Illinois Environmental Protection Agency
1021 North Grand Avenue East • P.O. Box 19276 • Springfield • Illinois • 62794-9276 • (217)782-3397

LEAD SERVICE LINE INVENTORY (LSLI) GRANT PROGRAM

PROJECT SUMMARY WORKSHEET

To be completed by grant applicant and submitted with LSLI Application Materials to the IEPA per NOFO application submittal requirements. If you need more space than what is provided, please attach the information on separate paper and note the attachment in the space provided.

NAME OF LSLI APPLICANT: _____

1. Identify the **total service population** to be served by this project.

2. Provide a **total number of service connections** within the CWS.

3. Identify the **location(s) of the service population to be served** by the project. The location(s) should include the name(s) of the town/city/village where the residents live and/or the unincorporated area(s) where the residents live in order for the IEPA to identify the median household income of the total service population.

4. Provide a **map** detailing the area of inventory assessment.
   Map of inventory assessment area included and attached: ☐ **YES** ☐ **NO**

5. Identify and briefly describe the **anticipated method(s) to be used** to perform the inventory assessment.

AUTHORIZED REPRESENTATIVE (PRINTED)	**TITLE**
AUTHORIZED REPRESENTATIVE (SIGNATURE)	**DATE**