2024 Application for Funding

PROGRAM OVERVIEW

The Wastewater and Drinking Water Treatment Financial Assistance Program (WTFAP) provides grant funding to lowa communities for wastewater and drinking water infrastructure projects. Awards are determined annually by a committee consisting of representatives from the Iowa Finance Authority (IFA), the Iowa Department of Natural Resources (DNR) and the Iowa Department of Agriculture and Land Stewardship (IDALS).

Priority consideration for funding is given to:

- Disadvantaged Communities seeking financial assistance for the installation or upgrade of wastewater or drinking water treatment facilities
 - For drinking water projects, a Disadvantaged Community defined in the same manner as that used by the Community Development Block Grant (CDBG) program (51% or more of the population served by the project have income that is considered low to moderate).
 - For wastewater projects, the Disadvantaged Community criteria can be found in Iowa Code 455B.199B.
- Projects whose completion will provide significant improvement to water quality in the watershed
- Communities employing alternative wastewater treatment technology pursuant to lowa Code 455B.199C
- Communities where sewer or water rates are more than 2% of the community's median household income
- Communities employing technology to address the goals of the lowa Nutrient Reduction Strategy
- Communities whose drinking water supply is a source water on the impaired waters list
- Communities whose project will improve waters on the impaired waters list

More information can be found at iowafinance.com.

FUNDING AVAILABILITY AND APPLICATION PROCESS

We are prepared to award approximately \$6 million available to eligible projects for the 2024 funding round. The maximum grant award is limited to \$500,000.

Applications are due Friday, November 15, 2024. Awards will be announced in early 2025.

Applications may be submitted via email or mail:

waterquality@iowafinance.com

Iowa Finance Authority Attn: Water Quality 1963 Bell Avenue, Suite 200 Des Moines, IA 50315

Because grants are awarded annually and funds are limited, 1) awards may be prioritized to projects that have not received previous funding or have not received full funding in a previous year, and 2) projects that do not expect to start construction before October 2025 should consider waiting until next year to apply. Projects that are in the planning and design phase should consider applying for financial assistance through:

- USDA Planning Grants contact your local USDA office
- SRF Planning and Design Loans contact waterquality@iowafinance.com

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APPLICANT INFORMATION

Applicant N	t Name:	
Contact Per	Person/Title:	
Street Addr	ddress: City:	
County:	Zip Code:	
Phone Num	umber: Email Address:	
	PROJECT INFORMATION	
	Please complete the following information about the Project.	
Project P	Priority Category (select all that apply)	
1.	1. Disadvantaged Community installing or upgrading wastewater or drinking water	r treatment facilities
2.	2. Project provides significant improvement to water quality in the watershed upo	n completion
3.	3. Project employs alternative wastewater treatment technology pursuant to lowa	Code <u>455B.199C</u>
4.	4. Sewer or water utility rates are more than 2% of the community's median hous	ehold income
5.	5. Project employs technology to address the goals of the Iowa Nutrient Reduction	n Strategy
6.	6. Drinking water supply is a source water on the impaired waters list	
7.	7. Project improves water(s) on the impaired waters list	
8.	8. None of the above	
Drainat D	Description	
•	Description riefly describe the project in simple, easily understood terminology (2-5 sentences).	

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Project Status

	Yes	No	N/A	Date Completed or Expected
Engineer Hired				
PER or Plan Developed (if YES, please submit)				
Construction Permit Issued				
Construction Bids Awarded				
Construction Started				

PROJECT COST BREAKDOWN

Please identify the Project's anticipated costs.

Administrative, Financial & Legal expenses	
Land and easements	
Planning & Design expenses	
Engineering construction fees	
Construction	
Equipment	
Miscellaneous	
Contingency	
Other – Specify:	
Total Project Cost:	

ANTICIPATED SOURCES OF FUNDS

Please identify the Project's anticipated sources of funds. Total Funding should match Total Project Cost above.

	Secured?	Date of Application	Dollars Contributed
2024 WTFAP Request (required)			
CDBG			
USDA – Grant			
USDA – Loan			
SRF Loan			
Local Funds			
Other – Specify:			
		Total Funding:	

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SYSTEM INFORMATION

Please provide operating and financial information about the Utility System.

Select System:	Annu	al Usage (<i>Gallons/year</i>):		
Wastewater		Γ		
- Wastewater	Popu	lation Served by System:		
Drinking Water	Medi	an Household Income:		
	C	lick <u>here</u> to look up Median Hot	usehold Inc	ome.
Connections and Annual Revenue b	у Туре			
	Number of Connections	Annual Revenue		ent of n Usage
Residential				
Commercial				
Industrial				
Other				
Unmetered				
	Total Revenue:			
User Rates				
Average Expected Monthly Bill for Residenti	<u>al</u> Ratepayers			
Not Including Requested 2024 WTFAP F	unds			
Including Requested 2024 WTFAP Funds	s			
			Yes	No
Have ordinances related to increasing rates by	peen adopted for financi	ng this project?		

Required Supporting Documentation:

- A copy of the most recent user charge ordinance must be submitted with this application.
- If you applied for CDBG, submit LMI documentation.
- If you applied for disadvantaged status, submit the determination letter provided by DNR.

Application continues on next page.

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Finan	cıal	Inform	ation

Phone Number:

5 W 6 5V 0004							
Expenditures for FY 2024						I	
Operation and Maintenance							
Repairs							
Capital Improvement Fund							
Other – Specify:							
		•	Total E	Expend	ditures:		
Fund Balances							
Total Fund Balance	Amount R	estricted			Amo	ount	Unrestricted
			•				
Existing System Debt		T., .	T .,				I
Revenue Bonds (list below)	Current Balance	Interest Rate	Ye Issu	_	Maturi Date	-	Annual Payment (P & I)
, ,							,
Other Debt Payable from System Revenues							
Totals:			ı	1			
PROFE	SSIONAL C	ONSUL	ΓΑΝ	TS			
Please provide information ab	oout the profession	onal consult	ants a	ssigne	d to the	Proje	ect.
Project Engineer							
Firm Name:							
Contact Person:							
Phone Number:							
Municipal Advisor/Financial Consu		-					
Firm Name: Contact Person:							

Email Address:

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Complete this sec areas:	ction if you are applying for assistance under any of the following priority
Priority Area 2:	Projects whose completion will provide significant improvement to water quality in the watershed.
Priority Area 6:	Community whose drinking water supply is a source water on the impaired waters list.
Priority Area 7:	Community whose project will improve waters on the impaired waters list
Identify the watershed	and/or waterbody the project will improve:
Identify the current im	paired use/s and cause/s of the impairment/s to the waterbody the project improves:
Briefly describe how the waterbody:	he project will improve water quality in the watershed or address the specific impairment/s to
Discuss project location	on, land ownership and plans for acquiring properties or easements, if applicable.

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Complete this section if you are applying for assistance under the following priority area:

Priority Area 3: Community employing alternative wastewater treatment technology pursuant to lowa Code 455B.199C

Please note that in addition to lowa Code 455B.199C, "alternative technology" could also mean a commonly used technology that has been proven effective and reliable for its intended purpose but is not included in the <u>lowa Wastewater Facilities Design Standards</u>.

xplain the alter	xplain the alternative wastewater treatment technology being used:						

Please include documentation with this application demonstrating that the alternative wastewater technology has been approved by DNR pursuant to lowa Code 455B199C.

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Complete this section if you are applying for assistance under the following priority area:

Priority Area 5: Community employing technology to address the goals of the lowa

, monty y a ca cr	Nutrient Reduction Strategy
Explain the technology Reduction Strategy:	being used and how it reduces nutrients to help address the goals of the lowa Nutrient

2024 Application for Funding – Minority Impact Statement

Pursuant to <u>Chapter 8</u> of the Iowa Code, all grant applications submitted to the State of Iowa which are due beginning January 1, 2009 shall include a Minority Impact Statement. This is the State's mechanism to require grant applicants to consider the potential impact of the grant project's proposed programs or policies on minority groups.

Please choose a statement below that pertains to this grant application. Complete all the information requested for the chosen statement.

1.	The proposed project funded by this grant could have a disproportionate or unique $\underline{\text{positive}}$ impact on minority persons.								
	Briefly describe the positive impact expected from this project:								
	Indicate which group(s) are expected to be impacted:								
	Women Persons with a Disability Asians Blacks American Indians Alaskan Native Americans Latinos Pacific Islanders Other								
2.	The proposed project funded by this grant could have a disproportionate or unique <u>negative</u> impact on minority persons.								
	Briefly describe the negative impact expected from this project:								
	Indicate which group(s) are expected to be impacted:								
	Women Persons with a Disability Asians Blacks American Indians Alaskan Native Americans Latinos Pacific Islanders Other								
	Present the rationale for the existence of the proposed project:								
	Provide evidence of consultation with representatives of the minority groups impacted:								
3.	The proposed project funded by this grant is <u>not expected</u> to have a disproportionate or unique impact on minority persons. Briefly present the rationale for determining no impact:								

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Attestation of Truthfulness

The undersigned is duly authorized to apply for this grant on behalf of the Applicant. The Applicant declares under penalty of law that all facts given, and information attached are true and correct. The Applicant authorizes lowa Finance Authority to verify all information.

Authorized Sign	nature		
Printed Name			
Title			
Date			

All applications are due Friday, November 15, 2024 Signed Applications may be emailed or mailed.

or

waterquality@iowafinance.com

Iowa Finance Authority Attn: Water Quality 1963 Bell Avenue, Suite 200 Des Moines, IA 50315