INSTRUCTIONS FOR THE ON-LINE APPLICATION

The Host Municipality Review of Permit Applications Grant must be submitted through the Department of Community and Economic Development's (DCED) 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 call the DCED Customer Service Center at 1-800-379-7448. They are open 8:30 am-5:00 pm EST Monday thru Friday.
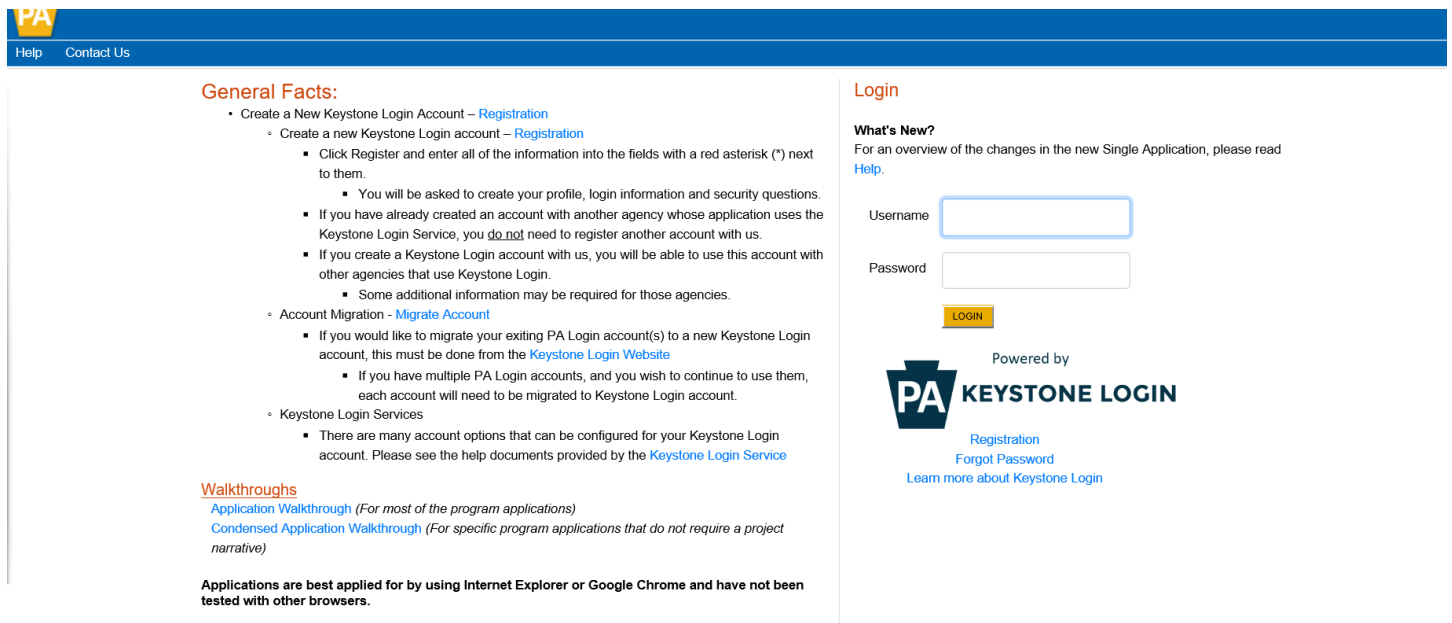
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Reminder: If you have questions completing the electronic application, please call the DCED Customer Service Center at 1-800-379-7448. They are open 8:30 am-5:00 pm EST Monday thru Friday.

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.

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".

Select Program

- Under Program Name, enter "Host Municipality".
- Click "SEARCH". Look for the appropriate grant program offered by DEP.

- 3 results (Edit Search)

Apply

- Select the program for which you are applying.

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).
- CEO – In this block, enter the head of the organization's name.
- CEO 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.

USE ACCOUNT INFORMATION

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

Applicant Name: Lebanon County

NAICS Code

--SELECT--

FEIN/SSN Number (xxxxxxxxx)

DUNS Number:

CEO:

CEO 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:

Type

f enterprises that describe the organization listed above. You may select more than one type.

nology	☐ Agri-Processor	☐ Agri-Producer	☐ Authority	☐ Biotechnology / Life Sciences
sial Services	☐ Call Center	☐ Child Care Center	☐ Commercial	☐ Community Dev. Provider
rical Operators	☐ Defense Related	☐ Economic Dev. Provider	☐ Educational Facility	☐ Emergency Responder

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.

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.

Click "Continue"

Project Narrative

- Complete question in this section. Be as specific and concise as possible. Responses to all questions are required.

Click "Continue"

Program Budget

- There are two tabs on this page, <u>Spreadsheet</u> and <u>Basis of Cost</u>.

Spreadsheet Tab

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

Click "Continue"

Basis of Cost Tab

This tab does not need completed and has been prepopulated. You may ignore this tab.

Click "Continue"

Program Addenda

- Complete all fields and upload all required documents on this tab. Once completed, click Continue.

Agency: Pennsylvania Department of Environmental Protection
Applicant: Municipal Waste Landfill Test
Program: Host Municipality Review of Permit Applications Grant

Web Application #: 8179369

Program Addenda

Below are additional application requirements specific to the program you selected. If you are having problems completing the Program Addenda because your organization or project do not meet the requirements li

1. USGS Map Location of Facility

Enter Latitude of site ◆

123.456

Enter Longitude of site ◆

789.101

7.5' Map Name ◆

Test

Upload an 8 ½ X11 copy of Site Location ◆

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

test document.pdf   View   Delete

File 1 [   ] Browse...

2. General Information on Facility
Total Acres of the Property ◆

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10. Attach copies of all invoices paid to the professional engineer/consultant by the municipality. ◆

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

test document.pdf   View   Delete

File 1 [   ] Browse...

Upload a copy of the Professional Certification Form. ◆

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

test document.pdf   View   Delete

File 1 [   ] Browse...

Continue

You may download required documents from within the application itself or visit
https://www.dep.pa.gov/Business/Land/Waste/SolidWaste/MunicipalWaste/Host-Municipality-Programs/Pages/default.aspx [need to verify website]   to obtain a copy of the complete grant guidance document, including all required documentation.

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.

Home	Help	Save	Print	Contact Us					
Program	Applicant	Company	Project Overview	Project Site	Narrative	Budget	Addenda	Certification	

Agency: Pennsylvania Department of Environmental Protection
Applicant: **Web Application #:** 8178841
Company:
Program: Growing Greener Plus - Growing Greener (Watershed Restoration and Protection) Program Guidelines

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

- Entity Type is required.
- Applicant Name is required.
- NAICS Code is not a valid four digit code.
- FEIN Number is required.
- Ceo is required.
- Ceo Title is required.
- Contact Name is required.
- Contact Title is required.
- Phone Number must be a valid phone number, please use "-" instead of spaces. Must include area code xxx-xxx-xxxx.
- Phone Number is required.

Click here to make the necessary changes

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

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:
  - o I am the applicant.
  - o I am an authorized representative of the company, organization or local government.
  - o 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 Applications 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 the Department 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.

| Home | Help | Print | Contact Us | | Logout |

Program   Addenda   Certification

Agency: Pennsylvania Department of Environmental Protection
Applicant: Lebanon County
Program: 901 Municipal Waste Planning Grant   Web Application #: 8116130

Application Certification

Single Application ID #: 201712074962

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 # 201712074962 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

Pennsylvania Department of Environmental Protection
DEP Grants Center
PO Box 8776
Harrisburg, PA 17105-8776

> You do not need to mail any documentation to DEP. All information needed is contained in your on-line submission.

- **Congratulations!** You have completed the on-line application.