



Current as of: December 20, 2003

Dear APPLICANT:

This is an application package for EPA financial assistance programs through the EPA's National Health and Environmental Effects Research Laboratory located in RTP, NC. A PDF read-only version may be found on the EPA NHEERL Web Page by selecting "Jobs & Opportunities" on the Home page and then "Solicitations for Business and Research Opportunities" on the Jobs & Opportunities Web page. The NHEERL Web page is located at:

<http://www.epa.gov/nheerl>

You may also access many of the forms included in the package at the following web site:

http://www.whitehouse.gov/omb/grants/grants_forms.html

If you have any questions about the assistance program for which you are applying or need help in completing your application, please contact the EPA NHEERL Point of Contact identified in the assistance opportunity announcement, or the EPA NHEERL Acquisition Program Manager at 919-541-4896.

ITEMS IN YOUR APPLICATION KIT

ATTACHMENTS

- 1. Application Submission Checklist (including Mailing Address)
Application Receipt Letter
Applicant's Key Contacts**
- 2. SF 424, 424A, 424B - Application Form**
- 3. Supplemental Information**
- 4. Certification Regarding Debarment and Suspension**
- 5. Lobbying Certification and Disclosure Forms**
- 6. Compliance Report**
- 7. Applicable EPA Regulations and OMB Circulars**

ATTACHMENT 1

**Application Submission Checklists
(w/Mailing Address)
Application Receipt Letter
Applicant's Contacts**

CHECKLIST FOR APPLICATIONS OVER \$100,000

ITEMS TO BE SUBMITTED

- ___ SF-424 APPLICATION FOR FEDERAL ASSISTANCE, with original signature, including:
 - SF-424 A, Budget by categories and indirect cost rate
 - SF-424 B, Assurances for non-construction programs
- ___ DEBARMENT AND SUSPENSION CERTIFICATION
- ___ CERTIFICATION REGARDING LOBBYING (if over \$100,000) and SF LLL, if applicable
- ___ EPA FORM 4700-4 PREAWARD COMPLIANCE REVIEW REPORT
- ___ NARRATIVE STATEMENT (Work Plan)
- ___ QUALITY ASSURANCE NARRATIVE STATEMENT, if applicable
- ___ DETAILED ITEMIZED BUDGET
- ___ COPY OF NEGOTIATED INDIRECT COST RATE AGREEMENT
- ___ KEY CONTACT LIST
- ___ BIOGRAPHICAL SKETCH
- ___ ONE SELF-ADDRESSED ENVELOPE, (if you want to receive notification of receipt)
- ___ APPLICATION RECEIPT LETTER, with your name and address filled in (if you want to receive notification of receipt)
- ___ NUMBER OF COPIES: Original and 2 copies to:

***Acquisition Program Manager
U.S. Environmental Protection Agency
NHEERL
MD B343-01
Research Triangle Park, NC 27711***

CHECKLIST FOR APPLICATIONS UNDER \$100,000

ITEMS TO BE SUBMITTED

___ SF-424 APPLICATION FOR FEDERAL ASSISTANCE, with original signature, including:

SF-424A, Budget by categories and indirect cost rate

SF-424B, Assurances for non-construction programs

___ DEBARMENT AND SUSPENSION CERTIFICATION

___ EPA FORM 4700-4 PREAWARD COMPLIANCE REVIEW REPORT

___ ABBREVIATED WORK PLAN AND RESUME:

The narrative work plan should not exceed five (5) pages in length. The work plan must include a summary of specific objectives, expected outcomes and deliverables; and discussion of the budget and how the budget relates to the objectives. Resume should not exceed an additional two (2) pages.

___ QUALITY ASSURANCE NARRATIVE STATEMENT, if applicable

___ KEY CONTACT LIST

___ ONE SELF-ADDRESSED ENVELOPE, (if you want to receive notification of receipt)

___ APPLICATION RECEIPT LETTER, with your name and address filled in (if you want to receive notification of receipt)

___ NUMBER OF COPIES: Original and 1 copy to:

***Acquisition Program Manager
U.S. Environmental Protection Agency
NHEERL
MD B343-01
Research Triangle Park, NC 27711***



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
National Health and Environmental Effects Research Laboratory
Research Triangle Park, NC 27711

OFFICE OF
RESEARCH AND DEVELOPMENT

Dear Applicant:

Your application has been received by the U.S. Environmental Protection Agency's National Health and Environmental Effects Research Laboratory, in RTP, NC. The temporary EPA Identification Number assigned to your project is _____. This number will identify your application throughout the receipt and evaluation process. Should your application be funded, a permanent identification number will be assigned by EPA's Grants Administration Division, in Washington, DC.

If you have any questions, please contact the NHEERL Acquisition Program Manager at 919-541-4896.

Sincerely,

NHEERL

(If you wish to receive acknowledgement of receipt of your application, please fill in your name and address in the space provided below and return this form, along with a self addressed envelope, with your application.)

KEY CONTACTS

Authorized Representative: Original awards and amendments will be sent to this individual for review and acceptance, unless otherwise indicated.

Name: _____
Title: _____
Complete Address: _____

Phone Number: _____

Payee: Individual authorized to accept payments.

Name: _____
Title: _____
Complete Address: _____

Phone Number: _____

Administrative Contact: Individual from Sponsored Programs Office to contact concerning administrative matters (e.g., indirect cost rate computations, rebudgeting request, etc.)

Name: _____
Title: _____
Complete Address: _____

Phone Number: _____

Project Manager: Individual responsible for the technical completion of the proposed work.

Name: _____
Title: _____
Complete Address: _____

Phone Number: _____

ATTACHMENT 2

**SF 424, 424A, 424B
Application Forms**

APPLICATION FOR FEDERAL ASSISTANCE

OMB Approval No. 0348-0043

1. TYPE OF SUBMISSION: Application <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction Preapplication <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction		2. DATE SUBMITTED	Applicant Identifier
		3. DATE RECEIVED BY STATE	State Application Identifier
		4. DATE RECEIVED BY FEDERAL AGENCY	Federal Identifier
5. APPLICANT INFORMATION			
Legal Name:		Organizational Unit:	
Address (give city, county, State, and zip code):		Name and telephone number of person to be contacted on matters involving this application (give area code)	
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		7. TYPE OF APPLICANT: (enter appropriate letter in box) <input type="checkbox"/>	
8. TYPE OF APPLICATION: <input type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) <input type="checkbox"/> <input type="checkbox"/> A. Increase Award B. Decrease Award C. Increase Duration D. Decrease Duration Other(specify): _____		A. State H. Independent School Dist. <input type="checkbox"/> B. County I. State Controlled Institution of Higher Learning C. Municipal J. Private University D. Township K. Indian Tribe E. Interstate L. Individual F. Intermunicipal M. Profit Organization G. Special District N. Other (Specify) _____	
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/>		9. NAME OF FEDERAL AGENCY:	
12. AREAS AFFECTED BY PROJECT (Cities, Counties, States, etc.): _____ TITLE:		11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:	
13. PROPOSED PROJECT		14. CONGRESSIONAL DISTRICTS OF:	
Start Date	Ending Date	a. Applicant	b. Project
15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?	
a. Federal	\$.00	a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON: DATE _____ b. No. <input type="checkbox"/> PROGRAM IS NOT COVERED BY E. O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW	
b. Applicant	\$.00		
c. State	\$.00		
d. Local	\$.00		
e. Other	\$.00		
f. Program Income	\$.00		
g. TOTAL	\$.00		
		17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?	
		<input type="checkbox"/> Yes If "Yes," attach an explanation. <input type="checkbox"/> No	
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.			
a. Type Name of Authorized Representative		b. Title	c. Telephone Number
d. Signature of Authorized Representative		e. Date Signed	

INSTRUCTIONS FOR THE SF-424

Public reporting burden for this collection of information is estimated to average 45 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

This is a standard form used by applicants as a required facesheet for preapplications and applications submitted for Federal assistance. It will be used by Federal agencies to obtain applicant certification that States which have established a review and comment procedure in response to Executive Order 12372 and have selected the program to be included in their process, have been given an opportunity to review the applicant's submission.

- | Item: | Entry: | Item: | Entry: |
|-------|---|-------|--|
| 1. | Self-explanatory. | 12. | List only the largest political entities affected (e.g., State, counties, cities). |
| 2. | Date application submitted to Federal agency (or State if applicable) and applicant's control number (if applicable). | 13. | Self-explanatory. |
| 3. | State use only (if applicable). | 14. | List the applicant's Congressional District and any District(s) affected by the program or project. |
| 4. | If this application is to continue or revise an existing award, enter present Federal identifier number. If for a new project, leave blank. | 15. | Amount requested or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines as applicable. If the action will result in a dollar change to an existing award, indicate <i>only</i> the amount of the change. For decreases, enclose the amounts in parentheses. If both basic and supplemental amounts are included, show breakdown on an attached sheet. For multiple program funding, use totals and show breakdown using same categories as item 15. |
| 5. | Legal name of applicant, name of primary organizational unit which will undertake the assistance activity, complete address of the applicant, and name and telephone number of the person to contact on matters related to this application. | 16. | Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process. |
| 6. | Enter Employer Identification Number (EIN) as assigned by the Internal Revenue Service. | 17. | This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans and taxes. |
| 7. | Enter the appropriate letter in the space provided. | 18. | To be signed by the authorized representative of the applicant. A copy of the governing body's authorization for you to sign this application as official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.) |
| 8. | Check appropriate box and enter appropriate letter(s) in the space(s) provided:

-- "New" means a new assistance award.

-- "Continuation" means an extension for an additional funding/budget period for a project with a projected completion date.

-- "Revision" means any change in the Federal Government's financial obligation or contingent liability from an existing obligation. | | |
| 9. | Name of Federal agency from which assistance is being requested with this application. | | |
| 10. | Use the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested. | | |
| 11. | Enter a brief descriptive title of the project. If more than one program is involved, you should append an explanation on a separate sheet. If appropriate (e.g., construction or real property projects), attach a map showing project location. For preapplications, use a separate sheet to provide a summary description of this project. | | |

BUDGET INFORMATION - Non-Construction Programs

OMB Approval No. 0348-0044

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1.		\$	\$	\$	\$	\$
2.						
3.						
4.						
5. Totals		\$	\$	\$	\$	\$

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1)	(2)	(3)	(4)	
a. Personnel	\$	\$	\$	\$	\$
b. Fringe Benefits					
c. Travel					
d. Equipment					
e. Supplies					
f. Contractual					
g. Construction					
h. Other					
i. Total Direct Charges (sum of 6a-6h)					
j. Indirect Charges					
k. TOTALS (sum of 6i and 6j)	\$	\$	\$	\$	\$

7. Program Income	\$	\$	\$	\$	\$
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SECTION C - NON-FEDERAL RESOURCES

(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS
8.	\$	\$	\$	\$
9.				
10.				
11.				
12. TOTAL (sum of lines 8-11)	\$	\$	\$	\$

SECTION D - FORECASTED CASH NEEDS

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$	\$	\$	\$	\$
14. Non-Federal					
15. TOTAL (sum of lines 13 and 14)	\$	\$	\$	\$	\$

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) Grant Program	FUTURE FUNDING PERIODS (Years)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16.	\$	\$	\$	\$
17.				
18.				
19.				
20. TOTAL (sum of lines 16-19)	\$	\$	\$	\$

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges:	22. Indirect Charges:
23. Remarks:	

INSTRUCTIONS FOR THE SF-424A

Public reporting burden for this collection of information is estimated to average 180 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0044), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

General Instructions

This form is designed so that application can be made for funds from one or more grant programs. In preparing the budget, adhere to any existing Federal grantor agency guidelines which prescribe how and whether budgeted amounts should be separately shown for different functions or activities within the program. For some programs, grantor agencies may require budgets to be separately shown by function or activity. For other programs, grantor agencies may require a breakdown by function or activity. Sections A, B, C, and D should include budget estimates for the whole project except when applying for assistance which requires Federal authorization in annual or other funding period increments. In the latter case, Sections A, B, C, and D should provide the budget for the first budget period (usually a year) and Section E should present the need for Federal assistance in the subsequent budget periods. All applications should contain a breakdown by the object class categories shown in Lines a-k of Section B.

Section A. Budget Summary Lines 1-4 Columns (a) and (b)

For applications pertaining to a *single* Federal grant program (Federal Domestic Assistance Catalog number) and *not requiring* a functional or activity breakdown, enter on Line 1 under Column (a) the Catalog program title and the Catalog number in Column (b).

For applications pertaining to a *single* program *requiring* budget amounts by multiple functions or activities, enter the name of each activity or function on each line in Column (a), and enter the Catalog number in Column (b). For applications pertaining to multiple programs where none of the programs require a breakdown by function or activity, enter the Catalog program title on each line in *Column* (a) and the respective Catalog number on each line in Column (b).

For applications pertaining to *multiple* programs where one or more programs *require* a breakdown by function or activity, prepare a separate sheet for each program requiring the breakdown. Additional sheets should be used when one form does not provide adequate space for all breakdown of data required. However, when more than one sheet is used, the first page should provide the summary totals by programs.

Lines 1-4, Columns (c) through (g)

For new applications, leave Column (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year).

For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the Federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of amounts in Columns (e) and (f).

For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of Federal funds and enter in Column (f) the amount of the increase or decrease of non-Federal funds. In Column (g) enter the new total budgeted amount (Federal and non-Federal) which includes the total previous authorized budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (g) should not equal the sum of amounts in Columns (e) and (f).

Line 5 - Show the totals for all columns used.

Section B Budget Categories

In the column headings (1) through (4), enter the titles of the same programs, functions, and activities shown on Lines 1-4, Column (a), Section A. When additional sheets are prepared for Section A, provide similar column headings on each sheet. For each program, function or activity, fill in the total requirements for funds (both Federal and non-Federal) by object class categories.

Line 6a-i - Show the totals of Lines 6a to 6h in each column.

Line 6j - Show the amount of indirect cost.

Line 6k - Enter the total of amounts on Lines 6i and 6j. For all applications for new grants and continuation grants the total amount in column (5), Line 6k, should be the same as the total amount shown in Section A, Column (g), Line 5. For supplemental grants and changes to grants, the total amount of the increase or decrease as shown in Columns (1)-(4), Line 6k should be the same as the sum of the amounts in Section A, Columns (e) and (f) on Line 5.

Line 7 - Enter the estimated amount of income, if any, expected to be generated from this project. Do not add or subtract this amount from the total project amount, Show under the program

INSTRUCTIONS FOR THE SF-424A (continued)

narrative statement the nature and source of income. The estimated amount of program income may be considered by the Federal grantor agency in determining the total amount of the grant.

Section C. Non-Federal Resources

Lines 8-11 Enter amounts of non-Federal resources that will be used on the grant. If in-kind contributions are included, provide a brief explanation on a separate sheet.

Column (a) - Enter the program titles identical to Column (a), Section A. A breakdown by function or activity is not necessary.

Column (b) - Enter the contribution to be made by the applicant.

Column (c) - Enter the amount of the State's cash and in-kind contribution if the applicant is not a State or State agency. Applicants which are a State or State agencies should leave this column blank.

Column (d) - Enter the amount of cash and in-kind contributions to be made from all other sources.

Column (e) - Enter totals of Columns (b), (c), and (d).

Line 12 - Enter the total for each of Columns (b)-(e). The amount in Column (e) should be equal to the amount on Line 5, Column (f), Section A.

Section D. Forecasted Cash Needs

Line 13 - Enter the amount of cash needed by quarter from the grantor agency during the first year.

Line 14 - Enter the amount of cash from all other sources needed by quarter during the first year.

Line 15 - Enter the totals of amounts on Lines 13 and 14.

Section E. Budget Estimates of Federal Funds Needed for Balance of the Project

Lines 16-19 - Enter in Column (a) the same grant program titles shown in Column (a), Section A. A breakdown by function or activity is not necessary. For new applications and continuation grant applications, enter in the proper columns amounts of Federal funds which will be needed to complete the program or project over the succeeding funding periods (usually in years). This section need not be completed for revisions (amendments, changes, or supplements) to funds for the current year of existing grants.

If more than four lines are needed to list the program titles, submit additional schedules as necessary.

Line 20 - Enter the total for each of the Columns (b)-(e). When additional schedules are prepared for this Section, annotate accordingly and show the overall totals on this line.

Section F. Other Budget Information

Line 21 - Use this space to explain amounts for individual direct object class cost categories that may appear to be out of the ordinary or to explain the details as required by the Federal grantor agency.

Line 22 - Enter the type of indirect rate (provisional, predetermined, final or fixed) that will be in effect during the funding period, the estimated amount of the base to which the rate is applied, and the total indirect expense.

Line 23 - Provide any other explanations or comments deemed necessary.

ASSURANCES - NON-CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE	
APPLICANT ORGANIZATION		DATE SUBMITTED

ATTACHMENT 3

Supplemental General Instructions Including:

- Instructions on filling out SF 424 and 424A**
- Instructions on Preparing a Project Description**
- Instructions on Preparing Quality Assurance Plans**
- Instructions on preparing a Detailed, Itemized Budget**

SUPPLEMENTAL GENERAL INSTRUCTIONS FOR APPLICATION FORMS SF 424A and B

Note: Please refer to the instructions for SF-424 on the SF-424 form. Those items not discussed below are considered self-explanatory or adequately covered by the form instructions.

FACE SHEET - SF424

Item 5: Include your Dunn & Bradstreet Number in the Address Block. This is called a "Data Universal Numbering System" (DUNS) number. Organizations can receive a DUNS number by calling the dedicated toll-free DUNS Number request line at 1-866-705-5711. Individuals who would personally receive a grant or cooperative agreement award from the Federal government apart from any business or non-profit organization they may operate are exempt from this requirement. The website where an organization can obtain a DUNS number is: <http://www.dnb.com>. This takes 30 business days and there is no cost unless the organization requests expedited (1-day) processing, which includes a fee of \$40.

If the individual you list under "Name and telephone number of the person to be contacted for matters involving this application," is not the Project Manager, please provide the Project Manager's name, title, address, telephone number, e-mail address and facsimile machine number.

Additionally, please submit a biographical sketch for the Project Manager. The biographical sketch should include educational and background information, and other qualifying experience relevant to the project. Also, list other key personnel engaged in the project, and detail each person's training or discipline. Identify the Project Manager's other projects, and the amount of time that he or she devotes to each project. Provide employment summaries for the Project Manager and the key personnel. The employment summaries should include contracts and consultancies for the present and for the past two years.

Item 9: List EPA personnel who have provided you with preapplication assistance along with their telephone number and the program office.

Item 10: List the Catalog of Federal Domestic Assistance (CFDA) Number and Title. If you do not know the CFDA Number and Title, leave this item blank. A list of EPA-specific CFDA's may be found on the Internet at: <http://www.epa.gov/ogd/cfda.htm>

Item 13: The "Start Date" and "Ending Date" should represent the time frame in which the entire scope of work detailed in the application will be completed, and during which the recipient may expend or obligate Federal funds.

Item 15: List the estimated funding amounts for the entire project and for each proposed budget period. The "Estimated Funding" amounts should include the amount requested from EPA, and your organization's cost sharing amount, if required.

Item 16: Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process. The Office of Management and Budget maintains a list of SPOCs at this site: <http://www.whitehouse.gov/OMB/grants/spoc.html>

Item 18: The authorized representative listed here will receive an official award agreement if EPA awards a grant or cooperative agreement in response to your application.

DESCRIPTION OF PROJECT: Include a section which addresses the following:

Objective:

- (1) Describe the primary and secondary project objectives.
- (2) Identify relevant physical, economic, social, financial, institutional, or other problems.
- (3) Include supporting documentation from concerned interests other than the applicant.
- (4) Include and footnote relevant data based on planning studies.

Results or benefits expected:

Identify results and benefits that will accrue to the project. **Include the benefits that will accrue to the recipient, the population served, the public, and the environment.** For example, compliance with water quality standards, or ambient air quality standards, advancements in the state of the art of pollution abatement, etc.

Approach:

(1) Provide a work plan detailing how the scope of work will be accomplished, and detailing the proposed project. Cite factors that could potentially accelerate or decelerate the work. Indicate why this approach has been chosen rather than alternative approaches. Describe any unusual project features such as design or technological innovations, cost or time reductions, or extraordinary social and community involvement.

(2) Describe all available facilities for carrying out the project.

(3) List all non-federal funds sources and facilities to be used to perform the proposed project.

(4) Provide a chronological schedule of accomplishments, progress, and milestones that are anticipated over the project's duration.

(5) Indicate who will carry out each of the work plan's elements. Include supporting agencies, consultants, and contractors.

(6) Describe sampling and data collection procedures, analytical methods, and methods to evaluate the project's results

General Project Information:

(1) Identify the kinds of data to be collected and maintained, and discuss the evaluation criteria for the project's results. Indicate whether research or demonstration will involve human subjects or research animals.

(2) Discuss this project's effect on or its relationship to work planned, anticipated, or in process, by the grantee, or Government agencies. Discuss the Federal, state, and local programs with which the work will be coordinated, and describe the extent and nature of the coordination.

QUALITY ASSURANCE:

If your project involves environmentally related measurements or data generation, you must develop and implement quality assurance practices. These practices must sufficiently produce quality data to adequately meet project objectives, and to minimize data loss due to uncontrolled conditions or malfunctions. State, local, or Indian tribal government applicants should refer to EPA regulation 40 CFR 31.45. All other applicants should refer to EPA regulation 40 CFR 30.54.

SF-424A - BUDGET INFORMATION

BUDGET:

The application includes Standard Form 424A: "Budget Information - Non-Construction Programs". Please complete only Section B: "Budget Categories", Section E: Budget Estimates of Federal Funds Needed for Balance of the Project", and Section F: "Other Budget Information" on Standard Form 424A. If you have budgeted indirect costs in Section B, please attach a copy of your indirect cost rate agreement which has been negotiated with a cognizant Federal agency. Please indicate under "remarks" in Section F, that your indirect cost rate is attached. For information on costs which may be unallowable under federal regulations, please visit the Office of Management and Budget's web site and review the circular appropriate to your organization. (<http://www.whitehouse.gov/OMB/>)

Guidance for completing a Detailed Budget to Supplement Standard Form 424A

In addition to completing Standard Form 424A, a separate, detailed budget is required.

Please follow the guidelines listed below.

Detailed Itemization of Costs:

Personnel: List all project participants' titles. Indicate the time percentage that each individual will devote to this project during the entire project period. The budgeted cost should be derived as follows: Multiply each person's time percentage by his or her annual salary. Indicate this calculation for each personnel member. The sum of each person's costs should be reflected as total personnel costs. *Record total on Standard Form 424A, Section B, Line A.*

Travel: Indicate the budgeted travel's purpose and the destination of each trip and indicate the number of travelers. *Record total on Standard Form 424A, Section B, Line C*

Equipment: Provide a list of equipment to be purchased. *Record total on Standard Form 424A, Section B, Line D*

Supplies: Itemize budgeted supplies unless their total represents less than two percent of total costs. *Record total on Standard Form 424A, Section B, Line E.*

Contractual: Specify the nature and cost of contractual services. EPA may review the contracts for personal services before the contracts are executed, to assure that all costs are reasonable and necessary to the project. *Record total on Standard Form 424A, Section B, Line F.* Applicants should review EPA's regulations concerning procurement and the need to provide justification for sole source agreements and documentation concerning cost-price analysis for contracts and other agreements.

Construction: If your budget includes construction costs, contact the Grants Administration Division for additional instructions while completing your application. *Record total on Standard Form 424A, Section B, Line G.*

Other: Itemize all costs included here. Include items here which can not be scheduled in the more specific categories. If you are applying for a training project, the itemization should include a cost breakdown of trainee tuition and fees, book allowances, stipends, and travel. *Record total on Standard Form 424A, Section B, Line H.*

Indirect Costs: Please indicate how indirect charges were calculated for this project, and remember to attach a copy of your current indirect cost rate agreement. *Record total on Standard Form 424A, Section B, Line J.* If an organization has not previously established an indirect cost rate with another Federal Agency, please *specify on Standard Form 424A, Section B, Line J.*

Program Income: If any income is expected to be generated from this project, insert the estimated income amount here. Do not add or subtract this amount from the total project amount. Your detailed direct cost itemization should show this income's nature and source. Examples of Program Income include: Registration fees collected, income from the sale of products produced under a grant, and rental fees generated from equipment purchased with assistance funds. *Record total on Standard Form 424A, Section B, Line 7.*

ATTACHMENT 4

Certification Regarding Debarment and Suspension

This form certifies that you are not included in the “List of Parties Excluded from Federal Procurement of Nonprocurement Programs.” You must also obtain this certification from each contractor or vendor when acquiring good and services in excess of \$100,000 during the project period of the award.

Your prime contractors must submit this certification to you for retention in your project file. Subcontractors must submit the certification to their prime contractor for retention in the prime contractor’s project file.



EPA Project Control Number

United States Environmental Protection Agency Washington, DC 20460

**Certification Regarding
Debarment, Suspension, and Other Responsibility Matters**

The prospective participant certifies to the best of its knowledge and belief that it and the principals:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
- (b) Have not within a three year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction: violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for otherwise criminally or civilly charged by a government entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1) (b) of this certification; and
- (d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated or cause or default.

I understand that a false statement on this certification may be ground for rejection of this proposal or termination of the award. In addition, under 18 U.S.C. Sec. 1001, a false statement may result in a fine of up to \$10,000 or imprisonment for up to 5 years, or both.

Typed Name & Title of Authorized Representative

Signature of Authorized Representative Date

I am unable to certify to the above statements. My explanation is attached.

ATTACHMENT 5

Lobbying Certification and Disclosure Forms

The attached Anti-Lobbying Recipient Certification must be completed and returned if you are requesting \$100,000 or more in federal funds.

Please use the Disclosure of Lobbying Activities form (SF-LLL) for reporting Lobbying activities to the EPA pursuant to 31 U.S.C. 1352.

CERTIFICATION REGARDING LOBBYING

CERTIFICATION FOR CONTRACTS, GRANTS, LOANS, AND COOPERATIVE AGREEMENTS

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including sub-contracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31 U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Typed Name & Title of Authorized Representative

Signature of Authorized Representative

Date

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known:	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency:	7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$ _____	
10. a. Name and Address of Lobbying Registrant <i>(if individual, last name, first name, MI):</i>	b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i>	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: _____ Print Name: _____ Title: _____ Telephone No.: _____ Date: _____	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.

ATTACHMENT 6

Pre-Award Compliance Report

As required by 40 CFR Part 7, all applicants must include a completed EPA Form 4700-4, Pre-Award Compliance Review Report, with any and all requests for federal financial assistance. ***Grant applications will not be processed if this form is not submitted.***

All applicants must complete Sections I through V. Sections VI through IX must be completed if applicable to the assisted program. If any of the information in Sections VI through IX is not relevant to the project or program for which assistance is requested, please enter "NA" for "Not Applicable".



Washington, DC 20460
**Preaward Compliance Review Report for
 All Applicants Requesting Federal Financial Assistance**

FORM Approved
 OMB No. 2030-0020
 Expires 12-31-05

Note: Read instructions before completing form.

I. A. Applicant (Name, City, State)	B. Recipient (Name, City, State)	C. EPA Project No.
II. Brief description of proposed project, program or activity.		
III. Are any civil rights lawsuits or complaints pending against applicant and/or recipient? If yes, list those complaints and the disposition of each complaint.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
IV. Have any civil rights compliance reviews of the applicant and/or recipient been conducted by any Federal agency during the two years prior to this application for activities which would receive EPA assistance? If yes, list those compliance reviews and status of each review.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
V. Is any other Federal financial assistance being applied for or is any other Federal financial assistance being applied to any portion of this project, program or activity? If yes, list the other Federal Agency(s), describe the associated work and the dollar amount of assistance.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
VI. If entire community under the applicant's jurisdiction is not served under the existing facilities/services, or will not be served under the proposed plan, give reasons why.		
VII. Population Characteristics		Number of People
1. A. Population of Entire Service Area		
B. Minority Population of Entire Service Area		
2. A. Population Currently Being Served		
B. Minority Population Currently Being Served		
3. A. Population to be Served by Project, Program or Activity		
B. Minority Population to be Served by Project, Program or Activity		
4. A. Population to Remain Without Service		
B. Minority Population to Remain Without Service		
VII. Will all new facilities or alterations to existing facilities financed by these funds be designed and constructed to be readily accessible to and usable by handicapped persons? If no, explain how a regulatory exception (40 CFR 7.70) applies.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
IX. Give the schedule for future projects, programs or activities (or of future plans), by which services will be provided to all beneficiaries within applicant's jurisdiction. If there is no schedule, explain why.		
X. I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.		
A. Signature of Authorized Official	B. Title of Authorized Official	C. Date
For the U.S. Environmental Protection Agency		
<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	Authorized EPA Official	Date

Instructions for EPA FORM 4700-4 (Rev. 1/90)

General

Recipients of Federal financial assistance from the U.S. Environmental Protection Agency must comply with the following statutes.

Title VI of the Civil Rights Acts of 1964 provides that no person in the United States shall, on the grounds of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.

The Act goes on to explain that the title shall not be construed to authorize action with respect to any employment practice of any employer, employment agency, or labor organization (except where the primary objective of the Federal financial assistance is to provide employment).

Section 13 of the 1972 Amendments to the Federal Water Pollution Control Act provides that no person in the United States shall on the ground of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under the Federal Water Pollution Control Act, as amended. Employment discrimination on the basis of sex is prohibited in all such programs or activities.

Section 504 of The Rehabilitation Act of 1973 provides that no otherwise qualified handicapped individual shall solely by reason of handicap be excluded from participation in, be denied the benefit of, or be subjected to discrimination under any program or activity receiving Federal financial assistance. Employment discrimination on the basis of handicap is prohibited in all such programs or activities.

The Age Discrimination Act of 1975 provides that no person on the basis of age shall be excluded from participation under any program or activity receiving Federal financial assistance. Employment discrimination is not covered. Age discrimination in employment is prohibited by the Age Discrimination in Employment Act administered by the Equal Employment Opportunity Commission.

Title IX of the Education Amendments of 1972 provides that no person on the basis of sex shall be excluded from participation in, be denied the benefit of, or be subjected to discrimination under any education program or activity receiving Federal financial assistance. Employment discrimination on the basis of sex is prohibited in all such education programs or activities. Note: an education program or activity is not limited to only those conducted by a formal institution.

The information on this form is required to enable the U.S. Environmental Protection Agency to determine whether applicants and prospective recipients are developing projects, programs and activities on a nondiscriminatory basis as required by the above statutes.

Submit this form with the original and

ITEMS

- IA. "Applicant" means any entity that files an application or unsolicited proposal or otherwise requests EPA assistance.
- IB. "Recipient" means any entity, other than applicant, which will actually receive EPA assistance.
- IC. Self-explanatory.
- II. Self-explanatory.
- III. "Civil rights lawsuits" means any lawsuit or complaint alleging discrimination on the basis of race, color, national origin, sex, age, or handicap pending against the applicant and/or entity, which actually benefits from the grant. For example, if a city is the named applicant but the grant will actually benefit the Department of Sewage, civil rights lawsuits involving both the city and the Department of Sewage should be listed.
- IV. "Civil rights compliance review" means any review assessing the applicant and/or recipient's compliance with laws prohibiting discrimination on the basis of race, color, national origin, sex, age, or handicap. If any part of the review covered the entity, which will actually benefit from the grant, it should be listed.
- V. Self-explanatory.
- VI. The word "community" refers to the area under the applicant and/or recipient's jurisdiction. The "community" might be a university or laboratory campus, or a community within a large city. If there is significant disparity between minority and nonminority populations to receive service, not otherwise satisfactorily explained, the Regional office may require a map, which indicates the minority and nonminority population served by this project, program or activity.
- VII. This information is required so that reviewers may determine if a disparity in the proposed provision of services will exist in the event the application is approved for funding. Give population of recipient's jurisdiction, broken out by categories as specified.

In the event the applicant cannot provide the requested information because the funds will be distributed over a wide demographic area, which is yet to be determined, an explanation may be provided on a separate sheet. For example, a State applying for a capitalization grant under the State Revolving Fund program may not know which cities and counties will apply for, and receive, SRF loans.
- VIII. Self-explanatory.
- IX. "Jurisdiction" means the geographical area over which applicant has the authority to provide service.

required copies of applications, requests for extensions, requests for increase of funds, etc. Updates of information are all that are required after the initial application submission.

If any item is not relevant to the project for which assistance is requested, write "NA" for "Not Applicable."

In the event applicant is uncertain about how to answer certain questions, EPA program officials should be contacted for clarification.

X. Self-explanatory.

"Burden Disclosure Statement"

EPA estimates public reporting burden for the preparation of this form to average 30 minutes per response. This estimate includes the time for reviewing instructions, gathering and maintaining the data needed and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, S.W., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

ATTACHMENT 7

Applicable EPA Regulations and OMB Circulars

Applicable EPA Regulations and Description

ENVIRONMENTAL PROTECTION AGENCY REGULATIONS AND DESCRIPTION

(If you should need a copy of the following regulations, you may access a copy through the World Wide Web at http://www.epa.gov/ogd/grant_regulations_and_policies.htm or call (202) 564-5305.)

40 CFR Parts 7 and 12 - APPLICABLE TO ALL APPLICANTS

NONDISCRIMINATION IN PROGRAMS RECEIVING FEDERAL ASSISTANCE FROM THE ENVIRONMENTAL PROTECTION AGENCY

This rule implements statutes which prohibit discrimination on the grounds of race, color; national origin, sex and handicap. This rule stipulates that no person shall be excluded from participation in, be denied the benefits of or be subjected to discrimination under any program or activity receiving EPA assistance on the basis of race, color, national origin, or on the basis of sex or handicap in any program or activity receiving EPA assistance.

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40 CFR Part 29 - APPLICABLE TO ALL APPLICANTS

### **INTERGOVERNMENTAL REVIEW OF THE ENVIRONMENTAL PROTECTION AGENCY PROGRAMS AND ACTIVITIES**

These regulations implement Executive Order 12373, "Intergovernmental Review of Federal Programs". These regulations apply to all EPA programs. You must contact your State's Single Point of Contact to find out if the program was selected for coverage by the State process and, if the program was selected, to receive information about your State's review process requirements and procedures. If you don't know who your Single Point of Contact is, please call (202) 564-5305.

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40 CFR Part 30 - APPLICABLE TO OTHER THAN STATE AND LOCAL GOVERNMENTAL APPLICANTS

GENERAL REGULATION FOR ASSISTANCE PROGRAMS FOR ALL APPLICANTS OTHER THAN STATE AND LOCAL GOVERNMENTS

These regulations inform applicants, other than state and local governments, how to apply for and manage an EPA project, describes EPA involvement in the process, and identifies recipient's responsibilities.

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40 CFR Part 31 - APPLICABLE TO ALL STATE AND LOCAL GOVERNMENT APPLICANTS

**UNIFORM ADMINISTRATIVE REQUIREMENTS FOR GRANTS AND COOPERATIVE AGREEMENTS TO STATE AND LOCAL GOVERNMENTS**

This part establishes uniform administrative rules for federal grants and cooperative agreements to State, local and Indian Tribal governments.

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40 CFR Part 32 - APPLICABLE TO ALL APPLICANTS

GOVERNMENT WIDE DEBARMENT AND SUSPENSION (NON PROCUREMENT) AND GOVERNMENT WIDE REQUIREMENTS FOR DRUG-FREE WORKPLACE (GRANTS)

Subpart A - General Executive Order 12549 provides for a government wide system of non procurement (grants and cooperative agreements) Debarment and suspension. A person who is debarred or suspended is excluded from federal financial and non financial assistance and benefits under federal programs and activities. Debarment or suspension of a participant in a program by one agency has government wide effect.

Subpart F - Drug-Free Workplace Requirements

The Drug-Free Workplace Act of 1988 requires that all grantees receiving funds from any federal agency certify to that agency that they will maintain a drug-free workplace, or, in the case of a grantee who is an individual, certify to the agency that his or her conduct of grant activity will be drug-free. This government-wide rule implements the statutory requirements. It directs that grantees take steps to provide a drug-free workplace in accordance with the Act.

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40 CFR Part 34 - APPLICABLE TO ALL APPLICANTS

**NEW RESTRICTIONS ON LOBBYING**

This interim final rule is in response to section 319 of Public Law 101-121. Section 319 prohibits recipients of Federal contracts, grants, and loans from using appropriated funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a specific contract, grant, or loan.

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40 CFR Part 40 - APPLICABLE TO ALL APPLICANTS APPLYING FOR RESEARCH AND DEMONSTRATION GRANTS

This part establishes mandatory policies and procedures for all EPA research and demonstration grants. The provisions of this part supplement the EPA general grant regulations and procedures (40 CFR part 30).

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40 CFR Part 45 - APPLICABLE TO ALL APPLICANTS APPLYING FOR TRAINING ASSISTANCE

This part establishes the policies and procedures for the award of training assistance by EPA. Assistance agreements are awarded under this part to support students through traineeships for occupational and professional training, and to develop career-oriented personnel qualified to work in occupations involving environmental protection and pollution abatement and control.

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40 CFR Part 46 - APPLICABLE TO ALL APPLICANTS APPLYING FOR FELLOWSHIPS

This part establishes the policies and procedures for all Environmental Protection Agency fellowships. Fellowships awarded under this part are intended to enhance the capability of State or local agencies responsible for environmental pollution control or other agencies with similar pollution control responsibilities; provide educational renewal opportunities for their career oriented personnel to achieve additional knowledge through academic professional training and to bring new people into the environmental control field.

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40 CFR Part 47 - APPLICABLE TO ALL APPLICANTS APPLYING FOR NATIONAL ENVIRONMENTAL EDUCATION ACT GRANTS AND COOPERATIVE AGREEMENTS

This part codifies policy and procedures for the award of grants or cooperative agreements under section 6 of the NEEA. Grants awarded under this part are educational activities and training activities involving elementary, secondary, and post secondary students, as such terms are defined in the State in which they reside, and environmental education personnel, but do not include technical training activities directed toward environmental management professionals or activities primarily directed toward the support of non educational research and development.