Project Name:	Location (City/County)

VIRGINIA DEPARTMENT OF HEALTH (VDH) OFFICE OF DRINKING WATER (ODW) FINANCIAL AND CONSTRUCTION ASSISTANCE PROGRAMS (FCAP)

HARD COPY APPLICATION SUBMISSIONS:

Virginia Department of Health Office of Drinking Water 109 Governor Street, 6th Floor Richmond, VA 23219



DIGITAL APPLICATION SUBMISSIONS: LEAP.applications@vdh.virginia.gov

Subject: FY24 LEAP Application – City/County – Project Name

LEAP Applications for LSL Replacement due May 5, 2023. LEAP Applications for LSL Inventory will be accepted year-round and reviewed on a quarterly basis.

APPLICATION FOR THE LEAD ELIMINATION ASSISTANCE PROGRAM (LEAP)

Application also available at: https://www.vdh.virginia.gov/drinking-water/fcap/leap/localities-waterworks/	
TYPE OF PROPOSED LSL PROJECT Lead Service Line Replacement (LSLR) Building a Lead Service Line (LSL) Inventory	
IS THIS AN INDEPENDENT LSL PROJECT?	
Yes, the scope of this project only includes LSLR work/LSL Inventory work. Therefore, it only requires applying for No, the scope of this project includes other construction work and will require submittal of a separate Construction A addition to the LEAP Application.	
Construction Project Name:	
Applicants are advised to schedule the required Funding Application Discussion with the appropriate ODW Field Office 30 days <u>prior</u> to the deadline. Not required for LSL Inventory only postable PRE-REQUIREMENTS FOR FUNDING	projects.
TO STORY OF STATE OF	
If you answer <i>YES</i> to either of these questions, STOP – you are <u>not <i>eligible</i></u> to apply for funds.	
If you answer <i>YES</i> to either of these questions, STOP – you are <u>not <i>eligible</i></u> to apply for funds. 1. Have you been debarred or suspended from applying for state or federal funds? 2. Is your waterworks state, federally, or tribally owned?	☐ Yes ☐ No ☐ Yes ☐ No
Have you been debarred or suspended from applying for state or federal funds?	= =
 Have you been debarred or suspended from applying for state or federal funds? Is your waterworks state, federally, or tribally owned? 	= =

$\underline{\textbf{SECTION A}} \textbf{ - PROPOSED FINANCING}$

a. VDH Funding Assistance Needed	(<u></u>	250,000 for LSL Inventory per ap		
\$				
b. Other Funds Available, provide de	tails below:			
<u>Amount</u>	Name/Type of Funds	Status of Other Funding indicate loan terms, date av		ding,
1				
2				
4				
Subtotal of 1b:				
c. Total Project Cost (1a + 1b) = \$				
TTACHMENT H-1: Provide document	tation of other funds available (e.g., L	etters of conditions, award lett	ers, etc.)	
	(,	,,	
<u>CTION B</u> – PROJECT, ORGANIZ	ATIONAL AND CONTACT IN	FORMATION		
Project Name:		Location (City/County)		
	_			
Waterworks info: New	Existing			
	PWSID number:			
☐ Nonprofit noncommunity F	PWSID number:	System Name:		
	PWSID number:			
☐ Nonprofit noncommunity F	PWSID number:	System Name:		
☐ Nonprofit noncommunity F	PWSID number:ned Investor/Privately ov	System Name:		
☐ Nonprofit noncommunity F Ownership Type: ☐ Publicly own Legal Owner of Waterworks or Authori	PWSID number:ned Investor/Privately ov	System Name: Other (please ex		
☐ Nonprofit noncommunity F Ownership Type: ☐ Publicly own Legal Owner of Waterworks or Authori a. Name: b. Address:	PWSID number:ned Investor/Privately ov zed Agent:	System Name:Other (please ex	xplain):	
☐ Nonprofit noncommunity F Ownership Type: ☐ Publicly own Legal Owner of Waterworks or Authori a. Name: b. Address: Street A.	PWSID number:ned Investor/Privately over zed Agent:	System Name: Other (please ex		
□ Nonprofit noncommunity F Ownership Type: □ Publicly own Legal Owner of Waterworks or Authoria a. Name: b. Address:	PWSID number:ned Investor/Privately over zed Agent:	System Name: Other (please ex	xplain):	ZIP
□ Nonprofit noncommunity F Ownership Type: □ Publicly own Legal Owner of Waterworks or Authoria a. Name: b. Address: Street A. c. Contact Person: d. Telephone Number:	PWSID number:ned Investor/Privately over zed Agent:	System Name: Other (please expense) Town/City Alternate Number:	xplain):	ZIP
□ Nonprofit noncommunity F Ownership Type: □ Publicly own Legal Owner of Waterworks or Authoria a. Name: b. Address: Street A. c. Contact Person: d. Telephone Number: e. FAX Number: □	PWSID number:ned Investor/Privately over zed Agent:	System Name: Other (please extended Other (please extended	xplain):	ZIP
□ Nonprofit noncommunity F Ownership Type: □ Publicly own Legal Owner of Waterworks or Authoria a. Name: b. Address: Street A. c. Contact Person: d. Telephone Number: e. FAX Number: □	PWSID number:ned Investor/Privately over zed Agent:	System Name: Other (please extended Other (please extended	xplain):	ZIP
□ Nonprofit noncommunity F Ownership Type: □ Publicly own Legal Owner of Waterworks or Authoria a. Name: b. Address: Street A. c. Contact Person: d. Telephone Number: e. FAX Number: f. Federal UEI #:	PWSID number:ned Investor/Privately over zed Agent:	System Name: Other (please extended Other (please extended	xplain):	ZIP
Nonprofit noncommunity F Ownership Type: □ Publicly own Legal Owner of Waterworks or Authoria a. Name: b. Address: Street A. c. Contact Person: d. Telephone Number: e. FAX Number: f. Federal UEI #: Engineering Consultant (If applicable):	PWSID number:ned Investor/Privately over zed Agent:	System Name: Other (please expense) Town/City Alternate Number: E-mail Address:	xplain):	ZIP
□ Nonprofit noncommunity Ownership Type: □ Publicly own Legal Owner of Waterworks or Authori a. Name: b. Address: Street A. c. Contact Person: d. Telephone Number: e. FAX Number: f. Federal UEI #: Engineering Consultant (If applicable): a. Firm Name:	PWSID number:ned Investor/Privately over zed Agent:	System Name: Other (please expense) Town/City Alternate Number: E-mail Address:	xplain):	ZIP
□ Nonprofit noncommunity F Ownership Type: □ Publicly own Legal Owner of Waterworks or Authoria a. Name: b. Address: Street A. c. Contact Person: d. Telephone Number: e. FAX Number: f. Federal UEI #: Engineering Consultant (If applicable): a. Firm Name: b. Address:	PWSID number:ned	System Name:	xplain):	ZIP
□ Nonprofit noncommunity F Ownership Type: □ Publicly own Legal Owner of Waterworks or Authoria a. Name: b. Address: Street A. c. Contact Person: d. Telephone Number: e. FAX Number: f. Federal UEI #: Engineering Consultant (If applicable): a. Firm Name: b. Address: Street A.	PWSID number:ned	System Name:	xplain):	ZIP
Nonprofit noncommunity F Ownership Type: □ Publicly own Legal Owner of Waterworks or Authoria a. Name: b. Address: Street And the street A	PWSID number:ned	System Name:	xplain):	ZIP
Nonprofit noncommunity F Ownership Type: □ Publicly own Legal Owner of Waterworks or Authoria a. Name: b. Address: Street And the street A	PWSID number:ned	System Name:	xplain):	ZIP
Nonprofit noncommunity F Ownership Type: □ Publicly own Legal Owner of Waterworks or Authoria a. Name: b. Address: Street And the street A	PWSID number:ned	System Name:	State	ZIP
Nonprofit noncommunity F Ownership Type: □ Publicly own Legal Owner of Waterworks or Authoria a. Name: b. Address: Street A. c. Contact Person: d. Telephone Number: e. FAX Number: f. Federal UEI #: Engineering Consultant (If applicable): a. Firm Name: b. Address: Street A. c. Preferred Contact Info: Contact Person:	PWSID number:ned	System Name:	splain):State	ZIP

SECTION C - PROPOSED PROJECT DESCRIPTION

Please provide a brief response for each of the following questions under Sections I, II, and III.

T	~	T 0	
I.	General	i Inform	iafion

What is the average age of service lines in your system? What percentage of service lines do you estimate to be installed prior to 1986 (under 25%, over 25, over 50%, or over 75%)? If uncertain, please provide your best guess.
Locality (Public) Side – Is the material type of pipes known? What percentage do you estimate to be lead (unknown, under 25%, over 25%, over 50%, over 75%)? Any lead components or connectors (goosenecks, pigtails, solder, etc.)?
Homeowner (Private) Side – Is the material type of pipes known? What percentage do you estimate to be lead (unknown, under 25%, over 25%, over 50%, over 75%)? Any lead components or connectors (goosenecks, pigtails, solder, etc.)?
Please describe any known history of risk to exposure of lead in drinking water. Have any LSLs been encountered in the system previously? Have there been any Action Level Exceedances?

ATTACHMENT H-2: Provide documentation of LSL history and/or Action Level Exceedances. If any additional space is required to answer the questions in Section C-I, you may also include this as a part of Attachment H-2.

II. Vulnerable Populations

Med Use eno	TACHMENT H-3: Please include the following information below as documentation. If any additional space is required to answ questions in Section C-II, you may also include this as a part of Attachment H-3. dian Household Income the census block or latest update for county/city/towns (http://data.census.gov). Include a printout in Attachment H-3. For projects not late update to be identifiable via census information, you may provide project specific income survey data. Include a printout in Attachment H-3. If you have applied or will apply to other funding agencies that require an income survey, attach the results to this application. For ciency, consider doing income and user agreement surveys at the same time. For assistance, please contact VDH-ODW.
Med Use	dian Household Income the census block or latest update for county/city/towns (http://data.census.gov). Include a printout in Attachment H-3. For projects not laugh to be identifiable via census information, you may provide project specific income survey data.
Med Use	questions in Section C-II, you may also include this as a part of Attachment H-3. dian Household Income the census block or latest update for county/city/towns (http://data.census.gov). Include a printout in Attachment H-3. For projects not latest update for county/city/towns (http://data.census.gov).
he	questions in Section C-II, you may also include this as a part of Attachment H-3.
С.	Does your system serve any schools or licensed childcare centers? If yes, please include a total count below as well as the number of attendees. Include a list of schools and/or licensed childcare centers in Attachment H-3.
3.	Describe the type, number, and stories of structures (single family homes, apartments, etc.) and amount of vacant land for the area that benefits from the projects. If the area contains a significant number of vacation homes or homes that are typically occupied less than half of the calendar year, then please provide details.

III. Project Scope

ollowing: (1) plans to identify and verif	itial LSL inventory or continuing work on an y LSLs (ex: old records, building structure a at will be used to collect and maintain data to	existing LSL inventory, please describe the ge, data extrapolation, excavation, scratch test build a LSL inventory, (3) general timeline
.SL Replacement Projects Only - Please	e select the scenario most applicable to your	project:
REBATE MODEL	CONTRACT MODEL	HYBRID MODEL
We plan to utilize VDH funding to set up training sessions for local plumbers and certify that they are approved to replace LSLs for our customers on the private side of the service line. We will utilize our own funding (or alternative source of funding outside of this VDH funding application) for LSL replacement on the public side.	We plan to utilize VDH funding to hire a contractor to perform LSL replacement on both the public and the private sides of the service lines. Procurement of these services will be treated in the same manner as traditional VDH (FCAP) construction projects.	We plan to utilize VDH funding to hire a contractor to perform LSL replacement on the public side of the service line. We also plan to use VDH funding to set up training sessions for local plumbers for local plumbers and certify that they are approved to replace LSLs for our customers on the private side of the service line.
trongly recommend selecting one of the	e alternative methods outlined above.	e considered on a case-by-case basis. Howeve
SL Replacement Projects Only – Pleas ne model you are most likely to utilize.	e elaborate on the scope of your potential pro	ject in detail below. If still undecided, please

ATTACHMENT H-4: Provide a copy of the notes/minutes from the Funding Application Discussion (FAD) meeting. Please note that FAD meetings are not required for LSL Inventory only projects. If applicable, you may include a copy of any VDH-Office of Drinking Water letter/email waiving this requirement. If any additional space is required to answer the questions in Section C-III, you may also include this as a part of Attachment H-4.

SECTION D – READINESS TO PROCEED

Please provide a brief response for each of the following questions under Sections I, II, and III.

I.	Service	Line	Material	Inspection	Methods
----	---------	------	----------	------------	---------

	Mechanical Excavation	Historical Records	CCTV/Camera – External	
	Vacuum Excavation	Staff Interviews	CCTV/Camera – Internal	
	Sequential Sampling	Customer-Provided Data	Door to Door Inspections	
I	Flushed/Targeted Service Line Sampling	Electro-scan Interior Probe	Inspections from Past/Current Projec	
		Predictive Modeling (AI)	·	
	Already in Use		Intend to Use	
(b)	Please inform us if there are any specific pro Material Inspection Methods. You may inclu VDH-ODW to validate these identification r	ide any additional information describing	ng these products/vendors that you feel may l	
	Material Inspection Methods. You may inclu	ide any additional information describing	ng these products/vendors that you feel may l	
	Material Inspection Methods. You may inclu VDH-ODW to validate these identification r ocurement and Scheduling Please indicate how the project will approach	nde any additional information describing methods as valid approaches as a part of the following of Project Management of the handling of Project	ng these products/vendors that you feel may if Attachment H-5.	
Pr	Material Inspection Methods. You may inclu VDH-ODW to validate these identification r ocurement and Scheduling Please indicate how the project will approach meet all State, Federal, and Programmatic re We plan to perform these Project Mana We plan to utilize VDH funding to hire	the handling of Project Management equirements). gement tasks ourselves a consultant to perform these Project M	ag these products/vendors that you feel may fattachment H-5.	

<u>ACTIVITY</u>	ANTICIPATED COMPLETION DATE
Engineering Procurement	
Submit PER*	
Submit P & S*	
Environmental Review	
Advertise Project for Bid	
Open Bids	
Award Project	
Substantial Completion	

III. Lead Service Line (LSL) Replacement Plan

A Lead Service Line (LSL) Replacement Plan is a document that describes how a water utility will complete replacements of lead service lines and/or galvanized requiring replacement service lines, protect the health of affected customers, and maintain compliance with certain requirements of the Lead and Copper Rule Revisions (LCRR). The initial LSL Replacement Plan shall be submitted to the State by October 16, 2024, and must include the following elements:

- (1) A strategy for determining the composition of lead status unknown service lines in its inventory;
- (2) A procedure for conducting full lead service line replacement;
- (3) A strategy for informing customers before a full or partial lead service line replacement;
- (4) For systems that serve more than 10,000 persons, a lead service line replacement goal rate recommended by the system in the event of a lead trigger level exceedance;
- (5) A procedure for customers to flush service lines and premise plumbing of particulate lead;
- (6) A lead service line replacement prioritization strategy based on factors including but not limited to the targeting of known lead service lines and lead service line replacement for disadvantaged consumers and populations most sensitive to the effects of lead; and
- (7) A funding strategy for conducting lead service line replacements, which considers ways to accommodate customers that are unable to pay to replace the portion they own.

For additional details on LSL Replacement Plan criteria, please visit:

https://www.vdh.virginia.gov/content/uploads/sites/14/2022/05/LSL-Replacement-FAQs-rev-5-20-22.docx

ATTACHMENT H-5: Provide responses to as many of the seven (7) LSL Replacement Plan items above. If some of your responses are incomplete or blank, please indicate that you will need to include an LSL Replacement Plan as part of your potential project. If any additional space is required to answer the questions in Section D, you may also include this as a part of Attachment H-5.

If you are applying for an LSL Inventory only project, you may skip to SECTION F.



The remaining TMF questions are only required for LSL Replacement projects.

PLEASE READ: Although the questions in Section E and the associated attachments are not required for LSL Inventory only applications, the Virginia Resources Authority (VRA) reserves the right to request this information if you receive a funding offer that contains a loan component.

^{*}The PER and P&S requirements are typically waived for LSL projects. However, please check with your local Field Office to confirm.

SECTION E -STATISTICAL DATA REQUIRED FOR TECHNICAL, MANAGERIAL, & FINANCIAL (TMF) REVIEW

1. Connections and Population:

ID	Data Description	Connections	Population ⁽⁴⁾
a.	Existing residential - Entire System		
b.	Existing total - Entire System		
c.	Project residential (1)		
d.	Project total (1)		
e.	Future residential (2, 3)		
f.	Future total ^(2, 3)		

NI	_	+0	٠.

- (1) New connections and/or existing connections that benefit from the project.
- (2) For a water line extension project, e. = a. + c. and f. = b. + d because new connections are being added. For any project that benefits existing connections only, e. = a. and f. = b., and then c. and d. will reflect how many existing residential and total connections, respectively, benefit from the project
- on) nefit

		(3) For a project that benefits existing connections (e.g. – water line replacement) and also adds new connections (water line extension then c. and d. will reflect how many residential and total connections, respectively, benefit from the project (connections that benefit from the project + new connections). In this case, e. = a. + new residential connections added and f. = b. + new total connections added.						
		(4) Provide population estimates based on the previous column (connections).						
2.	Wa	tter Usage and Losses						
	a.	What is the current monthly average number of gallons of water used per residential connection? gallons/month.						
		Use total annual gallons billed for in–town residential customers divided by 12 months and divided by the total number of in-town residential customers. Provide supporting documentation as ATTACHMENT H-6.						
	b.	Provide the percent of water loss within the system. Unbilled authorized consumption (e.g., firefighting) should be excluded. Provide supporting documentation as						

5.	Determine Average Monthly Residential Water User Rate:				
	Provide an average monthly residential water user rate analysis as ATTACHMENT H-10	- using VDH project only template.			
	Average Monthly Residential Water User Rate = \$/month				
6.	Target User Rates:				
	Target user rates are set as a percent of Median Household Income (MHI). The annual MHI census figures or latest update for the city, town or county in which the waterworks is located months to get the monthly target rate.				
	MHI (from item Section C, II, A. page 3 of 8) \$ x 0.01 = \$	/month. This is your Target User Rate .			
7.	Evaluate Current Rate Structure:				
	Does the value in Item 5 (water user rate) equal or exceed the value in item 6 (target user rate)	e), above? <u>Yes No</u>			
	If you answered "Yes", your waterworks/project may qualify as Disadvantaged . However, meet debt obligations or pass a VRA credit review.	rate increases/adjustments may be required to			
	If you answered "No" then the information indicates the owner needs to adjust water rates to ensure adequate revenues. Having adequate financial resources is crucial to maintaining a successful and sustainable waterworks. Furthermore, EPA mandates that all borrowers receiving program assistance must demonstrate full financial capacity in order to receive funds.				
	Waterworks are expected to meet or exceed the target rate criteria at or before the time of project completion. VDH reserves the right to require a rate revision plan and implementation schedule acceptable to VDH.				
8.	Do you have any outstanding debt related to the water and sewer (if applicable) system?	☐ Yes ☐ No			
	If yes, have you requested that new debt be issued on parity with the old? Provide documentation as ATTACHMENT H-11 .	☐ Yes ☐ No			
9.	Estimated Annual Water Facilities Costs - From PER or other sources based on existing PW	S's Financial Statements.			
	a. Net O, M & R (for existing water facilities) USE Financial Statements	\$			
	b. Existing Annual Debt Service for water system USE Financial Statements	\$			
	c. O, M & R for Proposed Facilities	\$			
	d. Total (Sum of a+b+c)	\$			
10.	Sources of Residential and Nonresidential Revenues as a Percentage of Total Annual Water	Revenue			
	a. Residential% b. Nonresidential%				
11.	For the proposed project - Provide a cash flow analysis as ATTACHMENT H-12 - using vexpenses (operating budget) showing as <u>a bottom line the funds available for debt service.</u>	/DH project only template- of revenue and			
12.	Please provide the following documents as attachments				
	 a. Latest interim (unaudited) financial statement (Budget vs. Actual Expenditures) as ATTACHMENT H-15 b. Current year budget as ATTACHMENT H-15 	TACHMENT H-13			

SECTION F - PROJECT BUDGET INFORMATION

1.	LSL Replacement	\$	
2.	LSL Administrative Fees	\$	_
3.	LSL Inventory	\$	_
4.	Other (e.g. Additional costs if submitting separate SRF Construction Application)	\$	_
5.	Contingencies (up to 10% of the construction costs for PLANNING ONLY*)	\$	_
6.	TMF (Asset Management Plan, WBOP, Studies, etc.)	\$	_
7.	Loan Closing Fee**	\$	6,000
8.	TOTAL [Round to the nearest thousand] (should match Section A)	\$	
	*During the planning process only, you may calculate contingency amounts up to 10% of	the estimated construction	on costs Please note

SECTION G – APPLICATION CERTIFICATION

By signing this application, you are certifying that you have been authorized to apply on behalf of the Owner or Controlling Board.

Submittal of this application is only a starting point for discussion and is not a binding agreement on either party.

Incomplete information may result in the delay or rejection of the application request.

The undersigned representative of the applicant certifies that the information contained herein, and the attached statements and exhibits are true, correct, and complete to the best of their knowledge and belief. The undersigned agrees to clarify or supplement information pertaining to this application upon request. The undersigned recognizes that the information contained herein may be subject to state Freedom of Information Act requirements. The undersigned acknowledges that a part of any interest required on a closed loan can be used by VDH to support the drinking water program.

Owner or Chief Administrative Officer of Waterworks:					
NAME and TITLE:					
ORGANIZATION:					
SIGNATURE :		DATE:			

^{*}During the planning process only, you may calculate contingency amounts up to 10% of the estimated construction costs. **Please note: the contingency amount that will be included in the final budget will not exceed 5% of the construction costs.**

^{**}VDH reserves the right to apply a closing fee of \$6,000 for all applicable loan offers to defray the cost of this service. The \$6,000 may be included in the principal of the loan. If VDH determines a loan closing fee does not apply it will be eliminated from the final budget.

<u>SECTION H</u> – REQUIRED ATTACHMENTS – Please check those attached and label your attachments with corresponding numbers (i.e., H-1, H-2, etc.).

- H1) Other Funds Available (e.g., Letters of conditions, award letters, etc.)
- H2) Project issue documentation of any history of lead service lines or lead components and/or Action Level Exceedances (ALEs).
- H3) Median Household Income (including site income surveys if census information not at project level) and Environmental Justice documentation in the form of Climate and Economic Justice Screening Tool (CEJST) printouts.
- H4) Funding Application Discussion documentation/notes. Please note that FAD meetings are not required for LSL Inventory only projects. If applicable, you may include a copy of any VDH-Office of Drinking Water letter/email waiving this requirement. If any additional space is required to answer the questions in Section C-III, you may also include this as a part of Attachment H-3.
- H5) Lead Service Line (LSL) Replacement Plan. If responses are incomplete or blank, please indicate that you will need to include an LSL Replacement Plan as part of your potential project.

Required for Technical, Managerial, Financial (TMF) Review

- H6) Monthly average of residential water usage. Use total annual gallons billed for in-town residential customers divided by 12 months and divide by the total number of in-town residential customers.
- H7) Supporting documentation used to determine the percent of leakage in the system. For this application, leakage is the amount of real water lost in the distribution system lines and tanks from cracks, leaks, and tank overflows divided by total water production.
- H8) Current rate schedule for water connection fee for water and date of last increase.
- H9) Listing of 10 largest water & sewer users and estimated monthly consumption per user.
- H10) Average Monthly Residential Water User Rate Analysis using VDH project only template. https://www.vdh.virginia.gov/content/uploads/sites/14/2022/02/J-User-Rate-Analysis-v2.28.2022.xlsx
- H11) Outstanding debt amount and with whom.
- H12) For the proposed project a cash flow analysis of revenue using VDH project only template and expenses (operating budget) showing as a bottom-line funds available for debt service. https://www.vdh.virginia.gov/content/uploads/sites/14/2022/03/Project-Cash-Flow-Template 2021-1 v2020.03.09.xlsx
- H13) One copy of the latest interim (unaudited) financial statement. (Budget vs. Actual Expenditures)
- H14) One copy of the current year budget.
- H15) One copy of the most recent annual audits.

Items may be submitted in PDF format on a thumb drive if submitting a hard copy.

Items H10 and H12 may also be included in spreadsheet format on a thumb drive. Please make note on the application that the information is included in the attached digital material.

