Massachusetts Department of Environmental Protection
Bureau of Water Resources
Division of Municipal Services
Drinking Water State Revolving Fund (DWSRF)
2016 Project Evaluation Form

Instructions to Applicant

The Massachusetts Drinking Water State Revolving Fund (DWSRF) provides low cost financing to help community public water suppliers comply with federal and state drinking water requirements. The purpose of the Drinking Water SRF Project Evaluation Form (DW PEF) is to enable MassDEP to prioritize for funding assistance projects that address the most serious risk to human health, that are needed to ensure compliance with the Safe Drinking Water Act, and address drinking water systems most in need based on state affordability criteria. There are no changes to the rating criteria for 2016.

MassDEP has eliminated the requirement of the submission of a paper copy of the PEF. Only one electronic copy of the Project Evaluation Form on a CD or USB flash drive needs to be submitted. There is also now an option for online filing described below.


For 2016, MassDEP will continue to use the Tier Scoring System. The Tier scoring System was found to be effective in identifying those projects that address the greatest public health needs. Using the Tier Scoring System, MassDEP will categorize each incoming PEF proposal into one of five Tiers:

- **Tier I projects** have the highest point value and are those proposing to correct a serious existing problem with the water supply or addresses water supply issues that are showing evidence of becoming serious and will likely exceed a standard or compromise the use of a water supply if not corrected.
- **Tier II projects** are those projects being undertaken to prevent a potential serious threat to a major water system component.
- **Tier III projects** are those undertaken to address exceedances of Secondary Maximum Contaminant Levels (SMCL) that compromise the potability of a water supply if not corrected.
- **Tier IV projects** are those proposing to upgrade/rehab/replace water supply infrastructure components that are approaching or have passed their planned useful life-cycle; and
- **Tier V projects** are projects that while important, will not lead to an immediate loss of the water supply if not immediately completed.

Secondary factors such as affordability, population, energy savings, sustainable development, and watershed management enhancement will also be given priority under this rating system. Priority also will be given to projects proposing innovative technologies to address water-quality issues. However, the Tier System is designed such that even if a project qualifies for the maximum amount of secondary factor points, the project cannot be elevated to a higher Tier.

The PEF presentation of the project requires the project applicant to present a detailed narrative discussion of the project addressing a set list of issues needed to properly Tier classify the project. To do this, the PEF must include relevant documentation to support those claims presented in the narrative.

**Online Filing Option**

For 2016 MassDEP is introducing an online filing option for PEFs. This process involves using Survey Monkey and DROPBOX to file the forms and backup documentation. Please see the 2016 DW PEF Instruction and Guidance document referenced above for additional details regarding this option. MassDEP will be holding a training session in July (exact date to be determined) for those entities that are interested in utilizing the online filing option.
## Part I - Applicant and Project Identification and Certification

1. **Local Governmental Unit (LGU)/Public Water System (PWS)**

<table>
<thead>
<tr>
<th>LGU/PWS Name</th>
<th>Federal Employer Identification Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address:</td>
<td></td>
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<tr>
<td>Street Address</td>
<td></td>
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<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td>Telephone Number</td>
<td>Fax</td>
</tr>
</tbody>
</table>

2. **a. LGU/PWS Authorized Representative**

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address if different from 1 above:</td>
<td></td>
</tr>
<tr>
<td>Street Address</td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td>Telephone Number</td>
<td>Fax</td>
</tr>
</tbody>
</table>

2. **b. LGU/PWS Contact Person (if different from item 2)**

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address:</td>
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<tr>
<td>Street Address</td>
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<td>City</td>
<td>State</td>
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<tr>
<td>Telephone Number</td>
<td>Fax</td>
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</tbody>
</table>

3. **Engineer or Consulting Firm**

<table>
<thead>
<tr>
<th>Firm/Agency</th>
<th>Federal Employer Identification Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Person</td>
<td></td>
</tr>
<tr>
<td>Mailing Address:</td>
<td></td>
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<tr>
<td>Street Address</td>
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<td>City</td>
<td>State</td>
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<tr>
<td>Telephone Number</td>
<td>Fax</td>
</tr>
</tbody>
</table>
Part I - Applicant and Project Identification and Certification (cont.)

4. Project Identification

Identify the project(s) for which you are seeking financial assistance. **IMPORTANT:** If more than one project, number the projects sequentially, and attach separate Part II and Part III forms for each project. Use Part IIA for Construction projects; Part IIB for Planning projects. Applicants may bundle elements only if they are linked, i.e. a trunk line and its pump station, or if the proposal is for multiple contracts for the same activity over a two or three year time frame, i.e. water main lining, lead service connection replacement, storage tank rehab. Disparate elements may not be bundled simply to enhance an applicant’s score. MassDEP reserves the right to decouple projects that have been inappropriately bundled.

<table>
<thead>
<tr>
<th>No.</th>
<th>(P)lanning or (C)onstruction</th>
<th>Name of Project as it would appear on the IUP</th>
<th>Give brief description of project (If planning project, indicate type)</th>
<th>River Basin(s)</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

1. Is the proposed project intended to replace existing water works that provide drinking water service to the same service area?  

2. Will the project have any potential negative impacts to water quality, water quantity, or public health? If yes, identify and describe in the narrative the extent of the impacts and assess to what extent any such negative impacts outweigh the project’s environmental and/or public health benefits.  

An affirmative answer to either of the two above questions could disqualify the project from review.

5. Certification

To the best of my knowledge and belief the information provided on this form and the accompanying forms and attachments is true, correct, and complete; and I am authorized to file this form on behalf of the below-named LGU/Public Water Supplier.

<table>
<thead>
<tr>
<th>Local Governmental Unit/Public Water System</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Typed Name</td>
<td>Title</td>
</tr>
</tbody>
</table>

☐ Yes ☐ No

☐ Yes ☐ No
Part II A - Project Schedule and Costs for Construction Projects

1. Project Schedule (Indicate projected dates in mm/dd/yy format.)

(For steps already accomplished, follow the date with the letter "A" to indicate an actual date.)

Planning (If planning has been completed, provide title and date of report.) ________________ ________________
Design (Preparation of project plans and specifications.) ________________ ________________
Construction/Implementation ________________ ________________

Is this proposed project subject to MEPA review? □ Yes □ No

If yes, provide an approximate date the MEPA ENF submittal will be made.

Date

Provide an approximate date the MHC submittal will be made

Date

Loan Application Submittal date (no later than October 15, 2016)

Date

2. Project Costs (Round estimated cost to the nearest $1,000)

Attach an explanation of the basis of the cost estimate and reference the source of data.

Use an ENR Index of 10195.

If the project includes costs for police traffic detail, provide an explanation and detailed breakdown of the estimate.

<table>
<thead>
<tr>
<th>Construction</th>
<th>Total Cost</th>
<th>Eligible Cost</th>
<th>Start date</th>
<th>End date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contract No.</td>
<td>_________</td>
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<td>Contract No.</td>
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<td>Contract No.</td>
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<tr>
<td>Total Construction:</td>
<td>__________</td>
<td>_________</td>
<td>_________</td>
<td>_________</td>
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<tr>
<td>Construction Contingency at 10%:</td>
<td>__________</td>
<td>_________</td>
<td>_________</td>
<td>_________</td>
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<tr>
<td>Construction Services:</td>
<td>__________</td>
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<td>_________</td>
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<tr>
<td>Police Traffic Detail:</td>
<td>__________</td>
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<tr>
<td>Total:</td>
<td>__________</td>
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</tbody>
</table>
Part II A - Project Schedule and Costs for Construction Projects (cont.)

3. Local Funding Authorization

Identify the governing body empowered to commit funding: 

Identify the type of action required to authorize funding: 

Has local funding been authorized? (Y/N): ☐ Yes ☐ No If yes, attach copy of appropriate document 

If yes, date of authorization: 

If no, planned date for authorization: 

4. Other Assistance

Are you seeking, or have you been awarded, a loan and/or grant from another program for this project or a portion thereof? ☐ Yes ☐ No 

<table>
<thead>
<tr>
<th>Loan/Grant Program</th>
<th>Type of Assistance</th>
<th>Amount Requested</th>
<th>Amount Received</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal</td>
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<td>State</td>
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<td>Other</td>
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</tbody>
</table>
Part II B - Project Schedule and Costs for Planning Projects

1. Project Schedule (Indicate projected dates in mm/dd/yy format.)

(For steps already accomplished, follow the date with the letter "A" to indicate an actual date.)

<table>
<thead>
<tr>
<th>Activity</th>
<th>Start</th>
<th>Finish</th>
</tr>
</thead>
<tbody>
<tr>
<td>Selection of consultant (&quot;finish&quot; date = date Engineering contract executed)</td>
<td></td>
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<tr>
<td>Preparation of Scope of Work (&quot;finish&quot; date = date Scope submitted to MassDEP)</td>
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</tr>
<tr>
<td>Planning</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loan Application Submittal date: (no later than October 15, 2016)</td>
<td></td>
<td>Date</td>
</tr>
</tbody>
</table>

2. Project Costs (Round Estimated Eligible Cost to nearest $1,000)

Total Eligible Cost: ____________________________________________

3. Funding Authorization

Identify the governing body empowered to commit funding: ____________________________________________

Identify the type of action required to authorize funding: ____________________________________________

Has local funding been authorized? (If yes, attach copy of appropriate document.)

☐ Yes  ☐ No

If yes, date of authorization

Amount authorized

If no, planned date for authorization

Date

4. Other Assistance

Are you seeking, or have you been awarded, a loan and/or grant from another program for this project or a portion thereof? ☐ Yes  ☐ No

<table>
<thead>
<tr>
<th>Loan/Grant Program</th>
<th>Type of Assistance</th>
<th>Amount Requested</th>
<th>Amount Received</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal</td>
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<tr>
<td>Other</td>
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NOTE: MassDEP understands that the purpose of undertaking a planning project is to try to identify the nature and extent of the water quality and public health problems, then to recommend solutions. At the planning stage, it may be unlikely that you have a good understanding of the situation. Consequently, not all of the criteria listed within the Project Evaluation Form may apply to your planning project. Please address all that apply and include a copy of relevant sections of any reports that you may have completed.
Part III - Project Narrative/Checklist and Documentation

Please refer to the Instruction & Guidance section before completing this section. As noted in Section 1, the scoring system will require placing project proposals into one of the five Tier categories. In choosing the appropriate Tier category, MassDEP will rely heavily on the narrative and documentation that is provided and assign the proposed project to the appropriate Tier. Please provide a narrative that sufficiently outlines the projects intent, and include documentation that substantiates that intent.

The narrative must include a discussion of each of the following topics and preferably in the order presented. MassDEP expects the narrative to be written similar to an Executive Summary. We anticipate the narrative (without attachments) to be about 5 pages in length, but not more than 10 pages.

☐ A detailed discussion of the problem to be solved by the project.
☐ Identification of project area using site plan and/or locus map.
☐ A detailed discussion of the severity of the existing public health issues due to the problem.
☐ The total system population affected by the project, and how the affected population is calculated.
☐ A discussion of all interactions with regulatory bodies pertaining to the problem, including the need to comply with existing enforcement orders or sanitary survey requirements
☐ A detailed discussion of the work to be completed.
☐ A description of the relative importance of the component(s) involved.
☐ A description of the energy efficiency measures, if any, to be implemented and anticipated energy savings.
☐ A description of the back-up systems currently in place to replace the component(s) on a temporary or permanent basis.
☐ A description of all the planning efforts performed in arriving at the recommended plan.
☐ A discussion of other options considered, including the “no action” option.
☐ A discussion of the status of the implementation process that currently exists.

The narrative must be supported by documentation that supports any claims made related to the project, including any enforcement actions. Any existing engineering or planning report should be submitted as a PDF attachment to the PEF. DO NOT insert the PDF into the body of the PEF.

1. Based on the Tier descriptions presented in the Instruction and Guidance document, what Tier do you believe best characterized your project?

<table>
<thead>
<tr>
<th>Points</th>
<th>Check for YES</th>
<th>Page # in Narrative</th>
<th>Attachment ID &amp; Page #</th>
</tr>
</thead>
<tbody>
<tr>
<td>500</td>
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<td>100</td>
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</tbody>
</table>

Tier I

Tier II

Tier III

Tier IV

Tier V
Part III  - Project Narrative/Checklist and Documentation (cont.)

2.a Does the proposed project address serious existing water quality and/or treatment technique issues? If yes check box, attach the appropriate water quality monitoring results from the last 18 months.

2.b Does the water quality monitoring results show an exceedance of a state or federal water quality allowable limit*?

2.c Has the state or federal water quality limit been greater than or within 80% of the state or federal water quality allowable limit in over half of the samples taken within the past 18 months?

2.d Has the running annual average (RAA) exceeded 80%?

* “Allowable Limit” refers to MassDEP, MCL, MRDL, Action Level, or ORSGL as applicable.

3. Does the proposed project address deficiencies found during a sanitary survey or other MassDEP documented actions? If yes, attach the applicable section of the survey.

4. Check list: Please indicate if any of the following are attached to your PEF application.

   Emergency Response Logs
   Emergency Repair Logs
   Enforcement Documentation
   Engineering Report
   Hydraulic Study
   Inventory Report (include life expectancy of components)
   Leak Detection Reports
   Master Plan (excerpts)
   Photos of tuberculated pipe or pipe coupons
   Renewable Energy Feasibility Study
   Sanitary Survey Report (applicable sections)
   Tank Inspection Report
   Water Quality Results

Other (please list):

___________________________________________________
___________________________________________________
_______________________________________________________
Part IV - Supplemental Adjustment Rating Criteria

1. Population affected by the project (as justified in the narrative):
   
   Points | Description |
   ------ | ----------- |
   20  | 100,000 and above |
   15  | 10,000 to 99,999 |
   10  | 3,300 to 9,999 |
   5   | 25 to 3,299 |

   Check for YES | Page # in Narrative | Attachment ID & Page # |
   -------------- | ------------------- | --------------------- |
   ☐             |                    |                      |

2. Energy Efficiency:
   
   Points | Description |
   ------ | ----------- |
   4    | Project will result in energy efficiencies without audit. |
   9    | Project will result in energy efficiencies with audit. |

   Check for YES | Page # in Narrative | Attachment ID & Page # |
   -------------- | ------------------- | --------------------- |
   ☐             |                    |                      |

3. Renewable Energy:
   
   Points | Description |
   ------ | ----------- |
   4    | Project will result in on-side renewable energy power generation without feasibility study. |
   9    | Project will result in on-side renewable energy power generation with feasibility study. |

   Check for YES | Page # in Narrative | Attachment ID & Page # |
   -------------- | ------------------- | --------------------- |
   ☐             |                    |                      |

4. Does the system’s service area have a median income of $53,493 or less? (That is, 80% of the 2009-2013 State Median Household Income (MHI) of $66,866.)

   To answer this question, Applicants may use the MHI prepared by the Massachusetts Department of Housing & Community Development based on U.S. Census Bureau data for the most appropriate city, town, or census designated place. If the service area includes more than one such designated MHI area, a weighted overall average based on population served in each of the covered MHI areas times the MHI for that area plus the same for any other such area, and divided by the total number served, shall be used to calculate the combined MHI.

   Alternatively, applicants may provide a service area specific MHI from an independent income survey covering the service area, provided that said independent survey is no more than eleven years old at the time of the application.
Part IV - Supplemental Adjustment Rating Criteria (cont.)

5. Will the rates to the end users, after implementation of the project, exceed 1% of the median household income of the service area?  
   If so, indicate which range below best describes the resultant rate.  Provide supporting documentation of current residential rates
   □ □
   Points
   10  Resultant rate greater than 1.75% of MHI.
   □ □
   8  Resultant rate 1.5% to 1.749% of MHI.
   □ □
   5  Resultant rate 1.25% to 1.499% of MHI.
   □ □
   2  Resultant rate 1.0% to 1.249% of MHI.
   □ □

6. Does the project consolidate or restructure a PWS to eliminate a public health problem or capacity development problem?  
   □ □
   Points
   2  If yes, to take over 1 to 2 systems.
   □ □
   4  If yes, to take over 3 or more systems.
   □ □
   Is the applicant restructuring or otherwise preparing to consolidate with or take over operation of one or more public water supply systems?
   □ □
   Points
   6  What is the reason for each proposed consolidation/takeover? (Please include justification in the narrative.)
   □ □

7. Is the project needed to ensure compliance with a federal or state court or administrative order as of August 15, 2014?  
   □ □
   Points
   20  Achieves substantial compliance with enforcement order.
   □ □
   10  Achieves moderate compliance with enforcement order.
   □ □
   0  Achieves marginal compliance with enforcement order.
Part IV - Supplemental Adjustment Rating Criteria (cont.)

8. Is the project needed to come into or maintain compliance with 310 CMR 22.00, the SDWA, or other required or related federal or state permit or approval, including MassDEP's approval of a new drinking water source?

If yes, please state the compliance need and describe how the project will enable the system to come into or maintain compliance in the narrative.

Check for YES
Page # in Narrative
Attachment ID & Page #

Points
5

9. Do you have a MassDEP approved source water protection plan?

Check for YES
Page # in Narrative
Attachment ID & Page #

Points
5

10. Does the project include any of the “new technologies” approved by the MassDEP Drinking Water Program since 2008 (see http://www.mass.gov/eea/agencies/massdep/)?

Check for YES
Page # in Narrative
Attachment ID & Page #

Points
5

11. For informational purposes only, does the public water system have capital improvement or asset management plans, or a plan that is utilized for rehabilitation or replacement of water works and maintenance equipment?

Check for YES
Page # in Narrative
Attachment ID & Page #

Thank you for completing this Project Evaluation Form. Please take a few moments to ensure that you have followed the following steps:

- Review all questions to make sure you have answered all that are relative to your project and that you have provided documentation of the nature and extent of problems.

- Supply relevant sections of planning documents that support your project approach or technology.

Please submit one electronic copy of the Project Evaluation Form on a CD or USB flash drive (no paper copy is necessary) no later than 12:00 noon on August 7, 2015 to:

Joseph Delaney, Deputy Division Director
MassDEP Municipal Services
One Winter Street, 6th floor
Boston, MA 02108