


INSTRUCTIONS FOR THE ON-LINE APPLICATION

The 902 Development & Implementation of Municipal Recycling Programs Grant must be submitted through the Department of Community and Economic Development's (DCED) Electronic Single Application 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 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 “” 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.
- 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.
- 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.

- **Login, and register if necessary, to the ESA system.**

General Facts

- Create a New Keystone Login Account – [Registration](#)
 - 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.
 - Account Migration - [Migrate Account](#)
 - If you would like to migrate your exiting PA Login account(s) to a new Keystone Login account, this must be done from the [Keystone Login Website](#)
 - If you have multiple PA Login accounts, and you wish to continue to use them, each account will need to be migrated to Keystone Login account.
 - 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](#)

Applications are best applied for by using Internet Explorer or Google Chrome and have not been tested with other browsers.

Login

What's New?

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

Username

Password

LOGIN

Powered by



[Registration](#)
[Forgot Password](#)
[Learn more about Keystone Login](#)

- **Begin a New Application**

- Project Name – Choose and enter a name for your project.
- Do you need help selecting your program – Select “Yes”
- Click on “CREATE A NEW APPLICATION”

A screenshot of a web application interface. At the top is a blue header with the 'PA' logo and navigation links: 'Home', 'Help', 'Contact Us', and 'Logout'. Below this is an orange bar with 'Submitted Applications' and 'User Settings'. The main content area is titled 'Begin a New Application' and contains instructions: '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".' There is a text input field for 'Project Name' and a dropdown menu for 'Do you need help selecting your program?' with 'Yes' selected. A yellow button labeled 'CREATE A NEW APPLICATION' is at the bottom, with a large red arrow pointing up to it.

- **Select Program**
 - Under “Agencies”, click on DEP.
 - Scroll down and click “SEARCH”

PA
Home Help Save Print Contact Us [Logout](#)

Program

Agency: Pennsylvania Department of Community and Economic Development Web Application #: 8116127

Applicant: _____

Program: DCED

Select Program

Below is a listing of the types of organizations and projects that are most commonly funded. You may select more than one option. If no options are selected, all programs will display.

Agencies
Select to limit the search results

PCA
 DCED
 DEP
 Dept of Agriculture
 Office of the Budget
 PEMA
 PENNDOT
 PHMC

[Clear Agencies](#)

Non-Profit/Government Enterprise Types ([Display For-Profit Program Finder](#))

If you are applying on behalf of a company, you may want to search the For-Profit Program Finder (click the link above).

Authority
 College/University
 Economic Development Provider
Types of organizations include but are not limited to: Area Loan Organizations (ALO), Community Development Financial Institutions (CDFI), Economic Development Corporations (EDC), Industrial Development Authorities (IDA), Industrial Development Corporations (IDC), Local Development Districts (LDD), Redevelopment Authorities, and Regional Export Networks (REN).
 Municipality - County Government and Councils of Governments (COGs) should also check this option for eligible programs.
 Other Government or Non-Profit -
Programs that are available to Government or Non-Profit organizations not listed above. Non-Profit/Government organizations listed above may also want to check this section for additional funding sources. Private Non-Profit organizations competing in primarily For-Profit industries may also want to check the For-Profit Program Finder for potential programs after using the Non-Profit Program Finder.

Use of Funds

Be sure to carefully read the Program Fact Sheet and Guidelines to make sure the project costs are eligible for funding. If the project does not match any of the options listed below, leave this section blank to view all programs.

Advanced Technology - Including Biotechnology, Life Sciences, and Nanotechnology.
 Community Services - Examples include Low Income Assistance projects and Emergency Responders programs.
 Infrastructure / Site Development / Housing - Including Construction, Environmental Assessments and Clean-Up, Land and Building Acquisition.
 Machinery and Equipment
 Planning / Marketing - Encompasses a wide range of projects, including Consulting Services, Municipal Planning, Research and Development, and Tourism Promotion.
 Workforce Development - Including Education and Job Training.

Sort By

Show Single Application Programs First

- **Apply**

- Scroll down through the various grant offerings, locate **“902 Development & Implementation of Municipal Recycling Program Grant”** and click on the **“apply link”** for the specific project type that you would like to apply for.
- Program Requirements – An access code was provided to the applicant at the pre-application meeting. Please enter that access code.

902 Development & Implementation of Municipal Recycling Programs Grant

 [Apply](#)




[Pennsylvania Department of Environmental Protection](#)

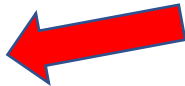
Act 101, Section 902, Recycling Program Development and Implementation Grants reimburse counties and municipalities 90 percent of eligible recycling program development and implementation expenses. Pre-application conferences with Regional Recycling Program Contacts are required. Additional grant program information is located [here](#)

 **REVIEW INFORMATION BELOW**

- BEFORE YOU CAN APPLY FOR 902 DEVELOPMENT & IMPLEMENTATION OF MUNICIPAL RECYCLING PROGRAMS GRANT, YOU MUST COMPLETE THE PRE-APPLICATION REQUIREMENTS SECTION BELOW.

Program Requirements

A pre-application meeting with your DEP Regional Recycling Coordinator is required prior to submitting this application. An access code was provided to you at the date of your pre-application meeting. Please enter that code here. 



[Continue](#)

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](#)

- **Applicant Information**

- The Applicant Information section requires data related to the entity for which the application is being submitted.
- Applicant Entity Type – **Select Appropriate Entity Type of your Organization.**
- Applicant Name – Enter the legal Entity name.
- NAICS Code - From the dropdown box, **select the appropriate option.** 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 – Unique Entity Identifier – a twelve-digit, alphanumeric number.
- Top Official/Signing Authority – In this block, enter the authorized representative of the municipality.
- Title – Enter the title of the authorized representative.
- SAP Vendor# - Leave blank.
- Contact Name – Enter the primary contact name for this project.
- Contact Title – Enter the primary contact title for this project.
- Phone and Fax – Enter the phone and fax numbers for the primary contact title for this project.
- E-mail – Enter the e-mail for the primary contact title for this project.
- Mailing address, City, State and Zip Code – Enter this information for the primary contact for this project.
- Enterprise Type – Select Appropriate type for the organization.
- Click on “Continue” at the bottom right.

- **Project Overview**

- Project Name – The project name will auto-populate.
- Is this project related to another previously submitted project – Select “Yes” if appropriate.
- Have you contacted anyone at DEP about your project – If so, please indicate “yes” and indicate whom you spoke with.
- Is your community certified through Sustainable Pennsylvania? If yes, what level?
- Site Locations – Enter as many sites that are applicable for your project.

Project Overview

Project Name: ◆

Jen's 902 Project

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 ▾

Click on “Continue”

- **Project Site**

- Address – Enter the address of the municipality. **P.O. Boxes are not acceptable.**
- City, State and Zip Code – Enter this information.
- County – Select county from the dropdown box.
- Municipality – Select municipality from the dropdown box.
- PA House, Senate and US House – These fields will auto-populate based on county and municipality. If a Legislator is not auto-populated, please visit <http://www.legis.state.pa.us/cfdocs/legis/home/findyourlegislator/>
- 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: -- Select County --

Municipality: -- Select Municipality --

PA House:

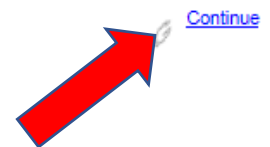
PA Senate:

US House:

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

Click on "Continue"



- **Project Narrative**
 - Complete the project narrative section.

Home Help Save Print Contact Us Logout

Program Requirements Applicant Project Overview Project Site Narrative Budget Addenda Certification

Agency: Pennsylvania Department of Environmental Protection
Applicant: Web Application #: 8181304
Program: 902 Development & Implementation of Municipal Recycling Programs Grant

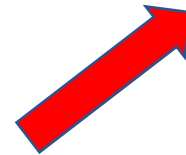
Project Narrative

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.

Project Description
Provide a brief description of the project for which you are seeking financial support
Character Count: 0/3000 characters

[Continue](#)

Click on "Continue"



- **Program Budget**

Spreadsheet Tab

- Click on the Spreadsheet tab.
- In the first column, enter the amount of funding you are requesting from DEP.
- After completing the budget, complete the Basis of Cost tab.

Home Help Save Print Contact Us Logout

Program Requirements Applicant Project Overview Project Site Narrative Budget Addenda Certification

Agency: Pennsylvania Department of Environmental Protection
 Applicant: Web Application #: 8181304
 Program: 902 Development & Implementation of Municipal Recycling Programs Grant

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	902 Development	Applicant Match Local	Total
902 Development & Implementation of Municipal Recycling Programs Grant - Collapse	\$0.00	\$0.00	
Total Combined Costs Remove	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	
		Budget Total:	\$0.00

Basis of Cost Tab

- Complete the Basis of Cost tab – Included is a Budget Narrative where you can provide a more detailed description of specific line items.

Agency: Pennsylvania Department of Environmental Protection
Applicant: Web Application #: 8181304
Program: 902 Development & Implementation of Municipal Recycling Programs Grant

Program Budget

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

Spreadsheet Basis of Cost

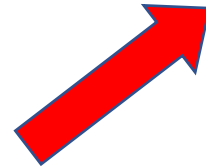
Basis of Cost ♦
Provide the basis for calculating the costs that are identified in the Project Budget.

<input type="checkbox"/> Appraisals	<input type="checkbox"/> Bids/Quotations
<input 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: 0

[Continue](#)

Click on "Continue"



- **Program Addenda – Pre-Application Requirement**
 - What date was your pre-application meeting?
 - Upload the Pre-Application Form

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 listed below, please try [changing your program](#).

PRE-APPLICATION REQUIREMENT

A pre-application meeting was required prior to submitting this application. What was the date of your pre-application meeting? ◆

Please upload your Pre-Application Form ◆

Upload Files

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

File 1

Browse...

- **Program Addenda – Part 1 – Applicant Information**
 - Complete the Municipality Information

PART I - APPLICANT INFORMATION

Municipality Information

1. Name ◆

2. Type ◆

- Home Rule Borough 1st Class Twp.
 City 2nd Class Twp. COG
 Town County SWA
 Authority Municipality Other

3. Other Municipality Name

4. Municipality Website Address ◆

Municipality Contact

5. Salutation ◆

- Mr. Ms.

6. Name ◆

7. Title ◆

8. Telephone Number ◆

9. E-mail Address ◆

• Program Addenda – Part II – Executive Summary – Program Information

Single Application for Assis...

PART II - EXECUTIVE SUMMARY A. Program Information

1. What is the population of your municipality? ◆

2. Is your municipality mandated to recycle per Act 101? ◆

Yes No

3. Does your municipality have an ordinance (rules/regulations) that requires residents to participate in a curbside recycling program? ◆

Yes No

Ordinance #

Date Enacted

4. Will this ordinance (rules/regulations) be updated? ◆

Yes No

Please list projected date(s)

5. Does your municipality have an ordinance that requires residents to participate in a waste collection service? ◆

Yes No

Ordinance #

Date Enacted

6. Who collects the waste? ◆

- Municipal Employees Contracted Hauler Private Subscription Other

Other

7. Please list the haulers who collect waste in your municipality ◆

8. What is the yearly cost to residents ◆

9. Does your municipality have an ordinance that requires commercial establishments to participate in a recycling program? ◆

- Yes No

Ordinance #

Date Enacted

10. Does your municipality have an ordinance that regulates the burning of waste? ◆

- Yes No

Ordinance #

Date Enacted

What items, if any, can be burned in your municipality?

11. Will the burning ordinance be updated? ◆

- Yes No

Please list projected date(s)

12. What materials are currently being collected curbside from residents within your municipality(ies)? ◆

Check all that apply

- | | | | |
|--------------------------------------|--|---|---|
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Aluminum Cans | <input type="checkbox"/> Clear Glass | <input type="checkbox"/> Office Paper |
| <input type="checkbox"/> Steel Cans | <input type="checkbox"/> Green Glass | <input type="checkbox"/> Cardboard | <input type="checkbox"/> Appliances/Scrap Metal |
| <input type="checkbox"/> Brown Glass | <input type="checkbox"/> Magazines | <input type="checkbox"/> Used Motor Oil | <input type="checkbox"/> Grass |
| <input type="checkbox"/> Mixed Paper | <input type="checkbox"/> Food Waste | <input type="checkbox"/> Tree Trimmings/Christmas Trees | <input type="checkbox"/> PET Plastic |
| <input type="checkbox"/> Electronics | <input type="checkbox"/> HDPE Plastic | <input type="checkbox"/> Other Paper Fiber | <input type="checkbox"/> Other Plastics |

Other Paper Fiber

Other Plastics

13. How often are the residential curbside materials collected per month? ◆

- 1X 2X 3X 4X Other

Other

14. How are the recyclable materials collected? ◆

- Municipal Employees Contracted Hauler Private Subscription Other

Other

14a. Where are the collected recyclable materials processed / marketed? ◆

15. What is the yearly cost to residents? ◆

16. Please list the haulers who collect recyclables in your municipality ◆

17. What materials are currently being collected at any drop-off facilities operating within or on behalf of your municipality(ies)? ◆

Check all that apply

- | | | | |
|--------------------------------------|--|---|---|
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Aluminum Cans | <input type="checkbox"/> Clear Glass | <input type="checkbox"/> Office Paper |
| <input type="checkbox"/> Steel Cans | <input type="checkbox"/> Green Glass | <input type="checkbox"/> Cardboard | <input type="checkbox"/> Appliances/Scrap Metal |
| <input type="checkbox"/> Brown Glass | <input type="checkbox"/> Magazines | <input type="checkbox"/> Used Motor Oil | <input type="checkbox"/> Grass |
| <input type="checkbox"/> Mixed Paper | <input type="checkbox"/> Food Waste | <input type="checkbox"/> Tree Trimmings/Christmas Trees | <input type="checkbox"/> PET Plastic |
| <input type="checkbox"/> Electronics | <input type="checkbox"/> HDPE Plastic | <input type="checkbox"/> Other Paper Fiber | <input type="checkbox"/> Other Plastics |

Other Paper Fiber

Other Plastics

18. Operating Hours ♦

19. What materials are currently being collected from (or recycled by) your commercial, institutional and municipal facilities within your municipality(ies)? ♦

Check all that apply

- | | | | |
|--------------------------------------|--|---|---|
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Aluminum Cans | <input type="checkbox"/> Clear Glass | <input type="checkbox"/> Office Paper |
| <input type="checkbox"/> Steel Cans | <input type="checkbox"/> Green Glass | <input type="checkbox"/> Cardboard | <input type="checkbox"/> Appliances/Scrap Metal |
| <input type="checkbox"/> Brown Glass | <input type="checkbox"/> Magazines | <input type="checkbox"/> Used Motor Oil | <input type="checkbox"/> Grass |
| <input type="checkbox"/> Mixed Paper | <input type="checkbox"/> Food Waste | <input type="checkbox"/> Tree Trimmings/Christmas Trees | <input type="checkbox"/> PET Plastic |
| <input type="checkbox"/> Electronics | <input type="checkbox"/> HDPE Plastic | <input type="checkbox"/> Other Paper Fiber | <input type="checkbox"/> Other Plastics |

Other Paper Fiber

Other Plastics

20. How are the commercial establishments' recyclable materials collected? ♦

- Municipal Employees Contracted Hauler Private Subscription Other

Other

21. Please list the haulers who collect recyclables from commercial establishments in your municipality ♦

22. Is there a residential curbside program in your municipality for the collection of leaves? ♦

Yes No

What is the collection frequency and who provides the service?

Where is this material processed?

23. Is there a residential curbside program in your municipality for the collection of garden residues, shrubbery, tree trimmings and similar materials? ♦

Yes No

What is the collection frequency and who provides the service?

Where is this material processed?

24. Is there a residential drop-off program in your municipality for the collection of garden residues, shrubbery, tree trimmings and similar materials? ♦

Yes No

How often and when is the drop-off facility available to residents?

Please list the drop-off facility(ies) utilized

25. How often are residents reminded about the requirements of the recycling education program? ♦

At least Monthly Quarterly Semiannually Annually Other

Other

26. What is used to remind residents of the program? ♦

Must provide documentation

- TV Radio Newsletter Calendar
 Direct Mailing Hand-outs Website Other

Website Address

Other

27. How often are commercial establishments reminded about how they should participate in the recycling program? ♦

- At least Monthly Quarterly Semiannually Annually Other

Other

28. What is used to remind commercial establishments of the program? ♦

Must provide documentation

- TV Radio Newsletter Calendar Direct Mailing Hand-outs Website Other

Website Address

Other

29. Does your municipality have a program of enforcement that periodically monitors participation, receives complaints and issues warnings for related participants and provides fines, penalties, or both? ♦

- Yes No

30. Does your municipality currently have any of the following ♦

Must provide supporting documentation for credit

- a. Pay-As-You-Throw program where residents are charged for waste collection/disposal based on the volume (# of bags, etc.) of waste placed at the curb?
 b. Limitation on the amount (# of bags) of waste residents may place at the curb at any one time?
 c. Recycling ordinance in place for community events?
 d. A program to address littering and/or illegal dumping?

31. Describe any revenues or other financial incentives your municipality receives as a result of marketing your recyclable materials ♦

Do not include 904 monies

32. List where your residential recyclable materials are currently recycled and marketed ♦

Character Count: 0 characters.

• **Program Addenda – Part II Executive Summary – Project Description**

PART II - EXECUTIVE SUMMARY
B. Project Description

1. If you are applying for funds to support a multi-municipal project, list the other counties or municipalities involved (please explain each municipality's involvement) ♦

Character Count: 0 characters.

Is there an inter-municipal agreement? ♦

If yes, please provide a copy of the agreement as supporting documentation.

Yes No

Please explain the agreement

2. What population will be served by the project for which you are seeking financial support? ♦

How many households does this represent? ♦

3. What new materials will be collected by the project for which you are seeking financial support? ♦

Character Count: 0 characters.

4. Will there be any changes or additions to the method of collection by the project for which you are seeking financial support? ◆

Yes No

Please explain

Character Count: 0 characters.

5. How often will the materials be collected (for drop-off programs, when will the drop-off container be available for residents to use it?) ◆

Character Count: 0 characters.

6. Will your municipality be revising any ordinances (rules/regulations) for the project which you are seeking financial support? ◆

Yes No

Please explain

Character Count: 0 characters.

7. Who will be responsible for the collection of recyclable materials included in the project for which you are seeking financial support? ◆

Character Count: 0 characters.

8. Will there be any changes or additions to the collection frequency by the project for which you are seeking financial support? ◆

Yes No

Please explain

Character Count: 0 characters.

9. Will your municipality be changing the frequency or methods of residential or commercial establishment education under the project for which you are seeking financial support? ◆

Yes No

Please explain

Character Count: 0 characters.

10. What are the goals of the project for which you are seeking financial support? List specific accomplishments you would like to achieve. How will you measure the project to determine if you are meeting your goals? ♦
Character Count: 0 characters.

Environmental Justice (EJ) is the fair treatment and meaningful involvement of all people regardless of race, color, natural origin or income with respect to the development, implementation and enforcement of environmental laws, regulations and policies. EJ embodies the principals that communities should not be disproportionately exposed to adverse environmental impacts and anyone can have a seat at the table in the decision-making process that affects their environment. If you have any questions regarding environmental justice, please contact DEP's Office of Environmental Justice. Pennsylvania DEP identifies an EJ Area where 20 percent or more individuals live at or below the federal poverty line, and/or 30 percent or more of the population identify as non-white minority, based on data from the U.S. Census Bureau and the federal guidelines for poverty. Use the DEP [Environmental Justice Area Viewer](#) to determine if your project is in an EJ area.

11. Will your recycling project be implemented in an EJ area and benefit a community located in an EJ Area? ♦

12. If Yes, please describe the EJ community and how the recycling project will beneficially impact the environmental and/or public health of an underserved community.
Character Count: 0/5000 characters.

Worker Protection and Investment:

For any application request totaling \$10,000 or more, please review the attached [Worker Protection and Investment Notice](#) (relating to Executive Order 2021-06). If your request is for \$10,000 or more, you are required to complete and upload the attached [Worker Protection Form](#).

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

File 1 No file chosen

• Program Addenda – Part III – Project Narrative

PART III – PROJECT NARRATIVE

Provide details to give a comprehensive view of your proposed project. This is your opportunity to convey to the Department the purpose and benefits of your project. Upload completed SOW Narrative in *Excel format ONLY*.

[Download 902 Project Narrative Worksheet.xlsx](#)

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

File 1

• Program Addenda – Part IV – Project Sustainability Plan

PART IV – PROJECT SUSTAINABILITY PLAN

As outlined by Act 175 of 2002, Pennsylvania communities are to make their recycling programs more financially self-sufficient. The following questions are meant to foster an overall Sustainability Plan for your recycling program and are not intended to be the whole of the plan itself. In completing this section of the grant application and your Sustainability Plan, refer to the Department's technical report on *Building Financially Sustainable Recycling Programs* under Recycling Program Development and Implementation Grants at DEP website:

http://www.portal.state.pa.us/portal/server.pt/community/financial_assistance/14065/recycling_program_development_and_implementation_grants_589534

The Department will utilize the information given below in evaluating and prioritizing your grant proposal. Failure to complete this section will result in the denial of your grant request.

1a. What are the current annual costs of your recycling and waste programs? These costs can include, but are not limited to: personnel; fuel; equipment purchase; maintenance; depreciation; education; and contractual obligations. ♦

Character Count: 0 characters.

Please upload additional itemized statement. ♦

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

File 1

1b. How have the above recycling and waste program costs been met in the past? Include in your revenues such sources as: fees/taxes; sale of recovered materials; donations/sponsors; grants/loans; and, avoided disposal costs. ♦

Character Count: 0 characters

Please upload additional itemized statement. ♦

Upload Files

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

File 1 Browse...

2. What are the projections for future costs and revenues associated with your recycling and overall waste management program over the next five years? What capital costs for your recycling program do you anticipate procuring over that time period? What is your municipality's funding plan (excluding Act 101, Section 902 Recycling Program Development Grants and Section 904 Recycling Program Performance Grants) to ensure revenues meet or exceed costs? ♦

Character Count: 0 characters

Please upload additional itemized statement. ♦

Upload Files

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3. What strategies will your municipality pursue/implement to minimize costs and increase revenue? Include strategies for reducing waste generated/disposed and increasing recyclables collected. ♦

Character Count: 0 characters

4. What mechanisms will be employed by your municipality to monitor program costs, revenues, performance participation and efficiency? ♦

Character Count: 0 characters

5. What other benefits (environmental, social, etc.) can be attributable to your recycling and waste programs? ♦

Character Count: 0 characters

6. Describe the mechanisms employed by your municipality to solicit input and support from all parties (i.e. citizens, business community, elected officials, schools waste/recycling collectors, etc.) affected by your recycling program. ♦

Character Count: 0 characters

7. List any other programs or factors that affect the sustainability of your municipality's recycling and waste programs. ♦

Character Count: 0 characters

• Project V – The Proposal – Project Scope of Work

PART V – THE PROPOSAL A. Project Scope of Work

List each item for which funding is being requested OR for which you are claiming the value of as match. Briefly describe the function of each item as it relates to your project. Number each item, using the same number and order for PART V.B. – FINANCIAL/WORK COMPLETION DATA. Attach additional pages as necessary. ♦

Character Count: 0 characters

• Project V – The Proposal – Financial/Work Completion Data

PART V – THE PROPOSAL B. Financial/Work Completion Data

Download the [Project Budget Details Worksheet](#), complete and upload here. Upload completed Budget Page in **Excel format ONLY**. ♦
[Download 902 Project Budget Worksheet.xlsx](#)

Upload Files

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

File 1

• Part VI – Supporting Documents

PART VI – SUPPORTING DOCUMENTS

Attach such items as proof of publication and responses received, price quotes and/or bids, ordinances and/or regulations, examples of educational materials, letters of support, multi-municipal agreement and any other items necessary to support your grant request. Be sure to consider the Department of General Services' COSTARS program when seeking quotes for equipment. ♦

Upload Files

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

File 1

Please upload [Land Use Planning Form](#) ♦

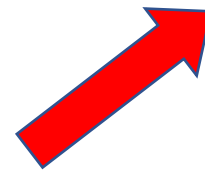
[Download 902 Land Use Planning Form.docx](#)

Upload Files

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

File 1

[Continue](#)



Click the “Continue”

- **Certification and Submission**

- If there is any missing information in your application, your screen will look similar to 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.

Agency: Pennsylvania Department of Environmental Protection
Applicant: Jen's Company
Program: Household Hazardous Waste Program Reimbursement Grant

Web Application #: 8178109

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

- FEIN Number is required.

Program Budget

- Funding Source "Household Hazardous Waste Program Reimbursement Grant ()" must have a Grand Total greater than zero.

Program Addenda

- Equipment or Build Cost is required.
- Reimbursement Form has not been uploaded.
- Reimbursement Calculator has not been uploaded.
- Operations Report has not been uploaded.

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

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 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.**

The screenshot shows a web page for 'Application Certification'. At the top, there is a blue navigation bar with links for 'Home', 'Help', 'Print', 'Contact Us', and 'Logout'. Below this is an orange bar with 'Program', 'Addenda', and 'Certification' links. The main content area is white and contains the following information:

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 address:

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

- **Congratulations!** You have completed the on-line application. You will be notified of your application status and subsequent steps in the next few weeks.