

## UNDERGROUND HEATING OIL TANK CLEANUP REIMBURSEMENT PROGRAM

### INSTRUCTIONS FOR THE ON-LINE APPLICATION FOR REIMBURSEMENT

The Application for Reimbursement must be submitted through the Electronic Single Application (ESA) website. **Paper and faxed copies will not be accepted.** This change allows DEP to expedite the application review process. The on-line application is available on the ESA website, which may be accessed at the following link:

<https://www.esa.dced.state.pa.us/Login.aspx>

This document provides instructions on how to apply and upload the required documentation in the ESA application. All information needed for your submission will be contained in this online application.

**No documentation needs to be mailed to the DEP Grants Center to complete the on-line application.**

Additional information about the Department of Environmental Protection's (DEP) Underground Heating Oil Tank Cleanup Reimbursement Program, including eligibility requirements and answers to frequently asked questions, is available on the program webpage at the following link:

<https://www.dep.pa.gov/Business/Land/SiteRemediation/Storage-Tank-Cleanup-Program/Pages/Underground-Heating-Oil-Tank-Cleanup-Reimbursement-Program.aspx>

#### User Tips

- The Electronic Single Application works best when accessed through Microsoft Edge or Google Chrome.
- If you allow your screen to sit idle for more than 30 minutes, you will lose the data entered since your last save and will have to re-enter it. Save frequently.
- When completing the application, fields marked with a “◆” (red diamond) are required fields. If a required field is skipped, you will be notified later in the application to return to that section to complete the field.
- Do not use special characters in the fields such as \, /, \*, &, %, #, etc.

**If you have questions when completing the application, please contact the Enterprise eGrants Customer Service Center at 1-833-448-0647 or by email at [egrantshelp@pa.gov](mailto:egrantshelp@pa.gov). Operating hours are Monday through Friday from 8:30 am to 6:00 pm EST.**

## Registration and Login

Go to the ESA login page at <https://www.esa.dced.state.pa.us/Login.aspx> and follow the instructions for creating a new account or migrating an existing account.

The screenshot shows the top navigation bar with the PA logo and links for Help and Contact Us. The main content is divided into two columns. The left column, titled "General Facts", contains a list of instructions for creating and managing a Keystone Login account. The right column, titled "Login", includes a "What's New?" section with a link to a help document, a login form with fields for Username and Password, a LOGIN button, and a "Powered by PA KEYSTONE LOGIN" logo. Below the logo are links for Register, Forgot Password, Forgot Username, Learn more about Keystone Login, and Having Trouble Registering.

### General Facts

- Create a New Keystone Login Account – [Registration](#)
  - Click Register and enter all of the information into the fields with a red asterisk (\*) next to them.
    - You will be asked to create your profile, login information and security questions.
  - If you have already created an account with another agency whose application uses the Keystone Login Service, you do not need to register another account with us.
  - If you create a Keystone Login account with us, you will be able to use this account with other agencies that use Keystone Login.
    - Some additional information may be required for those agencies.
- Keystone Login Services
  - There are many account options that can be configured for your Keystone Login account. Please see the help documents provided by the [Keystone Login Service](#)
  - Keystone Login account assistance or password resets, please contact the Keystone Global Help Desk at 877-328-0995
- For technical assistance with an application, please contact the appropriate resource center listed below:
  - **DCED customers:** Please contact the DCED Customer Service Center. Representatives are available Monday through Friday, from 8:30 AM until 5:00 PM, at 800-379-7448. Email inquiries can also be sent to [rdcedcs@pa.gov](mailto:rdcedcs@pa.gov).
  - **Customers of all other agencies:** Please contact the Enterprise eGrants Customer Service Center. Representatives are available Monday through Friday, from 8:30 AM until 6:00 PM, at 833-448-0647. Email inquiries can also be sent to [egrantshelp@pa.gov](mailto:egrantshelp@pa.gov).

### Login

#### What's New?

For an overview of the changes in the new Single Application, please read [Help](#).

Username

Password

Powered by  
**PA KEYSTONE LOGIN**

[Register](#)

**NOTE:** If registering for the first time with Keystone Login, please include an email address with your account. It will be needed to successfully complete grant applications and grant processing.

[Forgot Password](#)  
[Forgot Username](#)  
[Learn more about Keystone Login](#)  
[Having Trouble Registering](#)

## Begin a New Application

- **Project Name** – Enter a name for your project; *for example, “Underground Heating Oil Tank Cleanup”*. The project name may be changed in a later section of the application.
- **Do you need help selecting your program?** – Select “No”.
- Click “**CREATE A NEW APPLICATION**”.

The screenshot shows the "Begin a New Application" form. It includes a title, a brief instruction, a "Project Name" label, a text input field containing "Underground Heating Oil Tank Removal and Cleanup", a "Do you need help selecting your program?" label, a dropdown menu with "No" selected, and a "CREATE A NEW APPLICATION" button. Three red arrows point to the Project Name field, the dropdown menu, and the button.

### Begin a New Application

To begin a new Single Application For Assistance, enter a brief name for the project (up to sixty characters) and answer whether you need help selecting your program. If you already know the name of the program you want to apply for, answer "No".

Project Name

Do you need help selecting your program?

## Select Program

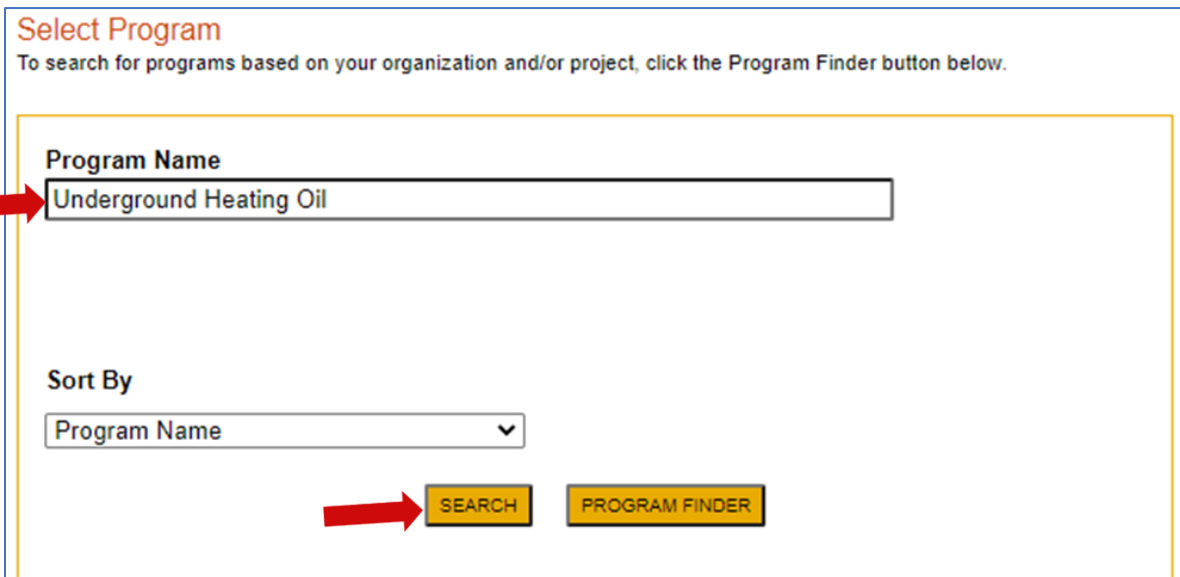
- **Program Name** – Enter “Underground Heating Oil”.
- Click “**SEARCH**”.

**Select Program**  
To search for programs based on your organization and/or project, click the Program Finder button below.

**Program Name**  
Underground Heating Oil

**Sort By**  
Program Name


**SEARCH** **PROGRAM FINDER**



## Apply

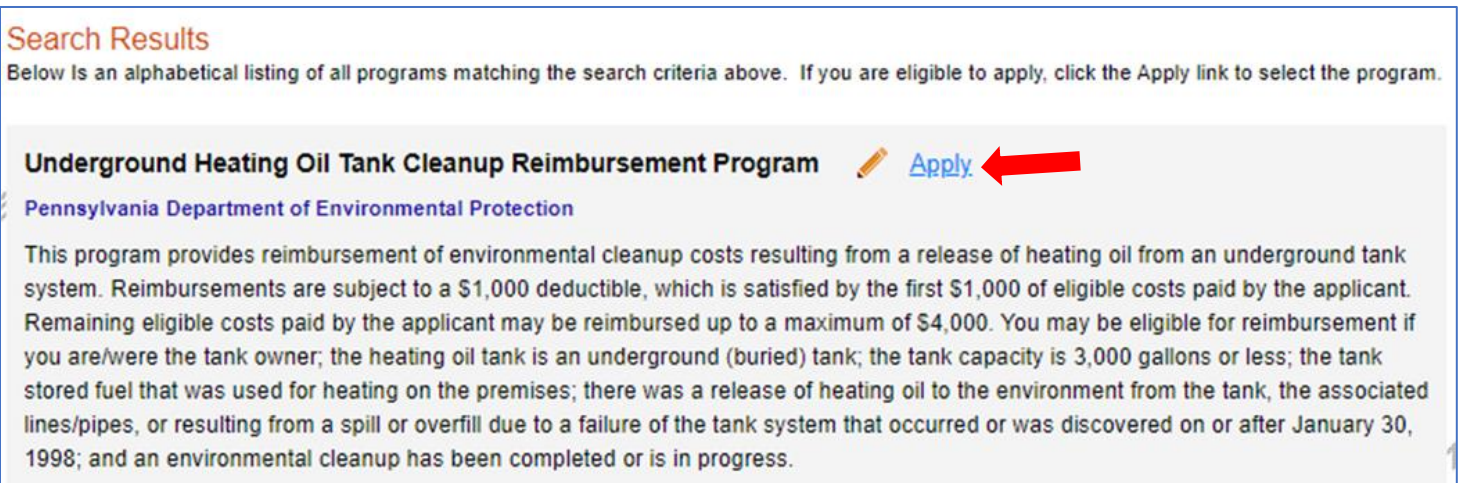
- Locate the **Underground Heating Oil Tank Cleanup Reimbursement Program** listing in the search results.
- Click “[Apply](#)” to open a new application and advance to the Applicant Information section.

**Search Results**  
Below is an alphabetical listing of all programs matching the search criteria above. If you are eligible to apply, click the Apply link to select the program.

**Underground Heating Oil Tank Cleanup Reimbursement Program**  [Apply](#)

Pennsylvania Department of Environmental Protection

This program provides reimbursement of environmental cleanup costs resulting from a release of heating oil from an underground tank system. Reimbursements are subject to a \$1,000 deductible, which is satisfied by the first \$1,000 of eligible costs paid by the applicant. Remaining eligible costs paid by the applicant may be reimbursed up to a maximum of \$4,000. You may be eligible for reimbursement if you are/were the tank owner; the heating oil tank is an underground (buried) tank; the tank capacity is 3,000 gallons or less; the tank stored fuel that was used for heating on the premises; there was a release of heating oil to the environment from the tank, the associated lines/pipes, or resulting from a spill or overfill due to a failure of the tank system that occurred or was discovered on or after January 30, 1998; and an environmental cleanup has been completed or is in progress.



## Applicant Information

The applicant must be the owner of the underground heating oil tank. This section requires information specific to the tank owner for which the application is being submitted. Complete the required fields. Then click "[Continue](#)" at the bottom-right to advance to the Project Overview section.

- **Applicant Entity Type** – Select the appropriate entity type for the tank owner.
  - Individuals – select "Sole Proprietorship".
  - Trusts and Estates – select "Non-Profit Corporation".
- **Applicant Name** – Enter the tank owner's legal name or the name under which the tank owner legally conducts business.
- **NAICS Code** – Enter the first four digits of the NAICS code for the tank owner entity. Or select the appropriate category from the dropdown box guide to determine the NAICS code.
  - Individuals should enter "8141".
  - Trusts and Estates should enter "5259"
- **FEIN/SSN Number** – Enter the tank owner's Federal Tax ID number, without dashes.
- **UEI Number** – Enter the applying organization's unique, 12-character alphanumeric identifier assigned to all entities that conduct business with the federal government.

## Applicant Information

To copy your Registration information into the application, click the "Use Account Information" button below.

**USE ACCOUNT INFORMATION**

Applicant Entity Type:  Limited Liability Partnership     Partnership  
 Government     Non-Profit Corporation  
 Sole Proprietorship     Limited Liability Company  
 S Corporation     C Corporation

Applicant Name:

NAICS Code:

FEIN/SSN Number:

\*Please enter FEIN as 9 digits, no dash.

UEI Number:

## Applicant Information (continued)

- **Top Official/Signing Authority and Title**
  - Individuals – Enter “N/A” in both boxes.
  - Estates – Enter the name and title of the executor.
  - Trusts – Enter the name and title of the trustee.
  - Other organizations/businesses – Enter the name and title of the owner or head of the organization.
- **SAP Vendor #** - Enter the tank owner’s SAP Vendor Number if known (not required).
- **Contact Name** – Enter the name of the primary contact person for this application.
- **Contact Title** – Enter the title of the primary contact person, if applicable; or, enter “Tank Owner”.
- **Phone** – Enter the daytime telephone number for the primary contact person.
- **E-mail** – Enter the e-mail address for the primary contact person (optional). *Applicants that provide a contact e-mail address will receive an email notification when their application is approved.*
- **Mailing Address, City, State and Zip Code** – Enter this information for the tank owner applicant. *If approved, the reimbursement payment will be mailed to this mailing address.*
- **Enterprise Type** – Check the applicable box(es) that describe the applicant. Individuals, Estates, and Trusts should check “Other”.

**Top Official/Signing Authority:**  ◆

**Title:**  ◆

**SAP Vendor #:**  ◆  
(xxxxxxx or xxxxxx-xxx)

**Contact Name:**  ◆

**Contact Title:**  ◆

**Phone:**  ◆ Ext.   
(xxx-xxx-xxxx)

**Fax:**

**E-mail:**  ◆

**Mailing Address:**  ◆

**City:**  ◆

**State:** PA ▼

**Zip Code:**  ◆

### Enterprise Type

Indicate the types of enterprises that describe the organization listed above. You may select more than one type. ◆

<input type="checkbox"/> Advanced Technology	<input type="checkbox"/> Agri-Processor	<input type="checkbox"/> Agri-Producer	<input type="checkbox"/> Authority	<input type="checkbox"/> Biotechnology / Life Sciences
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## Project Overview

Complete the following information in this section, as applicable. Then click "[Continue](#)" to advance to the Project Site Location(s) section

- **Project Name** – The project name will auto-populate with the name you entered at the beginning of the application process. You may change the project name at this time. Do not include the tank location or mailing address information in the project name.
- **Have you contacted anyone at DEP?** – If applicable, select "Yes" in the dropdown box and enter the name of the person you spoke with at DEP regarding your heating oil cleanup project.
- **How many Site Locations are involved in the project?** – If you are requesting reimbursement for eligible environmental cleanup costs associated with two or more tanks that are/were located at different street addresses (i.e. site locations) be sure to select the appropriate number of site locations in the dropdown box.

**Project Overview**

Project Name: ◆

Is this project related to another previously submitted project?

If yes, indicate previous project name:

Have you contacted anyone at DEP about your project?

If yes, indicate who:

Is your community certified through [Sustainable Pennsylvania?](#)

If yes, what level:  
 Bronze    Silver    Gold    Platinum

Are you interested in applying for multiple funding sources for this project?  
You are only permitted to apply for one program per application. By answering "Yes", you will be given the ability to apply for an additional program on the Certification page after this application has been submitted.

How many Site Locations are involved in the project?



## Project Site Location(s)

This section requires information specific to the tank location(s). If you selected more than one site location from the dropdown box in the previous Project Overview section, then this section will include multiple tabs labeled **Site 1**, **Site 2**, etc., to allow entry of multiple site location addresses. Provide the following information for each site location. Then click "[Continue](#)" to advance to the Project Narrative section.

- **Address** – Enter the street address at which the tank is/was located. P.O. Boxes are not acceptable.
- **City, State and Zip Code** – Enter this information for the tank location.
- **County** – From the dropdown box, select the county in which the tank is/was located.
- **Municipality** – From the dropdown box, select the Municipality in which the tank is/was located. Do not select County-Wide Project.
- **PA House, PA Senate and US House** – These fields will auto-populate based on the county and municipality information entered above.
- **Designated Areas** – Leave blank.

**Project Site Location(s)**  
To add Project Site Locations, please see the [Project Overview](#) section.

**Site 1**

**Address:** 400 Market Street

**City:** Harrisburg

**State:** PA

**Zip Code:** 17110

**County:** Dauphin

**Municipality:** Harrisburg City

**PA House:**  Patty Kim (103)

**PA Senate:**  John DiSanto (15)

**Designated Areas:**

<input type="checkbox"/> Act 47 Distressed Community	<input type="checkbox"/> Brownfield
<input type="checkbox"/> Enterprise Zone	<input type="checkbox"/> Greenfield
<input type="checkbox"/> Keystone Innovation Zone	<input type="checkbox"/> Keystone Opportunity Zone
<input type="checkbox"/> Prime Agricultural Area	<input type="checkbox"/> Uses PA Port

## Project Narrative

This section has been prepopulated and does not need to be completed. You may skip this section and click "[Continue](#)" to advance to the Program Budget section.

**Project Narrative**

Adequate answers to the Project Narrative questions below are required. Uploaded attachments or mailed documents are no longer permitted in this section of the application. If a more detailed narrative is required for the Program selected, instructions will either be provided in the Program Addenda section or the Program Guidelines.

**Underground Heating Oil Tank Cleanup Program Narrative Description**

Provide a general description  
Character Count: 80/500 characters.

Project narrative does not need to be completed and is pre-filled in application

## Program Budget

This section includes two tabs, **Spreadsheet** and **Basis of Cost**.

### Spreadsheet Tab

- Click on the **Spreadsheet** tab. Enter the reimbursement amount you are requesting from DEP. DEP may consider reimbursing up to \$5,000 of eligible, paid costs, less a \$1,000 program deductible, on a per tank basis. Therefore, for each tank, qualified applicants may request that DEP reimburse the lesser of either: 1) The total, eligible, paid costs minus \$1,000; or, 2) \$4,000.

Example lists of typical eligible and ineligible costs are available on the reimbursement program website at: <https://www.dep.pa.gov/Business/Land/SiteRemediation/Storage-Tank-Cleanup-Program/Pages/Underground-Heating-Oil-Tank-Cleanup-Reimbursement-Program.aspx>

**Program Budget**  
Please see the [Help](#) section for details on how to complete the Program Budget.

Spreadsheet
Basis of Cost

**Budget Spreadsheet** ◆

The first column indicates the amount of funding you are requesting from DEP. After completing the budget, please complete the [Basis of Cost](#) tab. Included is a Budget Narrative where you can provide a more detailed description of specific line items.

Add funding source	Underground Heating Oil Tank Cleanup Reimbursement Program	Total
Underground Heating Oil Tank Cleanup Reimbursement Program - Collapse	\$0.00	
Reimbursement Amount Request <span style="float: right;"><a href="#">Remove</a></span>	\$0.00	\$0.00
Total	\$0.00	\$0.00
<b>Budget Total:</b>		<b>\$0.00</b>

### Basis of Cost Tab

- This tab has been prepopulated and does not need to be completed. You may ignore this tab and click "[Continue](#)" to advance to the Program Addenda section.

**Program Budget**  
Please see the [Help](#) section for details on how to complete the Program Budget.

Spreadsheet
Basis of Cost

**Basis of Cost** ◆

Provide the basis for calculating the costs that are identified in the Project Budget.

Appraisals                       Bids/Quotations  
 Budget Justification             Contractor Estimates  
 Engineer Estimates                 Sales Agreements

**Budget Narrative** ◆

The narrative must specifically address each of the cost items identified in the Budget Spreadsheet.  
Character Count: 122

This area does not need to be completed. All relevant information for your application will be uploaded on the Addenda tab



## Program Addenda

Answer the questions as required in the addenda. Once you have completed this section and uploaded all necessary documentation, click “[Continue](#)” to advance to the Application Certification.

### Tank Owner Information

- **Tank Owner Name** – Enter the tank owner’s legal name.
- **Mailing Address**– Enter the tank owner’s mailing address (include city, state, and zip code).
- **Contact Name**– Enter the name of the primary contact person for this application.
- **Daytime Telephone Number** – Enter the daytime telephone number for the primary contact person.
- **E-mail** – Enter the e-mail address for the primary contact person (optional).

### Tank Location Information

If your application includes one tank, enter the street address (include city, state, and zip code), county, and municipality where your tank is/was located.

If your application includes multiple tanks, assign a number (#1, #2, etc.) to each tank and enter the street address (include city, state, and zip code), county, and municipality for Tank #1.

### Description of the Tank, the Release, and the Costs (#1-14)

If your application includes one tank, complete questions 1 through 14 to describe your tank, the release, and the eligible environmental cleanup costs that you have paid.

If your application includes two or more tanks, then complete questions 1 through 14 to describe Tank #1 that is/was located at the tank location address listed above; that tank’s release; and the eligible environmental cleanup costs that you have paid for that tank.

Example lists of typical eligible and ineligible costs are available on the reimbursement program website:

<https://www.dep.pa.gov/Business/Land/SiteRemediation/Storage-Tank-Cleanup-Program/Pages/Underground-Heating-Oil-Tank-Cleanup-Reimbursement-Program.aspx>

### Additional Tanks (#15)

If your application relates to two or more tanks, then you must download the Additional Tank Worksheet (PDF) from the link provided under question 15 to include the additional tank(s) on your application. Complete and upload one copy of this worksheet for each additional tank.

If uploading more than one worksheet, please rename the worksheet files “Additional Tank Worksheet 1”, “Additional Tank Worksheet 2”, etc., prior to uploading.

**Program Addenda**  
Below are additional application requirements that your organization or project do not meet.

**Tank Owner Information**

Tank Owner Name: ◆

Mailing Address: ◆

Contact Name: ◆

Daytime Telephone Number: ◆

Email Address:

**Tank Location Information:**

Street Address: ◆

County: ◆

Municipality: ◆

### Cleanup Contractor(s) (#16)

Enter the contractor name, mailing address (including city, state, and zip code), contact person name, and daytime telephone number. Then click “Add” to save the contractor information. Repeat as needed to add the information for each contractor that was involved in the project.

16. Cleanup Contractor(s): Provide information about the contractor(s) who performed the work. ♦				
Contractor Name: ♦	Contractor Mailing Address: ♦	Contact Name: ♦	Daytime Telephone Number: ♦	<a href="#">Add</a>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
No data has been entered.				

### Documentation (#17)

Upload copies of the following documentation:

- The original, itemized contractor invoices for the tank closure and/or environmental cleanup work that has been performed. Contractor estimates or proposals will not be accepted.
- Proof of payment for all eligible costs to be considered for reimbursement. Proof of payment may include a copy of both the front and back of a cancelled check; a paid contractor invoice or account statement; or other paid receipt.

Example lists of typical eligible and ineligible costs are available on the reimbursement program website:

<https://www.dep.pa.gov/Business/Land/SiteRemediation/Storage-Tank-Cleanup-Program/Pages/Underground-Heating-Oil-Tank-Cleanup-Reimbursement-Program.aspx>

Once you have completed the Program Addenda section and uploaded all necessary documentation, click “Continue” to advance to the Application Certification.

### Application Certification and Submission

When you advance to this section, if any required information is missing from your application, your screen will look like the following example.

Under the orange “Application Certification” heading, it will state, “The following sections are incomplete. All required fields marked with a red diamond must be completed before you are able to submit this application”.

To add/correct the information on your application, click on the section heading to return to the incomplete section(s).

### Application Certification

The following sections are incomplete. All required fields marked with a red diamond (♦) must be completed before you are able to submit this application:

[Applicant](#) ← Click here to return and make the necessary changes

- Applicant Name is required.
- NAICS Code is required.

If your application is complete, your screen will instead look like the example below.

Complete the following fields:

- Indicate your certification of the application information by checking the related checkbox under the Electronic Signature Agreement.
- Indicate your identity as one of the following:
  - I am the applicant.
  - I am an authorized representative of the company, organization or local government.
  - I am a "Certified" Partner representative.
- Type your name in the "Type Name Here" block. This will serve as your official e-signature and authorizes your application.
- Check the "Electronic Attachment Agreement" box. *Please note that you do not need to mail a signature page to DEP to complete the on-line Application for Reimbursement.*

Finally, click on "**SUBMIT APPLICATION**" to advance to the Application Receipt Verification.

**Application Certification**

All of the required sections of the web application have been completed. If you have reviewed the application, you may submit it for processing. **After submitting, you will no longer be able to make changes.**

**Electronic Signature Agreement:**

By checking this box and typing your name in the below textbox, I hereby certify that all information contained in the single application and supporting materials submitted via the Internet and its attachments are true and correct and accurately represent the status and economic condition of the Applicant, and I also certify that, if applying on behalf of the applicant, I have verified with an authorized representative of the Applicant that such information is true and correct and accurately represents the status and economic condition of the Applicant. I also understand that if I knowingly make a false statement or overvalue a security to obtain a grant and/or loan from the Commonwealth of Pennsylvania, I may be subject to criminal prosecution in accordance with 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) and 31 U.S.C. §§ 3729 and 3802 (relating to false claims and statements).

I am the applicant

I am an authorized representative of the company, organization or local government.

I am a "Certified" Partner representative.

**Type Name Here:**

**Electronic Attachment Agreement:**

Along with the web application, if you have been requested or need to send any documentation to DEP please print and send a copy of your E-Signature and mail it to DEP along with any paper supporting documents. You will be given an opportunity to print the signature page along with a copy of the application immediately after you submit.

**SUBMIT APPLICATION**

The screenshot shows a web form titled "Application Certification". It contains several sections: a paragraph explaining that all required sections are completed and that changes cannot be made after submission; a section for the "Electronic Signature Agreement" with a checkbox and a long text block; three radio button options for identifying the user as the applicant, an authorized representative, or a "Certified" Partner representative; a "Type Name Here" section with a text input field; another section for the "Electronic Attachment Agreement" with a checkbox and text; and a yellow "SUBMIT APPLICATION" button at the bottom right. Red arrows point to the checkbox in the Electronic Signature Agreement section, the first radio button, the text input field, the checkbox in the Electronic Attachment Agreement section, and the "SUBMIT APPLICATION" button.

