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**Interest Rate Subsidy for a Trust Fund Loan**

Notice: This form is authorized by s. 281.58, Wis. Stats. Submitting a completed form and all applicable items on the Checklist below to the Department is mandatory for each applicant seeking an interest rate subsidy from the CWFP. Failure to submit a complete application to the Department may be grounds for denial of this application. Personal information collected on this form will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Open Records law [ss. 19.31 - 19.39, Wis. Stats.].

Municipality Name	CWFP Project No.
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**The Board of Commissioners of Public Lands (BCPL) requires the use of a municipality's general obligation (GO) or revenue capacity. To determine your municipality's available GO capacity, contact the Department of Revenue or the BCPL. We encourage you to apply for a BCPL State Trust Fund loan before submitting this application.**

**The CWFP requires Facility Plan or other plan approval by the Bureau of Watershed Management prior to applying for an interest rate subsidy. A Fast Track Facility Plan approval may not meet this requirement.**

Facility Plan Approval No	Date Approved	Did this project receive fast track approval? <input type="radio"/> Yes <input type="radio"/> No If Yes, STOP. Contact Interest Rate Subsidy specialist at 608-266-7555
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<b>This application is not complete until the Bureau of Watershed Management receives biddable Plans and Specifications.</b>	Plans and Specifications Submittal Date
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**Checklist - A complete Interest Rate Subsidy application includes all applicable items on the list.**

The CWFP can allocate funds only after the following items are received and reviewed:

- Subsidy application form - 2 copies
- Proposed or executed intermunicipal agreement, if applicable (see Part IV)

**Additional Required Submittals - This checklist is part of the application. Keep a copy to track your submittals to the CWFP. Prior to preparation of the CWFP Interest Rate Subsidy Agreement (IRSA), the following information must be submitted to and reviewed by the appropriate parties. Supply as many target and actual submittal dates as are available.**

Required Items (Submit to Bureau of Community Financial Assistance, unless indicated otherwise)	✓	Target Submittal Date	Actual Submittal Date
1. Signed BCPL Loan Documents			
a. Copy of State Trust Fund loan application			
b. Copy of application review letter			
c. Copy of Certificate of Indebtedness			
2. Parallel cost estimate ( submit to Bureau of Watershed Management )			
Other Items - If requested by the department (Submit to Bureau of Community Financial Assistance)	N/A or ✓	Target Submittal Date	Actual Submittal Date
3. Executed contract with architectural/engineering (A/E) firm for facility planning, if costs requested			
4. Executed contract with A/E firm for plans and specification, if costs requested			
5. Proposed or executed contract with A/E firm for construction management, if costs requested			
6. Bidding documentation			
7. A copy of the executed construction contract			
8. Proof of user charge and sewer use or storm water ordinance adoption			
9. Executed intermunicipal agreement (see Part IV)			
10. Initial flow documentation (unsewered projects only)			
11. Proof of adoption of local regulations for construction sites and a municipal storm water management plan, (s. NR 162.07(7), Wis. Adm. Code - storm water projects only)			

**Part I**

**Applicant Information**

Indicate the legal name of the municipality which will undertake the project and its authorized representative. Provide the names and other pertinent information for all the professional services applicable to your project.

Municipality Name	County(ies)	CWFP Project No.
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Clerk or Secretary Name	Title
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<b>Highest Elected Official</b> Name	<b>Main Municipal Contact*</b> Name
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Title	Title
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Street Address	Street Address
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City, State, Zip Code + 4	City, State, Zip Code + 4
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Phone Number (Include area code) (     )	Fax Number (Include area code) (     )	Phone Number (Include area code) (     )	Fax Number (Include area code) (     )
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E-mail Address	E-mail Address
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<b>Consulting Engineer</b>	
Firm	Contact Name

Street Address	Phone Number (Include area code) (     )	Fax Number (Include area code) (     )
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City, State, Zip Code + 4	E-mail Address
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**Project Information**

Detailed Project Description (List major portions of the project)

List other municipalities served by the project.  _____ _____ _____	<table style="width: 100%;"> <tr> <td style="width: 70%;">Construction Start Date</td> <td style="width: 30%; text-align: right;"> <input type="radio"/> Estimated <input type="radio"/> Actual                 </td> </tr> <tr> <td>Substantial Completion Date</td> <td style="text-align: right;"> <input type="radio"/> Estimated <input type="radio"/> Actual                 </td> </tr> <tr> <td>Final Completion Date</td> <td style="text-align: right;"> <input type="radio"/> Estimated <input type="radio"/> Actual                 </td> </tr> </table>	Construction Start Date	<input type="radio"/> Estimated <input type="radio"/> Actual	Substantial Completion Date	<input type="radio"/> Estimated <input type="radio"/> Actual	Final Completion Date	<input type="radio"/> Estimated <input type="radio"/> Actual
Construction Start Date	<input type="radio"/> Estimated <input type="radio"/> Actual						
Substantial Completion Date	<input type="radio"/> Estimated <input type="radio"/> Actual						
Final Completion Date	<input type="radio"/> Estimated <input type="radio"/> Actual						

\* Should be someone familiar with the project and available on a daily basis.

**Board of Commissioners of Public Lands Loan Information**

1. How do you intend to collect revenues needed to repay the BCPL Loan?

Property Taxes     User Fees     Special Assessments     Other Revenue (Identify) \_\_\_\_\_

2. On what date do you expect to receive your first disbursement of BCPL loan funds? (MM/DD/YY):

**Municipal Official Certification**

To the best of my knowledge and belief, data provided in this application is true and correct. Furthermore, the applicant assures it possesses the legal authority to apply for CWFP assistance and to finance and construct the proposed project.

Printed Name of Municipal Official	Title
Signature of Municipal Official	Date Signed

The remainder of this page is left blank intentionally.

**Part II**

Instructions: Project Budget Sheet

**Project Budget Sheet contains four(4) columns:**

**Column A - Total Project Costs**

Include ALL costs related to this project regardless of the funding source. Also include costs of the project which the applicant identifies as ineligible for CWFP financial assistance as noted in directions for Column B.

**Column B - Ineligible Costs**

Identify and provide a brief narrative of project costs ineligible for CWFP financial assistance (e.g., laterals on private land segments of sewer exclusively serving future development, and hook-up fees owed to another municipality).

**Column C - Eligible Costs Paid By Other Funding Sources**

Provide project costs which the applicant anticipates funding with other sources (e.g., municipal funds, USDA Rural Development, Community Development Block Grant, replacement fund), and identify the funding sources at the bottom of the Project Budget Sheet.

**Column D - CWFP Costs Requested**

Complete this column if the requested CWFP costs are different from the Total Project Costs. If Column D is different from Column A, complete Columns B and C.

The Project Budget Sheet contains 6 budget items. The detailed costs under each line item must equal the amount on the shaded Total line.

**A total in the shaded area is required for each line item.**

**Budget**

- | <u>Budget Line</u> | <u>Instructions</u>  |
|--------------------|--|
| 1.                 | Indicate contract costs of the facility plan. <b>Executed</b> A/E agreement(s) must be attached for costs listed on this line. Costs outside the scope of the contract(s) should be included on line 6, Miscellaneous Costs.   |
| 2.                 | Indicate contract costs of the plans and specifications. <b>Executed</b> A/E agreement(s) must be attached for costs listed on this line. Costs outside the scope of the contract(s) should be included on line 6, Miscellaneous Costs.  |
| 3.                 | Include costs associated with land/easements needed for this project.  |
| 4.                 | Indicate all contracted engineering/construction management costs. <b>Executed</b> contract(s) must be submitted for all costs on this line prior to issuing a FAA.  |
| 5.                 | Indicate all construction and equipment costs included in the plans and specifications. <b>Executed</b> contract(s) must be submitted for all costs on this line prior to issuing a FAA. Non-contractual equipment costs should be included on line 6, Miscellaneous Costs.  |
| 6.                 | Indicate project costs that are outside the scope of the engineering, construction or equipment contracts. Non-contractual costs may include: soil boring, vehicles, materials, supplies, bid advertising, etc. For unsewered projects, if the application is claiming capitalization of interest on the CWFP loan, include an estimated amount of this capitalized interest. For sanitary districts, the legal costs of preparing an opinion on s. 60.726, Wis. Stats., are eligible. |
| 7.                 | ADD LINES 1-6 FOR EACH COLUMN TO GET THE TOTAL COSTS.  |

**Project Budget Sheet**

	A Total Project Costs	B Ineligible Costs*	C Eligible Costs Paid By Other Funding Sources**	D CWFP Costs Requested
1. Facility Plan Preparation	\$			
2. Plans/Specifications Preparation	\$			
3. Land or Easement Acquisition	\$			
4. Engineering/Construction Management	\$			
5. Construction/Equipment	\$			
6. Miscellaneous Costs	\$			
7. Total Project Costs	\$			

\*Provide a brief description and source of funds for any cost that is ineligible for CWFP funding.

\*\*Name the other funding sources (CDBG, USDA Rural Development, Focus on Energy, DOT, internal funds, replacement funds, etc.).

**Part III**

**Project Cost Categories**

Separate the project costs into CWFP Categories and EPA Treatment Works Categories. Each of the Requested Project Costs lines on this page must equal the CWFP Costs Requested on Line 7, Column D, of the Project Budget Sheet in Part II.

**Clean Water Fund Program Categories**

Compliance Maintenance	\$
New/Changed Limits	\$
Unsewered	\$
Urban Runoff, WPDES Permitted	\$
Urban Runoff, Non-WPDES Permitted	\$
Violator	\$
<b>Total Project Costs</b>	\$

**EPA Treatment Works Categories**

Secondary Treatment	\$
Advanced Treatment	\$
Infiltration/Inflow	\$
Sewer Rehabilitation	\$
Collection System	\$
Interceptor	\$
Combined Sewer Separation	\$
Urban Storm Water	\$
Nonpoint Source	\$
<b>Total Project Costs</b>	\$

**Parallel Cost Percentage**

Provide the approved or estimated parallel cost percentage (PCP) for the project. If the Department has already approved the PCP provide the date of approval.

To calculate the PCP, estimate the costs for a reduced capacity condition in which flows associated with reserve capacity, industrial capacity and state and federal facilities is removed.

The PCP is calculated as follows:

$$PC = RC/DC$$

Where:

PC = the PCP expressed as a decimal

RC = costs associated with the reduced capacity condition

DC = costs associated with the design capacity condition

	Estimated%	Approved %	Date Approved
<b>Parallel Cost Percentage:</b>			

**Septage-Related Costs (May be eligible for additional subsidy)**

Provide the approved or estimated costs related to septage receiving and treatment. Septage costs, which may be eligible for additional subsidy, are calculated as follows:

$$EZ = TP \times [(RC-RC2)/DC]$$

Where:

EZ = septage costs eligible for additional subsidy

TP = total project costs eligible for funding

RC = costs of the reduced capacity condition used to calculate the PCP

RC2 = costs of the reduced capacity condition without market rate items and without septage receiving facilities or septage capacity

	Estimated \$	Approved \$	Date Approved
<b>Septage-Related Costs:</b>			

Part IV

Intermunicipal Agreement Information

1. Will your municipality's wastewater or storm water be discharged to or through facilities of another municipality?

- Yes  No

2. Will another municipality discharge wastewater or storm water to or through your facility?

- Yes  No

If you answered "Yes" to either of the above two questions, you must submit an intermunicipal agreement. If the intermunicipal agreement sent with the application is not yet executed, you must submit an executed copy of it prior to preparation of the IRSA.

**Note:** If your municipality is a metropolitan sewerage district or your municipality discharges to a metropolitan sewerage district, submit intermunicipal agreements and contracts with users only if the documents are new or changed since previous submittals.

Provide the CWFP project number under which the existing agreements and contracts were submitted:

CWFP Project No.

**In your intermunicipal agreement you must:**

- ✓ Identify ownership for each individual portion of the treatment works or structural urban best management practice (BMP).
- ✓ Establish the term of agreement, that is at least for the life of the loan.
- ✓ Require municipalities requesting funding for storm water projects to adopt local regulations for construction sites and a municipal storm water management plan and ordinance for new development and redevelopment.
- ✓ Demonstrate the basis for generating revenue for operation, maintenance, and replacement costs based on actual use, and indicate who is responsible for paying charges.
- ✓ Indicate the method for generating revenue for capital costs and who is responsible for payment.
- ✓ Indicate that the owner of the regional facility shall accept the applicant's wastewater or urban runoff and identify the boundary from which the applicant's discharge originates.
- ✓ Require each entity to adopt a user charge system and sewer use ordinance.

**Exception to the Intermunicipal Requirement**

The Department may waive the requirement of an executed intermunicipal agreement if an order under s. 281.43(1), Wis. Stats., has been issued, or if the Department has obtained executed intermunicipal agreements for subscribers whose design flows, design suspended solids capacities, annual debt payments, and wastewater projects' designed biochemical oxygen demand capacities total at least 90% of the total for the regional treatment works or structural urban BMP.



**Part VI**

**User Charge System and Sewer Use Ordinance Certification**

**Your municipality is required to adopt a user charge system and sewer use ordinance if:**

- ✓ Estimated construction costs for the project are greater than \$750,000; or
- ✓ Two or more municipalities being served by the project discharge to or through the same treatment works or structural urban BMP.

A. I certify that the User Charge System for the \_\_\_\_\_  
(Name of Municipality)

1. Requires that each user or user class pays its proportionate share of operation and maintenance costs, including replacement costs of the treatment works or structural urban BMP within the service area.
2. Provides that the costs of operation and maintenance for all flow not directly attributable to users be distributed proportionally among all users of the recipient's treatment works or structural urban BMP.
3. Requires that the charges for users or user classes generate sufficient revenue to pay costs identified in par. 5 b) and c) below.
4. Requires that the recipient establish a replacement fund and make deposits to this fund on an annual basis. This fund will be used only for the replacement of equipment related to the wastewater treatment works, or for periodic maintenance of the urban runoff treatment works or structural urban BMP.
5. Establishes a financial management system that accounts for the following:
  - a) Revenues generated.
  - b) Costs of operation and maintenance of the treatment works or structural urban BMP, including replacement of equipment.
  - c) Debt service costs, including debt service reserves, and debt coverage requirements.
6. Requires the review, at least every 2 years, of the wastewater or urban runoff contribution of users and user classes, the total costs of operation and maintenance of the treatment works or structural urban BMP and the user charge system.
7. Requires that each user that discharges any toxic pollutants or high strength wastes to a wastewater treatment works pay for any increased costs associated with the discharge.
8. Provides that each user be notified, at least annually, in conjunction with a regular bill, of the rate of charge attributable to service provided by the treatment works or structural urban BMP.
9. Is based on actual or estimated use or meets the requirements for an exception as described in s. 281.58(14)(b)7, Wis. Stats.

Date of User Charge System Adoption	<input type="radio"/> Actual <input type="radio"/> Estimated
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B. Sewer Use Ordinance for a wastewater treatment works.

I certify that the \_\_\_\_\_:  
(Name of Municipality)

- has enacted and enforced       will enact and enforce a Sewer Use Ordinance  
 that meets the requirements of s. NR 162.08(4)(d), Wis. Adm. Code.

Date of Sewer Use Ordinance Adoption	<input type="radio"/> Actual <input type="radio"/> Estimated
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C. Adequate Legal Authority for an urban runoff treatment works or structural urban BMP  
 (documentation equivalent to a sewer ordinance)

I certify that the \_\_\_\_\_  
(Name of Municipality)  
 has adequate legal authority established by statute, ordinance or series of contracts to meet the provisions of  
 s. NR 216.06(1), Wis. Adm. Code.

**Municipal Official Certification**

Signature of Municipal Official	Date Signed
Date of User Charge System/Sewer Use Ordinance Adoption	<input type="radio"/> Actual <input type="radio"/> Estimated

**Note:** Prior to loan closing, submit proof of adoption, such as a signed copy, resolution, or rate schedule from a newspaper.