INSTRUCTIONS FOR THE ELECTRONIC SINGLE ON-LINE APPLICATION

The County Recycling Coordinator Program Grant Application 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

User Tips:

- Electronic Single Application (ESA) works best when accessed through Internet Explorer.
- If you allow your screen to sit idle for more than 30 minutes, you will lose the data entered since last save and will have to re-enter it.
- Save frequently.
- When completing the application, fields with a red diamond "•" are required fields. If a required field is skipped, you will be notified later in the application to return to the affected 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 Enterprise eGrants Customer Service Center at 1-833-448-0647 or by email at <u>egrantshelp@pa.gov</u>. They are open 8:30 am 6:00 pm EST Monday thru Friday.

1. Registration and Login:

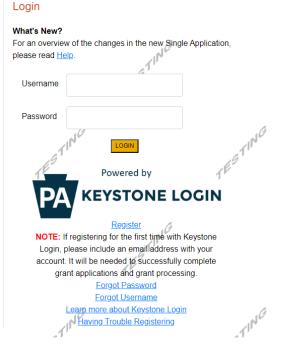
Go to the ESA login page https://www.esa.dced.state.pa.us/Login.aspx

- If you have previously submitted a 903 Grant, please enter the Username and Password you were given. Do not register for a second time.
- If you have registered with another agency through the Keystone Login Account, you do not need to register again.



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- Create a New Keystone Login Account <u>Registration</u>
 - · Click Register and enter all of the information into the fields with a red asterisk (*) next to thom
 - 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 ra-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.



2. Begin a New Application:

- a. <u>Project Name</u> Enter County Recycling Coordinator Grant
- b. Do you need help selecting your program? Select "No" in the dropdown box.

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c. Click on "CREATE A NEW APPLICATION."

PA				
Home Help Contact Us				
Submitted Applications User Settings				
Project Name	nter a brief name for the project (up to sixty characters) an	d answer whether you need help selecting your program. I	f you already know the name of the program you $\mathcal{A}_{\mathcal{A}}$	u want to apply for, answer "No".
Do you need help selecting your program?				
No V	TESTING		TESTING	TESTING

3. Select Program:

- a. Program Name County Recycling Coordinator Grant
- b. Scroll down and click on "SEARCH"

PA					
Home Help Save Print Contact Us					
Program					
Agency: Pennsylvania Department of Community and Economic De Applicant: Program: DCED	velopment		Web Application #: 8188534		
Red Diamond (♦) = Required Field. Blue Diamond (♦) = Conditional Required Field.					
Select Program To search for programs based on your organization and/or project, click the Pro	gram Finder button below.	,		,	,
Program Name		TESTING	TESTING	TESTING	
Sort By	TESTING			TESTING	TESTIN

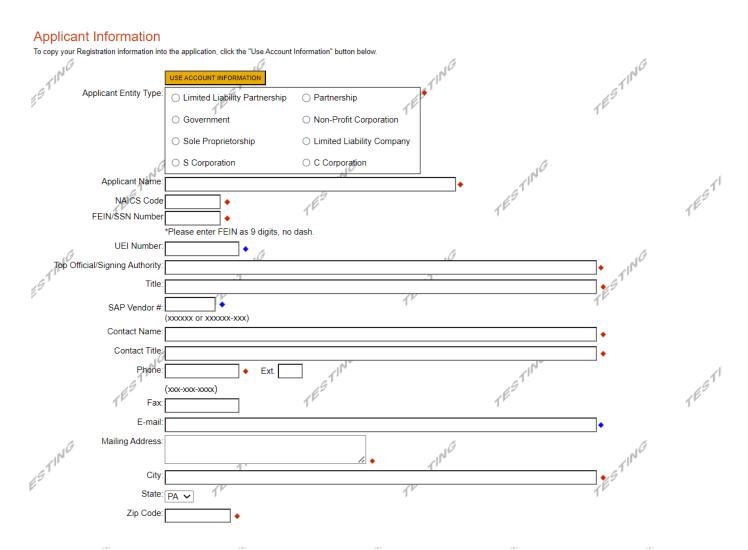
4. Apply:

- a. Locate "County Recycling Coordinator Grant."
- b. Click on "Apply."

PA		
Home Help Save Print Contact Us		Logo
Program		
Agency: Pennsylvania Department of Community and Economic Development Applicant: Program: DCED	Web Application #: 8188534	
Red Diamond (♦) = Required Field. Blue Diamond (♦) = Conditional Required Field.		
Select Program To search for programs based on your organization and/or project, click the Program Finder button below. Program Name County Recycling Coordinator Grant	TESTING TESTING	TESTING
Sort By Program Name v TESTING		NG TESTING
1 results. (Edit Search)		
Search Results Below Is an alphabetical listing of all programs matching the search criteria above. If you are eligible to apply, cli	ick the Apply link to select the program.	
County Recycling Coordinator Grant Pennsylvania Department of Environmental Protection The Department of Environmental Protection (DEP) avards Section 903 grant funds to eligible countie Municipal West Planning Recycling and Water Berdurdton Act (Act 101 of 1988, PJ, 555)	Accily s of Pennsylvania for 50 percent reimbursement of the approved cost of their county recycling	coordinator's salary and expenses. The grants are authorized under Section 903 of the

- **5.** Applicant Information (shown on next page):
 - a. The Applicant Information section requires data related to the County for which the application is being submitted. Instructions are as follows:
 - <u>Applicant Entity Type</u> Select "Government."
 - <u>Applicant Name</u> This MUST BE ENTERED as a COUNTY NAME only! The 903 Grant Program ONLY ACCEPTS applications from a County. Enter as, for example, "Dauphin County" (substitute the county name for which the application is submitted).
 - <u>NAICS Code</u> From the dropdown box, select "Executive, Legislative & Other General Government Support." The NAICS code will auto-populate the fields.
 - <u>FEIN/SSN Number</u> Enter the Federal Tax ID number for the County's legal name (no dashes). Be sure this is the COUNTY Federal Tax ID!
 - <u>UEI Number</u> Unique Entity ID. Enter the applying organization's unique, 12-character alphanumeric identifier assigned to all entities that conduct business with the federal government.
 - <u>**Top Official/Signing Authority**</u>– In this block, enter the organization's authorized representative (Official Applicant who signed the Application for Reimbursement for a County Recycling Coordinator (Section A F Form) Affidavit (Section F).
 - <u>**Top Official/Signing Authority Title**</u> Enter the title of the authorized representative (Official Applicant in Section F above).
 - <u>SAP Vendor#</u> Leave blank.
 - <u>Contact Name</u> Enter the primary contact's name (current CRC).
 - <u>Contact Title</u> Enter the primary contact's title (current CRC).
 - <u>Phone and Fax</u> Enter the workplace phone and fax numbers for the primary contact (current CRC).
 - <u>**E-mail**</u> Enter the e-mail for the primary contact (current CRC).
 - Mailing address, City, State, and Zip Code Enter the workplace information for the primary contact (current CRC).
 - <u>Enterprise Type</u> Select "Government."
 - b. Click on "Continue" at the bottom right of the page.

08/20/2023



Enterprise Type

1	ndicate the types of enterprises that describe the orga	nization listed above. You may se	elect more than one type. 🔶		
	Advanced Technology	Agri-Processor	Agri-Producer	Authority	Biotechnology / Life Sciences
	Business Financial Services	Call Center	Child Care Center	Commercial	Community Dev. Provider
	Computer & Clerical Operators	Defense Related	Economic Dev. Provider	Educational Facility	Emergency Responder
	Environment and Conservation	Exempt Facility	Export Manufacturing	Export Service	Food Processing
TP	Government	Healthcare	Hospitality	Industrial	Manufacturing
	Mining	Other	Professional Services	Recycling	Regional & National Headquarters
	Research & Development	Retail	Social Services Provider	Tourism Promotion	Warehouse & Terminal
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Continue

6. Project Overview:

- a. 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.
- b. The remaining information in the Project Overview section doesn't need entered.
- c. Click on "Continue."

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Home Help Sa	ve Print Cont	act Us				Logout
Program Applicant	Project Overview	Project Site Narr	ative Budget	Addenda Certifica	ation	
Agency: Pennsylvania I Applicant: Program: County Recyc				Web Appli	ication #: 8137150	
Project Overvie	WIN		TESTI		TEST	1
Is this project related to No		ibmitted project?]	TES	TING	1
Have you contacted any No V If yes, indicate who:	- MG		TESTI	10	TEST	N ^G
If yes, what level:	olying for multiple fur	ding sources for this rappidation. By answer	project? ing "Yes", you will be	19	TING or an additional program on the	Certification page
How many Site Location	s are involved in the p	project?	TESTI	10	TEST	in ¹⁰ Continue

- 7. Project Site:
 - a. <u>Address</u> Enter the county's mailing address (street address). **P.O. Boxes are not accepted** for entry here.
 - b. <u>City, State, and Zip Code</u> Enter this information in the boxes provided.
 - c. <u>**County**</u> Select "County" from the dropdown box.
 - d. <u>Municipality</u> Select "Countywide Project" from the dropdown box.
 - e. PA House, PA Senate, and US House fields will disappear based on the selection of "Countywide Project" in the Municipality dropdown box.
 - f. Designated Areas Leave blank.
 - g. Click on "Continue."

Program Applicant Project Overview Project Contract Us Program Applicant Project Overview Project O	Logout
Program Applicant Project Overview Project Site Narrative Budget Addenda Centification Agency: Pennsylvania Department of Environmental Protection Web Application #: 8188534 Applicant: Web Application #: 8188534 Program: County Recycling Coordinator Grant Red Diamond (•) = Required Field. Blue Diamond (•) = Conditional Required Field. Project Site Location(s) To add Project BioL Iocation (* Dear set the Project Overview section.	Logout
Agency: Pennsylvania Department of Environmental Protection Application #: 8188534 Program: County Recycling Coordinator Grant Red Diamond (*) = Required Field. Blue Diamond (*) = Conditional Required Field. Project Site Location (space see the Project Overview section.	
Applicant: Web Application #: 8188534 Program: County Recycling Coordinator Grant Web Application #: 8188534 Red Diamond (•) = Required Field. Blue Diamond (•) = Conditional Required Field. Project Site Location, place see the Project Overview section. To add Project Site Location, place see the Project Overview section.	
Blue Diamond (♦) = Conditional Required Field. Project Site Location(s) To add Project Site Locations, please see the <u>Project Overview</u> section.	
To add Project Site Locations, please see the <u>Project Overview</u> section.	
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8. Project Narrative:

- **a**. This section does not need to be completed.
- b. Click on "Continue."

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Web Application #: 8188534
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n. If a more detailed narrative is required for the Program selected, instructions will either be provided in the Addenda section or the
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9. Program Budget – Spreadsheet Tab:

- a. Click on the Spreadsheet tab.
- b. <u>In the first column of the Grant Request section, enter \$1.00</u> as the amount of funding you are requesting from DEP.

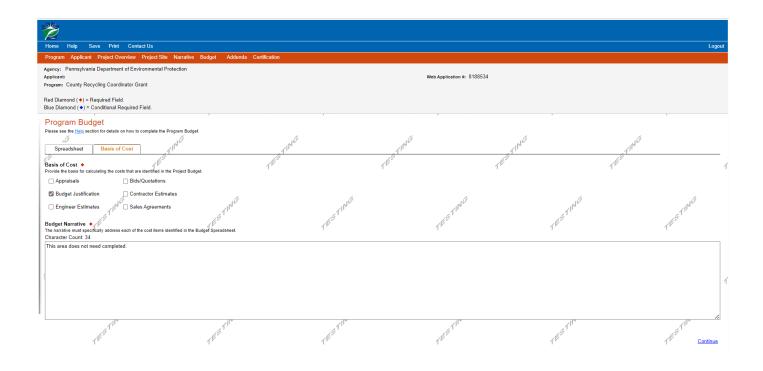
NOTE: The total amount of reimbursement will not be known until the application is processed. This entry will not have any effect on your final reimbursement amount.

c. Click on "Continue."

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Home Help Save Print Contact Us					Log
Program Applicant Project Overview Project Site Narrative	e Budget Addenda Certification				
Agency: Pennsylvania Department of Environmental Protection Applicant: Program: County Recycling Coordinator Grant			Web Application #: 8188534		
Red Diamond (\blacklozenge) = Required Field. Blue Diamond (\blacklozenge) = Conditional Required Field.					
Program Budget					
Please see the <u>Heip</u> section for details on how to complete the Program Budg	TING	111	0	TING	TING
The budget for this program is not determined until the program ha	as been submitted. However, a placeholder value i	s required at this time. Please fill in a value of	\$1 now, and the program office will upda	te the budget once you submit your appl	lication.
Budget Spreadsheet ◆					
The first column indicates the amount of funding you are requesting from DEF	P. After completing the budget, please complete the Basis	of Cost tab. Included is a Budget Narrative where yo	u can provide a more detailed description of sp	pecific line items.	
Add funding source County Recycling T Coordinator Grant	Total				
DEP County Recycling Coordinator Grant - Collapse \$0.00					
Grant Request Remove \$0.00 Total \$0.00 \$0.00	\$0.00				
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11. Basis of Cost Tab:

- a. The Basis of Cost tab will pre-populate. Nothing in this section needs entered.
- b. Click on "Continue."



12. Program Addenda

- a. <u>Upload all required documentation</u>, (see the 903 County Recycling Coordinator Program Grant for more detailed information) to include:
 - o 903 Application Spreadsheet.
 - All expenses, such as invoices, receipts, proofs of payment, etc. If there are none for this application, please download a page saying, "no requests."
 - Section A-F Form, pages 1-3 (Application for Reimbursement for a County Recycling Coordinator).
 - Agreement between the County and the Contractor (organization / person) designated as the CRC, if applicable.
 - Worker Protection Form if grant request is totaling more than \$10,000.00.
- b. Click on "Continue."

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ncy: Pennsylvania Department of Environmental Protection
licant: Web Application #: 8188534 pram: County Recycling Coordinator Grant
Diamond (•) = Required Field. Diamond (•) = Conditional Required Field.
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w are additional application requirements specific to the program you selected. If you are having problems completing the Addenda bacause your organization or project do not meet the requirements listed below, please try <u>classing your compared to a completing the Addenda bacause</u> your organization or project do not meet the requirements listed below, please try <u>classing your your</u> and the try of the program you selected.
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ske uptoad the completed 903 Application Spreadsheet of the appropriate calendar year, which has been sent by the 903 County Recycling Grant Coordinator via e-mail to the County Recycling Coordinator. •
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13. Application Certification – Completion:

- **a**. If there is any missing information in your application, the screen will look similar to the following example.
- b. 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 submission of this application".
- **c.** To add/correct the information on the application, click on the orange section heading to return to the page.

*	
Home Help Save Print Contact Us	Logout
Program Applicant Project Overview Project Site Narrativ	ive Budget Addenda Certification
Agency: Pennsylvania Department of Environmental Protection Applicant: Program: County Recycling Coordinator Grant	Web Application #: 8137150
Application Certification	TESTIN.
The following sections are incomplete. All required fields marked application:	d with a red diamond (*) must be completed before you are able to submit this
Applicant Entity Type is required. Applicant Name is required. Fill Number is required. Ceo is required. Contact Name is required. Contact Title is required. Contact Title is required. Contact Title is required.	Click here to make the necessary changes
 Phone Number must be a valid phone number, please use "-" Phone Number is required. Mailing Address is required. City is required. Zip Code is required. Enterprise Type is required. Applicant Information has not saved correctly 	"instead of spaces. Must include area code xxx-xxx-xxxx. TESTING
Project Site Location(s)	
Project Site 1: County is required. Project Site 1: Municipality is required. Project Site 1: PA House District is required. Project Site 1: PA Senate District is required. Project Site 1: US Congressional House District is required.	TESTING
Program Budget	
Funding Source "County Recycling Coordinator Grant ()" mus	st have a Grand Total greater than zero.
Program Addenda Application Spreadsheet has not been uploaded. Expense Receipts has not been uploaded. Application For Reimbursement has not been uploaded.	TESTING
Your application Is automatically saved as you work. Feel free to exit	it this application and return at a later time.

14. Application Certification – Submission:

a. If application is complete, the screen will look like this:

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Home Help	Save	Print Con	tact Us					Logout
Program App	licant Proj	ect Overview	Project Site	Narrative	Budget	Addenda	Certification	
Agency: Pennsy Applicant: York C Program: County	ounty			ction			Web Application #: 81371	150
Application	16		ration have bee	n completed	If you have	reviewed th	e application, you may a	ubmit it for processing. After
submitting, you					. in you ridw	a reviewed th	io application, you may si	aoran a for processing. Alter
supporting mater the Applicant, an information is tru make a false stata prosecution in ac claims and stater O I am the ap	his box and t ials submitted d latso certif e and correct tement or over cordance wit ments). oplicant thorized repr rtified" Pattne	yping your na d via the Inter y that, if apply and accurate rivalue a sect h 18 Pa.C.S.	net and its attac ing on behalf of ely represents th unity to obtain a g § 4904 (relating the company, or	hments are t f the applican le status and grant and/or l to unsworn f	true and con it, I have ver economic co loan from the falsification t	rect and accu ified with an a ondition of th e Commonwe to authorities)	authorized representative e Applicant. I also unders ealth of Pennsylvania, I n	us and economic condition of e of the Applicant that such
E-Signature ar	the web appli nd mail it to D	ication, if you EP along with	have been requ h any paper supp y after you subm	porting docur nit.	d to send ar ments. You w	will be given a	ation to DEP please print an opportunity to print the	and send a copy of your e signature page along

- b. Complete the following fields under the Electronic Signature Agreement (see above):
 - <u>Indicate certification of application information</u> by checking the related checkbox.
 - <u>Indicate identity</u> by clicking on "I am an authorized representative of the company, organization, or local government."
 - <u>Type YOUR name in the "Type Name Here" block</u>. This will serve as your official e-signature and authorizes your application.
 - <u>Check the "Electronic Attachment Agreement" box.</u>
 - <u>Click on "Submit Application"</u>.

15. Application Receipt Verification:

- a. 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.
- b. Make sure to note the <u>Single Application ID#</u>. All future correspondence from the Department will reference this number.
- c. Please do not send the signature page and/or any further documentation to the Grants Center. All the information needed is contained in the on-line submission.

Home Help Print Contact Us	Logout
Program Addenda Certification	
Agency: Pennsylvania Department of Environmental Protection Applicant: York County rogram: County Recycling Coordinator Grant	Web Application #: 8137150
Application Certification	aTh.
Single Application ID #: 201809278038	TE
The web application has been successfully submitted for processing.	
certify that, if applying on behalf of the applicant, I have verified with an author correct and accurately represents the status and economic condition of the Ap	plicant. I also understand that if I knowingly make a false statement or
certify that, if applying on behalf of the applicant, I have verified with an author correct and accurately represents the status and economic condition of the Ap overvalue a security to obtain a grant and/or loan from the Commonwealth of I with 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) and 31 The signature page may also be printed now. You may also print submitted a	ized representative of the Applicant that such information is true and plicant. I also understand that if I knowingly make a false statement or Pennsylvania, I may be subject to criminal prosecution in accordance U.S.C. §§ 3729 and 3802 (relating to false claims and statements).
certify that, if applying on behalf of the applicant, I have verified with an author priect and accurately represents the status and economic condition of the Ap overvalue a security to obtain a grant and/or loan from the Commonwealth of I with 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) and 31 The signature page may also be printed now. You may also print submitted a Applications" in the top toolbar.	ized representative of the Applicant that such information is true and plicant. I also understand that if I knowingly make a false statement or Pennsylvania, I may be subject to criminal prosecution in accordance U.S.C. §§ 3729 and 3802 (relating to false claims and statements).
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d. **Congratulations!** The on-line application is completed. Notification of application status will be sent.