

## WATER RESOURCES COST-SHARE APPLICATION CHECKLIST

(This checklist must be attached to all applications for Water Resources cost-share assistance.)

Project sponsors requesting cost-share assistance from the North Dakota Department of Water Resources (DWR) are required to submit completed applications, including all supplemental materials, at least 45 days in advance of meetings. Incomplete applications or those submitted after the 45 day deadline will not appear on the next Water Commission meeting agenda. Project sponsors, or their authorized representative, must verify that the following information is included as part of their application package for cost-share assistance.

Sponsoring Entity:

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Initial If Included, or "X" If Not	DWR Cost-Share Application Materials *Required For All Applications				
	*Cost-Share Application Form (SFN 60439)				
	*Project Specific Map (Including an Inset Map of Location within State.) See Examples				
	* <u>Detailed Project Costs SFN 61801</u> (Submit Fillable Worksheet)				
	Approved Drainage Permit (Rural Flood Control Only)				
	Results Of Positive Assessment Vote (Rural Flood Control Only) <sup>1</sup>				
	Sediment Analysis (Drain Reconstruction Only)				
	Acquisition Plan (Flood Recovery Property Acquisition Program Only)				
	Proof of HMGP Funding Ineligibility (Flood Recovery Property Acquisition Program Only)				
	Plans & Specifications For Bidding Project Construction (Request for Construction Cost-Share Only)				
	Economic Analysis Worksheet (Flood Control or Water Conveyance Construction & Total Cost > \$200,000)				
	<u>Life Cycle Cost Analysis Worksheet</u> (Water Supply Only)				
	Capital Improvement Plan SFN 61938 (Water Supply Only)				
<sup>1</sup> A pre-application process is allowed for assessment projects. (See Project Funding Policy, Procedure, and General Requirements)					
I hereby certify that the information contained in this application for cost-share assistance is true and accurate, and all required materials have been provided with this application. I have read and understand the requirements for a completed application, and further understand that the submission of an incomplete application package will not be considered by the Water Commission for cost-share assistance.					
Project Sp	ponsor (Printed Name) Project Spons	or (Signature)	Date		

## PLEASE NOTE

Project Name

The cost-share application (SFN 60439); Life Cycle Cost Analysis Worksheet; Economic Analysis Worksheet; Project Funding Policy, Procedure, and General Requirements; and future meeting dates are available via the Water Resources website at dwr.nd.gov. If you have questions, please call 701-328-4989 or email dwrcostshare@nd.gov.

This form is to be filled out by the project or program sponsor with Water Resources staff assistance as needed. Applications for costshare are accepted at any time. However, applications received less than 45 days before a Water Commission meeting will be held for consideration at the next scheduled meeting.

Please answer the following questions as completely as possible. Supporting documents such as maps, detailed cost estimates, and engineering reports should be attached to this form. If additional space is required, please use extra sheets as necessary.

For information regarding cost-share program eligibility see the *Water Commission Cost-Share Policy, Procedure, and General Requirements* – available upon request or at www.dwr.nd.gov.

Project, Program, Or Study Name						
Sponsor(s)						
County			Township/Range/Section			
Request Type New Updated (previously submitted) Description Type Pre-Construction Construction						
If Study, What Type	Hydrologic F	loodplain Mgmt.	bibility			
FEMA Levee Program Munic	ion Purpose ipal Water Supply rty Acquisition Progra	☐ Recreation ☐ Ring Dike Prograr ☐ Rural Flood Contr am ☐ Rural Water Supp	rol			
Jurisdictions/Stakeholders Involved In This Proje	ect					
Description Of Problem Or Need And How The	Project Provides A Sc	olution				
Level Of Study Completed						

Describe Potential Obstacles To Implementation						
Land Acquisition						
Permits						
Funding						
Local Opposition						
Environmental Concern	S					
Other						
Funding Timeline (Care	fully consider when DWR cos	st-share will be needed.)				
Source	Total Cost	2021-2023 7/1/21-6/30/23	2023-2025 7/1/23-6/30/25	Beyond 7/1/25		
Federal	\$	\$	\$	\$		
Water Resources	\$	\$	\$	\$		
Other State	\$	\$	\$	\$		
Local	\$	\$	\$	\$		
Total	\$	\$	\$	\$		
Funding Detail (Provide	names and amounts from all	<del>` ,                                     </del>	rom the table above.)			
Source	Amount	Grant Or Loan	Term	Interest		
	\$			%		
	\$			%		
	\$			%		
Evaloia Timolinos For A	\$ Ill Phases And Their Current	Status		%		
Explain Timelines For A	ai Friases And Their Guitent	Status				
Study (Month/Year) Design (M		(Month/Year)	Bid (Month/Year)			
Construction Start (Month/Year)  Construction Completion (Month/Year)						
Has Economic Analysis Been Completed? Yes No Ongoing Not Applicable						
Has Life Cycle Cost Analysis Been Completed? Yes No Ongoing Not Applicable						
Has Feasibility Study Been Completed?						
Has Engineering Design Been Completed?  Yes  Ongoing  Not Applicable						
Have Land Or Easements Been Acquired?  Yes No Ongoing Not Applicable						
Have Assessment Distri			going Not Applicable	If Yes, (Date)?		
Are Connections For New Rural Customers Located Within The Extra-Territorial Jurisdiction Of A Municipality?						

- 490 0 0.0						
Have You Applied For Any Federal Permits?	Yes	Yes No		☐ Not Applicable		
Have You Been Approved For Any Federal Permits?	Yes		No [	] Not	Applicable	
Туре			Numbe	r		
If Yes, Please Explain						
Lieus Vou Amilia d'Esmanu Otata Damaita				□ Not	Applicable	
Have You Applied For Any State Permits?				_		
,	Yes	۱ <u> </u>			Applicable	
Type			Numbe	r 		
If Yes, Please Explain						
Have You Applied For Any Local Permits?		<u></u>	No F	□ Not	Applicable	
Have You Been Approved For Any Local Permits?  Type	Yes	<u>П</u>	Numbe	_	Applicable 	
Турс			TVUITIDO			
If Yes, Please Explain						
Submitted By						Date
Address	City				State	ZIP Code
Addiess	Oity					Zii Odde
Sponsor's Telephone Number			Sponso	or's Em	nail Address	
Engineer's Name	,		Engine	er's Te	elephone Number	
Engineer's Company			Engineer's Email Address			
I Certify That, To The Best Of My Knowledge, The Provided Information Is True And Accurate.						
Signature						Date

**E-MAIL TO:** dwrcostshare@nd.gov

Submit Via Email