

**INSTRUCTIONS FOR THE ON-LINE APPLICATION**  
**Pollution Prevention Reimbursement Grant Program**


Grant 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 review process. The link to the on-line application can be found at:

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

This document will provide 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 DEP.**


**User Tips**

- The Electronic Single Application works best when accessed through Internet Explorer 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 with a “” 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 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 thru Friday from 8:30 am-6:00 pm EST.**

## Registration and Login

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

[Help](#) [Contact Us](#)

### 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 [dcedcs@pa.gov](mailto:dcedcs@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

[LOGIN](#)

Powered by

**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.
- Indicate whether you are applying for your or another's organization.
- Do you need help selecting your program – Select "No".
- Click on "CREATE A NEW APPLICATION".

### 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

Test Pump & Plug

Do you need help selecting your program?

Yes ▼

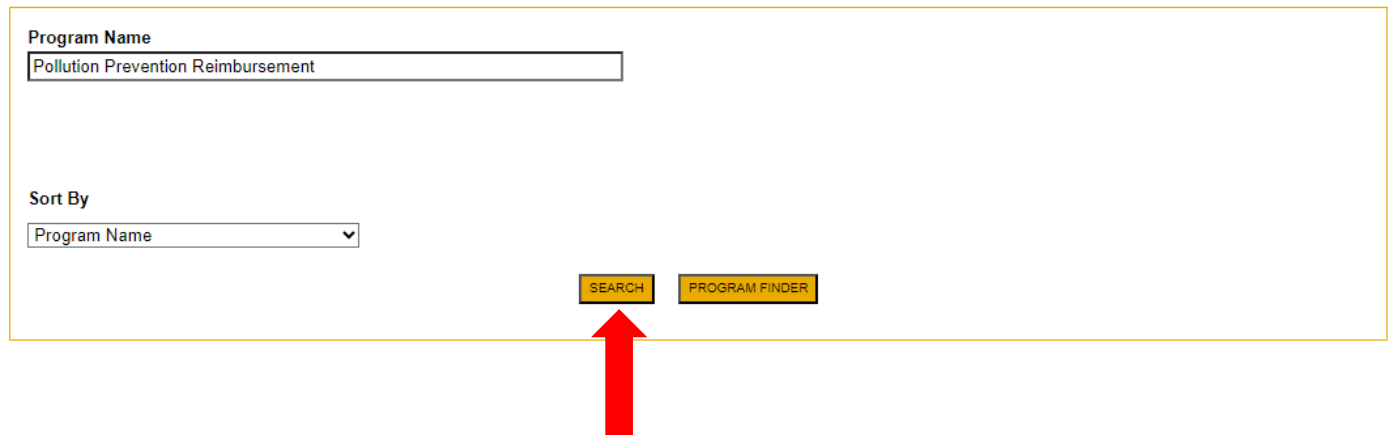
[CREATE A NEW APPLICATION](#)

## Select Program

- Under Program Name, enter “Pollution Prevention Reimbursement”.
- Click “SEARCH”. Look for the appropriate grant program offered by DEP.

### Select Program

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



The screenshot shows a web form titled "Select Program". It has a text input field labeled "Program Name" containing the text "Pollution Prevention Reimbursement". Below this is a "Sort By" dropdown menu set to "Program Name". At the bottom of the form are two buttons: "SEARCH" and "PROGRAM FINDER". A large red arrow points upwards from below the "SEARCH" button.

## Apply

- Select the program for which you are applying.

### Pollution Prevention Reimbursement Grant

Pennsylvania Department of Environmental Protection

*Grants are issued to eligible tank owners who own six or fewer regulated underground tanks in Pennsylvania.*

Grants and funds are authorized under Section 711 of the Storage Tank and Spill Prevention Act, Act 32 of 1989 (as amended). Tanks must be underground tanks which have not been upgraded to comply with technical requirements of federal and state regulations, regulated, and which are registered with DEP prior to tank closure. The grant shall not exceed \$2,500 per tank and the grant application must be submitted after all work is finished. Eligible costs may include: pumping regulated product out of the tank; disposal of product; tank cleaning and grouting the fill pipe.

 [Apply](#) 

## Applicant Information Tab

- The Applicant Information section requires data related to the applicant or sponsor for which the application is being submitted.
- Applicant Entity Type – select the appropriate type for your organization.
- Applicant Name – Enter the organization’s name, the name under which the applicant or sponsor legally conducts business.
- NAICS Code - From the dropdown box, select the appropriate type. The NAICS code will auto-populate for you.
- FEIN/SSN Number - Enter the Federal Tax ID number for the legal County name (no dashes).
- UEI Number - Enter the applying organization’s unique, 12-character alphanumeric identifier assigned to all entities that conduct business with the federal government.
- Top Official/Signing Authority – In this block, enter the head of the organization’s name.
- Title – Enter that person’s title.
- SAP Vendor# - Fill in if known.
- Contact Name – Enter the primary contact name for this project.
- Contact Title – Enter the primary contact’s title for this project.
- Phone and Fax – Enter the phone and fax numbers for the primary contact for this project.

- E-mail – Enter the e-mail for the primary contact for this project.
- Mailing address, City, State and Zip Code – Enter this information for the organization and primary contact for this project.
- Click “Continue” at the bottom right.

## 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:  ♦

Top Official/Signing Authority:  ♦

Title:  ♦

SAP Vendor #:  ♦  
(xxxxxx 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
<input type="checkbox"/> Business Financial Services	<input type="checkbox"/> Call Center	<input type="checkbox"/> Child Care Center	<input type="checkbox"/> Commercial	<input type="checkbox"/> Community Dev. Provider
<input type="checkbox"/> Computer & Clerical Operators	<input type="checkbox"/> Defense Related	<input type="checkbox"/> Economic Dev. Provider	<input type="checkbox"/> Educational Facility	<input type="checkbox"/> Emergency Responder
<input type="checkbox"/> Environment and Conservation	<input type="checkbox"/> Exempt Facility	<input type="checkbox"/> Export Manufacturing	<input type="checkbox"/> Export Service	<input type="checkbox"/> Food Processing
<input type="checkbox"/> Government	<input type="checkbox"/> Healthcare	<input type="checkbox"/> Hospitality	<input type="checkbox"/> Industrial	<input type="checkbox"/> Manufacturing
<input type="checkbox"/> Mining	<input type="checkbox"/> Other	<input type="checkbox"/> Professional Services	<input type="checkbox"/> Recycling	<input type="checkbox"/> Regional & National Headquarters
<input type="checkbox"/> Research & Development	<input type="checkbox"/> Retail	<input type="checkbox"/> Social Services Provider	<input type="checkbox"/> Tourism Promotion	<input type="checkbox"/> Warehouse & Terminal

[Continue](#)



## Project Overview

- Project Name – The project name will auto-populate from the information you filled in at the beginning of the process. You may change the project name at this time.
- Enter the name of the person you spoke with at DEP regarding your application (if applicable).
- Be sure to enter the number of sites if there is more than one project site.

### Project Overview

Project Name: ♦

Pollution Prevention

Is this project related to another previously submitted project?

No ▼

If yes, indicate previous project name:

Have you contacted anyone at DEP about your project?

No ▼

If yes, indicate who:

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

No ▼

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.

No ▼

How many Site Locations are involved in the project?

1 ▼

[Continue](#)

Click "Continue"

## Project Site

- Address – Enter the mailing address (street address). **P.O. Boxes are not acceptable.**
- City, State and Zip Code – Enter this information. (If you indicated more than one site on the prior tab, you will be requested to complete this information for all sites.)
- County – Select your county from the dropdown box.
- Municipality – Select the Municipality or County-Wide from the dropdown box, as appropriate.
- PA House, PA Senate and US House – These fields will be auto-populate based on the 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:**

**City:**

**State:** PA

**Zip Code:**

**County:**  ◆

**Municipality:**  ◆

**PA House:** ◆ ☒ Patty Kim (103)  
☐ Dave Madsen (104)

**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

[Continue](#)

Click “Continue”

## Project Narrative

- This tab does not need completed for this type of application. It has been prepopulated for you and can be skipped by clicking continue.

Click “Continue”

### 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 Addenda section or the Program Guidelines.

**Please provide a brief narrative of your project**

Character Count: 123/3000 characters.

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

[Continue](#)

## Program Budget

- There are two tabs on this page, Spreadsheet and Basis of Cost.

### Spreadsheet Tab

- Click on the Spreadsheet tab. Enter the amount of funding you are requesting from DEP.

### 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	Pollution Prevention Reimbursement Grant	Total
Pollution Prevention Reimbursement Grant - <a href="#">Collapse</a>	\$0.00	
Grant Request <a href="#">Remove</a>	<input type="text" value="\$0.00"/>	\$0.00
Total	\$0.00	
	Budget Total:	\$0.00



[Continue](#)

Click “Continue”

## Basis of Cost Tab

This tab does not need to be completed and has been prepopulated. You may ignore this tab and click continue.

### 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.

- |  |   |
|--|---|
| <input type="checkbox"/> Appraisals                      | <input type="checkbox"/> Bids/Quotations      |
| <input checked="" type="checkbox"/> Budget Justification | <input type="checkbox"/> Contractor Estimates |
| <input type="checkbox"/> Engineer Estimates              | <input type="checkbox"/> Sales Agreements     |

#### Budget Narrative ♦

The narrative must specifically address each of the cost items identified in the Budget Spreadsheet.

Character Count: 123

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

Click "Continue"

## Program Addenda

Answer the questions as required on the addenda.

### Addenda

Below are additional application requirements specific to the program you selected. If you are having problems completing the Addenda because your organization or project do not meet the requirements listed below, please try [changing your program](#).

#### Owner Information

Tank Owner Name ♦

Business Address ♦

Character Count: 0 characters.

You will need to upload the Itemized Expenses for Reimbursement Form, which should be completed and signed by the contractor. Click on the links provided to obtain this form, or click here for [Word](#) or [PDF](#). You may also upload documentation that supports qualification for the Pollution Prevention Reimbursement Grant.



## Documentation

Upload the Itemized Expenses For Reimbursement form. Please remember page one of this form must be signed by the contractor completing the work. ♦

You will need to upload the Itemized Expenses for Reimbursement Form, which should be completed and signed by the contractor. Click for [Word](#) or [PDF](#) . You may also upload documentation that supports qualification for the Pollution Prevention Reimbursement Grant.

### Upload Files

Use the control below to select your file. Each file can be no larger than 30MB.

File 1  No file chosen

## Certification and Submission

- If there is any missing information in 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 page.

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## 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.
- All conditional fields marked with a blue diamond (◆) may be required to be completed before you are able to submit this application.

[Applicant](#)



- NAICS Code is not a valid four digit code.
- Phone Number must be a valid phone number, g
- Phone Number is required.
- Mailing Address is required.
- Enterprise Type is required.

Click here to make the necessary changes

Your application is automatically saved as you work. Feel free to exit this application and return at a later time.

If your application is complete, your screen will look like this:

## 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

Complete the following fields:

- Indicate certification of application information by checking the related checkbox under the Electronic Signature Agreement.
- Indicate 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.
- Click on "Submit Application".

## Application Receipt Verification

- If you want a copy of your application, click the “Print Entire Application with Signature Page” link. You will always be able to access your application with the user name and password you created at the beginning of the application.
- Make sure to note the Single Application ID#. All future correspondence from DEP will reference this number.
- **You do not need to send the signature page and/or any further documentation to the Grants Center.** All the information needed is contained in your on-line submission.

## Application Certification

Single Application ID #: 202308295136

The web application has been successfully submitted for processing.

I hereby certify that all information contained in the single application and supporting materials submitted via the Internet, Single Application # 202308295136 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).

The signature page may also be printed now. You may also print submitted applications from the Home page. Click the link labeled "Submitted Applications" in the top toolbar.

[Print Signature Page only](#)

[Print Entire Application with Signature Page](#)

The signature page along with any paper supporting documents can be mailed to the following address:

Pennsylvania Department of Environmental Protection  
DEP Grants Center  
P.O. Box 8776  
Harrisburg, PA 17105-8776

Do not send any documentation to DEP. All information needed is contained in your on-line submission.

- **Congratulations!** You have completed the on-line application. **You do not need to mail anything additional to DEP.**