

Required Forms

Application for Federal Assistance [Standard Form 424]

Following are instructions for filling out each numbered item in Standard Form (SF) 424. This form is used to provide general information about your TAG group. It certifies that you have determined your state's intergovernmental review requirements and requires the signature of an authorized representative of your group.

1. **Type of Submission** -- Check "application."
2. **Type of Application** -- Check "new."
3. **Date Received** -- Leave blank.
4. **Application Identifier** -- Leave blank.
- 5a. **Federal Entity Identifier** -- Enter xxxx
- 5b. **Federal Award Identifier** -- If this is a new application, leave blank. If this is a continuation or revision to an existing TAG award, enter the previously assigned Federal award identifier number. If this is a changed/corrected application, enter the Federal Identifier in accordance with agency instructions.
6. **Date Received by State** -- Leave blank.
7. **State Application Identifier** -- Leave blank.
8. **Applicant Information** --
 - a. **Legal Name** -- Enter your group's name.
 - b. **EIN/TIN** -- Enter your group's Employer Identification Number (EIN)/Taxpayer Identification Number (TIN). If you do not have an EIN or TIN, go to the IRS website at: [http://www.irs.gov/Businesses/Small-Businesses-&Self-Employed/Apply-for-an-Employer-Identification-Number-\(EIN\)-Online](http://www.irs.gov/Businesses/Small-Businesses-&Self-Employed/Apply-for-an-Employer-Identification-Number-(EIN)-Online) and follow instructions.
 - c. **Organizational DUNS** -- Enter your group's Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number. If you do not have a DUNS number, call the toll-free request line at 1-866-705-5711 to obtain one immediately at no cost.
 - d. **Address** -- Enter your group's full address in the blanks as indicated.
 - e. **Organizational Unit** -- Leave both boxes blank.
 - f. **Name and Contact Information** -- Type in the name, title, telephone number, fax number, and email address of your organization's authorized representative. Leave the box under "Organizational Affiliation" blank.

Application for Federal Assistance SF-424	
<p>* 1. Type of Submission:</p> <input type="checkbox"/> Preapplication <input checked="" type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application	
<p>* 2. Type of Application: * If Revision, select appropriate letter(s):</p> <input checked="" type="checkbox"/> New <input type="text"/> <input type="checkbox"/> Continuation * Other (Specify) <input type="checkbox"/> Revision <input type="text"/>	
<p>* 3. Date Received: 4. Applicant Identifier:</p> <input type="text" value="Completed by Grants.gov upon submission."/> <input type="text"/>	
<p>5a. Federal Entity Identifier: * 5b. Federal Award Identifier:</p> <input type="text" value="XXXXXXX"/> <input type="text"/>	
State Use Only:	
<p>6. Date Received by State: <input type="text"/> 7. State Application Identifier: <input type="text"/></p>	
8. APPLICANT INFORMATION:	
<p>* a. Legal Name: <input type="text" value="Woodtown Landfill Coalition"/></p>	
<p>* b. Employer/Taxpayer Identification Number (EIN/TIN): <input type="text" value="XX-XXXXXXX"/> * c. Organizational DUNS: <input type="text" value="XX-XXX-XXXX"/></p>	
d. Address:	
<p>* Street1: <input type="text" value="Main Street"/> Street2: <input type="text"/> * City: <input type="text" value="Woodtown"/> County: <input type="text" value="Litchfield"/> * State: <input type="text" value="CT"/> Province: <input type="text"/> * Country: <input type="text" value="USA"/> USA: UNITED STATES * Zip / Postal Code: <input type="text" value="06898"/></p>	
e. Organizational Unit:	
<p>Department Name: <input type="text"/> Division Name: <input type="text"/></p>	
f. Name and contact information of person to be contacted on matters involving this application:	
<p>Prefix: <input type="text" value="Ms"/> * First Name: <input type="text" value="Pat"/> Middle Name: <input type="text"/> * Last Name: <input type="text" value="Jones"/> Suffix: <input type="text"/></p>	
<p>Title: <input type="text" value="Executive Director"/></p>	
<p>Organizational Affiliation: <input type="text"/></p>	
<p>* Telephone Number: <input type="text" value="203-555-1234"/> Fax Number: <input type="text" value="203-555-1234"/></p>	
<p>* Email: <input type="text" value="jones.pat@coalition.org"/></p>	

Required Forms (continued)

Application for Federal Assistance [SF424] (continued)

9. **Type of Applicant** -- Select “M” from the drop-down menu if your group is a non-profit corporation with tax-exempt status. Select “N” from the drop-down menu if your group does not have tax-exempt status from the IRS. **NOTE: Tax-exempt status is different from being incorporated by your state as a non-profit organization.**
10. **Name of Federal Agency** -- Enter “U.S. Environmental Protection Agency.”
11. **Catalog of Federal Domestic Assistance Number** -- Enter 66.806.

CDFA Title -- Enter “Superfund Technical Assistance Grants (TAGs) for Community Groups at National Priorities List (NPL) Sites.”
12. **Funding Opportunity Number** -- Enter the number of the Federal Opportunity under which your group is requesting a TAG. This number will be supplied by your EPA Regional TAG Coordinator.

Title -- Enter the title of the Federal Opportunity provided by your EPA Regional TAG Coordinator.
13. **Competition Identification Number** --Leave blank.
14. **Areas Affected by Project** -- List municipalities, towns, counties, and states encompassing, adjacent to, and affected by the site.
15. **Descriptive Title of Project** -- Enter “Technical Assistance for [name of your site].”

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9. Type of Applicant 1: Select Applicant Type:

N: Nonprofit without 501C3 IRS Status (other than Institution of Higher Education)

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

*** 10. Name of Federal Agency:**

U.S. Environmental Protection Agency

11. Catalog of Federal Domestic Assistance Number:

66.806

CFDA Title:

Superfund Technical Assistance Grants (TAGs)

*** 12. Funding Opportunity Number:**

XXXXXXXXXX

* Title:

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

Smithtown, Woodtown, Litchfield, CT

*** 15. Descriptive Title of Applicant's Project:**

Technical Assistance at the Woodtown Landfill Site

Attach supporting documents as specified in agency instructions.

Required Forms (continued)

Application for Federal Assistance [SF424] (continued)

16. **Congressional Districts** --

- a. Enter the Congressional District (two-letter state abbreviation, dash, three-digit district number) in which your group's office (mailing address) is located.
- b. Enter all the Congressional Districts (two-letter state abbreviation, dash, three-digit district number) that are affected by the site.

If you do not know the district numbers, ask the local library or visit <http://nationalatlas.gov/printable/congress.html#list>.

17. **Proposed Project**

a. **Start Date** -- Ask your EPA Regional Office when funding is likely to be approved if you receive an award. Type in this date or the date you wish to begin receiving funds, whichever is later.

b. **End Date** -- Enter the date on which your proposed project will be completed (for example, if you are requesting funding for a three year project, enter the date that will be three years after your start date).

18. **Estimated Funding** -- Type in the amount of money your are asking EPA to provide (block "a"), the amount of "matching" funds you will provide (block "b"), and the total (block "g"). Copy these numbers from your Budget Narrative Attachment Form. The amount in block "a" must not be more than \$50,000 and not more than 80% of the total in block "g".

19. **Review by State** -- Check with your EPA Regional Office to determine if your application must be reviewed by the state. If "yes," check "a" and provide the date the application was provided to the state for review. If "no," check "b."

20. **Delinquent on Federal Debt** -- Check "yes" or "no" as appropriate. If "yes," provide an explanation in the blank provided (see Sample on page 35).

21. **Certification** -- Check "I agree" and enter the name, title, telephone number, fax number (if any), and email of your organization's authorized representative. If you are submitting your application in hard copy, have your authorized representative sign and date the form. If you are submitting your application via the Grants.gov Web site, leave the signature and date block blank; these will be filled in automatically when you fill out the final form online.

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16. Congressional Districts Of:

* a. Applicant CT-006

* b. Program/Project CT-006

Attach an additional list of Program/Project Congressional Districts if needed.

17. Proposed Project:

* a. Start Date: 1/1/13

* b. End Date: 12/31/15

18. Estimated Funding (\$):

* a. Federal \$50,000

* b. Applicant \$12,500

* c. State

* d. Local

* e. Other

* f. Program Income

* g. TOTAL \$62,500

*** 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

a. This application was made available to the State under the Executive Order 12372 Process for review on 11/30/06.

b. Program is subject to E.O. 12372 but has not been selected by the State for review.

c. Program is not covered by E.O. 12372.

*** 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.) Applicant Federal Debt Delinquency Explanation**

Yes No

21. *By signing this application, I certify (1) 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:

Prefix: Ms.

* First Name: Pat

Middle Name:

* Last Name: Jones

Suffix:

* Title: Executive Director

* Telephone Number: 203-555-1234

Fax Number: 203-555-1234

* Email: jones.pat@coalition.org

* Signature of Authorized Representative:

* Date Signed:

Required Forms (continued)

Application for Federal Assistance [SF424] (continued)

Delinquent on Federal Debt -- If you checked "yes" to question 20, provide an explanation in the blank provided.

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*** Applicant Federal Debt Delinquency Explanation**

The following field should contain an explanation if the Applicant organization is delinquent on any Federal Debt. Maximum number of characters that can be entered is 4,000. Try and avoid extra spaces and carriage returns to maximize the availability of space.

SAMPLE

Required Forms (continued)

Standard Form 424A—Budget Information

Section A—Budget Summary

- 1.a. Grant Program, Function, or Activity -- *Type in the name of the Superfund site.*
- 1.b. Catalog of Federal Domestic Assistance Number -- *Type in 66.806.*
- 1.c. Enter amount of federal funds requested
- 1.d. Enter amount of matching funds from your budget

Section B—Budget Categories

- 6.a-7.k --*Using your estimated budget, enter amounts in appropriate categories. Column (c) is for federal funds and Column (d) is for your matching share. Note that in-kind services or time of volunteers may be categorized as "Personnel."*

BUDGET INFORMATION - Non-Construction Programs

SECTION A - BUDGET SUMMARY						
Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		Total (g)
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	
1. Woodtown Landfill	66.806	\$ 50,000.00	\$ 12,500.00	\$	\$	\$ 62,500.00
2.						0.00
3.						0.00
4.						0.00
5. Totals		\$ 50,000.00	\$ 12,500.00	\$ 0.00	\$ 0.00	\$ 62,500.00
SECTION B - BUDGET CATEGORIES						
Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY			Total (5)		
	(1)	(2)	(3)		(4)	
a. Personnel	\$	\$	\$ 11,360.00	\$	\$ 11,360.00	
b. Fringe Benefits					0.00	
c. Travel		900.00			900.00	
d. Equipment					0.00	
e. Supplies					0.00	
f. Contractual		48,260.00			48,260.00	
g. Construction					0.00	
h. Other		840.00	1,140.00		1,980.00	
i. Total Direct Charges (sum of 6a-6h)		50,000.00	12,500.00	0.00	0.00	62,500.00
j. Indirect Charges					0.00	
k. TOTALS (sum of 6i and 6j)	\$	\$ 50,000.00	\$ 12,500.00	\$ 0.00	\$ 0.00	\$ 62,500.00
7. Program Income		\$	\$	\$	\$	\$ 0.00

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Required Forms (continued)

Standard Form 424A—Budget Information (continued)

Section C—Non-Federal Resources

8.a. Grant Program -- *Type in the name of the Superfund site.*

8.b.-8e. and 9-12 --*See sample. Type in amounts of your TAG request and matching share, as shown. Assume totals will be paid in quarterly intervals.*

Section D—Forecasted Cash Needs

13. Federal -- *In the column labeled “Total for 1st Year”, type in the **total** amount of money you are asking EPA to provide for your project, as shown in the Sample on the next page. (Get this amount from the Budget Narrative Attachment Form that you have already filled out.) Then, type in the portion of the estimated total that you expect to need for each stated time period. The sum of the four quarterly amounts should be equal to the total amount shown. (Don’t spend a lot of time on this section—a rough estimate is fine.)*

14. Non-Federal -- *In the column labeled “Total for 1st Year”, type in the **total** amount of “matching” funds you will provide for your project, as shown in the Sample on the next page. (Get this amount from the Budget Narrative Attachment Form that you have already filled out.) Then, type in the portion of the estimated total that you expect to need for each stated time period. The sum of the four quarterly amounts should be equal to the total amount shown.*

15. Totals

Type in the total amount for each column of Rows 13 and 14, as shown in the Sample on the next page.

Section E—Budget Estimates of Federal Funds Needed for Balance of the Project

16.-20. -- *Leave blank, as shown on the Sample on the next page.*

Section F—Other Budget Information

21. and 22. -- *Type “NA” in each block.*

23. Remarks -- *Leave this block blank.*

SECTION C - NON-FEDERAL RESOURCES

(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS
8. Woodtown Landfill Coalition	12,500.00			\$ 12,500.00
9.				\$ 0.00
10.				\$ 0.00
11.				\$ 0.00
12. Total (SUM OF LINES 8-11)	12,500.00	0.00	0.00	\$ 12,500.00

SECTION D - FORECASTED CASH NEEDS

	Total for 1 st Year	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter
	13. Federal	\$ 50,000.00	\$ 12,500.00	\$ 12,500.00	\$ 12,500.00
14. Non-Federal	12,500.00	3,125.00	3,125.00	3,125.00	3,125.00
15. TOTAL (sum of lines 13 and 14)	\$ 62,500.00	\$ 15,625.00	\$ 15,625.00	\$ 15,625.00	\$ 15,625.00

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) Grant Program	FUTURE FUNDING PERIODS (years)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16.	\$	\$	\$	\$
17.				
18.				
19.				
20. TOTAL (sum of lines 16-19)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges: NA	22. Indirect Charges: NA
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23. Remarks:

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Required Forms (continued)

Standard Form 424B–Assurances

This form contains the regulations, policies, guidelines, and requirements which your group must obey if you receive a TAG. Read it carefully. If you are submitting your application in hard copy, have your project manager or other authorized representative (the person who is signing your SF 424 “Application for Federal Assistance”) sign this form at the bottom (as shown in the sample below and on the next page) and include it with the rest of your application package. If you are submitting your application via the Grants.gov Web site, your authorized representative’s signature will be added automatically when you prepare the final form.

OMB Approval No. 0348-0040

ASSURANCES - NON-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 (0348-0040), 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 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:

- | | |
|---|---|
| <ol style="list-style-type: none"> 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 award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. 3. 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. 4. 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. 5. 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). 6. 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 | <p>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 VII 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.</p> <ol style="list-style-type: none"> 7. 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 or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. 8. Will comply, as applicable, with 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. |
|---|---|

<p>9. 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 subagreement.</p> <p>10. Will comply, if applicable, 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.</p> <p>11. 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 flood plains 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).</p>	<p>12. 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.</p> <p>13. Will assist the awarding agency in assuring compliance will 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.).</p> <p>14. Will comply with P.L.93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.</p> <p>15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) Pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance</p> <p>16. 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.</p> <p>17. 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."</p> <p>18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.</p>
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SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL <i>Pat Jones</i>	TITLE Executive Director
APPLICANT ORGANIZATION Woodtown Landfill Coalition	DATE SUBMITTED November 30, 2012

Required Forms (continued)

EPA 4700-4, Preaward Compliance Review Report

Following are instructions for filling out EPA Form 4700-4, Preaward Compliance Review Report for All Applicants Requesting Federal Financial Assistance. COMPLETE ALL SECTIONS of the form, have your authorized representative SIGN IT, and SUBMIT the form with your group's TAG application. If you are submitting your application via the Grants.gov Web site, your authorized representative's signature will be added automatically when you prepare the final form.

Recipients of federal financial assistance from the U.S. Environmental Protection Agency must comply with Title VI of the Civil Rights Acts of 1964, Section 13 of the 1972 Amendments to the Federal Water Pollution Control Act, Section 504 of The Rehabilitation Act of 1973, The Age Discrimination Act of 1975, and Title IX of the Education Amendments of 1972. Information on this form is required to enable the U.S. Environmental Protection Agency to determine whether applicants and prospective recipients are developing projects, programs and activities on a nondiscriminatory basis as required by these statutes.

If any item is not relevant to the project for which assistance is requested, write "NA" for "Not Applicable."

- I. Enter your organization's name and full mailing address.
- II. If your organization currently is receiving EPA assistance, enter "Yes." Otherwise, enter "No."
- III. "Civil rights lawsuits" means any lawsuit or complaint alleging discrimination on the basis of race, color, national origin, sex, age, or handicap pending against the applicant and/or entity that benefits from the grant.
- IV. "Civil rights lawsuits" means any lawsuit or complaint alleging discrimination on the basis of race, color, national origin, sex, age, or handicap pending against the applicant and/or entity that benefits from the grant.
- V. "Civil rights compliance review" means any review assessing the applicant's compliance with laws prohibiting discrimination on the basis of race, color, national origin, sex, age, or handicap. The review should be listed if any part of it covered the entity.

VI. Check the "No" box.

*Note: Questions VII-XI are for informational use and will not affect your grant status. However, you should answer all questions on this form

VII. Check the "Yes" box

- a. Check the "Yes" box or the "No" box, as applicable.
- b. Check the "Yes" box or the "No" box, as applicable.
- c. Check the "Yes" box or the "No" box, as applicable.

VIII. Enter NA for "Not Applicable."

IX. Enter NA for "Not Applicable."

X. Enter NA for "Not Applicable."

XI. Enter NA for "Not Applicable."

**Preaward Compliance Review Report for
All Applicants and Recipients Requesting EPA Financial Assistance**
Note: Read instructions on other side before completing form.

I. Applicant/Recipient (Name, Address, State, Zip Code). Woodtown Landfill Coalition, Main Street, Litchfield, CT 06898	DUNS No.
II. Is the applicant currently receiving EPA assistance? No	
III. List all civil rights lawsuits and administrative complaints pending against the applicant/recipient that allege discrimination based on race, color, national origin, sex, age, or disability. (Do not include employment complaints not covered by 40 C.F.R. Parts 5 and 7. See instructions on reverse side.) N/A	
IV. List all civil rights lawsuits and administrative complaints decided against the applicant/recipient within the last year that allege discrimination based on race, color, national origin, sex, age, or disability and enclose a copy of all decisions. Please describe all corrective action taken. (Do not include employment complaints not covered by 40 C.F.R. Parts 5 and 7. See instructions on reverse side.) N/A	
V. List all civil rights compliance reviews of the applicant/recipient conducted by any agency within the last two years and enclose a copy of the review and any decisions, orders, or agreements based on the review. Please describe any corrective action taken. (40 C.F.R. § 7.80(c)(3)) N/A	
VI. Is the applicant requesting EPA assistance for new construction? If no, proceed to VII; if yes, answer (a) and/or (b) below. <div style="display: flex; justify-content: space-around;"> Yes <input checked="" type="checkbox"/> No </div> a. If the grant is for new construction, will all new facilities or alterations to existing facilities be designed and constructed to be readily accessible to and usable by persons with disabilities? If yes, proceed to VII; if no, proceed to VI(b). Yes No b. If the grant is for new construction and the new facilities or alterations to existing facilities will not be readily accessible to and usable by persons with disabilities, explain how a regulatory exception (40 C.F.R. § 7.70) applies. Yes No	
VII.* Does the applicant/recipient provide initial and continuing notice that it does not discriminate on the basis of race, color, national origin, sex, age, or disability in its programs or activities? (40 C.F.R. § 5.140 and § 7.95) <input checked="" type="checkbox"/> Yes No a. Do the methods of notice accommodate those with impaired vision or hearing? <input checked="" type="checkbox"/> Yes No b. Is the notice posted in a prominent place in the applicant's offices or facilities or, for education programs and activities, in appropriate periodicals and other written communications? <input checked="" type="checkbox"/> Yes No c. Does the notice identify a designated civil rights coordinator? <input checked="" type="checkbox"/> Yes No	
VIII.* Does the applicant/recipient maintain demographic data on the race, color, national origin, sex, age, or handicap of the population it serves? (40 C.F.R. § 7.85(a)) N/A	
IX.* Does the applicant/recipient have a policy/procedure for providing access to services for persons with limited English proficiency? (40 C.F.R. Part 7, E.O. 13166) N/A	
X.* If the applicant/recipient is an education program or activity, or has 15 or more employees, has it designated an employee to coordinate its compliance with 40 C.F.R. Parts 5 and 7? Provide the name, title, position, mailing address, e-mail address, fax number, and telephone number of the designated coordinator. N/A	
XI* If the applicant/recipient is an education program or activity, or has 15 or more employees, has it adopted grievance procedures that assure the prompt and fair resolution of complaints that allege a violation of 40 C.F.R. Parts 5 and 7? Provide a legal citation or Internet address for, or a copy of, the procedures. N/A	

For the Applicant/Recipient

I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law. I assure that I will fully comply with all applicable civil rights statutes and EPA regulations.

A. Signature of Authorized Official	B. Title of Authorized Official Executive Director	C. Date
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For the U.S. Environmental Protection Agency

I have reviewed the information provided by the applicant/recipient and hereby certify that the applicant/recipient has submitted all preaward compliance information required by 40 C.F.R. Parts 5 and 7; that based on the information submitted, this application satisfies the preaward provisions of 40 C.F.R. Parts 5 and 7; and that the applicant has given assurance that it will fully comply with all applicable civil rights statutes and EPA regulations.

A. Signature of Authorized EPA Official	B. Title of Authorized EPA Official	C. Date
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See ** note on reverse side

Required Forms (continued)

Certification Regarding Lobbying

If you are submitting your application in hard copy, your authorized representatives MUST SIGN AND SUBMIT this certification with your group's TAG application. If you are submitting your application via the Grants.gov Web site, your authorized representative's signature will be added automatically when he/she completes the final application.

Contact the Remedial Project Manager (RPM) or Regional TAG Coordinator for the site to obtain the EPA Project Number.

CTDxxxxxxx

EPA Project Control Number

CERTIFICATION REGARDING LOBBYING

CERTIFICATION FOR CONTRACTS, GRANTS, LOANS, AND COOPERATIVE AGREEMENTS

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including sub-contracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31 U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Pat Jones, Executive Director

Typed Name & Title of Authorized Representative

Pat Jones

November 30, 2012

Signature of Authorized Representative

Date

Required Forms (continued)

EPA 5700-54, Key Contacts Form

This form provides the government with the name, title, address, and telephone number of the individuals responsible for key parts of your grant.

Enter the requested information for your group's authorized representative, the individual in your group who will be verifying the receipt of payments, and the person in your group whom EPA should contact with any questions about administrative and budgetary matters related to your grant. **NOTE: You may not list the same person for all three positions.**

Enter "NA" in the space for contact information for a Principal Investigator.



KEY CONTACTS FORM

Authorized Representative: *Original awards and amendments will be sent to this individual for review and acceptance, unless otherwise indicated.*

Name: Pat Jones

Title: Executive Director

Complete Address: Woodtown Landfill Coalition
Main Street, Litchfield, CT 06898

Phone Number: 203-xxx-xxxx

Payee: *Individual authorized to accept payments.*

Name: Mary Jones

Title: _____

Mail Address: Woodtown Landfill Coalition
Main Street, Litchfield, CT 06898

Phone Number: 203-xxx-xxxx

Administrative Contact: *Individual from Sponsored Program Office to contact concerning administrative matters (i.e., indirect cost rate computation, rebudgeting requests etc.)*

Name: Fred Smith

Title: _____

Mailing Address: Woodtown Landfill Coalition
Main Street, Litchfield, CT 06898

Phone Number: 203-xxx-xxxx

FAX Number: _____

E-Mail Address: _____

Principal Investigator: *Individual responsible for the technical completion of the proposed work.*

Name: NA

Title: _____

Mailing Address: _____

Phone Number: _____

FAX Number: _____

E-Mail Address: _____

Web URL: _____

Prepare and Submit the Final TAG Application (Step 7)

Submitting in Hard-Copy Format (by Mail):

If you plan to submit your completed application in hard-copy format (via mail) to your EPA Regional Office, download a blank copy of each of the forms you will need using the hyperlinks to the forms listed on page 4. Fill out each of the forms using the information from the draft copy you already prepared.

Make sure all required forms that require a signature have been signed by the authorized representative for your group.

Send your completed application package, including all sections of the Project Narrative Attachment Statement and attachments, the Budget Narrative Attachment Form, and all the required forms to the Agency Contact provided by your Regional TAG Coordinator.

Submitting Electronically through the Grants.gov Web Site:

If you plan to submit your application electronically, you must access, fill out, and submit final versions of the required forms through the Grants.gov Web site.

- 1) Go to www.grants.gov. Click on “Apply for Grants” on the left side of the page. Then click on “Apply Step 1: Download a Grant Application Package and Instructions.” Click on “PureEdge Viewer.” You must download this viewer software in order to access the application package. Once the “PureEdge Viewer” has been installed, you can retrieve the application package by entering the Catalogue of Federal Domestic Assistance (CFDA) number (CFDA 66.806) or the appropriate Funding Opportunity Number (for example, EPA-XXX-06-xx), provided by your EPA Regional TAG Coordinator, in the space provided and clicking on “Download Package.”

You will then see a page like the one shown on the next page. The top half of the page contains all the identifying information about the TAG for which you are applying. The lower half of the page contains the information needed for your application.

In the box beside “Application Filing Name:” enter organization's name (abbreviate where possible), the fiscal year (e.g., FY07), and the grant category (e.g., Environment). The filing name should not exceed 40 characters.

Submission _ □ ×

PDF FORM POWERED

Submit Save Print Cancel Check Package for Errors

GRANTS.GOV™ **Grant Application Package**

<p>Opportunity Title: Superfund Technical Assistance Grant</p> <p>Offering Agency: Environmental Protection Agency</p> <p>CFDA Number: 68.806</p> <p>CFDA Description:</p> <p>Opportunity Number: xxx-xxx-xxx</p> <p>Competition ID:</p> <p>Opportunity Open Date: 1-03-07</p> <p>Opportunity Close Date:</p> <p>Agency Contact: Please contact Jane Smith at xxx-xxx-xxxx</p>	<p>This electronic grants application is intended to be used to apply for the specific Federal funding opportunity referenced here.</p> <p>If the Federal funding opportunity listed is not the opportunity for which you want to apply, close this application package by clicking on the "Cancel" button at the top of this screen. You will then need to locate the correct Federal funding opportunity, download its application and then apply.</p>
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I will be submitting applications on my behalf, and not on behalf of a company, state, local or tribal government, academia, or other type of organization

* Application Filing Name: _____

<p>Mandatory Documents</p> <ul style="list-style-type: none"> Application for Federal Assistance (SF-424) Project Narrative Attachment Form Budget Narrative Attachment Form Budget Information for Non-Construction Programs (SF-424A) Assurances for Non-Construction Programs (SF-424B) Pre-Award Compliance Review Report (EPA Form 4700-4) Certification Regarding Lobbying (Grants.gov Lobbying Form) <p style="text-align: right;">Open Form</p>	<p>Move Form to Submission List</p> <p>⇒</p> <p>Move Form to Documents List</p> <p>⇐</p>	<p>Mandatory Completed Documents for Submission</p> <div style="border: 1px solid gray; height: 60px;"></div> <p style="text-align: right;">Open Form</p>
<p>Optional Documents</p> <ul style="list-style-type: none"> Other Attachments Form <p style="text-align: right;">Open Form</p>	<p>Move Form to Submission List</p> <p>⇒</p> <p>Move Form to Documents List</p> <p>⇐</p>	<p>Optional Completed Documents for Submission</p> <div style="border: 1px solid gray; height: 60px;"></div> <p style="text-align: right;">Open Form</p>

Prepare and Submit the Final TAG Application (Step 7)

Submitting your TAG application (continued)

You will see the following forms and documents required for your application listed in the "Mandatory Documents" box.

1. **Standard Form (SF) 424, Application for Federal Assistance** - See instructions and sample on pages 28-35. (Please note that the organizational DUNS number must be included on the SF-424. Organizations may obtain a DUNS number at no cost. See page 3 for more information.)
2. **Project Narrative Attachment Statement** - See instructions and sample on pages 8-25.
3. **Budget Narrative Attachment Form** - See instructions and sample on pages 26-27.
4. **SF-424A, Budget Information for Non-Construction Programs** - See instructions and sample on pages 36-39.
5. **SF-424B, Assurances for Non-Construction Programs** - See instructions and sample on pages 40-41.
6. **EPA Form 4700-4, Pre-Award Compliance Review Report** - See instructions and sample on pages 42-43.
7. **Certification Regarding Lobbying** - See instructions and sample on pages 44-45.
8. **EPA Form 5700-54, Key Contacts Form** - See instructions and sample on pages 46-47.

For documents 1 and 4-8, click on the appropriate form and then click "Open Form" below the box.

1. The fields that must be completed will be highlighted in yellow. Use the information from your draft to fill in these fields.
2. Optional fields and completed fields will be displayed in white.
3. If you enter an invalid response or incomplete information in a field, you will receive an error message
4. When you have finished filling out each form, click "Save."
5. When you return to the electronic Grant Application Package page, click on the form you just completed, and then click on the box that says, "Move Form to Submission List."
6. This action will move the document over to the box that says, "Mandatory Completed Documents for Submission."

For documents 2, the Project Narrative Attachment Statement, and document 3, the Budget Narrative Attachment Form, you will need to attach electronic files.

1. Using the draft copy you already have prepared, prepare your final Project Narrative Attachment Statement, combining all four sections of the document into one file, and save it on your computer as an MS Word or WordPerfect file. (U.S. EPA prefers to receive documents in MS Word, but documents prepared in WordPerfect will also be accepted.)
2. When you are ready to attach your Project Narrative Attachment Statement to the application package, click on "Project Narrative Attachment Statement," and open the form.
3. Enter "TAG at (your site name)" in the space beside "Mandatory Project Narrative File Filename;" the filename should be no more than 40 characters long, so abbreviate if necessary.
4. Click "Add Mandatory Project Narrative File," and then attach the final Project Narrative Attachment Statement (previously saved to your computer) using the browse window that appears.
5. You may then click "View Mandatory Project Narrative File" to view it.
6. You will need to attach, in turn, an electronic copy of your organization's bylaws and a copy of the letter from the state approving the group for incorporation (See pages XX and XX). To do so, click "Add Optional Project Narrative File" and then attach each of these documents (previously saved to your computer) using the browse window that appears.
7. When you have finished, click "Close Form."
8. When you return to the "Grant Application Package" page, select the "Project Narrative Attachment Statement" and click "Move Form to Submission List."
9. This will move the file over to the box that says, "Mandatory Completed Documents for Submission."
10. Follow the same general procedures for finalizing and attaching your Budget Narrative Attachment Form file and moving it into the "Mandatory Completed Documents for Submission" box.

Submission
POWERED

Submit
Save
Print
Cancel
Check Package for Errors

Grant Application Package

Opportunity Title:	Superfund Technical Assistance Grant
Offering Agency:	Environmental Protection Agency
CFDA Number:	68.806
CFDA Description:	
Opportunity Number:	EPA-xxx-xxxx-xxx
Competition ID:	
Opportunity Open Date:	1-03-07
Opportunity Close Date:	
Agency Contact:	Please contact Jane Smith at 202-xxx-xxxx

This electronic grants application is intended to be used to apply for the specific Federal funding opportunity referenced here.

If the Federal funding opportunity listed is not the opportunity for which you want to apply, close this application package by clicking on the "Cancel" button at the top of this screen. You will then need to locate the correct Federal funding opportunity, download its application and then apply.

I will be submitting applications on my behalf, and not on behalf of a company, state, local or tribal government, academia, or other type of organization

* Application Filing Name: Woodtown Landfill Coalition

<p>Mandatory Documents</p> <div style="border: 1px solid gray; height: 40px; margin-bottom: 5px;"></div> <p style="text-align: center; margin: 0;">Open Form</p>	<p>Move Form to Submission List</p> <p style="margin: 0;">=></p> <p>Move Form to Documents List</p> <p style="margin: 0;"><=</p>	<p>Mandatory Completed Documents for Submission</p> <div style="border: 1px solid gray; padding: 2px; margin-bottom: 5px;"> Application for Federal Assistance (SF-424) Project Narrative Attachment Form Budget Narrative Attachment Form Budget Information for Non-Construction Programs (SF-424A) Assurances for Non-Construction Programs (SF-424B) Pre-Award Compliance Review Report (EPA Form 4700-4) Certification Regarding Lobbying (Grants.gov Lobbying Form) </div> <p style="text-align: center; margin: 0;">Open Form</p>
<p>Optional Documents</p> <div style="border: 1px solid gray; height: 40px; margin-bottom: 5px;"></div> <p style="text-align: center; margin: 0;">Open Form</p>	<p>Move Form to Submission List</p> <p style="margin: 0;">=></p> <p>Move Form to Documents List</p> <p style="margin: 0;"><=</p>	<p>Optional Completed Documents for Submission</p> <div style="border: 1px solid gray; padding: 2px; margin-bottom: 5px;"> Woodtown Coalition By Laws State Incorporation Approval Letter </div> <p style="text-align: center; margin: 0;">Open Form</p>

Prepare and Submit the Final TAG Application (Step 7)

Submitting your TAG application (continued)

Once you have finished filling out all of the forms, all the completed forms should appear in either the "Mandatory Completed Documents for Submission." When you have finished attaching a copy of the letter from the state approving your group for incorporation and a copy of your group's bylaws, these two documents should appear in the "Optional Completed Documents for Submission" box.

Now click the "Save" button that appears at the top of the Web page. **(NOTE: You must submit a complete application; you may not complete and submit only parts of it.)** Please use the following format when saving your file: "(your organization name) - FYXX - (grant category) - 1st Submission" (for example, the files for the Woodtown Landfill Coalition would be named "Woodtown Landfill Coalition - FY07 - Environment - 1st Submission").

It is wise to save the document a second time, using a different name, such as "(your organization name) - FYXX - (grant category) - Back-up Submission" (for example, "Woodtown Landfill Coalition - FY07 - Environment - Back-up Submission"). This will make it easier to submit an amended package later if necessary. If it becomes necessary to submit an amended package at a later date, you can use your Back-up Submission file and rename it "(your organization name) - FYXX - Environment - 2nd Submission" when you submit the amended application.

Once your application package has been completed and saved, close all other software programs on your computer before attempting to submit the application.

Your AOR then may submit the application package by clicking the "Submit" button that appears at the top of the page. (REMEMBER: Your AOR must have completed the Grants.gov registration process before he or she can submit an application.) The AOR will then be asked to verify the agency and funding opportunity number for which the application package is being submitted. If problems are encountered during the submission process, the AOR should reboot his/her computer before trying to submit the application package again. (It may be necessary to turn off the computer (not just restart it) before attempting to submit the package again.) If the AOR continues to experience submission problems, he/she may contact Grants.gov for assistance by phone at 1-800-518-4726 or email at support@grants.gov.

Within 24 to 48 hours after Grants.gov has received your submission, Grants.gov will send you two email messages. The first will confirm receipt of your application by the Grants.gov system, and the second will indicate that the application has either been successfully validated by the system prior to transmission to the grantor agency or has been rejected due to errors. You also can check the status of your application anytime after submission, by logging into Grants.gov using the black "Applicants" link at the top of any page, and clicking on the "Check Application Status" link.

When your application is successfully validated and retrieved by EPA from the Grants.gov system, EPA will send you an email. How quickly you receive EPA's email will depend on when the Agency retrieves your application from the Grants.gov system for processing; it may take several days or weeks from the date of submission. Note that Grants.gov does not participate in making any award decisions. **If you have not received a confirmation of receipt from EPA within 30 days of the application deadline, please contact the Agency Contact provided by your Regional TAG Coordinator or listed in the grant application package on the Grants.gov Web site. Failure to do so may result in your application not being reviewed.**

