



DISTRIBUTION SYSTEM & WATER MAIN REHABILITATION PROJECT SUMMARY WORKSHEET

To be completed by grant applicant and submitted with the 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 GRANT APPLICANT: _____

1. The **Fiscal and Administrative Risk Assessment Questionnaire (ICQ)** must be completed prior to the application submittal. This is located within the GATA Portal. The applicant must complete the Fiscal and Administrative Risk Assessment Questionnaire in the GATA Portal for **Fiscal Year 2023 & 2024**.

Fiscal Year 2023 & 2024 ICQ COMPLETED/SUBMITTED in GATA Portal:

YES NO **Date Submitted:** _____

2. **Uniform Application for State Grant Assistance** completed, signed by authorized signatory, and attached:

YES NO

3. **Uniform Grant Budget Template (UGBT)** completed, signed by authorized signatory, and attached:

YES NO

4. **Programmatic Risk Assessment Questionnaire (PRAQ)** completed, signed by authorized signatory, and attached:

YES NO

5. **Certifications and Assurances Acknowledgement Form** completed, signed by authorized signatory, and attached:

YES NO

6. **An Engineering Study**, or equivalent planning report, is attached:

YES NO

7. **Total Project Cost Estimate (where applicable):**

PROJECT PLANNING: _____

DESIGN ENGINEERING: _____

CONSTRUCTION ENGINEERING: _____

OTHER (LEGAL, FINANCIAL, ETC.): _____

CONSTRUCTION: _____

CONTINGENCY (10%): _____

TOTAL PROJECT COST: _____

8. **Project Implementation Schedule:**

PERMITTING: _____

BID ADVERTISEMENT DATE: _____

CONSTRUCTION START DATE: _____

CONSTRUCTION COMPLETION DATE: _____

9. 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).

10. Provide a **map** detailing the project area.

Map of project area included and attached: YES NO



Illinois Environmental Protection Agency

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

11. **Describe the proposed project** which provides a solution to an identified need for drinking water distribution and/or treatment where currently distribution and/or treatment is failing or inadequate:

AUTHORIZED REPRESENTATIVE (PRINTED)

TITLE

AUTHORIZED REPRESENTATIVE (SIGNATURE)

DATE