S)

4. CERTIFIED OPERATOR AND EMERGENCY OPERATING PLAN

THE APPLICANT HAS PROVIDED:

Documentation the public water supply has a certified chief operator or expects to have prior to loan award.

Documentation the public water supply has an emergency operating plan or expects to have prior to loan award.

Documentation the public water supply has a permit to dispense or expects to have prior to loan award.

5. PROJECT DESCRIPTION

DESCRIBE THE MAJOR COMPONENTS OF THE PROJECT (ATTACH A SEPARATE SHEET, IF NECESSARY)

6. PROJECT COST INFORMATION

ESTIMATED PROJECT COST BREAKDOWN		BREAKDOWN OF STATE REVOLVING FUND ELIGIBLE COST PER DESIGNATED CATEGORIES:	
		Treatment	\$
Administrative/Legal	\$	Transmission and Distribution	\$
Engineering Planning and Design	\$	Storage	\$
Construction Engineering Services	\$	Source	\$
Engineering Inspection	\$	Land Acquisition	\$
Construction	\$	Purchasing of Other Systems	\$
Other Costs (labs, upgrades, automation, etc.) Specify:	\$	Refinancing	\$
Interest During Construction	\$	Other Specify:	\$
Contingency (10 percent of Construction)	\$	PROJECTED REPAYMENT SOURCE	
Total Project Costs	\$	<input type="checkbox"/> User Fees <input type="checkbox"/> General Funds <input type="checkbox"/> Sales <input type="checkbox"/> Other (Please, describe):	
Funding Sources other than the Drinking Water State Revolving Fund (specify whether loan or grant): If you list grant funding, please attach a copy of the grant approval letter, otherwise do not assume any grant funding.			
•	\$		
•	\$		
BALANCE (Total project costs minus other funding sources)	\$		
Cost of Issuance (Estimate 3% of Balance)	\$		
AMOUNT OF LOAN REQUEST (Balance plus Cost of Issuance)	\$	IS THE SOURCE OF REPAYMENT IN PLACE AND AVAILABLE AT THIS TIME? (CHECK ONE) <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, specify:	

7. ANTICIPATED DEBT STRUCTURE/SECURITY

<input type="checkbox"/> General Obligation Bonds		<input type="checkbox"/> Revenue Bonds	
AMOUNT OF BOND \$	HAVE YOU PASSED BONDS FOR THIS PROJECT? (CHECK ONE) <input type="checkbox"/> Yes – include a copy of the bond language and certified election results <input type="checkbox"/> No		

8. PROJECT SCHEDULE (READINESS TO PROCEED-SEE ATTACHED READINESS TO PROCEED AND DISTRIBUTION OF FUNDS CRITERIA FACT SHEET)

MILESTONE	ANTICIPATED DATE
A. Facility plan submittal (See attached Facility Plan Submittal Checklist when submitting the facility plan)	
B. All other funding is secured (if necessary, bonds are voted)	
C. Engineering plans and specifications submittal	
D. Construction start date	

9. PRIORITY POINTS CRITERIA (SEE ATTACHED MISSOURI WATER STATE REVOLVING FUND PRIORITY POINTS CRITERIA FACT SHEET)

NOTE: Check all items listed below that apply to the project and describe in the space provided. Attach any supporting documentation (e.g., copy of the latest sanitary survey, inspection, copy of order, agreement, permit or other enforceable document, etc.) and specifically cross-reference it in the narrative description. The department will consider only supporting documentation described on the application form.

SAFE DRINKING WATER ACT COMPLIANCE (Anticipated compliance benefits of the proposed project.)

- THIS PROJECT WILL (CHECK ALL THAT APPLY):
- Correct persistent violations of maximum contaminant levels or treatment performance criteria for acute risk contaminants (such as coliform, turbidity or nitrate) within the past 36 months.
 - Correct persistent violations of treatment technique requirements.
 - Correct persistent violations of maximum contaminant levels for nonacute risk primary contaminants occurring within the past 36 months.
 - Correct persistent violations of maximum contaminant levels for secondary contaminants occurring within the past 36 months.
 - Enable the public water supply to comply with certain anticipated federal regulations.
 - Enable the public water supply to comply with an administrative order, bilateral compliance agreement, permit or other enforceable document issued by the Missouri Department of Natural Resources.

DESCRIPTION OR ADDITIONAL COMMENTS:

PUBLIC HEALTH (Anticipated public health benefits of the proposed project.)

- Existing public water systems only: At least 51 percent of the project will address problems causing a waterborne disease outbreak attributable to the public water supply by the Missouri Department of Health and Senior Services.
- Existing public water systems only: The public water supply can document its inability consistently to maintain >35 psi as a normal working pressure in the distribution system.
- Existing public water systems only: The public water supply can document its inability consistently to maintain >20 psi at all service connections.
- Private or noncommunity wells or sources in the project service area are unable to consistently provide an adequate amount of potable water for general household purposes and at least 51 percent of the project addresses this need.

PUBLIC WATER SYSTEM INFRASTRUCTURE IMPROVEMENTS (Anticipated infrastructure benefits of the proposed project.)

THIS PROJECT WILL (CHECK ALL THAT APPLY):

- Provide a public water supply with a backup well or backup interconnection with another public water supply.
- Address problem(s) with improper well construction.
- Address unaccounted for water that exceeds 10 percent of the drinking water produced by the system, and the loss is due to leaking or broken water lines.
- Provide necessary modifications to a distribution system anticipated to exceed design capacity or useful life within the next five years.
- Address a demonstrated need to replace faulty pipes or substandard pipe materials.
- Address a demonstrated need for distribution system valves and flushing devices.
- Address a demonstrated need for looping of water mains.
- Address an inability to maintain a disinfectant residual at all points in the distribution system.
- Address water storage facilities in poor condition not related to inadequate maintenance.
- Provide the public water supply with a storage capacity equal to one day's average use or provide the public water supply with adequate standby power.
- Provide necessary modifications to a source or treatment facility anticipated to exceed design capacity or useful life within the next five years.
- Address significant degradation of the quality of raw water supply.
- Address significant degradation of the quality of finished water in storage.
- Enable the public water supply to meet existing state requirements for the treatment or storage of waste residues generated by the water treatment plant.
- Enable repair or replacement of treatment facilities for required disinfection or turbidity removal that are severely deteriorated beyond the useful life of the facility.
- The facility's source is vulnerable to natural disasters (such as flood or drought) or contamination.
- The facility's treatment plan is vulnerable to natural disasters (such as flood or drought) or contamination.
- The facility is located in a department-approved wellhead protection area.

ADDITIONAL PRIORITY POINT CATEGORIES

THIS PROJECT WILL (CHECK ALL THAT APPLY):

- At least 51 percent of the project cost is for repair or replacing an existing public water system damaged or destroyed by a natural disaster. (Note: Documentation must be submitted along with a statement that adequate state or federal disaster relief is not available).

- Project will result in interconnections with other systems affected by drought or for upgrades to existing systems to address drought related problems

- Project will result in interconnections with other systems prone to flooding or for upgrades to existing systems to address flood related problems

- Provide necessary upgrades to facilities of a primary water system to continue or expand services as a regional water supplier. Name of system(s): _____

- Result in the permanent supply interconnection of two or more existing public water systems. (This includes new water systems that allow small water systems within their boundaries to consolidate).
Name of system(s): _____

- Result in a regional management system responsible for the day-to-day operation of the water system.
Name of the system(s): _____

- Enable the public water supply to enhance the water system security.

- At least 50 percent of the applicant's governing board has received training related to the management and operation of drinking water infrastructure. Please provide documentation of the training and a list of members who received the training.

- The public water supply has completed an asset inventory.

DESCRIPTION OR ADDITIONAL COMMENTS

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CERTIFICATION

The undersigned representative certifies the information submitted in this application is true and correct to the best of his or her knowledge and that he or she is authorized to sign and submit this application. The applicant agrees, if a loan is awarded on the basis of this application, to comply with all applicable rules and regulations of the Department of Natural Resources and the terms and conditions of the loan agreement. Furthermore, the applicant meets the requirements of 10 CSR 60-3.030 Technical, Managerial, and Financial (TMF) Capacity or will meet these requirements upon completion of the project. For more information regarding TMF Capacity, please contact the department's Financial Assistance Center at 573-751-1192.

Incomplete applications will be returned.

SIGNATURE OF AUTHORIZED REPRESENTATIVE	DATE
NAME AND OFFICIAL TITLE	TELEPHONE NUMBER WITH AREA CODE Ext.

PREPARER'S NAME AND SIGNATURE (IF APPLICABLE)

SIGNATURE OF PREPARER	DATE
NAME AND TITLE	TELEPHONE NUMBER WITH AREA CODE Ext.

Drinking Water State Revolving Fund Loan Application Instruction for 780-1845

Note: Any funding assistance is subject to all State Revolving Fund requirements. Potential applicants should contact the Missouri Department of Natural Resources' [Financial Assistance Center](#) prior to completing and submitting an application. Please contact the Financial Assistance Center at 573-751-1192 or toll free at 800-361-4827.

1. Print or type the applicant information. Include a street address if available. The applicant 1. is the entity that will receive the loan funds, if awarded. Prior to receiving a loan, the entity must have a DUNS (Data Universal Numbering System) number. The [DUNS number](#) is a nine digit number established and assigned by Dun and Bradstreet Inc., or D&B, to uniquely identify business entities. A DUNS number is available from D&B by telephone at 866-705-5711 or at fedgov.dnb.com/webform. The contact noted on the application should be knowledgeable about the application and able to be contacted during business hours.
2. Include the engineering firm name and the name of the professional engineer working on the project.
3. Show the population of the entire service area. The population served by public water supply will be different from the decennial census population if the project is to serve a portion of the municipality or district. The information included in Section 3 of the application will be used to determine the financial capability of the applicant with respect to the proposed project. Please provide the most accurate information available. Collection delinquency rate is defined as bills that are never collected, not bills that don't get paid by the due date but are eventually collected later.

Show the revenue minus expenses including operation and maintenance, replacement and debt service for the last fiscal year. Please include the beginning and end of the fiscal year if not using the calendar year. Provide the median household income based on the most recent decennial census. The median household income data can be found online at factfinder2.census.gov/faces/nav/jsf/pages/community_facts.xhtml.

Fill in the current rate for a 5,000 gallon user and what the estimated rate will be at project completion.

Provide the U.S. congressional district numbers, state senate and state representative district numbers for the project area.

4. Check the appropriate box if the public water supply has a certified chief operator or an emergency operations plan. Please provide a copy of your permit to dispense. If you do not have a permit to dispense, visit dnr.mo.gov/forms and submit an [application](#) to:

Missouri Department Of Natural Resources, Public Drinking Water Branch, P.O. Box 176, Jefferson City, MO 65102-0176

5. Provide a brief project description.
6. Supply the cost estimates for the project. Land acquisition and easements may be eligible for a Drinking Water State Revolving Fund Loan. Please call the department's Financial Assistance Center at 573-751-1192 or 800-361-4827 for additional guidance concerning requirements needed when acquiring land and easements. **NOTE:** Do not assume any grant funds. If you list grant funding, please provide a copy of the grant approval letter.

Provide a cost breakdown by category of need.

State the source of repayment for the loan and if it is in place and available at this time.

7. Provide information about existing or proposed ballot issues. If a bond or tax issue has already been voted, provide a copy of the ballot language and certified election results.

8. Provide a project schedule that will be used to determine the applicant's readiness to proceed. Please review the Readiness to Proceed and Distribution of Funds Criteria fact sheet.
9. Check all boxes that apply to the proposed project and include descriptions or additional comments as needed. Additional information from these descriptions and a preliminary engineering report will help determine priority.

Note: Please look at the Missouri Drinking Water State Revolving Fund Priority Points Criteria fact sheet to help you to maximize the priority points received for the project. The priority ranking criteria is available at dnr.mo.gov/pubs/pub2362.pdf.

Incomplete Applications will be Returned

- Sign the application and attach any information that will enable the department to prioritize the drinking water needs.
- If funds from the U.S. Department of Agriculture-Rural Development or Department of Economic Development - Community Development Block Grant Program will also be sought, please ensure that information is included with this application.
- Make a copy of the completed application for you records.

Mail the completed application to: Missouri Department of Natural Resources, Financial Assistance Center
P.O. Box 176, Jefferson City, MO 65102-0176

For More Information

Missouri Department of Natural Resources
Water Protection Program
Financial Assistance Center
P.O. Box 176
Jefferson City, MO 65102-0176
800-361-4827 or 753-751-1192
FAX: 573-571-9396
www.dnr.mo.gov/env/wpp/srf/index.html