

CLEAN VESSEL ACT GRANT APPLICATION
MARINE PUMP-OUT FACILITY AND/OR PUMP-OUT BOAT
RHODE ISLAND DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
Office of Water Resources 235 Promenade Street Providence, RI 02908-5767

This application should include a site map, O&M plan, along with price estimates or associated supporting documents.

Please include with this application:

Site Map Operation and maintenance plan Price Estimate for proposed project

Please provide the following information

a. Applicant Information

1. Applicant's Legal Name (private or municipal)
2. Division/Department/Unit
3. Street/P.O. Box
4. City/Town
5. Federal Employer Identification No.
6. Applicants DUNS number
7. Contact Person and Title
8. Contact Telephone Number and Email

b. Facility Information

1. Facility Location including Name of Water Body (include a map)
2. Size of Marina/Facility (No. Of slips/moorings)
3. Range of Size of Vessels and Estimated No. Of Boats with Type III MSD's
4. Services Offered such as fuel dock, upland rest rooms, showers, laundry facilities, etc.
5. Depth of Water at Proposed Pump-Out Site
6. Proposed User Fee (Not applicable for land based station O & M grants)
7. Proposed Marina Operating Season/Hours
8. Seasonal Start/End Dates of Operation:
Daily Hours of Operation:
9. Proposed Restrictions or Conditions on Use:

c. Project Information

1. Application Types - **Check all that apply:**

- Operation and Maintenance Costs Associated with a Land Based Pump-out facility
- Operation and Maintenance Costs Associated with a Pump-out Vessel
- New/Replacement Land based Pump-out facility
- New Pump-out Vessel or Outboard Motor

2. **Project Cost / Budget Estimates** – Complete all sections for which you are requesting funds

Estimation of Operation and Maintenance Costs Associated with a Land Based Pump-out facility

| | |
|---|---------|
| a. Equipment | |
| b. Supplies | |
| c. Contractual (maintenance agreements) | |
| d. Total O&M Costs (Line a + b + c) | |
| e. 75% of total (Line d * 0.75) | |
| f. Funding Requested (Line e or \$1,875 whichever is less) | |
| g. Total Applicant Match (Line d – Line f) | |
| h. Calculate % match ((Line g / Line d) * 100) | Percent |

Estimation of Operation and Maintenance Costs Associated with a Pump-out Vessel

| | |
|---|---------|
| a. Bottom Painting | |
| b. Engine Maintenance | |
| c. Pump System | |
| d. Fuel /Oil | |
| e. Registration | |
| f. Trailer Maintenance | |
| g. Annual Maintenance (haul/launch, winterization) | |
| h. Storage | |
| i. Safety Equipment | |
| j. Insurance | |
| k. Total O&M Costs (sum of lines a-j) | |
| l. 75% of total (Line k * 0.75) | |
| m. Funding Requested (Line l or \$4,875 whichever is less) | |
| n. Total Applicant Match (Line k – Line m) | |
| o. Calculate % match ((Line n / Line k) *100) | Percent |

Estimation of New/Replacement of Land based Pump-out facility

| | |
|--|---------|
| a. Engineering/Design | |
| b. Pump | |
| c. Associated Parts | |
| d. Holding Tank/Sewer Connection | |
| e. Labor | |
| f. Total (sum of lines a-e) | |
| g. 75% of total (Line f * 0.75) | |
| h. Funding Requested (Line g or \$18,750 whichever is less) | |
| i. Total Applicant Match (Line f – Line h) | |
| j. Calculate % match ((Line i / Line f) * 100) | Percent |

Estimation of New Pump-out Vessel or Outboard Motor

| | |
|--|---------|
| a. Engineering/Design | |
| b. Hull | |
| c. Engine | |
| d. Miscellaneous equipment | |
| e. Labor | |
| f. Total (sum of lines a-e) | |
| g. 75% of total (Line f * 0.75) | |
| h. Funding Requested (Line g or \$56,250 whichever is less) | |
| i. Total Applicant Match (Line f – Line h) | |
| j. Calculate % match ((Line i / Line f) * 100) | Percent |

4. Project Time Frame: Estimated Start/End Dates:
Duration: (months)

d. Narrative Description of Proposed Project

Please respond to the following questions by providing adequate information to explain each of the following questions in detail:

| | | |
|---|---------------------------|---------|
| 1. Is the application for the purchase, installation, repair/replacement of equipment and/or maintenance of equipment? | YES Provide Details | NO |
| 2. Is the application for the purchase, repair/replacement of equipment, maintenance or operational costs for a marine pump-out boat? | YES Provide Details | NO |
| 3. Is this application for a system that will discharge into public sewers via a preexisting connection? | YES Provide Details | NO |
| 4. Does this application propose a NEW connection to a sewer line? | YES Provide Details | NO |
| If yes, has a DEM Order of Approval been filed? | YES Provide Details | NO |
| 5. Is this application for a system that will discharge into a Holding Tank? | YES Provide Details | NO |
| If yes, is a connection to public sewers possible? | YES Provide Details | NO |
| If an existing tank what is the size? | | Gallons |
| If this is a new holding tank has an OWTS permit been applied for? | YES Provide Details | NO |
| 6. Have you attached and included a site map to this application? | YES | NO |
| 7. Have you attached and included an Operations and Maintenance plan to this application? | YES | NO |
| 8. Will the facility be available on a fair and equitable basis to all members of the recreational boating public? | YES | NO |

Give a brief summary of the project(s) / purpose(s) for which you are seeking CVA grant funding:

e. Additional Required Information

Required Permits

CRMC/Assent

Application Filed: YES NO Date application filed:
Permit Received: YES NO Date approved:

DEM/Order of Approval

Application Filed: YES NO Date application filed:
Order Received: YES NO Date received: Approval Number:

Holding Tank Application (OWTS permit)

Application Filed: YES NO Date application filed:
Permit Received: YES NO Date approved: Permit Number:

Name, Address, and Phone Number of Individual having day-to-day responsibility for direction and installation of project:

Applicant's Signature:

Written signature
(If unable to sign electronically)

Name and Title:

Date: