**Collection System Rehabilitation and Replacement and Collection System Expansion Tables**

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1. Upfront Information

Complete as required by Part B of the guidance.

1. Executive Summary

Complete in narrative format as required by Part B of the guidance.

1. Current Situation
	1. Collection System Rehabilitation and Replacement

| **Table 2.1. System Overview** |
| --- |
| **Project Name** |
| **Owner Name** |
| *For use for projects funded or co-funded with the CWSRF, WW-SRP, WW-SEL, or CDBG-I programs.* |
| Appendix reference for figures: |       |
| Appendix reference for supporting information: |       |
| *Complete this table in accordance with the instructions provided in Subchapter 2.1.1 of Part B of the guidance.* |
| *Pump Stations* |
| Key | Pump Station Name | Capacity(gpm) | Force Main Length(l.f.) | Force Main Diameter(s)(inches) | Force Main Material(if known) | Force Main Age(if known) |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
| *Gravity Sewers* |
| Length(l.f.) | Diameter(inches) | Material(if known) | Age(if known) |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

To [Section 2.2](#Section_2_2) (Collection System Expansion), if applicable.

| Table 2.2. SSO Description and Special Orders |
| --- |
| Project Name |
| Owner Name |
| ***For use with projects funded or co-funded by the CWSRF, WW-SRP, WW-SEL, and CDBG-I programs.*** |
| *Provide the SSOs that have occurred in accordance with Subchapter 2.1.2 of Part B of the guidance.* |
| Figure number for SSO map: |       |
| Appendix Number for SSO Reports and Special Orders: |  |
| **Date** | **Location** | **Brief Description of Cause** | **Estimated Amount Spilled (gal).** | **Map Key** |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
| *Provide information related to special orders in accordance with Subchapter 2.1.2 of Part B of the guidance.* |
| Does the Applicant have a SOC, pending SOC, Administrative Order or other special order?[ ]  Yes, SOC is in place.[ ]  Yes, SOC is pending.[ ]  No |
| *If Yes, provide the information discussed in Subchapter 2.1.2 of Part B of the guidance.* |
|       |

To [Section 2.2](#Section_2_2) (Collection System Expansion), if applicable.

| Table 2.3. Collection System Issue Description  |
| --- |
| Project Name |
| Owner Name |
| ***For use with projects funded or co-funded by the CWSRF, WW-SRP, WW-SEL, or CDBG-I programs.*** |
| Supporting Information Appendix Reference: |       |
| *Provide additional information regarding collection system issues as discussed in Subchapter 2.1.3 of Part B of the guidance.* |
|       |

\*\*\*The next three subchapters contain tables to fit a variety of situations. Use tables from only one of the three subchapters. Three asterisks denote then the tables you must use pick up again.\*\*\*

* + 1. SSES Completed

| Table 2.4.1 Summary of Work Accomplished with the SSESa |
| --- |
| Project Name |
| Owner Name |
| ***For use with projects funded or co-funded by the CWSRF, WW-SRP, WW-SEL, or CDBG-I programs.*** |
| SSES Appendix Reference: |       |
| *Per Subchapter 2.1.4.1 of Part B of the guidance, provide a summary of the work accomplished with/through the Sewer System Evaluation Survey.*  |
|       |
| aFor use with the requirements of Subchapter 2.1.4.1 of Part B of the guidance only. |

| **Table 2.4.2. Priority Evaluation Results for Sewers Needing Rehabilitation/Replacementa** |
| --- |
| **Project Name** |
| **Owner Name** |
| ***For use with projects funded or co-funded by the CWSRF, WW-SRP, WW-SEL, or CDBG-I programs.*** |
| *Per Subchapter 2.1.4.1 of Part B of the guidance, provide the information below.* |
| **Gravity****Sewer Location I.D.** | **Sewer Score** | **Recommended Solution** | **Cost** | **Part of Proposed Project?** |
|  |  |  |  | **[ ]  Yes** | **[ ]  No** |
|  |  |  |  | **[ ]  Yes** | **[ ]  No** |
|  |  |  |  | **[ ]  Yes** | **[ ]  No** |
|  |  |  |  | **[ ]  Yes** | **[ ]  No** |
|  |  |  |  | **[ ]  Yes** | **[ ]  No** |
| **Total Cost of Collection System Needing Rehabilitation/Replacement:** |  |  |  |
| **Total Cost of Collection System To Be Replaced/Rehabilitated as Part of Project:** |  |  |  |
| aFor use with the requirements of Subchapter 2.1.4.1 of Part B of the guidance only. |

* + 1. Portions of SSES Completed

| **Table 2.4.1. Summary of Work Accomplished to Prioritize Collection System Components for Rehabilitation/Replacementa** |
| --- |
| **Project Name** |
| **Owner Name** |
| ***For use with projects funded or co-funded with the CWSRF, WW-SRP, WW-SEL, or CDBG-I programs.*** |
| Additional Information Appendix Reference: |       |
| *Discuss the methodology and results of steps taken to prioritize collection system components for rehabilitation/replacement (see Subchapter 2.1.4.2 of Part B of the guidance).* |
|       |
| aFor use with Subchapter 2.1.4.2 of Part B of the guidance only. |

| **Table 2.4.2. Priority Evaluation Results for Sewers Needing Rehabilitation/Replacementa** |
| --- |
| **Project Name** |
| **Owner Name** |
| ***For use with projects funded or co-funded by the CWSRF, WW-SRP, WW-SEL, or CDBG-I programs.*** |
| *Per Subchapter 2.1.4.2 of Part B of the guidance, provide the information below.* |
| **Gravity****Sewer Location I.D.** | **Priority Score** | **Cost** | **Part of Proposed Project?** |
|  |  |  | **[ ]  Yes** | **[ ]  No** |
|  |  |  | **[ ]  Yes** | **[ ]  No** |
|  |  |  | **[ ]  Yes** | **[ ]  No** |
|  |  |  | **[ ]  Yes** | **[ ]  No** |
|  |  |  | **[ ]  Yes** | **[ ]  No** |
| **Total Cost of Collection System Needing Rehabilitation/Replacement:** |  |  |  |
| **Total Cost of Collection System To Be Replaced/Rehabilitated as Part of Project:** |  |  |  |
| aFor use with the requirements of Subchapter 2.1.4.2 of Part B of the guidance only. |

* + 1. No SSES Work Completed

| **Table 2.4.1. Summary of Plans to Analyze and Prioritize Collection System Components for Rehabilitation/Replacementa** |
| --- |
| **Project Name** |
| **Owner Name** |
| *For use with projects funded or co-funded by the CWSRF, WW-SRP, WW-SEL, or CDBG-I programs.* |
| Figure Reference: |       | Supporting Information Appendix Reference: |       |
| *Discuss the step the LGU is taking or plans to take toward analyzing and prioritizing collection system components for rehabilitation/replacement (see 2.1.4.3 of Part B of the guidance).* |
|       |
| aFor use with the requirements of Subchapter 2.1.4.3 of Part B of the guidance only. |

\*\*An optional 2.4.2 may be included to show a tabular listing of the work that will be performed.

\*\*\*

For collection system rehabilitation/replacement, the tables below are required.

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* 1. Collection System Expansion

System Overview – Complete [Table 2.1 System Overview](#Table_2_1_2_1) above.

General Overflow History – Complete [Table 2.2 SSO Description and Special Orders](#Table_2_1_2_2) above.

| Table 2.3. Unsewered Areas and Failing Septic System Description |
| --- |
|  |
|  |
| ***For use with projects funded or co-funded by the CWSRF, WW-SRP, WW-SEL, or CDBG-I programs.*** |
| *Provide information related to unsewered areas and septic systems in accordance with Subchapter 2.2.2 of Part B of the guidance.* |
| Figure Number for Unsewered Areas map: |       |
| Are there any failing septic systems within the unsewered areas? [ ]  Yes [ ]  No |
| If Yes, Appendix Reference for failing septic systems letter: |       |
| *Discuss any unsewered areas and failing septic systems.* |
|        |

Table 2.4 (WWTP Flow) will be found in the Collection System Expansion workbook.

For small service areas, Table 2.5 will be found in the Current Population – Method 1 worksheet in the Collection System Expansion workbook.

For large service areas, Table 2.5 will be found in the Current Population – Method 2 worksheet in the Collection System Expansion workbook.

Table 2.6 (Current Flow) will be found in the Collection System Expansion workbook.

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1. Future Situation
	1. Collection System Rehabilitation and Replacement

| **Table 3.1. Future Flow** |
| --- |
| **Project Name** |
| **Owner Name** |
| ***For use with projects funded or co-funded by the CWSRF, WW-SRP, WW-SEL, or CDBG-I programs.*** |
| Supporting Information Appendix Reference: |       |
| Project Contains: | [ ]  Pump Stations/Force Mains | [ ]  Gravity Sewers |
| *Complete this table in accordance with Section 6.4 of the guidance.* |
| ***Pump Stations/Force Mains*** |
| **Name** | **Firm Pumping Capacity****(gpm)** | **Current Peak Flow****(gpm)** | **Future Peak Flow****(gpm)** | **% Change in Flow** | **% Capacity Utilized** |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
| ***Gravity Sewers*** |
| **Name** | **Capacity****(gpd)** | **Current Peak Flow****(gpd)** | **Future Peak Flow****(gpd)** | **% Change in Flow** | **% Capacity Utilized** |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
| *Describe the methodology used to determine the future flow(s) listed above.* |
|       |
| *Provide any additional information related to future flow determinations.* |
|       |

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* 1. Collection System Expansion

Complete Tables 3.1, 3.2, and 3.3 as found in the Collection System Expansion workbook.

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* 1. Energy Efficiency

Complete the narrative as required by the guidance.

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1. Need and Purpose

Use narrative to complete this section according to the guidance.

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1. Alternatives Analysis
	1. Alternatives Description

| **Table 5.x. Alternatives Description** |
| --- |
| Project Name |
| Owner Name |
| No-Action Alternative |
| ***Use this table for projects funded or co-funded by the WW-SRP, WW-SEL, and CDBG-I programs.*** |
| *Provide a description of the above alternative in accordance with Subchapter 5.1 of Part B of the guidance.*  |
| Supporting Information Appendix Reference: |       |
| **Description** |
|       |
| Is Figure Included? [ ]  Yes [ ]  No | If Yes, Figure #:       |
| **Alternative Feasibility:** [ ]  Feasible [ ]  Infeasible |
| **Capital Cost:** |       | **Present Worth:** |       |
| **Environmental Impact Description** |
| *Provide a qualitative description of the environmental impacts and compare the impacts to that of the Preferred Alternative.* |
|  |
| **Environmental Impact Analysis** |
| **[ ]** Greater than Preferred Alternative[ ]  Less than Preferred Alternative[ ]  Same as Preferred Alternative[ ]  Preferred Alternative |
| **Acceptance/Rejection** |
| **Alternative: [ ]** Accepted [ ]  Rejected |
| **Rationale for Acceptance/Rejection** |
| *Discuss the rationale for acceptance/rejection of the above-referenced alternative.* |
|       |

| **Table 5.y. Alternatives Description** |
| --- |
| Project Name |
| Owner Name |
| No-Action Alternative |
| ***Use this table for projects funded or co-funded by the CWSRF program only.*** |
| *Provide a description of the above alternative in accordance with Subchapter 5.1 of Part B of the guidance.*  |
| Supporting Information Appendix Reference: |       |
| **Description** |
|       |
| Is Figure Included? [ ]  Yes [ ]  No | If Yes, Figure #:       |
| **Alternative Feasibility:** [ ]  Feasible [ ]  Infeasible |
| **Capital Cost:** |       | **Present Worth:** |       |
| **Water Use, Reuse, Recapture, and Conservation****(CWSRF funded and co-funded projects only)** |
| *Check the box that most appropriately describes the water use, reuse, recapture, and conservation capabilities of the project.* |
| [ ]  The project type is not applicable to water use, reuse, recapture, and conservation. Therefore, no analysis has been completed.[ ]  The scope of the project is not applicable to water use, reuse, recapture, and conservation. Therefore, no analysis has been completed.[ ]  The project type or project scope requires an analysis of water use, reuse, recapture, and conservation. The analysis is briefly discussed below.  |
| *If the third box above is checked, then check the appropriate box below and briefly provide a qualitative discussion about the water use, reuse, recapture, and conservation abilities of the alternative.* |
| [ ]  This is the No-Action Alternative.[ ]  This alternative provides more water use, reuse, recapture, and/or conservation than the Preferred Alternative.[ ]  This alternative provides less water use, reuse, recapture, and/or conservation than the Preferred Alternative.[ ]  This alternative provides the same water use, reuse, recapture, and/or conservation as the Preferred Alternative.[ ]  This alternative is the Preferred Alternative. |
| *Water Use, Reuse, Recapture, and Conservation Discussion* |
|       |
| **Energy Conservation (CWSRF funded and co-funded projects only)** |
| *Check the box that most appropriately describes the energy conservation capabilities of the project.* |
| [ ]  The project type is not applicable to energy conservation. Therefore, no analysis has been completed.[ ]  The scope of the project is not applicable to energy conservation. Therefore, no analysis has been completed.[ ]  The scope of the project is applicable to energy conservation. The analysis is briefly discussed below.[ ]  The project type is applicable to energy conservation. The analysis is briefly discussed below. |
| *If the third box and/or fourth boxes above are checked, then check the appropriate box below and briefly provide a qualitative discussion about the energy conservation abilities of the alternative.* |
| [ ]  This is the No-Action Alternative[ ]  This alternative provides more energy conservation than the Preferred Alternative.[ ]  This alternative provides less energy conservation than the Preferred Alternative.[ ]  This alternative provides the same energy conservation as the Preferred Alternative.[ ]  This alternative is the Preferred Alternative. |
| *Energy Conservation Discussion* |
|       |
| **Environmental Impact Description** |
| *Provide a qualitative description of the environmental impacts and compare the impacts to that of the Preferred Alternative.* |
|  |
| **Environmental Impact Analysis** |
| **[ ]** Greater than Preferred Alternative[ ]  Less than Preferred Alternative[ ]  Same as Preferred Alternative[ ]  Preferred Alternative |
| **Acceptance/Rejection** |
| **Alternative: [ ]** Accepted [ ]  Rejected |
| **Rationale for Acceptance/Rejection** |
| *Discuss the rationale for acceptance/rejection of the above-referenced alternative.* |
|       |

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* 1. Present Worth Analysis

Complete the present worth analysis by using the Present Worth Analysis workbook.

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1. Proposed Project Description

Complete the proposed project description by using a narrative format and following Chapter 6.0 of Part B of the guidance.

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1. Environmental Information Document

| Table 7.1. Topography and Floodplains |
| --- |
| Project Name |
| Owner Name |
| ***Use this table for projects funded or co-funded by the CWSRF, WW-SRP, or WW-SEL programs.*** |
| *Complete this table in accordance with Subchapter 7.4.1 of Part B of the guidance.*  |
| Floodplain Figure Reference Number (if applicable): |       |
| Floodplain Information Appendix Reference (if applicable): |       |
| ***Existing Conditions*** |
| *Physiographic Province:* | [ ]  Coastal Plain [ ]  Piedmont [ ]  Mountains |
| *Minimum Elevation in Project Area (MSL):* | *Maximum Elevation in Project Area (MSL):* |
|       |       |
| *Is the project in the 100-year floodplain? (If so, show in Environmental Features Figure.)* | [ ]  Yes[ ]  No |
| *Is the project in the 100-year floodway? (If so, show in Environmental Features Figure.)* | [ ]  Yes[ ]  No |
| *Discuss other topographical and geological features.* |
|       |
| ***Impacts*** |
| *Describe temporary and permanent construction impacts of project on topography.* |
|       |
| *Describe temporary and permanent impacts of project on the 100-year floodplain and floodway if “Yes” is checked above. If permanent impacts are proposed, explain alternatives that were considered and why those alternatives are not practicable.* |
|       |
| *Describe SCI of the project.* |
|       |
| ***Mitigative Measures*** |
| *Mitigative Measures for Construction Impacts?* | *Mitigative Measures for SCI?* |
| [ ]  Yes[ ]  Not Applicable | [ ]  Yes[ ]  Not Applicable |
| *Describe the mitigative measures below and supply references to the appropriate appendix in the ER/EID.* |
| *Mitigative Measure Description* | *Reference(s)* |
|       |       |

| Table 7.2. Soils |
| --- |
| Project Name |
| Owner Name |
| ***For use with projects funded or co-funded by the CWSRF program and/or projects requiring a FONSI.*** |
| *Complete this table in accordance with Subchapter 7.4.2 of Part B of the guidance.* |
| Soils Figure Reference Number: |       |
| Soils Information Appendix Reference (if applicable): |       |
| ***Existing Conditions*** |
| *Identify and describe the primary types of soil. Provide a soils figure in the EID.* |
|       |
| *Is soil contamination present?* | [ ]  Yes [ ]  No |
| *Does soil type present any constraints to the project?* | [ ]  Yes [ ]  No |
| *If yes to either of the above, explain:* |
|       |
| ***Impacts*** |
|  |
| *Will soil be moved offsite?* | [ ]  Yes [ ]  No | *Quantity (yd3):* |       |
| *Will soil be contaminated?* | [ ]  Yes [ ]  No |
| *Describe temporary and permanent construction impacts of project.* |
|       |
| *Describe SCI of the project.* |
|       |
| ***Mitigative Measures*** |
| *Mitigative Measures for Construction Impacts?* | *Mitigative Measures for SCI?* |
| [ ]  Yes[ ]  Not Applicable | [ ]  Yes[ ]  Not Applicable |
| *Describe the mitigative measures below and supply references to the appropriate appendix in the ER/EID.* |
| *Mitigative Measure Description* | *Reference(s)* |
|       |       |

| Table 7.3. Prime and Unique Farmland |
| --- |
| Project Name |
| Owner Name |
| ***For use with projects funded or co-funded with CWSRF program and/or for projects requiring a FONSI.*** |
| *Complete this table in accordance with Subchapter 7.4.3 of Part B of the guidance.* |
| Prime and Unique Farmland Information Appendix Reference (if applicable): |       |
| ***Existing Conditions & Impacts*** |
| 1. *Does the project area contain prime and unique (P&U) farmlands? If yes, show on soils figure the soil types that are prime and unique farmland. (If “No” skip the rest of the table.)*
 | [ ]  Yes[ ]  No | If Yes, Quantity (acres): |       |
| 1. *Is P&U farmland in agricultural use?*
 | [ ]  Yes[ ]  No |  |  |
| 1. *Will P&U farmland be directly impacted by the project? (If “No” skip questions 3-4.)*
 | [ ]  Yes[ ]  No | If Yes, Quantity (acres): |       |
| 1. *What is the total acreage of P&U farmland in the county?*
 | Acres Impacted: |       |
| 1. *What is the percentage of P&U farmland in the county that will be impacted? (Divide answer to Question 2 by answer to Question 3)*
 | Percentage Impacted: |       |
|  |
| *Will SCI impact prime and unique farmlands?* | [ ]  Yes[ ]  No | If Yes, Quantity (acres): |       |
| *Describe SCI of the project.* |
|       |
| ***Mitigative Measures*** |
| *Mitigative Measures for Construction Impacts?* | *Mitigative Measures for SCI?* |
| [ ]  Yes[ ]  Not Applicable | [ ]  Yes[ ]  Not Applicable |
| *Describe the mitigative measures below and supply references to the appropriate appendix in the ER/EID.* |
| *Mitigative Measure Description* | *Reference(s)* |
|       |       |

| Table 7.4. Land Use |
| --- |
| Project Name |
| Owner Name |
| ***For use with projects funded or co-funded with CWSRF program and/or projects requiring a FONSI.*** |
| *Complete this table in accordance with Subchapter 7.4.4 of Part B of the guidance.* |
| Land Use Figure Reference Number (if applicable): |       |
| Land Use Information Appendix Reference (if applicable): |       |
| ***Existing Conditions*** |
| *Discuss the current land use for the project site.* |
|       |
| *Discuss the current land use for the broader project area.* |
|       |
| *Discuss the zoning for the project site.* |
|       |
| *Discuss the zoning for the broader project area.* |
|       |
| ***Impacts*** |
| *Discuss the direct impacts to land use on the project site.* |
|       |
| *Describe SCI of the project.* |
|       |
| ***Mitigative Measures*** |
| *Mitigative Measures for Construction Impacts?* | *Mitigative Measures for SCI?* |
| [ ]  Yes[ ]  Not Applicable | [ ]  Yes[ ]  Not Applicable |
| *Describe the mitigative measures below and supply references to the appropriate appendix in the EID.* |
| *Mitigative Measure Description* | *Reference(s)* |
|       |       |

| Table 7.5. Forest Resources |
| --- |
| Project Name |
| Owner Name |
| ***For use with projects funded or co-funded by the CWSRF program and/or for projects requiring a FONSI.*** |
| *Complete this table in accordance with Subchapter 7.4.5 of Part B of the guidance.* |
| Forest Resources Information Appendix Reference (if applicable): |       |
| ***Existing Conditions*** |
| *Discuss the type of forest resources on the project site and in the project area* |
|       |
| *Discuss the types of wildlife habitat on the project site and in the project area.* |
|       |
| ***Impacts*** |
| *Will forest resources be impacted?* | [ ]  Yes[ ]  No | If Yes, Quantity (acres): |       |
| *Will SCI impact forest resources?* | [ ]  Yes[ ]  No | If Yes, Approximate Quantity (acres): |       |
| *Describe SCI of the project.* |
|       |
| ***Mitigative Measures*** |
| *Mitigative Measures for Construction Impacts?* | *Mitigative Measures for SCI?* |
| [ ]  Yes[ ]  Not Applicable | [ ]  Yes[ ]  Not Applicable |
| *Describe the mitigative measures below and supply references to the appropriate appendix in the EID.* |
| *Mitigative Measure Description* | *Reference(s)* |
|       |       |

| Table 7.6.1. Wetlands and Streams |
| --- |
| Project Name |
| Owner Name |
| ***For use with the CWSRF, WW-SRP, and WW-SEL programs.*** |
| *Complete this table in accordance with Subchapter 7.4.6 of Part B of the guidance.* |
| Wetlands and Streams Figure Reference Number: |       |
| Wetlands and Streams Information Appendix Reference (if applicable): |       |
| ***Existing Conditions*** |
| *Are wetlands present on the project site and in the project area?* | *Are streams present on the project site and in the project area?* |
| [ ]  Yes[ ]  No | [ ]  Yes[ ]  No |
| *If so, discuss the type, quality, function, and relative importance of wetlands and identify any streams.* |
|       |
| *Have delineations occurred?* | *If so, supply the date.* |
| [ ]  Yes [ ]  No |       |
| ***Impacts*** |
| *Will wetlands be impacted?* | [ ]  Yes[ ]  No | If Yes, Quantity (acres): |       |
| *Will streams be impacted?* | [ ]  Yes[ ]  No | If Yes, Quantity (linear feet): |       |
| *Will SCI impact wetlands?* | [ ]  Yes[ ]  No | If Yes, Approximate Quantity (acres): |       |
| *Will SCI impact streams?* | [ ]  Yes[ ]  No | If Yes, Approximate Quantity (linear feet): |       |
| *Describe Direct Impacts of the project (construction and operational impacts). If there will be any stream/wetland crossings, complete Table S.9.a in addition to the description.* |
|       |
| *Describe SCI of the project.* |
|       |
| ***Mitigative Measures*** |
| *Mitigative Measures for Construction Impacts?* | *Mitigative Measures for SCI?* |
| [ ]  Yes[ ]  Not Applicable | [ ]  Yes[ ]  Not Applicable |
| *Describe the mitigative measures below and supply references to the appropriate appendix in the EID.* |
| *Mitigative Measure Description* | *Reference(s)* |
|       |       |

| Table 7.6.2. Stream/Wetland Crossings |
| --- |
| Project Name |
| Owner Name |
| ***For use with the CWSRF, WW-SRP, and WW-SEL programs.*** |
| *Wetland Crossings (add rows as needed; include all crossings even if impact is zero acres.)* |
| Stream and Wetlands Crossing Figure Reference Number: |       |
| Stream and Wetlands Crossing Information Appendix Reference (if applicable): |       |
| # Keyed to Map | Diameter & Type of Sewer | Installation Method | Acres Impacted |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
| **Total Wetland Impacts (acres):** |  |
| *Stream Crossings (add rows as needed; include all crossings even if impact is zero feet.)* |
| # Keyed to Map | Diameter & Type of Sewer | Installation Method | Linear Feet Impacted |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
| **Total Stream Impacts (feet):** |  |

| Table 7.7. Water Resources |
| --- |
| Project Name |
| Owner Name |
| ***For use with projects funded or co-funded with CWSRF program and/or projects requiring a FONSI.*** |
| *Complete this table in accordance with Subchapter 7.4.7 of Part B of the guidance.* |
| Water Resources Appendix Information Appendix Reference (if applicable): |       |
| ***Existing Conditions*** |
| *River basin(s) for project:* |       |
| *List all stream(s) found within the project site and greater project area.* |
| *Name* | *Classification* | *Impaired?* | *Reason for Impairment* |
|       |       | [ ]  Yes [ ]  No |       |
|       |       | [ ]  Yes [ ]  No |       |
|       |       | [ ]  Yes [ ]  No |       |
|       |       | [ ]  Yes [ ]  No |       |
|       |       | [ ]  Yes [ ]  No |       |
| *Discuss groundwater quality and quantity.* |
|       |
| *Discuss surface water quality.* |
|       |
| *LGU water supply(ies):* |       |
| ***Impacts*** |
| *Discuss construction impacts related to surface water quality and groundwater quality/quantity.* |
|       |
| *Discuss operational impacts related to surface water quality and groundwater quality/quantity.* |
|       |
| *Describe SCI of the project.* |
|       |
| ***Mitigative Measures*** |
| *Mitigative Measures for Construction Impacts?* | *Mitigative Measures for SCI?* |
| [ ]  Yes[ ]  Not Applicable | [ ]  Yes[ ]  Not Applicable |
| *Describe the mitigative measures below and supply references to the appropriate appendix in the EID.* |
| *Mitigative Measure Description* | *Reference(s)* |
|       |       |

| Table 7.8. Wild & Scenic Rivers  |
| --- |
| Project Name |
| Owner Name |
| ***For use with projects funded or co-funded with CWSRF program and/or projects requiring a FONSI.*** |
| *Complete this table in accordance with Subchapter 7.4.8 of Part B of the guidance.* |
| *Is the project located within one mile of one of the designated Wild & Scenic Rivers or a river in the Nationwide Rivers inventory, or its tributaries?* |
| *Chattooga River* *Horsepasture River* *Lumber River*  | [ ]  Yes [ ]  No[ ]  Yes [ ]  No [ ]  Yes [ ]  No | *New River**Wilson Creek* | [ ]  Yes [ ]  No[ ]  Yes [ ]  No |
| *If “Yes” is the stream reach in the project area designated as Wild & Scenic?* [ ]  Yes [ ]  No*Describe the stream reach:*      |
| ***Impacts***  |
| *Discuss construction impacts related to Wild and Scenic Rivers.* |
|       |
| *Discuss operational impacts related to Wild and Scenic Rivers.* |
|       |
| *Describe SCI of the project.* |
|       |
| ***Mitigative Measures*** |
| *Mitigative Measures for Construction Impacts?* | *Mitigative Measures for SCI?* |
| [ ]  Yes[ ]  Not Applicable | [ ]  Yes[ ]  Not Applicable |
| *Describe the mitigative measures below and supply references to the appropriate appendix in the EID.* |
| *Mitigative Measure Description* | *Reference(s)* |
|       |       |

| Table 7.9. Coastal Resources  |
| --- |
| Project Name |
| Owner Name |
| ***For use with projects funded or co-funded with CWSRF program and/or projects requiring a FONSI.*** |
| Coastal Resources Appendix Information Appendix Reference (if applicable): |       |
|  |
| ***CAMA***  |
| 1. *Is the project in a CAMA county listed in Subchapter 7.4.9 of Part B of the guidance.? If “No,” skip the rest of the table.*
 | [ ] Yes [ ] No |
| 1. *Does the project involve new construction, land conversion, major rehabilitation, and substantial improvement activities?*
 | [ ] Yes [ ] No |
| *If “Yes” to a and b, discuss consistency review with Division of Coastal Management and include any relevant documentation in an appendix.*       |
| ***Coastal Barriers***  |
| ***For use with projects funded or co-funded with CWSRF program and/or projects requiring a FONSI.*** |
| 1. *Is project located within a CBRS community? If “Yes,” attach a FIRM map indicating whether construction activity occurs in a CBRS and provide documentation of US Fish and Wildlife Service approval in an Appendix. Include the appropriate Appendix Reference at the top of this table.*
 | [ ] Yes [ ] No |
|       |

| Table 7.10. Shellfish, Fish, and Their Habitats |
| --- |
| Project Name |
| Owner Name |
| ***For use with projects funded or co-funded by the CWSRF, WW-SRP, and WW-SEL programs.*** |
| *Complete this table in accordance with Subchapter 7.4.10 of Part B of the guidance.* |
| Shellfish, Fish, and Their Habitats Information Appendix Reference (if applicable): |       |
| ***Existing Conditions*** |
| *Are T&E species present within the project site, the project area, or downstream from the project?* |
| [ ]  Yes [ ]  No |
| *If Yes, list all aquatic state and federal T&E species located in the waterbodies within the project site, in the project area, and downstream of the project site.*  |
| Aquatic T&E Species Figure Reference Number (if applicable): |       |
| *Common Name* | *Scientific Name* | *Status* | *Approximate Location**(e.g., 5 mi. NE of Project)* |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
| *Discuss shellfish and fish habitat. (Not just T&E species.)* |
|       |
| ***Impacts*** |
| *Discuss any impacts to threatened and endangered species or explain why none are expected.* |
|       |
| *Discuss construction impacts related to fish, shellfish, and their habitat generally.* |
|       |
| *Discuss operational impacts related to fish, shellfish, and their habitats generally.* |
|       |
| *Describe SCI of the project.* |
|       |
| ***Mitigative Measures*** |
| *Mitigative Measures for Construction Impacts?* | *Mitigative Measures for SCI?* |
| [ ]  Yes[ ]  Not Applicable | [ ]  Yes[ ]  Not Applicable |
| *Describe the mitigative measures below and supply references to the appropriate appendix in the EID.* |
| *Mitigative Measure Description* | *Reference(s)* |
|       |       |

| Table 7.11. Wildlife and Natural Vegetation |
| --- |
| Project Name |
| Owner Name |
| ***For use with projects funded or co-funded with the CWSRF, WW-SRP, and WW-SEL programs.*** |
| *Complete this table in accordance with Subchapter 7.4.11 of Part B of the guidance.* |
| Wildlife and Natural Vegetation Information Appendix Reference (if applicable) |       |
| ***Existing Conditions*** |
| *Are T&E species present within the project site, or project area?* |
| [ ]  Yes [ ]  No |
| *If Yes, list all terrestrial state and federal T&E species located in the project site or project area.*  |
| Terrestrial T&E Species Figure Reference Number (if applicable): |       |
| *Common Name* | *Scientific Name* | *Status* | *Approximate Location**(e.g., 5 mi. NE of Project)* |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
| *Discuss the wildlife and vegetation present in the project site and project area. (Not just T&E species.)* |
|       |
| ***Impacts*** |
| *Discuss any impacts to threatened and endangered species or explain why none are expected.* |
|       |
| *Discuss construction impacts related to wildlife and natural vegetation generally.* |
|       |
| *Describe SCI of the project.* |
|       |
| ***Mitigative Measures*** |
| *Mitigative Measures for Construction Impacts?* | *Mitigative Measures for SCI?* |
| [ ]  Yes[ ]  Not Applicable | [ ]  Yes[ ]  Not Applicable |
| *Describe the mitigative measures below and supply references to the appropriate appendix in the EID.* |
| *Mitigative Measure Description* | *Reference(s)* |
|       |       |

| Table 7.12. Public Lands and Scenic, Recreational, and State Natural Areas |
| --- |
| Project Name |
| Owner Name |
| ***For use with projects funded or co-funded by the CWSRF program and/or projects requiring a FONSI.*** |
| *Complete this table in accordance with Subchapter 7.4.12 of Part B of the guidance.* |
| Public Lands and Scenic, Recreational, and State Natural Area Figure Reference Number (if applicable): |       |
| Public Lands and Scenic, Recreational, and State Natural Area Information Appendix Reference (if applicable): |       |
| ***Existing Conditions*** |
| *Are public lands and scenic, recreational, and state natural areas found adjacent to or in the project area?* |
| [ ]  Yes [ ]  No (then no impact) |
| *If yes, list these areas and show on the Environmental Features Figure* |
| *Name* | *Type* | *Location**(e.g., 5 mi. NE of Project)* |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
| ***Impacts*** |
| *If Yes, discuss construction impacts related to public lands, and scenic, recreational, and state natural areas.*  |
|       |
| *If Yes, discuss operational impacts related to public lands, and scenic, recreational, and state natural areas.* |
|       |
| *Describe SCI of the project.* |
|       |
| ***Mitigative Measures*** |
| *Mitigative Measures for Construction Impacts?* | *Mitigative Measures for SCI?* |
| [ ]  Yes[ ]  Not Applicable | [ ]  Yes[ ]  Not Applicable |
| *Describe the mitigative measures below and supply references to the appropriate appendix in the EID.* |
| *Mitigative Measure Description* | *Reference(s)* |
|       |       |

| Table 7.13. Areas of Archaeological or Historical Value |
| --- |
| Project Name |
| Owner Name |
| ***For use with projects funded or co-funded by the CWSRF, WW-SRP, and WW-SEL programs.*** |
| *Complete this table in accordance with Subchapter 7.4.13 of Part B of the guidance.* |
| Archaeological or Historical Area Figure Reference Number (if applicable): |       |
| Archaeological or Historical Area Information Appendix Reference (if applicable): |       |
| ***Existing Conditions*** |
| *Are areas of archaeological or historical value in the project site, project vicinity, or project area?* |
| [ ]  Yes [ ]  No (No Impact) |
| *If yes, list these and show on the Environmental Features Figure* |
| *Name* | *Type* | *Location**(e.g., 5 mi. NE of Project)* |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
| ***Impacts*** |
| *If Yes, discuss construction impacts related to areas or archaeological or historical value?* |
|       |
| *If Yes, discuss operational impacts related to areas of archaeological or historical value.* |
|       |
| *Describe SCI of the project.* |
|       |
| ***Mitigative Measures*** |
| *Mitigative Measures for Construction Impacts?* | *Mitigative Measures for SCI?* |
| [ ]  Yes[ ]  Not Applicable | [ ]  Yes[ ]  Not Applicable |
| *Describe the mitigative measures below and supply references to the appropriate appendix in the EID.* |
| *Mitigative Measure Description* | *Reference(s)* |
|       |       |

| Table 7.14. Air Quality |
| --- |
|  |
|  |
| ***For use with projects funded or co-funded by the CWSRF program and/or projects requiring a FONSI.*** |
| *Complete the table in accordance with Subchapter 7.4.14 of Part B of the guidance.* |
| Air Quality Information Appendix Reference (if applicable): |       |
| ***Existing Conditions*** |
| *Discuss the general air quality and identify current sources of emissions from the project and surrounding area. Note whether odors have been a problem.* |
|       |
| ***Impacts*** |
| *Discuss construction impacts related to air quality.* |
|       |
| *Will open burning occur?* | *If Yes, describe what will be burned.* |
| [ ]  Yes[ ]  No |       |
| *Discuss operational impacts related to air quality.* |
|       |
| *Describe SCI of the project.* |
|       |
| ***Mitigative Measures*** |
| *Mitigative Measures for Construction Impacts?* | *Mitigative Measures for SCI?* |
| [ ]  Yes[ ]  Not Applicable | [ ]  Yes[ ]  Not Applicable |
| *Describe the mitigative measures below and supply references to the appropriate appendix in the EID.* |
| *Mitigative Measure Description* | *Reference(s)* |
|       |       |

| Table 7.15. Noise Levels |
| --- |
|  |
|  |
| ***For use with projects funded or co-funded by the CWSRF program and/or projects requiring a FONSI.*** |
| *Complete this table in accordance with Subchapter 7.4.15 of Part B of the guidance.* |
| Noise Level Information Appendix Reference (if applicable): |       |
| ***Existing Conditions*** |
| *Discuss the current noise levels for the project site and project area and identify existing sources of noise.* |
|       |
| *Does the LGU have noise ordinances in place?* | [ ]  Yes[ ]  No |
| *If yes, describe.* |  |
| ***Impacts*** |
| *Discuss construction impacts related to noise levels. If noise levels will increase, discuss when they will be heard and at what distance.* |
|       |
| *Discuss operational impacts related to noise levels.* |
|       |
| *Describe SCI of the project.* |
|       |
| ***Mitigative Measures*** |
| *Mitigative Measures for Construction Impacts?* | *Mitigative Measures for SCI?* |
| [ ]  Yes[ ]  Not Applicable | [ ]  Yes[ ]  Not Applicable |
| *Describe the mitigative measures below and supply references to the appropriate appendix in the EID.* |
| *Mitigative Measure Description* | *Reference(s)* |
|       |       |

| Table 7.16. Introduction of Toxic Substances |
| --- |
|  |
|  |
| ***For use with projects funded or co-funded by the CWSRF program and/or projects requiring a FONSI.*** |
| *Complete this table in accordance with Subchapter 7.4.16 of Part B of the guidance.* |
| Introduction to Toxic Substances Appendix Reference (if applicable): |       |
| ***Impacts*** |
| *Discuss any toxic substances that may be introduced during project construction and operation in accordance with Subchapter 7.4.16 of Part B of the guidance.* |
|       |
| ***Mitigative Measures*** |
| *Mitigative Measures for Construction Impacts?* |
| [ ]  Yes[ ]  Not Applicable |
| *Describe the mitigative measures below and supply references to the appropriate appendix in the EID.* |
| *Mitigative Measure Description* | *Reference(s)* |
|       |       |

| Table 7.17. Environmental Justice Analysis |
| --- |
|  |
|  |
| ***For use with projects funded or co-funded by the CWSRF program.*** |
| *Complete this table in accordance with Subchapter 7.4.17 of Part B of the guidance.* |
| Was the U.S. Environmental Protection Agency’s Environmental Justice Geographic Assessment Tool used?If No, then complete the Existing Conditions cells below. | [ ]  Yes[ ]  No |
| Environmental Justice Figure Reference Number(s): |       |
| Environmental Justice Information Appendix Reference (if applicable): |       |
| **Existing Conditions** |
| *Provide the following information and key the Block Groups to the map in the EID. Include figures.* |
| **County** | **Census Tract** | **Census Block Group** | **Total Population** | **Minority Population** | **Percent Minority Population** | **Significant Minority Population?** | **Low-Income Population** | **Percent Low-Income Population** | **Significant Low Income Population?** |
|       |       |       |       |       |       |       |       |       |            |
|       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |
| **Impacts** |
| Are there any potentially significant environmental justice populations in the project area? | [ ]  Yes [ ]  No |
| *If the answer is yes, then below, list the impacts to the minority and/or low-income populations below and whether the impacts are potentially significant. If potentially significant, contact the Environmental Assessment Coordinator.* |
| *Impact* | *Potentially Significant?* |
|       | [ ]  Yes [ ]  No |
|       | [ ]  Yes [ ]  No |
|       | [ ]  Yes [ ]  No |
|       | [ ]  Yes [ ]  No |
|       | [ ]  Yes [ ]  No |
|       | [ ]  Yes [ ]  No |
|       | [ ]  Yes [ ]  No |

| Table 7.18. Mitigative Measures |
| --- |
|  |
|  |
| ***For use with projects funded or co-funded by the CWSRF, WW-SRP, and WW-SEL programs.*** |
| *Complete this table for all applicable categories in accordance with Subchapter 7.4.16 of Part B of the guidance. If there was no impact in a particular resource category, then state, “No Impact.” Be sure this table is consistent with information provided in the resource category tables.†* |
| **Resource Category** | **Potential Direct Impact** | **Mitigative Measure(s) for Direct Impact** | **Potential SCI** | **Mitigative Measures for SCI** |
| Topography & Floodplains |       |       |       |       |
| Soils |       |       |       |       |
| Prime & Unique Farmland |       |       |       |       |
| Land Use |       |       |       |       |
| Forest Resources |       |       |       |       |
| Wetlands and Streams |       |       |       |       |
| Water Resources |       |       |       |       |
| Shellfish, Fish, and their Habitats |       |       |       |       |
| Wildlife and Natural Vegetation |       |       |       |       |
| Public Land and Scenic, Recreational, and State Natural Areas |       |       |       |       |
| Areas of Archaeological or Historical Value |       |       |       |       |
| Air Quality |       |       |       |       |
| Noise Levels |       |       |       |       |
| Toxic Substances |       |       |       |       |
| Environmental Justice |       |       |       |       |
| †If completing a limited EID, then delete rows for the resources categories not reviewed. |