Sec. 9007 – Rural Energy for America Program (REAP)

**Renewable Energy Systems Grant**

**Total Project Costs $80,000** **or less**

**Please note:** This application template was designed for the temporary period between July 7, 2014 and the introduction of the new OMB REAP application form.This template is designed for training and education and does not replace the 4280-B regulation.

***DO NOT begin to build or install your proposed project before you complete your application, submit it to Rural Development, and ask us to notify you that your application and environmental review is complete. Projects that are started before you submit a complete application are not eligible for funding consideration.***

**This simplified grant application template** includes a sample title page, sample table of contents, a framework of divider pages to organize the application package, and links to required forms. Please tab the divider pages as indicated and number all the pages within the application.

**General Guidance: Before Starting Your Application**

1. *Complete a detailed evaluation of your renewable resource, verify your ability to interconnect (if applicable), and work with qualified experts to design and plan your project.* Renewable energy generation projects are very complex and require considerable planning and professional development work. USDA Rural Development will only consider funding projects that demonstrate they are well-conceived and well-designed.
2. *Develop a clear project budget & implementation plan.* Figure out what renewable energy generating system you want to develop. Get a few bids and determine the total project cost.
3. *Begin lining up additional funds.* Once the energy project’s scope has been defined, you will need to find other funding sources because the grant cannot pay for more than 25% of the total project’s cost. Proposals that have all their funding committed are more likely to receive a grant.
4. *Contact USDA Rural Development to discuss your project & application process.* USDA Rural Development staff can provide you with insights and ideas on how best to proceed. Feel free to contact us!
5. *Prepare your application.* We recommend using our application template to assure your application is well-documented and complete.
6. **Shortcut Tip!** Save time re-typing your name over and over again. Use the Edit/Replace command, replacing “Applicantname” with the actual applicant/entity name.

**Submit original application by 4:30 pm on or before the deadline to:**

**Anne Correia, Energy Coordinator:**

USDA Rural Development

15 Cranberry Highway

West Wareham, MA 02576

**Applications may be also be accepted at any of our USDA/Rural Development area offices in MA/CT/RI**

USDA/Rural Development USDA/Rural Development USDA/Rural Development

Attn: Anne Correia Attn: Anne Correia Attn: Anne Correia

52 Boyden Rd. 195 Russell St 60 Quaker Lane Suite 44

Holden, MA 01520 Hadley, MA 01035 Warwick, RI 02886

USDA/Rural Development USDA/Rural Development USDA/Rural Development

Attn: Anne Correia Attn: Anne Correia Attn: Anne Correia

238 West Town St 100 Northfield Drive Floor 4 451 West St, Suite 2

Norwich, CT, 06360 Windsor, CT 06095 Amherst, MA 01002

**Title of Project:**

**Submitted by**

**Applicant Name:  Applicantname**

**Address:**

**City:**

**County:**

**State:**

**Zip code:**

**Phone #:**

**E-mail:**

**Fax:**

**$\_     \_ Grant Request**

(not to exceed $20,000 or 25% of project cost, whichever is less)

**Grant Writer**

**Phone**

**E-mail**

**Date Submitted to Rural Development (RD)**

**Table of Contents**

**(Title of the Project)** \_\_     \_\_

**A detailed** **table of contents** in the order presented below with clear pagination and chapter identification. The table of contents must include page numbers for each component of the proposal. Begin pagination immediately following the Table of Contents.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Simplified Grant Application Components** | **Tab**  | **Page** |
|  | Title Page |  |  |
|  | Table of Contents |  |  |
| I. | Project specific forms1. SF 424 - Application for Federal Assistance
2. SF 424 C - Budget Information – Construction Programs
3. SF 424 D - Assurances – Construction Programs
4. 1940-20 - “Request for Environmental Information” and attachments (if any)
5. AD 2106 - Form to Assist in Assessment of USDA Compliance With Civil Rights Laws (optional)
6. Certifications for REAP Application - $80,000 or less in total project cost
 | A |  |
|  |  |  |       |
|  |  |  |       |
|  |  |  |       |
|  |  |  |                 |
| IV. | Project Summary A. Title of Project B. Applicant Eligibility C. Project Eligibility D. Operation Description E. Financial Information  | B |  |
|  |  |  |       |
|  |  |  |       |
|  |  |  |       |
|  |  |  |       |
|  |  |  |       |
| V. | Matching Funds Documentation  | C |       |
| VIII. | Technical Report | D |       |

|  |
| --- |
| **Tab A** Divider Page |
| Federal Tax ID # |       |
| DUNS #*To get a DUNS number, call**1-866-705-5711 or* go *to* <http://fedgov.dnb.com/webform> *All applicants must have a DUNS # before applying for a CAGE Code* |       |
| System for Award Management (SAM) CAGE Code - ***For all grant requests*** *To get a Cage Code, go to* [https://www.sam.gov/portal/public/SAM/#](https://www.sam.gov/portal/public/SAM/)  |       |
| **Project Specific Forms**(insert forms immediately after this divider page) |
|  | “X” (enclosed)“NA” (not applicable) |
| SF 424 – Application for Federal Assistance |       |
| SF 424C – Budget Information |       |
| SF 424D – Assurances – Construction Programs |       |
| 1940-20 – Request for Environmental Information – and documentationSupplemental for Class 1 projects other than PV solar, involving constructionSection 106 ER Survey for solar PV projects Only |       |
| AD 2106 - Form to Assist in Assessment of USDA Compliance With Civil Rights Laws**Submission of this form is voluntary, not mandatory.** |       |
| Certifications for REAP Application - $80,000 or less in total project cost |       |

***Tab A:*** OMB Number: 4040-0004

**APPLICATION FOR FEDERAL ASSISTANCE SF-424** Version 02 Expiration Date: 01/31/2012

|  |  |
| --- | --- |
| 1. Type of Submission | **Application** |
| 2. Type of Application | **New** |
| 3. Date Received: | 4. Applicant Identifier: N/A |
| 5a. Federal Entity Identifier: N/A | 5b. Federal Award Identifier: N/A |
| 6. Date Received by State: N/A | 7. State Application Identifier: N/A |
| **8. APPLICANT INFORMATION** |
| a. Legal Name: | **Applicantname** |
| b. Employer/Taxpayer Identification Number | **###** |
| c. Organizational DUNS: | **###** You must provide a “DUNS” number. More info on DUNS is online at: <http://www.rurdev.usda.gov/or/bizgranthelp.htm> |
| d. Mailing Address: |  |
| Physical Address (if different): |  |
| e. Organizational Unit (Department/Division): |  |
| f. Project Contact – name & contact information of person to be contacted on matters involving this application: |
| Name |  |
| Title |  |
| Organizational Affiliation |  |
| Telephone Number |  |
| Fax Number |  |
| Email |  |
| 9. Type of Applicant  | Select only one & delete the others:**L. Individual (sole proprietor)****M. Profit Organization** **N. Other (specify)** |
| 10. Name of Federal Agency | **USDA Rural Development** |
| 11. Catalog of Federal Domestic Assistance # (Title) | **10.868 (REAP Renewable Energy Generation Grant)** |
| 12. Funding Opportunity Number: N/A | 13. Competition Identification Number: N/A |
| 14. Areas Affected by Project (Cities, Counties, States, etc.): |  |
| 15. Descriptive Title of Applicant’s Project |   |
| 16. Congressional Districts of: a. Applicant: |  |
| b. Project: |  |
| 17. Proposed Project: a. Start Date: |  |
| b. End Date: |  |
| **18. Estimated Funding ($)** |
| Source | $ Amount | Describe |
| a. Federal | **$**  | **REAP Grant** |
| b. Applicant | **$**  |  |
| c. State | **$**  |  |
| d. Local | **$**  |  |
| e. Other | **$**  |  |
| f. Program Income | **$**  |  |
| **g. TOTAL** | **$**  |  |
| 19. Is Application Subject to Review By State Under Executive Order 12372 Process? | **b. Program is not covered by E.O. 12372** |
| 20. Is the Applicant Delinquent On Any Federal Debt? (If “Yes”, provide explanation.) |  |
| 21. By signing this application, I certify 910 to the statements contained in the list of certifications \* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances \* and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**I AGREE**\* The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.  |
| **Authorized Representative** |
| Full Name: |  |
| Title: |  |
| Telephone Number: |  |
| Fax Number: |  |
| Email: |  |
|  |  |
| Signature of Authorized Representative | Date Signed |

Authorized for Local Production Standard Form 424 (Revised 10/2005)

 Prescribed by OMB Circular A-102

OMB Approval No. 0348-0041

 Expiration Date 07/30/2010

**BUDGET INFORMATION – Construction Programs**

*NOTE: Certain Federal assistance programs require additional computations to arrive at the Federal share of project costs eligible for participation. If such is the case, you will be notified*

|  |  |  |  |
| --- | --- | --- | --- |
| **COST CLASSIFICATION** | **a. Total Cost** | **b. Costs Not Allowable****for Participation** | **c. Total Allowable Costs****(Columns a-b)** |
| 1. Administrative and legal expenses | **$**  |  | **$**  |
| 2. Land, structures, rights-of-way, appraisals, etc. | **$**  |  | **$**  |
| 3. Relocation expenses and payments | **$**  |  | **$**  |
| 4. Architectural and engineering fees | **$**  |  | **$**  |
| 5. Other architectural and engineering fees | **$**  |  | **$**  |
| 6. Project inspection fees | **$**  |  | **$**  |
| 7. Site work | **$**  |  | **$**  |
| 8. Demolition and removal | **$**  |  | **$**  |
| 9. Construction | **$**  |  | **$**  |
| 10. Equipment | **$**  |  | **$**  |
| 11. Miscellaneous | **$**  |  | **$**  |
| **12. SUBTOTAL**  *(sum of lines 1-11)* | **$**  |  | **$**  |
| 13. Contingencies | **$**  |  | **$**  |
| **14. SUBTOTAL** | **$**  |  | **$**  |
| 15. Project (program) income(This figure must match 18.f on previous page; usually this figure is“$0”) | **$0** |  | **$0** |
| **16. TOTAL PROJECT COSTS**  *(subtract #15 from #14)*This total must match 18.g on previous page | **$**  | **n/a** | **$**  |
| FEDERAL FUNDING |
| 17. Federal assistance requested, calculate as follows: (Consult Federal agency for Federal percentage share.) Enter the resulting Federal share(#17 must be not more than 25% of the #16 total or $500,000, whichever is less.) | Enter eligible costs from line 16c.Multiply X **25%** | **$**  |

**Previous Edition Usable Authorized for Local Reproduction Standard Form 424C (Rev. 7-97)**

 **Prescribed by OMB Circular A-102**

OMB Approval No. 4040-0009

**ASSURANCES - CONSTRUCTION PROGRAMS**

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing

instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of

information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for

reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0042), Washington, DC 20503.

**PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET.**

**SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.**

**NOTE**: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the

Awarding Agency. Further, certain Federal assistance awarding agencies may require applicants to certify to additional

assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance

and the institutional, managerial and financial capability

(including funds sufficient to pay the non-Federal share

of project cost) to ensure proper planning, management

and completion of the project described in this

application.

2. Will give the awarding agency, the Comptroller General

of the United States and, if appropriate, the State,

through any authorized representative, access to and

the right to examine all records, books, papers, or

documents related to the assistance; and will establish a

proper accounting system in accordance with generally

accepted accounting standards or agency directives.

3. Will not dispose of, modify the use of, or change the

terms of the real property title, or other interest in the

site and facilities without permission and instructions

from the awarding agency. Will record the Federal

interest in the title of real property in accordance with

awarding agency directives and will include a covenant

in the title of real property acquired in whole or in part

with Federal assistance funds to assure non-discrimination

during the useful life of the project.

4. Will comply with the requirements of the assistance

awarding agency with regard to the drafting, review and

approval of construction plans and specifications.

5. Will provide and maintain competent and adequate

engineering supervision at the construction site to

ensure that the complete work conforms with the

approved plans and specifications and will furnish

progress reports and such other information as may be

required by the assistance awarding agency or State.

6. Will initiate and complete the work within the applicable

time frame after receipt of approval of the awarding

agency.

7. Will establish safeguards to prohibit employees from

using their positions for a purpose that constitutes or

presents the appearance of personal or organizational

conflict of interest, or personal gain.

8. Will comply with the Intergovernmental Personnel Act

of 1970 (42 U.S.C. §§4728-4763) relating to prescribed

standards for merit systems for programs funded

under one of the 19 statutes or regulations specified in

Appendix A of OPM’s Standards for a Merit System of

Personnel Administration (5 C.F.R. 900, Subpart F).

9. Will comply with the Lead-Based Paint Poisoning

Prevention Act (42 U.S.C. §§4801 et seq.) which

prohibits the use of lead-based paint in construction or

rehabilitation of residence structures.

10. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a)

Title VI of the Civil Rights Act of 1964 (P.L. 88-352)

which prohibits discrimination on the basis of race,

color or national origin; (b) Title IX of the Education

Amendments of 1972, as amended (20 U.S.C. §§1681-

1683, and 1685-1686), which prohibits discrimination

on the basis of sex; (c) Section 504 of the

Rehabilitation Act of 1973, as amended (29 U.S.C.

§794), which prohibits discrimination on the basis of

handicaps; (d) the Age Discrimination Act of 1975, as

amended (42 U.S.C. §§6101-6107), which prohibits

discrimination on the basis of age; (e) the Drug Abuse

Office and Treatment Act of 1972 (P.L. 92-255), as

amended, relating to nondiscrimination on the basis of

drug abuse; (f) the Comprehensive Alcohol Abuse and

Alcoholism Prevention, Treatment and Rehabilitation

Act of 1970 (P.L. 91-616), as amended, relating to

nondiscrimination on the basis of alcohol abuse or

alcoholism; (g) §§523 and 527 of the Public Health

Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-

3), as amended, relating to confidentiality of alcohol

and drug abuse patient records; (h) Title VIII of the

Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as

amended, relating to nondiscrimination in the sale,

rental or financing of housing; (i) any other

nondiscrimination provisions in the specific statute(s)

under which application for Federal assistance is being

made; and, (j) the requirements of any other

nondiscrimination statute(s) which may apply to the

application.

**Previous Edition Usable Standard Form 424D (Rev. 7-97)**

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11. Will comply, or has already complied, with the

requirements of Titles II and III of the Uniform Relocation

Assistance and Real Property Acquisition Policies Act of

1970 (P.L. 91-646) which provide for fair and equitable

treatment of persons displaced or whose property is

acquired as a result of Federal and federally-assisted

programs. These requirements apply to all interests in real

property acquired for project purposes regardless of

Federal participation in purchases.

12. Will comply with the provisions of the Hatch Act (5 U.S.C.

§§1501-1508 and 7324-7328) which limit the political

activities of employees whose principal employment

activities are funded in whole or in part with Federal funds.

13. Will comply, as applicable, with the provisions of the Davis-

Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act

(40 U.S.C. §276c and 18 U.S.C. §874), and the Contract

Work Hours and Safety Standards Act (40 U.S.C. §§327-

333) regarding labor standards for federally-assisted

construction subagreements.

14. Will comply with flood insurance purchase requirements of

Section 102(a) of the Flood Disaster Protection Act of 1973

(P.L. 93-234) which requires recipients in a special flood

hazard area to participate in the program and to purchase

flood insurance if the total cost of insurable construction

and acquisition is $10,000 or more.

15. Will comply with environmental standards which may be

prescribed pursuant to the following: (a) institution of

environmental quality control measures under the

National Environmental Policy Act of 1969 (P.L. 91-

190) and Executive Order (EO) 11514; (b) notification

of violating facilities pursuant to EO 11738; (c)

protection of wetlands pursuant to EO 11990; (d)

evaluation of flood hazards in floodplains in accordance

with EO 11988; (e) assurance of project consistency

with the approved State management program

developed under the Coastal Zone Management Act of

1972 (16 U.S.C. §§1451 et seq.); (f) conformity of

Federal actions to State (Clean Air) Implementation

Plans under Section 176(c) of the Clean Air Act of

1955, as amended (42 U.S.C. §§7401 et seq.); (g)

protection of underground sources of drinking water

under the Safe Drinking Water Act of 1974, as

amended (P.L. 93-523); and, (h) protection of

endangered species under the Endangered Species Act

of 1973, as amended (P.L. 93-205).

16. Will comply with the Wild and Scenic Rivers Act of

1968 (16 U.S.C. §§1271 et seq.) related to protecting

components or potential components of the national

wild and scenic rivers system.

17. Will assist the awarding agency in assuring compliance

with Section 106 of the National Historic Preservation

Act of 1966, as amended (16 U.S.C. §470), EO 11593

(identification and protection of historic properties), and

the Archaeological and Historic Preservation Act of

1974 (16 U.S.C. §§469a-1 et seq.).

18. Will cause to be performed the required financial and

compliance audits in accordance with the Single Audit

Act Amendments of 1996 and OMB Circular No. A-133,

"Audits of States, Local Governments, and Non-Profit

Organizations."

19. Will comply with all applicable requirements of all other

Federal laws, executive orders, regulations, and policies

governing this program.

|  |  |
| --- | --- |
| SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL | TITLE |
|  |  |
| APPLICANT ORGANIZATION | DATE SUBMITTED |
| **Applicantname** |  |

**Standard Form 424D (Rev. 7-97) Back**

|  |  |  |
| --- | --- | --- |
| **USDA** Form RD 1940-20(Rev. 4-06) | *Position 3****Tab A:*****REQUEST FOR ENVIRONMENTAL INFORMATION** | FORM APPROVEDOMB No. 0575-0094 |
|  | Name of Project |
|  | **Applicantname** |
|  | Location |
|  |  |

**Item 1a**. Has a Federal, State, or Local Environmental Impact Statement or Analysis been prepared for this project?

[ ] Yes [ ]  No [ ]  Copy attached as EXHIBIT I-A.

 **1b.** If “No.” provide the information requested in Instructions as EXHIBIT I.

**Item 2.** The State Historic Preservation Officer (SHPO) has been provided a detailed project description and has been requested to submit comments to the appropriate Rural Development Office. [ ] Yes [ ]  No Date description submitted to SHPO \_\_\_\_\_\_\_\_

**Item 3.** Are any of the following land uses or environmental resources either to be affected by the proposal or located within or adjacent to the project site(s)? *(Check appropriate box for every item of the following checklist).*

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes No Unknown** |  | **Yes No Unknown** |
| 1. Industrial ……………………… |  [ ]  [ ]  [ ]  | 19. Dunes ………………………. |  [ ]  [ ]  [ ]  |
| 2. Commercial ……………………  |  [ ]  [ ]  [ ]  | 20. Estuary ..……………………. |  [ ]  [ ]  [ ]  |
| 3. Residential …………………….. |  [ ]  [ ]  [ ]  | 21. Wetlands ……………………. |  [ ]  [ ]  [ ]  |
| 4. Agricultural ……………………. |  [ ]  [ ]  [ ]  | 22. Floodplain ………………….. |  [ ]  [ ]  [ ]  |
| 5. Grazing ………………………...6. Mining, Quarrying …………….. |  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  | 23. Wilderness ………………….*(designated or proposed under the Wilderness Act)* |  [ ]  [ ]  [ ]  |
| 7. Forests ………………………….8. Recreational …………………… |  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  | 24. Wild or Scenic River ………..*(designated or proposed under the Wild and Scenic Rivers Act)* |  [ ]  [ ]  [ ]  |
| 9. Transportation ………………….10. Parks …………………………. |  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  | 25. Historical, Archeological Sites *(Listed on the National Register of Historical Places or which may be eligible for listing)* |  [ ]  [ ]  [ ]  |
| 11. Hospital ………………………. |  [ ]  [ ]  [ ]  | 26. Critical Habitats ……………. *(endangered/threatened species)* |  [ ]  [ ]  [ ]  |
| 12. Schools ………………………. |  [ ]  [ ]  [ ]  | 27. Wildlife …………………….. |  [ ]  [ ]  [ ]  |
| 13. Open spaces ………………….. |  [ ]  [ ]  [ ]  | 28. Air Quality …………………. |  [ ]  [ ]  [ ]  |
| 14. Aquifer Recharge Area ...…….. |  [ ]  [ ]  [ ]  | 29. Solid Waste Management …... |  [ ]  [ ]  [ ]  |
| 15. Steep Slopes ………………….. |  [ ]  [ ]  [ ]  | 30. Energy Supplies ……………. |  [ ]  [ ]  [ ]  |
| 16. Wildlife Refuge ..……………..17. Shoreline ……………..………. |  [ ]  [ ]  [ ]  [ ]  [ ]  [ ]  | 31. Natural Landmark *(Listed on National Registry of Natural Landmarks)* |  [ ]  [ ]  [ ]  |
| 18. Beaches ...…………………….. |  [ ]  [ ]  [ ]  | 32. Coastal Barrier Resources System . |  [ ]  [ ]  [ ]  |

**Item 4.** Are any facilities under your ownership, lease, or supervision to be utilized in the accomplishment of this project, either listed or under consideration for listing on the Environmental Protection Agency’s List of Violating Facilities? 🞎 Yes 🞎 No

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | Signed: |  |
| *(Date)* |  |  | *(Applicant)* |
|  |  |  |  |
|  |  |  | *(Title)* |

*According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information*

*unless it displays a valid OMB control number. The valid OMB control number for this information collections is 0575-0094. The time required to complete this*

*information collection is estimated to average 6 to 10 hours per response, including the time for reviewing instructions, searching existing data sources,*

*gathering and maintaining the data needed, and completing and reviewing the collection of information.*

**Supplemental Environmental Information Exhibit 1A**

(to accompany Form 1940-20, Request for Environmental Information)

(*Note*: This information is only needed for projects involving construction.)

Federal agencies are required by law to independently assess the expected environmental impacts associated with proposed Federal actions. It is extremely important that the information provided be in sufficient detail to permit Rural Development to perform its evaluation. Failure to provide sufficient data will delay agency review and a decision on the processing of your application.

This information request is designed to obtain an understanding of the area’s present environmental condition and the project’s elements that will affect the environment. Should you believe that an item does not need to be addressed for your project, consult with the RD office from which you received this form before responding. In all cases when it is believed that an item is not applicable, explain the reasons for this belief.

It is important to understand the comprehensive nature of the information requested. Information must be provided for (a) the site(s) where the project facilities will be construction and the surrounding areas to be directly and indirectly affected by its operation and (b) the areas affected by any primary beneficiaries of the project. The amount of detail should be commensurate with the complexity and size of the project, and the magnitude of the expected impact.

|  |  |
| --- | --- |
| **Examples of projects:** | **Documentation:** |
| ***Categorical Exclusion Environmental Assessment (Example)***--Crop drying equipment--bioenergy equipment | --Site photo, & map.--Please complete only the 1920-40 form. |
| ***PV Solar Ground or Roof Mount***  | -Complete 1940-20 & Survey form & Provide Aerial map |
| ***Class I Environmental Assessment***--Solar thermal - Small ponds/receivers--Geothermal--Wind turbines.--Bioenergy equipment + construction--Hydro | --Subsequent to the first page of the 1940-20 - Answer questions 1,2,3,13,15,16,17 – attach third party documents as appropriate & provide legal description--Site photos--Aerial map--Discussion of alternative sites consideredIf wind project:--Photos in all 4 directions from the turbine site.--Schematic of where electrical line to be located |

|  |  |
| --- | --- |
| Name of Applicant: | **Applicantname** |
| Name of Project: |  |
| Project Location: |  |
| **1. Primary Beneficiaries.** Identify any businesses or major developments that will benefit from the proposal, and those which will expand or locate in the area because of the project. |
|       |
| **2. Area Description.**  |
| A. Describe the size, terrain, and present land uses as well as the adjacent land uses of the areas to be affected. These areas include the site(s) of construction or project activities, adjacent area, and areas affected by the primary beneficiaries. |
|       |
| B. For each box checked “Yes” in item 3 of Form RD 1940-20, describe the nature of the effect on the resource |
|       |
| C. Attach a detailed street map or topographic map showing the location of the project. |
| [ ]  attached       |
| D. Attach a plot plan that clearly delineates the location of the project elements. |
| [ ]  attached       |
| E. Provide photos of the site to be developed, including any structures now on the site, and photos of the surrounding area. Digital photos sent via e-mail are strongly encouraged |
| [ ]  attached/sent       |
| **3. Historic/Archaeological Properties**  |
| A. Describe any structures that are 50 or more years old on the site and on contiguous parcels. (Be sure to provide photos of these structures.) Discuss any proposed activity that will affect these structures. |
| If structure is more than 50 years old, please describe if & how it has been previously altered. (i.e. new architectural shingles, & vinyl siding in 1980.) |
|       |
| B. Indicate whether the project is located in the vicinity of a historical district. |
|       |
| C. Identify any known historic/archaeological resources within the project area that are either listed on the National Register of Historic Places or considered to be of local and state significant and perhaps eligible for listing in the National Register. |
|       |
| D. If available, attach any historical/archaeological survey that has been conducted for the project area. |
| [ ]  no survey has been done and one is not planned [ ]  survey is pending and should be available      [ ]  attached       |
| **13. Public Reaction**  |
| A. Describe any objections which have been made to the project. |
|       |
| B. If a public hearing has been held, attach a copy of any transcript or resolution. If not, certify that a hearing was not held. |
|      [ ]  attached       |
| C. Indicate any other evidence of the community’s awareness of the project such as through newspaper articles or public information. |
|       |

|  |
| --- |
| **15. Mitigation Measures.** Describe any measures which will be taken to avoid or mitigate any adverse environmental impacts associated with the project. |
|       |
| **16. Permits**  |
| A. Indicate any current zoning restrictions and the project’s consistency with local land use plans. |
|       |
| B. Identify any permits which are needed for the project. Identify any city or county planning department that has jurisdiction over your project – i.e., from which a permit must be obtained. Provide the name and phone number of the contact person there. |
| Permit Type | Agency | Contact Person | Contact Phone |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
| C. Indicate the status of obtaining each such permit and attach any that have been received. |
|      [ ]  attached       |
| **17. Other Federal Actions.** Identify other federal programs or actions which are either related to this project or located in the same geographical area and for which you are filing an application, have recently received approval, or have in the planning stages. |
|  |

**Section 106 Environmental Review Survey –**

Q&A for Solar Energy Projects

APPLICANT NAME  **Applicantname**

* For ALL PV SOLAR SYSTEMS:
	+ ***Please attach an aerial photo & identify exact location of the solar project***
1. Have there been any previously received comments or concerns from the

state or local historic commission regarding this project Yes [ ]  No [ ]

If yes, please explain or attach

1. Is the proposed project listed within a historical district? Yes [ ]  No [ ]
2. Is the location of the proposed project within view shed of a building or

Structure that is listed on the National or State register of Historical Places? Yes [ ]  No [ ]

 If Yes Please explain:

* IF ROOF MOUNTED: (*please complete & sign if roof mounted*)
1. Will the proposed project be mounted on a bldg./structure that is more than 50

years old or within view shed of a property that is 50+ years old? Yes [ ]  No [ ]

If Yes, how old is the building?

If Yes, has the bldg. been significantly altered or modernized in the last 50 years? Yes [ ]  No [ ]

(*Please describe for each bldg, i.e. new asphalt roof 1996, vinyl siding replacement 2002, etc).*

IF GROUND MOUNTED: *(please complete & sign if ground mounted*)

1. Is the proposed solar project utilizing anything other than standard cross bracing on

pier & post type foundations, pile driven technology, or a ballasted mounting systems

in a manner that will provide for the least amount of ground disturbance? Yes [ ]  No [ ]

If yes, please explain

1. Is there any other expected ground disturbance? Yes [ ]  No [ ]

If yes, please explain

1. Are you aware that the proposed ground disturbance location has any

archaeological significance? Yes [ ]  No [ ]

1. Is the size of the proposed system greater than 50 KW? Yes [ ]  No [ ]
2. Has the area of the proposed project previously been disturbed in the past?

*i.e. mounted upon old barn foundation*. Yes [ ]  No [ ]

Based on responses above, the project may qualify for an exemption, where it has been determined that any historic property will not be impacted by this project. This may prevent any further consultation or review from the Historic Preservation office. Thereby I certify with signature below that all the above responses are true & accurate to the best of my knowledge.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Authorized Representative Date

***Tab A:***

**AD-2106** Approved –OMB No. 0503-0019

(01-19-12)

U.S. Department of Agriculture

**Form to Assist in Assessment**

**of USDA Compliance With Civil Rights Laws**

**QUESTIONNAIRE**

The purpose of this questionnaire is to gather race, ethnicity, and gender information about persons who apply and participate in this USDA program. The information you provide will not be used when reviewing your application or when determining whether you are eligible to participate in this program. This is a voluntary questionnaire. You are not required to give this information, but we hope you will because the information you give will be used to improve the operation of this program, to help USDA design additional opportunities for program participation, and to monitor enforcement of laws that require equal access to this program for eligible persons. If you have previously provided this information to USDA please DO NOT fill out this form. Your information will be kept private to the extent permitted by law. Thank you for your response.

|  |  |  |
| --- | --- | --- |
| 1. | What is your name? |       |
| 2. | Legal Residence: |       |  |
| 3. | What is your gender? |  [ ]  Male |  [ ]  Female |

**Please answer BOTH question 4 and question 5 below about ethnicity and race. For this questionnaire,**

**Hispanic or Latino origins are not races.**

4. Ethnicity: [ ]  Hispanic or Latino

 [ ]  Not Hispanic or Latino

5. What is your race? Mark all that apply.

 \_[ ]  American Indian or Alaska Native

\_[ ] \_Asian

\_[ ] \_Black or African American

\_[ ] \_Native Hawaiian or Other Pacific Islander

\_[ ] \_White

According to the Paperwork Reduction Act of 1995, an agency may not conduct, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0503-0019. The time required to complete this information collection is estimated to average 2 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

**Certifications for REAP Application – $80,000 or less in total project cost**

1. This is to certify that I, as the Applicant, have a known [ ]  or no known [ ] relationship or association with a Rural Development employee.

If there is a known relationship, please indicate the name of the Rural Development employee:

1. I, the Applicant, have [ ]  or have not[ ] , received any grants and/or guaranteed loans under the REAP program. If grants or guaranteed loans have been received, identify each grant and/or guaranteed loan and describe the progress that has made on each project, including projected schedules and actual completions dates, if applicable:
2. I, the Applicant, being a legal entity, am [ ]  or am not [ ]  in good standing and operating in accordance with the laws of the State(s) or Tribe where I, the Applicant, have a place of business.

Or, [ ]  Not applicable, I am applying as a sole proprietor.

1. The Applicant certifies to each of the following: (Check all that are applicable.)

[ ] The Applicant meets each of the Applicant eligibility criteria found in RD Instruction 4280.112.

[ ] The proposed project meets each of the project eligibility requirements found in RD Instruction 4280.113(a), (b), (d), and (e).

[ ] Per RD Instruction 4280.113 (f), the Applicant acknowledges caution against taking any actions or incurring any obligations prior to the Agency’s environmental review that limits the range of alternatives or has an adverse effect on the environment, such initiation of construction. If taken, it could result in project ineligibility.

[ ] The Applicant meets the criteria for submitting an application for projects with Total Project Costs of $80,000 or less.

[ ] The Applicant or the Applicant’s prime contractor assumes all risk and responsibilities of project development, including interim financing, including during construction. The Applicant is solely responsible for the execution of all contracts.

[ ] Construction planning and performing development will be performed in compliance with RD Instruction 4280.119(c).

[ ] The Applicant agrees not to request reimbursement from funds obligated under this program until after the project has been completed and is operating in accordance with the information provided in the application for the project.

[ ] The Applicant will maintain insurance coverage as required under RD Instruction 4280.122(b).

[ ] The design, engineering, testing, and monitoring will be sufficient to demonstrate that the proposed project will meet its intended purpose.

[ ] The equipment required for the project is available, can be procured and delivered within the proposed project development schedule, and will be installed in conformance with manufacturer’s specifications and design requirements. This would not be applicable when equipment is not part of the project.

[ ] The project will be constructed in accordance with applicable laws, regulations, agreements, permits, codes, and standards.

[ ] The Applicant will abide by the open and free competition requirements in compliance with RD Instruction 4280.124(a)(1).

[ ] For bioenergy projects, that any and all woody biomass feedstock from National forest system land or public lands cannot be used as a higher value wood-based product. (Check if applicable.)

[ ] The Applicant will abide by the equal employment opportunity requirements in compliance with RD Instruction 4280.124(a)(2).

I have executed this certification on this       day of      , 201  .

\_\_ Applicantname \_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_

Name of Applicant Signature of Applicant or Authorized Representative

|  |
| --- |
| **Tab B**Divider Page |
| **Project Summary** (Insert forms immediately after this divider page) |
|  Please indicate with “X” (enclosed) |
| Title of the project | [ ]  |
| Applicant Eligibility (as per 4280.112) | [ ]  |
| Project Eligibility (as per 4280.113) | [ ]  |
| Operation Description | [ ]  |
| Financial Information for Size Determination | [ ]  |
|  |
| Documentation of commercially available technology, including warranty | **B-1** | [ ]  |
| Third party contracts for management and maintenance*(if applicable)* *[ ]  Not Applicable* | **B-2** | [ ]  |
| Evidence of site control – copy of a recent property tax bill for the tax parcel containing the project site, a lease between the applicant and the site owner for the useful life of the project, if applicable, or other documentation of site control | **B-3** | [ ]  |
| IRS Forms and other Size Standard Documentation | **B-4** | [ ]  |

 **Project Summary**

Applicant Name  **Applicantname**

Title of Project

Type of Technology (i.e. solar, wind)       Renewable Energy

**Applicant Eligibility**

Indicate with “X” statements that are applicable and “NA” statements not applicable

1       **If applying** as an Agricultural Producer – more than 50% of the Applicant’s GROSS income is from agricultural production as explained in “Financial Information for Size Determination” and as documented in the attached tax return(s). please provide 3 years of tax returns.



OR (pick 1 or other)-small business or ag producer)

2.       **If applying** as a Rural Small Business – the business is “rural” as explained in “Project Eligibility – item 9” and the business meets SBA’s “small business” criteria as explained in “Financial Information for Size Determination” and as documented in the attached tax return(s). Please provide 3 years of tax returns.

Indicate if statement is either “True” or “False”

3.       The Applicant has no outstanding judgment from Federal court, is not delinquent on federal income taxes or federal debt, and has not been debarred from receiving federal assistance.

4.       Applicant has received a Section 9006 or 9007 (REAP) grant in prior years.

 If the answer is *true* – please indicate the year      , type of project       and current stage of development      .

**Project Eligibility**

1. Type of Technology [x]  Renewable Energy

Please describe the proposed project. Provide enough detail that Rural Development staff will understand how the project will benefit your business.

2. Describe how the proposed project will have a positive effect on each of the following:

1. **Resource conservation (***e.g. water, soil, forest***)**
2. **Public health (***e.g. potable water improve air quality***)**
3. **Environment (***e.g. greenhouse gases emissions, EPA’s Renewable fuel standard***)**

Answer “Yes” or “No”

3.       Will the project reduce or replace fuel consumption from finite resources?

4.       Will the project reduce or replace fossil fuel consumption, reducing emissions and thereby leading to better air quality?

5.       Will the project reduce or replace fossil fuel consumption, reducing greenhouse gas emissions and thereby creating a healthier environment?

6. The project is for [ ]  Commercially available and replicable technology

Commercially available - A system that has a proven operating history specific to the proposed application. Such a system is based on established design, and installation procedures and practice. Professional service providers, trades, large construction equipment providers, and labor are familiar with installation procedures and practices. Proprietary and balance of system equipment and spare parts are readily available. Service is readily available to properly maintain and operate system. An established warranty exists for parts, labor, and performance.

Answer “Yes” or “No”

7.       Documentation is attached or summarized in the technical report to supportthe commercial availability of the technology in my application. (i.e. catalog cut sheets,)

8.       The project has technical merit as demonstrated in the Technical Report, which follows Tab G of this application.

9.       ***For Rural Small Businesses only***; project is located in a rural area, as defined in 4280.103.

 The Project will be located at (*please provide address*)      .

 The project      is or       is not located in an urbanized area.

Please check our website if applying as a small business to determine Rural Area Eligibility

<http://eligibility.sc.egov.usda.gov/eligibility/welcomeAction.do?pageAction=RBSmenu&NavKey=property@13>

The owner of the project is      .

Answer “Yes” or “No”

10.       The owner of the project is the same entity as the Applicant.

11*.*       A third party is going to be under contract (copy of contract attached) to control revenues and expenditures and operate/maintain the project.

12.       Applicant will control the site where the project will be located - for the useful life of the proposed technology.

13.       Attached is documentation showing Applicant’s control of the project site.

14.       Applicant has satisfactory sources of revenue in an amount sufficient to provide for the operation, management, maintenance, and debt service of the project – for the life of the project.

**Operation Description**

(1) Describe the Applicant’s total farm/ranch or rural small business operation. Next, describe the relationship of the proposed project to the Applicant’s total farm/ranch/business operation (for example, “this project will install biomass burners in two of my four greenhouses producing ornamentals for retail sale, replacing fossil fuels burned during the cold months”).

(2) Provide a description of the ownership of the Applicant, including a list of individuals and/or entities with an ownership interest, names of any parent company, affiliates, and subsidiaries, as well as a description of the relationship, including products, between these entities.

**Financial Information for Size Determination**

Attached is financial information to allow the Agency to determine the Applicant’s size. All information submitted under this paragraph has been substantiated by authoritative records. Financial size will determine the number of points the Applicant is eligible to receive

IRS forms submitted are as follows (please check as applicable):

 [ ]  IRS form(s) 1120 – “C” Corporation

[ ]  IRS form(s) 1120S – “S” Corporation

[ ]  IRS form(s) 1065 – Partnership, LLC, LLP

[ ]  IRS Schedule(s) F – Farming (sole proprietorship)

[ ]  IRS Schedule(s) C – Business (sole proprietorship)

[ ]  IRS Form(s) 1040 - Individual

**1. Complete this section if applying as an AGRICULTURAL PRODUCER** (An “agricultural producer” is directly engaged in the production of agricultural products including crops, livestock, forestry products, hydroponics, nursery stock, or aquaculture, whereby 50% or more of Applicant’s gross income is derived from operations.)

The Applicant’s business is primarily engaged in the following type of agricultural production:

As demonstrated below, 50% or more of the Applicant’s gross income is derived from the production of agricultural products, including crops, livestock, forestry, hydroponics, nursery stock, or aquaculture.

|  |  |  |  |
| --- | --- | --- | --- |
| Total annualgross receipts from agricultural production.  | Total annual nonfarm income from all other sources (including nonfarm income and custom work | Year of these receipts | Source of Data |
| $      | $      |       |      IRS – filed tax returns |
|       |       |       |       |
|       |       |       |       |
|       |       |  | averages |

**2. Complete the appropriate section below if Applicant is applying as a RURAL SMALL BUSINESS.** (A “small business” must satisfy the definition as set forth in the Small Business Administration’s size standards.)

The NAICS code that best describes the Applicant’s business is      , which is the NAICS code for “     ” business category.

(A) As demonstrated below, Applicant’s business (including parent, affiliates, and subsidiaries) combined average annual gross receipts over the past three years does not exceed SBA’s size standard of $

**Table of Small Business Size Standards Matched to North American Industry Classification System Codes**

[**http://www.sba.gov/sites/default/files/Size\_Standards\_Table.pdf**](http://www.sba.gov/sites/default/files/Size_Standards_Table.pdf)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name of Business | Relationship to Applicant | Annual gross receiptsYr  | Annual gross receiptsYr  | Annual gross receiptsYr  | 3 years average annual gross receipts | Source of data (e.g. tax returns) |
|   | Applicant | $  | $  | $  |  |   |
|   | Parent of Applicant | $  | $  | $  |  |   |
|   | Subsidiary of Applicant | $  | $  | $  |  |   |
|   | Affiliate of Applicant | $  | $  | $  |  |   |
| **Total** |  | **$**  | **$**  | **$**  | **$**  |  |

**OR**

(B) As demonstrated below, the Applicant’s business (including parent, affiliates, and subsidiaries) combined number of full time equivalent employees is less than      .

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Business | Relationship to Applicant | # FTE employees in immediately previous year | Year  | Source of data (e.g. payroll) |
|   | Applicant |   |   |   |
|   | Parent of Applicant |   |   |   |
|   | Subsidiary of Applicant |   |   |   |
|   | Affiliate of Applicant |   |   |   |
| **Total** |  |   |  |  |

The applicant certifies that the statements made in this Project Summary are true to the best of their knowledge and has executed this certification on this \_\_\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_  Applicantname  \_\_\_\_\_\_\_\_\_

Name of Applicant

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Authorized Representative of Applicant

|  |
| --- |
| **Tab C**Divider Page |
| **Matching Funds Documentation**  |
| A **spreadsheet** identifying **sources of** **matching funds**, **amounts** and **status** of matching funds. The spreadsheet will also include a directory of matching funds, source(s), and contact information. (S*ample spreadsheet follows divider page)* |       |
| **Attach** Lender Letters of Commitment (a letter of intent is not a commitment), applicant’s bank statement to evidence available cash-on-hand, and other documentation for the matching funds identified in the spreadsheet. |       |
| If firm commitments are not yet available, attach any applications, correspondence, or other written communication between Applicant and matching fund sources. |       |

Passive third party equity contributions are acceptable for renewable energy system projects, including those that are eligible for Federal production tax credits, provided the applicant meets the requirements of Section 4280.112 (applicant eligibility).

Without specific statutory authority, other Federal grant awards and applicant in-kind contributions cannot be used to meet the matching fund requirement. Third party, in-kind contributions are allowable matching fund. The Agency will advise if the third party, in-kind contributions are acceptable in accordance with 7 CFR part 3015.

Applicant/Grantee Name

Matching Funds Commitment Documentation Spreadsheet

Title of Project

Total Cost $\_     \_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Source of Funds** | **Contact Name****Phone****Email** | **Dollars** | **Commitment****Letter attached** |
|  |
| 1 | Section 9007 Grant  | Anne Correia508-295-5151, ext. 3anne.correia@ma.usda.gov | $       | Pending Award of Grant |
| 3 | Applicant funds |  Applicantname     | $       |       |
| 4 | Lending Institution Loan |                 | $       |       |
| 5 | Other:      |                 | $       |       |
| 7 | Other:      |                 | $       |       |
|  |  |  | Total Project Cost | $       | (Should match total project cost on SF 424C located behind Tab A) |

*Please be aware that grants are disbursed on a reimbursement basis after the project is complete and fully operating, and therefore the applicant will be responsible for interim financing the construction*

|  |
| --- |
| **Tab D** |
| **Technical Report**– **Renewable Energy** |
|  |  |
| The Technical report must demonstrate that the renewable energy system or energy efficiency improvement project can be installed and perform as intended in a reliable, safe, cost effective, and legally compliant manner. |       |
|  |  |

**Technical Reports for Project with Total Eligible Project Costs of $80,000 Or Less**

The technical requirements specified in this section apply to renewable energy systems.

All technical information provided must follow the format specified in the following sections. Supporting information may be submitted in other formats. Questions identified in the Agency’s technical review of the project must be answered to the Agency’s satisfaction before the application will be approved.

1. Qualifications of key project service providers. Describe all key project service providers including the number of similar systems installed and/or manufactured professional credentials, licenses and relevant experience.
2. Resource assessment. Provide adequate and appropriate data to demonstrate the amount of resource where the system is to be installed. Indicate the source of the data and assumptions.
* Energy Generation. Identify the amount of Renewable Energy that will be generated once the proposed system is operating at its steady state operating level. Include the price per energy unit to be sold to the grid or via a PPA and annual operating and maintenance expenses.
1. Commercially Available. Describe how the system meets the requirements below or provide the certification by a recognized industry organization whose standards are acceptable to Rural Development or provide industry recognized certification for proposed equipment..
2. Has, for at least one year, both a proven and reliable operating history and proven performance data;
3. Is based on established design and installation procedures and practices and is replicable;
4. Has professional service providers, trades, large construction equipment providers, and labor who are familiar with installation procedures and practices.
5. Has proprietary and balance of system equipment that are readily available and available spare parts.
6. Has services that are readily available to properly maintain and operate the system.
7. Has an existing established warranty that is valid in the U.S. for major parts or labor.
8. Energy Generation. Identify the amount of Renewable Energy that will be generated once the proposed system is operating at its steady state operating level. Include the price per energy unit to be sold to the grid or via a PPA and annual operating and maintenance expenses.
9. Project economic assessment. Describe the projected financial performance of the proposed project. The description must address Total Project Cost (w/project break cost breakdown), energy savings and revenues and include the calculation of simple payback. For energy replacement projects, include historical energy usage and per unit of energy paid (cost of energy)in the prior year. Simple payback is calculated using the full purchase cost of the system, disregarding the REAP grant and subsidies or incentives received from other sources, divided by annual savings and/or income from energy sales.