



July 2011

CALIFORNIA NATURAL RESOURCES AGENCY

Department of Resources Recycling and Recovery (CalRecycle)

PARTIAL GRANTS TO PUBLIC ENTITIES TO ABATE SOLID WASTE DISPOSAL SITES GRANT PROGRAM AND GRANTS TO PUBLIC ENTITIES TO ABATE ILLEGAL DISPOSAL SITES GRANT PROGRAM APPLICATION Fiscal Year (FY) 2011/12

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Grant applications are accepted on a continuous basis up to the last Cycle deadline. CalRecycle provides three opportunities to submit an application during the fiscal year. Applications must be postmarked on or before the deadlines stated below. Hand delivered Applications must be received and date stamped by CalRecycle Staff no later than 3:00 p.m. on the date listed below. For Cycles 1 and 2, applications received after the deadline will be considered during the next cycle. Applications postmarked after the deadline for Cycle 3 will be returned unopened to the Applicant with a letter of explanation. For applications submitted prior to and at the deadline, the deadline shall be considered the date of receipt for the applications. Applications e-mailed or faxed will not be accepted. The cycle timelines for FY 2011/12 are as follows:

Table with 3 columns: Cycle Number, Application Due Date, Resolution Due Date. Rows include Cycle 1 (Sept 15, 2011 / Oct 14, 2011), Cycle 2 (Dec 15, 2011 / Jan 16, 2012), and Cycle 3 (March 15, 2012 / April 16, 2012).

Please follow instructions in the Application Guidelines and Instructions when completing this Application. The Application Guidelines and Instructions are crucial to properly completing and submitting this Application.

Applications become the property of CalRecycle and are subject to disclosure under the Public Records Act. Do not submit confidential information.

Applications sent by U.S. Postal Service or a commercial delivery service should be sent in a manner that allows for tracking by the sender and that provides an addressed and dated receipt. Failure to do so is at the risk of the applicant and if delivery is delayed or the application is lost by the Post Office or delivery service, the burden is on the applicant to demonstrate timely mailing or delivery of the application.

**Application
 (FY 2011/12)**

Complete and submit all sections.

INDICATE WHICH GRANT PROGRAM YOU ARE APPLYING FOR:			
NOTE: ONE APPLICATION MUST BE SUBMITTED FOR EACH GRANT APPLIED FOR.			
<input type="checkbox"/> ILLEGAL DISPOSAL SITE CLEANUP GRANT <ul style="list-style-type: none"> • MAXIMUM GRANT FUND REQUEST \$500,000 • NO MATCH REQUIREMENT 		<input type="checkbox"/> PARTIAL GRANT TO PUBLIC ENTITIES <ul style="list-style-type: none"> • MAXIMUM GRANT FUND REQUEST \$750,000 • MUST MATCH 50 PERCENT OF TOTAL ELIGIBLE CLEANUP COSTS AND FUND ALL INELIGIBLE COSTS FOR SPECIAL CASES CALRECYCLE MIGHT CONSIDER APPROVAL OF PARTIAL GRANTS THAT PROVIDE GREATER THAN 50 PERCENT UP TO THE MAXIMUM GRANT AMOUNT 	
APPLICANT / ORGANIZATION INFORMATION			
APPLICANT / ORGANIZATION NAME (MUST MATCH RESOLUTION):		REQUESTED GRANT AMOUNT:	
PARTICIPATING JURISDICTIONS (FOR REGIONAL PROGRAMS ONLY):		MATCHING GRANT AMOUNT: <i>(IF APPLICABLE)</i>	
		TOTAL AMOUNT: <i>(ROUND AMOUNTS TO THE NEAREST WHOLE DOLLAR)</i>	
MAILING ADDRESS:		PROJECT ADDRESS:	
CITY:		CITY:	
COUNTY:	ZIP CODE:	COUNTY:	ZIP CODE:
PRIMARY CONTACT NAME:	SIGNATURE AUTHORITY NAME: <i>(AS AUTHORIZED IN RESOLUTION)</i>	AUTHORIZED DESIGNEE NAME: <i>(IF APPLICABLE, AS AUTHORIZED IN LETTER OF DESIGNATION-LOD)</i>	
TITLE:	TITLE:	TITLE:	
TELEPHONE NUMBER:	TELEPHONE NUMBER:	TELEPHONE NUMBER:	
FAX NUMBER:	FAX NUMBER:	FAX NUMBER:	
EMAIL ADDRESS:	EMAIL ADDRESS:	EMAIL ADDRESS:	
INDICATE WHICH TYPE OF ENTITY YOU ARE (CHECK ONLY ONE):			
<input type="checkbox"/> CITY <input type="checkbox"/> COUNTY <input type="checkbox"/> CITY & COUNTY <input type="checkbox"/> SPECIAL DISTRICT			
LEGISLATIVE DISTRICT NUMBERS (TO FIND YOUR DISTRICT, USE MAILING ADDRESS ABOVE AND GO TO www.ciwmb.ca.gov/Profiles/Juris/)		FEDERAL TAX IDENTIFICATION NUMBER:	
ASSEMBLY:	SENATE:		

APPLICATION CHECKLIST

This application checklist is provided for your convenience and is not intended to be all inclusive. Prior to submitting your application, check the Q&A website at <http://www.calrecycle.ca.gov/LEA/GrantsLoans/SolidWaste/> for additional information. You are responsible for completing and submitting all required documentation.

Grant Application Form (CalRecycle 243-SWC)	
<input type="checkbox"/>	All applicable information and documents are provided; applicable boxes are checked.
<input type="checkbox"/>	Application Certification is signed by the: <ol style="list-style-type: none"> 1) Signature Authority as authorized in Resolution or 2) Authorized Designee. <p style="margin-left: 40px;"><i>Authorized Designee may sign only if the Letter of Designation has been submitted to CalRecycle.</i></p>
Environmental Justice Certification	
<input type="checkbox"/>	Box is checked.
Resolution Requirement— See Application Guidelines & Instructions for Resolution, and Letter of Designation (LOD) information and examples	
<input type="checkbox"/>	Approved Resolution is included with Application; box is checked, or
<input type="checkbox"/>	If applicable, approved Resolution not submitted with Application but will be submitted to CalRecycle for receipt by date listed on page 1; box is checked.
<input type="checkbox"/>	If applicable, Letter of Designation (LOD) is included with Application. <i>A LOD is not required to be submitted with the Application; however, it must be submitted prior to Designee's exercise of his/her authority.</i>
Environmentally Preferable Purchases and Practices Policy— See Application Guidelines & Instructions for example	
<input type="checkbox"/>	Appropriate boxes are completed on the Environmentally Preferable Policy, Purchases, and Practices Evaluation.
General Checklist of Licenses, Permits, & Filings Form	
<input type="checkbox"/>	Appropriate boxes are completed on the form.
Site Characterization Form	
<input type="checkbox"/>	Appropriate boxes are completed on the Site Characterization Form.
Application Format & Submittal	
<input type="checkbox"/>	Copies: One application with original signature (blue ink preferred), and three copies .
<input type="checkbox"/>	Paper: 8½ X 11, printed double-sided, single spaced, on 100 percent post consumer fiber, and numbered consecutively.
<input type="checkbox"/>	Stapled, not bound: upper left-hand corner.
<input type="checkbox"/>	Font: Comparable to 12 pt. Times New Roman.
<input type="checkbox"/>	Addressed to the appropriate mailing address of CalRecycle.

PROJECT DESCRIPTION	
Provide a brief description of the project below (3-5 sentences):	
ENVIRONMENTAL JUSTICE CERTIFICATION	
<i>CalRecycle Grantees must in the performance of the Grant Agreement conduct their programs, policies, and activities that substantially affect human health or the environment in a manner that ensures the fair treatment of people of all races, cultures, and income levels, including minority populations and low-income populations of the State. [Govt. Code §65040.12(e)]</i>	
Must check box	
<input type="checkbox"/>	We acknowledge that our organization will comply with these principles of Environmental Justice.
RESOLUTION REQUIREMENT	
Submit either an approved Resolution, valid up to 5 years, with your application or the following acknowledgement <i>(If applicable, submit a current Letter of Designation (LOD) for signature designee)</i>	
<i>Note: See Application Guidelines & Instructions for Resolution and Letter of Designation (LOD) information and examples</i>	
Must check one	
<input type="checkbox"/>	We acknowledge that an approved Resolution and, if applicable, LOD designating additional signature authority is enclosed in the application.
<input type="checkbox"/>	We acknowledge that our approved Resolution must be received by CalRecycle no later than the date listed on page 1. We further acknowledge that if our Resolution is received after this date, our application may be considered for the next cycle or disqualified.
ENVIRONMENTALLY PREFERABLE PURCHASES AND PRACTICES POLICY	
Must check one	
<input type="checkbox"/>	No, our organization has not adopted a policy.
<input type="checkbox"/>	Yes, our organization has adopted a policy. If yes, you must provide a copy of policy.
APPLICATION CERTIFICATION	
<i>Certification: I declare, under penalty of perjury under the laws of the State of California, that I have read all information in the Application Guidelines and Instructions and that all information submitted for CalRecycle's consideration for award of grant funds is true and accurate to the best of my knowledge.</i>	
X	
<i>Signature Authority - as authorized in Resolution; or Authorized Designee - as authorized in submitted Letter of Designation</i>	<i>Date</i>
<hr style="border: 0; border-top: 1px solid black; margin: 0;"/> <i>Print Name</i>	<hr style="border: 0; border-top: 1px solid black; margin: 0;"/> <i>Print Title</i>

GENERAL CHECKLIST OF BUSINESS PERMITS, LICENSES AND FILINGS

CalRecycle 669 (Revised 1/10)

GENERAL CHECKLIST OF BUSINESS PERMITS, LICENSES AND FILINGS

Mark (✓ or X) appropriate box on each line below. All lines must be completed.

Note: This list is not all-inclusive. Grant Applicant/Grantee must list other critical permits/licenses/filings not identified below.

Grant Applicant/Grantee currently holds this valid permit/license/filing				
Grant Applicant/Grantee will modify and/or obtain this permit/license/filing				
This permit/license/filing is not applicable for this grant project or business				
			LOCAL PERMITS, LICENSES & FILINGS	REGULATOR OR ISSUER
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Authority to Construct/Permit to Operate	Air Quality Management District
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Building Construction Permit	City or County
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Business License	City or County
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fictitious Business Name Filing	County
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Land Use Permit/Zoning Clearance/Conditional Use Permit	City or County
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Permit By Rule (PBR) for Permanent HHW Facilities or Temporary Collection Events	City, County or Cal/EPA-DTSC
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste Hauler Permit	City or County
			STATE PERMITS, LICENSES & FILINGS	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Antifreeze, Battery, Oil & Paint (ABOP) Notification	CUPA or Cal/EPA-DTSC
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Corporate, Company or Partnership Filings	Ca. Secretary of State
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hazardous Waste Haulers Permit	Cal/EPA – DTSC
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Industrial Activities Storm Water General Permit	Cal/EPA – SWRCB
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-Profit Organization 501 (C) (3)	Ca. Secretary of State
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Prop. 65 Safe Drinking Water & Toxic Enforcement Act	Cal/EPA – OEHHA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Solid Waste Facilities Permit	Cal/EPA – CalRecycle
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	State EPA Identification Number	Cal/EPA – DTSC
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste and Used Tire Hauler Registration	Cal/EPA – CalRecycle
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste Discharge Requirements	Cal/EPA – SWRCB
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste Tire Facilities Permit	Cal/EPA – CalRecycle
			FEDERAL PERMITS, LICENSES & FILINGS	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	US EPA – Identification Number	US EPA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	US EPA – NPDES and/or NSR Permits	US EPA
			OTHER PERMITS, LICENSES & FILINGS	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

DO NOT submit copies of the permits/licenses/filings with this form. Please retain all permits/licenses/filings in grant file for audit purposes.

GENERAL CHECKLIST OF BUSINESS PERMITS, LICENSES AND FILINGS

CalRecycle 669 (Revised 1/10)

<i>Comments/Notes:</i>

<input type="checkbox"/>	PUBLIC ENTITY CERTIFICATION: I declare under penalty of perjury under the laws of the State of California that the proposed grantee: 1) has or will comply with all applicable state, federal, and local laws, ordinances, regulations, license and permit requirements necessary for the proper performance of this grant; and 2) where compliance has not been met, have attached a letter describing what has been done to achieve full compliance.
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Executed _____ on _____
 at: _____
City and State Date

Print Name of Grant Applicant/Grantee (as identified in resolution) *Title*

Signature of Grant Applicant/Grantee (as identified in resolution) *Date*

Note: Falsification under penalty of perjury may result in criminal and civil penalties. In addition, pursuant to the terms of the grant agreement, any misrepresentations in the above certification shall constitute a breach of contract that could result in non-payment of grant funds to the grantee; relinquishment by the grantee of funds previously paid; termination of the grant; and/or placing the grantee on CalRecycle's Unreliable Contractors List.

**SOLID WASTE DISPOSAL AND CODISPOSAL SITE CLEANUP PROGRAM
 SITE CHARACTERIZATION FORM**

I. Site Information							
Site Name			AKA			SWIS #	
Address				Nearest Cross Street			
City			County			Zip	
APN			Zoning				
Latitude			Longitude			Source (GPS/Map)	
Land Owner Name					Phone #		
Address							
City				State			Zip
Renter/Operator Name					Phone #		
II. Site Activity							
Active Dumping: Yes <input type="checkbox"/> No <input type="checkbox"/>		Buried Waste: Yes <input type="checkbox"/> No <input type="checkbox"/>			Site Security: Yes <input type="checkbox"/> No <input type="checkbox"/>		
Comments (Approx. years of operation, duration, methods, etc.)							
Type of Waste	Estimated Waste Quantity	Units (Each, CY, tons,...)	Details				
Burn Ash							
Garbage-Trash-Refuse							
Construction/Demolition							
Appliances (White Goods)							
Vehicles							
Misc. Scrap Metals							
Wood Waste							
Green/Landscape Waste							
Tires							
Hazardous Waste							
Asbestos/Pesticides							
Other							
Sampling & Analysis (Yes/No)							
III. Land Use Within 1 Mile							
Land Use	Within (Check Applicable Boxes)		Comments (Types of structures, density,...)				
	1,000 Feet	1 Mile					
Residential							
Commercial							
Industrial							
Parks and Recreational							
Agricultural							
Water Supply Wells							
Surface Water Bodies							
Sensitive Environment*							
Other							
*Explain							

IV. Site Drawing

Site drawing (sketch) to show the following applicable information:

- | | |
|--|---|
| <ul style="list-style-type: none"> • Approximate property boundaries • Access points and roads on-site and to the site • Waste locations • On-site structures (Buildings, drainage...) • Utilities (Phone poles, cables, sewer,...) | <ul style="list-style-type: none"> • Groundwater/Gas Monitoring wells • Site security (Fences, barriers,...) • Surface water bodies (Ponds, creeks,...) • Estimated topography and drainage patterns • North arrow and approximate scale |
|--|---|

V. Enforcement Actions (Chronological List)

Provide a list of Enforcement Actions and Results for solid waste on the property.

Date	Type of Action	Issuing Agency	Results

Comments	

VI. Site Access

Describe how site access will be obtained for cleanup:

VII. Comments (CEQA considerations, hazards to cleanup, landfills/recycling centers, haul routes,...)

VIII. Attachments (Check Applicable Boxes)

- | | |
|--|--|
| <input type="checkbox"/> Vicinity/Location Map | <input type="checkbox"/> Enforcement Actions |
| <input type="checkbox"/> Parcel/Tax Book Map | <input type="checkbox"/> Sampling and Analysis Results |
| <input type="checkbox"/> Site Drawing (Sketch) | <input type="checkbox"/> Property Access Authorization |
| <input type="checkbox"/> Photos | <input type="checkbox"/> Other: _____ |