



State of Oregon Department of Environmental Quality

Point Source Project Loan Application: Design and Construction Projects

Clean Water State Revolving Fund

Contact: [Regional Project Officer](#)

Please answer all questions in this application. If a question does not apply, please mark “not applicable.”

DEQ accepts completed, signed applications that are submitted either electronically or in hard copy by close of business on the application due date.

Applicant Information

1. Public Agency/Legal Applicant:

Name:			
Address:			
City, State:	ZIP:	County:	Federal Congressional District:
Agency Website:			

2. Only public agencies are eligible for Clean Water State Revolving Fund. Does your agency meet the definition of a “public agency” as defined by [ORS 468.423](#)?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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3. Identify the type of your public agency:

<input type="checkbox"/>	Tribal Government	<input type="checkbox"/>	City	<input type="checkbox"/>	School District
<input type="checkbox"/>	County	<input type="checkbox"/>	Sanitary District or Sanitary Authority	<input type="checkbox"/>	County Service District
<input type="checkbox"/>	State Agency	<input type="checkbox"/>	Irrigation district	<input type="checkbox"/>	Metropolitan Service District
<input type="checkbox"/>	Other Special District (please specify):				
<input type="checkbox"/>	Intergovernmental Agency (please specify):				

Translation or other formats

[Español](#) | [한국어](#) | [繁體中文](#) | [Русский](#) | [Tiếng Việt](#) | [العربية](#)

800-452-4011 | TTY: 711 | deqinfo@deq.oregon.gov

4. Is your agency registered in SAMs ([SAMs home page](#))?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	
If no, please explain:				
SAMs Unique Identifying Number:				

5. Does your agency have authority to take on debt?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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If yes, please provide reference to the relevant ORS, or local ordinance, law, charter or regulation:

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If no, explain:

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6. Project Contact:

Name:	Dept./Organization:	Title:
Telephone:	Email:	

Budget and Schedule

7. CWSRF loan amount requested:

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8. Total estimated project cost:

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9. CWSRF Interim Financing:

	Yes		No	
If yes, name of the agency providing long-term financing:				
Interim Funding Amount:				

10. Are you applying for a Sponsorship Option loan for a nonpoint source project in addition to this loan for a point source project?

	Yes		No	
If yes, please complete and submit a Nonpoint Source Application in addition to this application.				

11. Please fill out Tables A and B below on proposed project cost and funding. Total funding in Table B must be equal to total costs in Table A.

Table A. Project Budget		
Type	Total Project Budget	Amount funded by CWSRF
Administration and Legal		
Contingency		
Preliminary Expense		
Land and Right of Way		
Basic Engineering		
Other Engineering		
Project Inspection		
Construction		
Other:		
Total Costs		

Table B. Funding Sources	
Source	Amount
DEQ Clean Water State Revolving Fund (Permanent)	
Business Oregon Special Public Works	
Business Oregon Water/Wastewater	
Business Oregon Community Development Block Grant	

USDA Rural Development (No Interim Funding)	
USDA Rural Development (With CWSRF Interim Funding)	
USDA Natural Resource Conservation Service	
General Obligation Bonds	
Revenue Bonds	
Local Funds (note source of funds below):	
In-Kind Assistance	
Other:	
Total Funding (must equal total cost in Table A)	

12. Please note any existing sewer related debt service (before CWSRF project funding). Attach additional documentation as necessary.

Type	Current Balance	Interest Rate	Year Issued	Annual Payment	Bond Rating
General obligation bonds					
Sewer Revenue Bonds					
Other Debt					

13. Proposed project schedule (Month, Year):

Estimated design start date:	
Estimated construction start date:	
Estimated project completion date:	
Please explain if the estimated design start date is <i>before</i> the loan application date or the date a loan will be signed:	

Compliance Information

14. If applicable, indicate the water quality permit information associated with the proposed project:

Type	Yes/No	Identification Information
National Pollutant Discharge Elimination System Permit		(EPA reference number beginning with "OR"):
Water Pollution Control Facility Permit		(Permit number):
Municipal Separate Storm Sewer System Permit (MS4)		(Phase):
Clean Water Act 401 Certification		(USACE Permit Application Number):
Not Applicable or Unknown		

15. From the above referenced information, please select which of the following applies:

<input type="checkbox"/>	Permit renewal needed	<input type="checkbox"/>	Renewed/Current/No Change
<input type="checkbox"/>	Permit modification needed	<input type="checkbox"/>	Permit in progress
<input type="checkbox"/>	New permit	<input type="checkbox"/>	Administratively Extended
<input type="checkbox"/>	Not applicable	<input type="checkbox"/>	

16. Is the proposed project related to a facility currently in compliance with its permit(s)?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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What noncompliance issue(s), if any, will this project address:

<input type="checkbox"/>	Water Quality Standards	<input type="checkbox"/>	Public Health
<input type="checkbox"/>	Limits for wastewater or stormwater discharge to surface water or groundwater	<input type="checkbox"/>	Waste discharge limits for reuse of biosolids or wastewater

Describe how the project will ensure continued compliance of facility and how long the system is expected to maintain compliance:

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If applicable, does the permit related to this proposed project include:

<input type="checkbox"/>	A compliance schedule
<input type="checkbox"/>	A Mutual Agreement and Order (MAO)
<input type="checkbox"/>	N/A

Project Description

Use this section to describe the objectives, components and expected outcomes of the project. The loan agreement will refer to this section in defining what expenses can be reimbursed.

17. Project type (check one or both, as appropriate)

<input type="checkbox"/>	Design	<input type="checkbox"/>	Construction
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18. Is this proposed project covered by a facility plan, pre-design report, other engineered planning document, or system plan?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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If no, explain:

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If yes, provide the year document completed:

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Has this plan been reviewed and approved by DEQ within the last 5 years?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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Date of approval:	
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19. Project Location (if different from public agency location):

Address:			
City:	Zip:	County:	Federal Congressional District:
Latitude WGS84:		Longitude WGS84:	
Additional sites (if applicable):			

20. Project description

Name of project:	
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Summarize the purpose of the proposed project, including any water quality benefits and public health objectives (3 to 4 sentences):

Describe the major project components (for example, type of structures to be built, equipment replacement, treatment plant or pump station improvements):

Describe how the proposed project will achieve the water quality benefits and public health objectives. Does the proposed project improve water quality by addressing water quality parameters including, but not limited to, the following: temperature, dissolved oxygen, contaminated sediments, toxic substances, bacteria or nutrients? If available, provide quantitative results as an attachment:

Give any other pertinent information that explains why this project is proposed:

21. Proposed project is expected to improve water quality by addressing one or more of the following (check all that apply). Please attach documentation to support water quality improvements:

<input type="checkbox"/>	Temperature	<input type="checkbox"/>	Bacteria	<input type="checkbox"/>	Dissolved oxygen	<input type="checkbox"/>	Nutrients
<input type="checkbox"/>	Total Suspended Solids	<input type="checkbox"/>	NPDES/WPCF permit requirement(s)	<input type="checkbox"/>	Oregon Health Authority requirement(s)	<input type="checkbox"/>	Toxic substances
Other, please specify:							

22. Does the proposed project address [emerging contaminants](#)?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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Information on emerging contaminants can be found in DEQ's [fact sheet on emerging contaminants](#). Please specify which contaminants the project will address:

<input type="checkbox"/>	Per- and Polyfluoroalkyl Substances (PFAS and PFOS)
<input type="checkbox"/>	Pharmaceuticals and Personal Care Products (PPCPs)
<input type="checkbox"/>	6PPD; 6PPD-Quinone (6PPD-Q)
<input type="checkbox"/>	Endocrine Disruptors
<input type="checkbox"/>	Microplastics
<input type="checkbox"/>	Microorganisms
<input type="checkbox"/>	Pesticides and Herbicides
<input type="checkbox"/>	Nanomaterials (NM)
<input type="checkbox"/>	Fire Suppressants
<input type="checkbox"/>	UV Filters
<input type="checkbox"/>	N/A
<input type="checkbox"/>	Other, please specify:

Describe how the proposed project will address the emerging contaminants known to occur in its vicinity. If applicable, attach any qualitative and/or quantitative supporting documentation (i.e., visual monitoring, anecdotal evidence, sampling results).

23. Project Categories

Please enter all numbers as decimals (i.e., 23.34% =0.2334).

Project Category	Description	% CWSRF Funding
Centralized Wastewater Treatment	Secondary Treatment Plant (includes, but is not limited to: new, expansion, improvements; effluent disposal; biosolids treatment, biosolids disposal, water reuse)	
Centralized Wastewater Treatment	Advanced Treatment	
Centralized Wastewater Treatment	Infiltration/Inflow	
Centralized Wastewater Treatment	Sewer System Rehabilitation	
Centralized Wastewater Treatment	New Collector Sewer	
Centralized Wastewater Treatment	New Interceptor	
Centralized Wastewater Treatment	Combined Sewer Overflow (CSO) Correction	
Stormwater	Gray Infrastructure	
Stormwater	Green Infrastructure	
Energy Conservation	Energy Efficiency	

Energy Conservation	Renewable Energy	
Water Conservation	Water Efficiency	
Water Conservation	Water Reuse	
Other	Estuary (§320) Assistance	
Other	Desalination	
Total		

Green Project Components

Oregon DEQ is required to finance a certain percentage of projects that use green infrastructure, address water and energy efficiency, and/or implement other environmentally innovative activities. Refer to [Appendices A-D, Green Project Reserve Project Eligibility Guidance](#), to complete the following questions.

24. Does the proposed project incorporate or expand green infrastructure, as described in [Appendix A](#)?

	Yes		No	
If yes, give dollar value \$				
If yes, cite the objective as stated in Appendix A (as specified in the project description):				
Describe how and which components of the proposed project will achieve the Appendix A objective(s):				

25. Does the proposed project incorporate or expand water efficiency as described in [Appendix B](#)?

	Yes		No	
If yes, give dollar value \$				
If yes, cite the objective as stated in Appendix B (as specified in the project description):				
Describe how and which components of the proposed project will achieve the Appendix B objective(s):				

26. Does the proposed project incorporate or expand energy efficiency as described in [Appendix C](#)?

	Yes		No	
If yes, give dollar value \$				
If yes, cite the objective as stated in Appendix C (as specified in the project description):				
Describe how and which components of the proposed project will achieve the Appendix C objective(s):				

27. Does the proposed project incorporate or expand environmentally innovative projects or practices as described in [Appendix D](#)?

	Yes		No	
If yes, give dollar value \$				
If yes, cite the objective as stated in Appendix D (as specified in the project description):				
Describe how and which components of the proposed project will achieve the Appendix D objective(s):				

28. Does the proposed project integrate or expand sustainability or the use of natural infrastructure, or use approaches including, but not limited to, water quality trading, that are not specified in Appendices A through D above?

	Yes		No	
If yes, give dollar value \$				
Describe the approach(es) and how they will be incorporated into the project:				

Waterbody Information

29. Provide the name, eight-digit [Hydrologic Unit Code](#) of waterbody receiving discharge, and the location of the waterbody receiving discharge:

Primary affected waterbody		8-digit HUC#	
Other affected waterbody		8-digit HUC#	
Latitude WGS84:		Longitude WGS84:	

30. Discharge affected by proposed project (check all that apply):

	No Change		Surface water (stream river, lake)		Wetland
	Estuary/Coastal		Ocean outfall		Groundwater
	Land Application/Reuse		Seasonal discharge		No Discharge
	Eliminates discharge		Other, please specify:		

31. If applicable, provide wastewater volume (average dry weather design flow):

For current system:	mgd
For proposed project:	mgd
Eliminated or conserved	mgd

32. Indicate if the proposed project will protect or restore beneficial use(s) of the waterbody. If the project provides both protection and restoration, indicate which beneficial uses are primary and which are secondary. If one doesn't apply, select N/A. Information on [beneficial uses of Oregon's waters](#) is available online.

Beneficial Use	Protection		Restoration		N/A
	Primary	Secondary	Primary	Secondary	
Domestic Water Supply					
Fishing					
Industrial Water Supply					
Boating					
Irrigation/Water Contact					
Recreation					

Livestock Watering					
Aesthetic Quality					
Fish and Aquatic Life					
Wildlife and Hunting					
Commercial Navigation and Transportation					
Hydropower					
Infrastructure Improvements					
Water Reuse/Recycling/Conservation					
Groundwater Protection					
Drinking Water Supply (e.g., groundwater)					
Wetland Restoration					
Security					
Industrial					
Riparian Restoration					
Other (please describe below):					

33. Please answer the following questions on Other Uses and Outcomes.

Does this project contribute to Regionalization/Consolidation?		Yes		No
Does this project address Nutrient Loadings of Nitrogen and Phosphorus?		Yes		No
Does any element of the project, including planning and design, have to do with avoiding, withstanding, or recovering from a disaster of any sort?		Yes		No
Does this project contribute to Public Health (e.g. Pathogen Reduction)?		Yes		No

Water Quality/Public Health Benefits

34. If the proposed project is not implemented at this time, are water quality standards likely to be exceeded, or are existing exceedances of the standards likely to worsen?

Yes	No	
<p>If yes, explain which standard(s) will worsen and provide evidence:</p>		

35. Will the proposed project improve or sustain aquatic habitat that supports native species or other special status species?

Yes	No	
Which species?		
<p>Describe how project will improve or sustain aquatic habitat that supports native species. Please provide a map with the project location and habitat clearly indicated. If available, provide evidence, such as written documentation by a subject matter expert, or an existing plan such as ODFW's Oregon Conservation Strategy or equivalent federal plan:</p>		

36. Will the proposed project address water quality or public health issues within any of the below? (check all that apply). Please attach a map to the application with project location and proximity to waterbodies clearly indicated.

<input type="checkbox"/>	Federally designated Wild and Scenic River	<input type="checkbox"/>	Tillamook Bay Estuary
<input type="checkbox"/>	Federally designated sole source aquifer	<input type="checkbox"/>	Lower Columbia River Estuary
<input type="checkbox"/>	State designated scenic waterway	<input type="checkbox"/>	Designated Groundwater Management Area
<input type="checkbox"/>	River designated under OAR 340-041-0350 (Three Basin Rule): The Clackamas River Subbasin, the McKenzie River Subbasin above the Hayden Bridge (river mile 15), or the North Santiam Subbasin.	<input type="checkbox"/>	Wetland or riparian area listed by state or local government
<input type="checkbox"/>	None of the above		

37. Proposed project supports the implementation of which of the following:

<input type="checkbox"/>	Existing Total Maximum Daily Load (TMDL)	<input type="checkbox"/>	DEQ water quality status and action plan
<input type="checkbox"/>	Projected TMDL	<input type="checkbox"/>	Designated GWMA Action Plan declared under ORS 468B.180
<input type="checkbox"/>	Other qualifying plan, please specify: (i.e. Estuary Management Plan, adopted Watershed Assessment, etc.)		
<input type="checkbox"/>	None of the above		

Specify which TMDL, Plan, or GWMA, and associated parameter, that the project will address:

Is your agency a Designated Management Agency with implementation plan requirements under the TMDL?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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38. Does project provide performance-based water quality improvement supported by monitoring? Is there reasonable assurance that the project will continue to function over time?

	Yes		No	
<p>If yes, describe activities, including required and voluntary monitoring, that support these water quality improvements and how these activities will provide reasonable assurance that the project will continue to function over time. Attach documentation, if available.</p>				

39. Explain the long-term planning effort that addresses financial, managerial or technical capability, or asset planning that ensures the proposed project will be maintained. Include any tools, resources, or other strategies that will help assess operations, manage assets, and measure performance over time (i.e. Effective Utility Management (EUM), Lean Six Sigma, Sustainable Utility Management (SUM) or setting aside funds for capital improvement projects).

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Education and Involvement

40. Describe ongoing educational or outreach components of the proposed project:

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41. Does the proposed project incorporate other resources including, but not limited to, in-kind support, other funding sources or a partnership with a governmental, tribal or non-governmental organization?

	Yes	No	
Please describe:			

Population Data

Refer to the Portland State University [Population Research Center](#) to complete question 42. Please use proposed project's county data if the relevant community is not listed.

42. Service area data:

Population served by current system:	
Estimated population served by proposed project:	

Does the population served by current system meet the definition of a small community (defined as 10,000 or fewer people)?

	Yes	No

43. Does your community have a ratepayer hardship program in place?

A ratepayer hardship program is a service offered by a public agency as defined by ORS 468.423, Tribe or other CWSRF eligible borrower that offers financial assistance for individual rate payers (users) based upon economic or financial need.

	Yes		No
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Please confirm that the ratepayer hardship program incorporates each of the following:

	Assists a particular population of the community for economic assistance.
	Indicates how a rate payer would qualify for their services.
	Is active and ongoing or permanent (cannot be a limited-duration program).
	Has a publicly available form, system, or notice of their current services and assistance offerings, or other documentation available that describes the rate payer hardship program.
Please provide a link or attach documentation that demonstrates how your program meets each of the above requirements:	

Attachments

As applicable, please check the box for each attachment that will be submitted with this application.

Included?	Question Number	Document Type
	12	Additional existing sewer related debt service documentation
	20	Quantitative results of impact of proposed project on water quality
	21	Documentation to support expected water quality improvements of the proposed project
	22	Qualitative or Quantitative supporting documentation of emerging contaminants in the vicinity of the proposed project
	34	Evidence supporting existing or new water quality exceedances if project is not implemented
	35	Written documentation to support improvement or sustainment of aquatic habitat for native or special status species
	35	Map of project locations and habitat clearly indicated
	36	Map of project location and proximity to waterbodies clearly indicated
	38	Documentation of activities, such as required and voluntary monitoring, that support the water quality improvements and provide reasonable assurance that the project will continue to function over time
	43	Ratepayer hardship documentation
	N/A	Other optional attachment to support proposed project

Additional Information

This application provides the necessary information for DEQ to determine eligibility, scoring, ranking and to complete reporting requirements for the proposed project. Once deemed eligible and scored, the project will be included in the Clean Water State Revolving Fund Intended Use Plan and the applicant can then complete the remaining required documents to secure a loan. To receive CWSRF program updates, sign up for [GovDelivery](#). You may unsubscribe at any time.

Learn about additional DEQ water quality funding opportunities here:

- [Sewer Overflow and Stormwater Reuse Municipal Grants Program](#)
- [Onsite Septic Financial Aid Program](#)
- [Nonpoint Source Implementation Grants \(\\$319 Grants\)](#)
- [Supplemental Environmental Projects](#)

Certification

The public agency or applicant certifies that:

- Clean Water State Revolving Fund loan proceeds will be used only for the project described in this application and that project work will be consistent with project objectives.
- The public agency or applicant will comply with all applicable rules and laws.
- The public agency or applicant will obtain all applicable local, state, and federal permits, approvals, and licenses, and comply with their terms and conditions.
- The undersigned is duly authorized to request this loan on behalf of the public agency.
- The public agency or applicant declares under penalty of law that all facts given and information attached are true and correct.
- The public agency or applicant authorizes DEQ to verify all information.

Authorized Signature	Date
Typed Name	Title

Return the completed application to your DEQ Project Officer. A list of Clean Water State Revolving Fund staff is available [online](#).

Non-discrimination statement

DEQ does not discriminate on the basis of race, color, national origin, disability, age or sex in administration of its programs or activities. Visit DEQ's [Civil Rights and Environmental Justice page](#).