

WEST VIRGINIA
WATER POLLUTION CONTROL REVOLVING FUND

APPLICATION FOR A CONSTRUCTION LOAN

as administered by the

DEPARTMENT OF ENVIRONMENTAL PROTECTION

and the

WATER DEVELOPMENT AUTHORITY

Sept. 2014

INSTRUCTION FOR FILING

1. One original and one copy of the attached application form (SRF-2) is to be submitted to the:

West Virginia Department of Environmental Protection
Division of Water & Waste Management
State Revolving Fund Program
601 57th Street, S.E.
Charleston, West Virginia 25304
2. The application shall contain one copy of all supporting documentation and required certifications.
3. The application shall require the original signature of the duly authorized representative and the original signature of the engineering representative authorized to execute contract documents.
4. All necessary documents must be provided prior to approval of the application. Failure to provide required documentation shall constitute an incomplete application, necessitating rejection and return of such document.

WEST VIRGINIA WATER POLLUTION CONTROL REVOLVING FUND
APPLICATION FOR A CONSTRUCTION LOAN

The undersigned Governmental Agency (the "Applicant") hereby applies to the West Virginia Department of Environmental Protection (the "DEP") and the West Virginia Water Development Authority (the "Authority") for a Water Pollution Control Revolving Fund Loan in the estimated amount shown on Line 20 of Schedule A or Schedule B hereto, pursuant to the provisions of Chapter 22, Article 11, and Chapter 22c, Article 2, of the Code of West Virginia 1931, as amended. Such loan will be utilized by the Applicant to finance on a long-term basis, the cost of constructing the water pollution control project hereinafter described the "Project". This Application shall constitute a commitment of the Applicant to enter into a binding contract.

A. GENERAL

1. Full legal name and address of Applicant: _____

Year established: _____ FEIN Number: _____

Telephone number: 304/ _____ Fax number: 304/ _____

DUNS # _____ County: _____

Magisterial District: _____ Watershed: _____

E-mail: _____

2. Name and title of chief executive officer of Applicant (Authorized Representative):

E-mail: _____

Telephone number: 304/ _____ Fax number: 304/ _____

(Provide documentation certifying the individual's authority if changed since last transaction).

3. Location of Project: _____

4. Name, address, telephone & fax number, or e-mail address of bond counsel:

5. Name, address, telephone & fax number, or e-mail address of local attorney:

6. Name, address, telephone & fax number, or e-mail address of consulting engineer:

7. Name, address, telephone & fax number, or e-mail address of independent certified public accountant or independent public accountant:

8. Describe any bond anticipation notes or other interim financing outstanding (bank loans, etc.) in connection with the Project. The description should include the title, the principal amount currently outstanding, the repayment schedule and the security and source of payment. If the obligations are secured by a lien on or payable from revenues of the System, as hereinafter defined, the obligations should be paid or otherwise taken out with a portion of the proceeds of the revenue bonds issued to the Authority. If that is not anticipated, please contact the Authority. If no such interim construction obligations are outstanding, check this blank: _____.

9. Describe all outstanding waterworks revenue bonds, sewerage system revenue bonds or combined waterworks and sewerage system revenue bonds relating to the System, as hereinafter defined, and attach copies of all related ordinances or resolutions. The description should include the principal amount of such bonds currently outstanding and a schedule of remaining debt service. Restrictions regarding the issuance of additional bonds (prior, parity or subordinate) should be described. If no such bonds are outstanding, check this blank: _____.

*** If applicant has received prior bonds, only list debt incurred after last loan closing.

B. ADMINISTRATIVE AND TECHNICAL
(Attach separate sheets of paper as needed.)

1. Proposed Project (check which type):

- a. Wastewater Treatment/Collection Facility _____
- I/I Correction/Rehabilitation _____
- CSO Correction _____
- Other (i.e. green technology) _____

b. Description: _____

2. Check permits required for the Project and date received or, if not yet received, date application was submitted:

_____ West Virginia Department of Environmental Protection:
date received _____ or application submitted _____
Other (specify): _____
_____ date received _____ or application submitted _____
Other (specify): _____
_____ date received _____ or application submitted _____

3. List all grants awarded or applied for and assumed in Schedule A. If already awarded, attach copy of grant award or approval. If not yet awarded, give date application was submitted and briefly describe status.

4. Miscellaneous

- (a) Date bids for Project were received: _____
- (b) Expiration date of bids: _____
- (c) Attach copy of bid tabulations.
- (d) Attach copy of the certified newspaper bid advertisement.
- (e) Final Title Opinion by legal counsel indicating the status of right-of-way acquisition.
- (f) Attach copies of apparent responsible, acceptable low bids.
- (g) Attach a copy of 1st envelope items for each apparent low bidder (statement provided per Executive Order 11246, bid bonds and power-of-attorney, certification of non-segregated facilities, documentation of receipt of addenda, Alcohol & Drug Free Workplace Plan).

- (h) Preaward Compliance Review Report (EPA Form 4700-4)
- (i) PSC Final Certificate of Convenience and Necessity
- (j) Proposed Reimbursement Payment Schedule and current milestone schedule
- (k) Other documents as previously discussed between our office and the engineering firm

5. Proposed construction schedule dates (include construction activities already completed or in process):

Construction Completion _____

Final Payment Package _____

Substantial Completion Certificate _____

Performance Certification submittal _____

Asset Management plan (if applicable) _____

6. Complete attached Schedule A for SRF funding. Complete Schedule B for total costs only if other funding sources are necessary.

7. If the Project is a start-up system, check this blank: _____ .

8. Provide current rate ordinance in effect and a proposed ordinance and its effective date, if rates are required to be increased. This data is to be for the first full year of operation after completion of the Project. (or Rule 42)

- (a) Estimated debt service and estimated debt service coverage during the period should be shown based on all outstanding obligations payable from the revenues of the System and the estimated size of the bond issue calculated on Schedule A or B.

The above requirements of this paragraph 8 may be omitted if all information is contained in such audits or reports as required under Item 9.

9. **If not previously submitted**, provide the last two years audit reports prepared by an independent auditor for the Sewer/Combined System.

* * * * *

The undersigned, as a duly authorized representative of the Project, certifies that this Application is a true representation to the best of his/her knowledge, including the exhibit documents attached, and consents to the use of such information by the DEP and the Authority in connection with the financing of the Project.

(Authorized Representative's Signature)

(Consultant's Signature)

Title: _____

Date: _____, 20____

Date: _____, 20____

Attachments:

Schedule A – Costs for SRF funding

Schedule B – Costs for multiple funding sources

INSTRUCTIONS FOR SCHEDULE A and B

Note: If CWSRF is the **only funding source** use **Schedule A**. If there are **multiple funding sources**, use **Schedule B**.

1. Attach a separate sheet itemizing the miscellaneous items and cost.
2. Attach supporting documentation of commitment of funds, if available. If not yet available, state such.
3. For example, interest earnings during construction, if applicable. Include the proceeds of any parity or subordinate bond issue to be used for such purpose and attach supporting documentation if available.
4. Bond counsel fees, to include registrar's fees.
5. Consult with bond counsel and the Authority (WDA) before assuming a funded reserve.

Additional or explanatory material (duplexed) may be provided on additional sheets attached to Schedule A/B.

SCHEDULE A

NAME OF GOVERNMENTAL AGENCY: _____

ESTIMATED TOTAL COST OF PROJECT, SOURCES OF FUNDS AND COST OF FINANCING

A. Cost of Project

- 1. Construction \$ _____
- 2. Technical Services (provide breakout) \$ _____
- 3. Legal \$ _____
- 4. Administrative \$ _____
- *5. Site and Other Lands \$ _____
- **6. Fac. Plan/Design or Other Loan
Repayment (Specify Type:
_____) \$ _____
- 7. Contingency (5% of construction) \$ _____
- 8. Miscellaneous ¹ \$ _____
- 9. Total of Lines 1 Through 8 \$ _____

B. Sources of Funds

- 10. Federal Grants: ² _____ \$ _____
(Specify Sources) _____
- 11. State Grants: ² _____ \$ _____
(Specify Sources) _____
- 12. Other Grants: ² _____ \$ _____
(Specify Sources) _____
- 13. Any Other Source ³ _____ \$ _____
(Specify) _____
- 14. Total of Lines 11 Through 13 \$ _____
- 15. Net Proceeds Required from Bond Issue
(Line 9 minus Line 14) \$ _____

C. Cost of Financing

- 16. Bond Council ⁴ \$ _____
Registrar fee \$ _____
- 17. Funded Reserve Account: ⁵ \$ _____
- 18. Total Cost of Financing (lines 16 + 17) \$ _____
- 19. Size of Bond Issue (Line 15 plus Line 18) \$ _____

* not allowable for State Revolving Fund Assistance
 ** WDA loans associated with EPA grants are not allowable

Signature of Authorized Representative

Signature of Consulting Engineer

Date: _____

Date: _____

(Loan Recipient Name)

SRF C54

SCHEDULE B

A. COST OF PROJECT	TOTAL	CWSRF	(ID Other Funding)	(ID Other Funding)
1. Construction				
Contract				
Contract				
Contract				
Equipment				
2. Technical Services				
Planning				
Design				
Eng. During Const.				
Special Services				
Inspection Services				
3. Legal				
4. Administrative				
5. Sites & Lands				
Land /ROW Acquisition (1)				
Land/ROW Activities				
6. Loan Repayment				
7. Interim Financing (1)				
8. Contingency				
9. Miscellaneous (provide listing)				
10. Total (Lines 1 – 9)				
B. SOURCE OF FUNDS				
11. Federal Grants				
12. State Grant				
13. Other Grants				
14. Any Other Source				
15. Total (Lines 11 – 15)				
16. Net Proceeds from Bond Issue				
C. COST OF FINANCING				
17. Funded Reserve				
a. SRF Funded Reserve				
b. Other Funded Reserve (1)				
18. Other Costs				
a. Registrar Fees				
b. Bond Counsel				
19. Total Cost of Financing				
20. Size of Bond Issue				

(1) Not for SRF funding

Signature of Authorized Representative

Date: _____

Signature of Consulting Engineer

Date: _____