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| **Submittal Checklist for Engineering Reports/Environmental Information Documents**  (Last updated: May 2017) | | | | | | | | |
| *This checklist must accompany the initial submittal of all Engineering Reports/Environmental Information Documents. If your submittal does not contain this checklist, the Project Manager will not start review until it is received.* | | | | | | | | |
| **A. Number of Reports Submitted** | | | | | | | | |
| Number of Copies Submitted:  2 copies  4 copies (FONSIs only)  Other: | | | | | | | | |
|  | | | | | | | | |
| **B. Contact Information** | | | | | | | | |
| ***Owner Information*** | | | | | | | | |
| *Is the contact person (Elected Official or Authorized Representative) different from the application?*  Yes  No | | | | | | | | |
| **First Name** | **Last Name** | **Suffix** | **Position** | | | Elected Official | | |
|  |  |  |  | | | Authorized Representative | | |
| **Mailing Address 1** | | **Mailing Address 2** | | | **City** | | **State** | **Zip Code** |
|  | |  | | |  | |  |  |
| **E-Mail Address** | | | | | **Phone Number** | | **Extension (if applicable)** | |
|  | | | | |  | |  | |
| ***Consultant Information*** | | | | | | | | |
| *Is the contact person different from the application?*  Yes  No | | | | | | | | |
| **Firm Name** | | **First Name** | | | **Last Name** | | | **Suffix** |
|  | |  | | |  | | |  |
| **Mailing Address 1** | | **Mailing Address 2** | | | **City** | | **State** | **Zip Code** |
|  | |  | | |  | |  |  |
| **E-Mail Address** | | | | | **Phone Number** | | **Extension (if applicable)** | |
|  | | | | |  | |  | |
| ***Environmental Information Document Contact Information*** | | | | | | | | |
| *Did a separate firm prepare the Environmental Information Document?*  Yes  No | | | | | | | | |
| *If Yes, complete the information below. If No, then continue to Part C (Project Information).* | | | | | | | | |
| **Firm Name** | | **First Name** | | | **Last Name** | | | **Suffix** |
|  | |  | | |  | | |  |
| **Mailing Address 1** | | **Mailing Address 2** | | | **City** | | **State** | **Zip Code** |
|  | |  | | |  | |  |  |
| **E-Mail Address** | | | | | **Phone Number** | | **Extension (if applicable)** | |
|  | | | | |  | |  | |
|  | | | | | | | | |
| **C. Project Information** | | | | | | | | |
| **Project Name** | | | | | | | | |
| ***Project Type*** | | | | | | | | |
| *Check all that apply in terms of project type. Note that for the CDBG-I program, projects in both wastewater and water may be checked.* | | | | | | | | |
| Wastewater Treatment Plant Equipment Repair and Replacement  Wastewater Treatment Plant Expansion  Collection System Rehabilitation and Replacement  Collection System Expansion  Reclaimed Water  Stormwater Best Management Practices  Stream/Buffer/Wetland Restoration  Rainwater Harvesting | | | | Water Treatment Plant Equipment Repair and Replacement  Water Treatment Plant Expansion  Water Line Rehabilitation and Replacement  Water Storage Repair/Replacement/Expansion  Water Source Development | | | | |

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| **D. Environmental Information** | | | |
| *Check the box for the appropriate final information document required for the project and based upon the minor construction activities listed in Appendix A of the guidance (CWSRF, DWSRF, WW-SRP, and DW-SRP only), and any discussion with Division staff. Note: Under the CDBG-I program, the Responsible Entity will be in charge of the environmental review process. The Consultant should check which environmental document the Responsible Entity is preparing.* | | | |
| ***Final Environmental Document*** | | | |
| Certificate of Exemption (CDBG-I only)  Categorical Exclusion Subject to §58.5 (CDBG-I only)  Categorical Exclusion (CWSRF and DWSRF only)  Approval Only (WW-SRP and DW-SRP) | | Categorical Exclusion Not Subject to §58.5 (CDBG-I only)  Finding of No Significant Impact (all funding programs)  Record of Decision (all funding programs) | |
| *Check the box(es) for the river basin(s) where the project is found. This information is used for programmatic reporting purposes.* | | | |
| Broad  Cape Fear  Catawba  Chowan  French Broad  Hiwassee  Little Tennessee  Lumber  Neuse | | New  Pasquotank  Roanoke  Savannah  Tar-Pamlico  Watauga  White Oak  Yadkin | |
|  | | | |
| **E. Funding Information** | | | |
| ***Estimated Project Cost*** | | | |
| Provide the estimated Project Cost: | | | |
| ***Funding Source(s)*** | | | |
| *Check the box(es) for each source of funding, including those outside of the Division. Place the amount(s) in the appropriate column.* | | | |
| CWSRF  DWSRF  CDBG-I  WW-SRP  DW-SRP | $  $  $  $  $ | North Carolina Rural Center  USDA Grant/Loan  Bonds  Local Funds  Bank Loans  Other, Specify: | $  $  $  $  $  $ |
|  | | | |
| **F. Signature** | | | |
| This submittal checklist has been completed and is, to the best of my knowledge, accurate. | | | |
| Signature: | | | |
| Date: | | | |