

## Instructions for the On-line Application

The 901 Planning Grants for Household Battery Management application must be submitted online 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 ESA website is: <https://grants.pa.gov/Login.aspx>

**No documentation should be mailed to DEP.**

### User Tips

- Electronic Single Application works best when accessed through Microsoft Edge or Google Chrome
- If you allow your screen to sit idle for 30 minutes or more, 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 the affected section to complete the field.
- Do not use special characters such as \,/, \*, &, %, #, etc.
- If you have questions completing the application, please contact Enterprise eGrants Customer Service Center at 1-833-448-0647 or email at [egrantshelp@pa.gov](mailto:egrantshelp@pa.gov). Operating hours are Monday through Friday from 7:00 am to 6:00 pm EST.

**Table of Contents**

**1. Registration and Login ..... Page 3**

**2. Begin a New Application ..... Page 4**

**3. Select a Program ..... Page 5**

**4. Apply ..... Page 6**

**5. Requirements..... Page 6**

**6. Applicant Information Tab..... Pages 7-8**

**7. Project Overview Tab..... Page 9**

**8. Project Site Tab..... Page 10**

**9. Narrative Tab ..... Page 11**

**10. Budget ..... Pages 12-13**

**11. Program Addenda Tab..... Pages 14-15**

**12. Certification and Submission..... Pages 16-17**

**13. Application Receipt Verification ..... Page 18**

*Reminder:* If you have questions completing the application, please contact Enterprise eGrants Customer Service Center at 1-833-448-0647 or email at [egrantshelp@pa.gov](mailto:egrantshelp@pa.gov). Operating hours are Monday through Friday from 7:00 am to 6:00 pm EST.

## 1. Registration and Login

- Go to ESA login page <https://grants.pa.gov/Login.aspx> and follow the instructions for creating a new account, or login with your existing account.
- **Write down and save** the Username and Password you have chosen. You will need this for later your grant documents.

### 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 [ra-dcedcs@pa.gov](mailto:ra-dcedcs@pa.gov).
  - **Customers of all other agencies:** Please contact the Enterprise eGrants Customer Service Center. Representatives are available Monday through Friday, from 7:00 AM until 6:00 PM, at 833-448-0647. Email inquiries can also be sent to [egrantshelp@pa.gov](mailto:egrantshelp@pa.gov).

### Login

#### What's New?

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

Username

Password

Powered by



[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](#)

1/28/2025

## 2. 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”

### Begin a New Application

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

Project Name

Do you need help selecting your program?

CREATE A NEW APPLICATION



### 3. Select Program

- Under “Agencies,” click DEP
- Scroll down and click “Search”

#### 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.

Dept of Agriculture     PCA     DCED     DEP     PennDOT     PLCB     L&I     Office of the Budget     PDA     PEMA     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 ▾

#### 4. Apply

- Scroll down through the various grant offerings, locate the “ 901 Planning Grants for Household Battery Management and click on “Apply.”

#### Search Results

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


**901 Planning Grants for Household Battery Management** 

**Pennsylvania Department of Environmental Protection**

The Act 101, Section 901 Household Battery Management Education grants are available to all Pennsylvania counties for the cost of educational programs on household battery management. The grant to a county cannot exceed 80% of the approved project costs. A county may request up to \$75,000 every two years for costs associated with household battery management education. Household battery management education costs incurred on January 1, 2025, or beyond will be eligible for grant funding. Applications may be submitted at any time during the year. Prior to applying, the applicant must meet with the appropriate DEP Regional Planning and Recycling Coordinator to discuss the proposed project and grant requirements


#### 5. Requirements

- A Pre-application meeting is required prior to applying for this grant. Enter the code received at the time of the meeting to get into the application.

 **REVIEW INFORMATION BELOW**

- Before you can apply for 901 Planning Grants for Household Battery Management, you must complete the Pre-Application Requirements section below.

#### Requirements

Pre-Application Meeting Code 

[Continue](#)

## 6. Applicant Information

- The Applicant Information section requires data related to the entity for which the application is being submitted.
- Applicant Entity Type – select the appropriate type for your organization
- Applicant Name – Enter the legal name, the name under which the entity legally conducts business.
- NAICS Code – enter the appropriate code for your organization
- FEIN/SSN Number - Enter the Federal Tax ID number for the legal name (no dashes).
- UEI Number – Unique Entity Identifier. Enter the applying organization’s unique, 12-character alphanumeric identifier which is assigned to all entities that conduct business with the federal government.
- Top Official/Signing Authority – In this block, enter the authorized representative of the organization.
- Title – Enter the title of the authorized representative.
- SAP Vendor# - Enter, if known.
- 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.
- Click “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](#)



## 7. Project Overview

- Project Name – The project name will auto-populate.
- Site Locations – Default setting at 1. Only needs filled in if more than one site location exists for this project.

The rest of the information in the Project Overview section is not required and does not need to be filled out.

### Replace Image based on program

---

#### Project Overview

Project Name: ♦

901 Municipal

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”

## 8. Project Site

- Address – Enter the applicant’s mailing address (street address). **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, 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:

PA Senate:

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”

## 9. Project Narrative

- Complete all fields in this section

### Project Narrative

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

**Project Summary and Justification – Please provide a summary of problems confronting the county from lithium-ion or other batteries in the waste stream, and how the proposed project will address Act 190 in solving the described problems. Indicate what other sources of funding have been evaluated/applied for and what could occur should this section 901 grant application not be approved. ♦**

Character Count: 0/3000 characters.

**Project Schedule – Please provide a detailed schedule of activities, including dates, if applicable to this project. Examples of dates relevant to the project schedule may be publication or broadcast dates for advertisements associated with the county's household battery management efforts of lithium-ion or other batteries. ♦**

Character Count: 0/1000 characters.

**Consulting Firms and/or Subcontractor Selection Justification – If utilized for the project, indicate the name(s) of the subcontractor(s) and how they were chosen. If a subcontractor will not be utilized for this project, please note this below. ♦**

Character Count: 0/1000 characters.

[Continue](#)

Click on “Continue”

## 10. Program Budget

There are two tabs on this page which need to be completed, the Spreadsheet and Basis of Cost.

### a. Spreadsheet

- Click on the Spreadsheet tab
- Indicate the Total Project Costs and the amount to be paid by the county and by DEP. Total Project Costs is equal to all project costs required to complete the Scope of Work. DEP Share cannot exceed 80% of the Total Project Costs. Applicant Match cannot be less than 20% of the total project costs. The total DEP Share cannot exceed \$75,000.

### Program Budget

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

Spreadsheet	Basis of Cost
-------------	---------------

On the spreadsheet provided, the first column (901 Household Battery Management Education Grant (HBME)) indicates the amount of funding being requested from DEP. The second column (Applicant Match Local) indicates the amount of applicant match. The third column (Total) indicates the total cost for the project. Additional details for each category will be identified in – Addenda and Scope of Work.

**Total Project Costs:** Indicate the Total Project Costs and the amount to be paid by the county and by DEP. Total Project Costs is equal to all project costs required to complete the Scope of Work. DEP Share cannot exceed 80% of the Total Project Costs. Applicant Match cannot be less than 20% of the total project costs.

Using the Project Scope of Work and the application instructions, complete the following table:

#### 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	901 Planning Grants for Household Battery Management	Applicant Match Local	Total
HBMEG - Collapse	\$0.00	\$0.00	
HBME <span style="float: right; font-size: small;">Remove</span>	\$0.00	\$0.00	\$0.00
HBME Admin (10 %) <span style="float: right; font-size: small;">Remove</span>	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	
		<b>Budget Total:</b>	\$0.00

[Continue](#)

Click on “Continue”

**b. Basis of Cost Tab**

- Click the Basis of Cost Tab
- Provide a brief narrative of the cost of each requested item.

**Program Budget**

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

Spreadsheet	<b>Basis of Cost</b>
-------------	----------------------

**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: 59

This section does not need to be completed. Click Continue

[Continue](#)



Click on “Continue”

## 11. Program Addenda

- Complete all fields in this section.

### 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](#).

Below the appropriate Scope of Work Budget Category, list and describe the work to be performed under each category for which funds will be requested or utilized as match. Describe in detail how this work relates to the overall project completion. Be specific, identifying specific work items rather than making broad generalizations. Any match costs should be included in the appropriate budget category, with the nature of the match described in each.

#### Scope of Work – Household Battery Management Education ♦

These are costs associated to produce and distribute targeted educational materials to promote the safe handling, storage, disposal, and recycling of lithium-ion and other batteries to prevent fires in waste transportation and processing facilities. Describe Battery Management educational items by purpose and types of media used, such as flyers, websites, billboards, posters, online advertising, radio, television, or newspaper.

Character Count: 0/3000 characters.

#### Scope of Work – Household Battery Management Education Administration ♦

These are costs that include County staff administrative time to work directly on the project and/or in-kind services, such as match for volunteer time, donated advertisements, materials, or services. Describe how these costs were projected, the administrative work performed directly on the project by county staff and/or in-kind services used as match and/or volunteer hours for educational events on household battery management. A maximum of 10% of the Total Project Cost may consist of administration costs. Costs associated with County Recycling Coordinators for apply for a section 903 grant are not eligible.

Character Count: 0/3000 characters.

Describe the nature of the match. If any portion of this match is to be administration or in-kind services, indicate the manner in which the value of these services was determined. ♦

Character Count: 0/3000 characters.

If applicable, describe the tasks to be performed by volunteers and the hours anticipated to complete each task. ♦

Character Count: 0/3000 characters.

1/28/2025

Please attached any supporting documents to your application as needed. Supporting documents include, but are not limited to, bids, quotes, drafts, household battery educational items, etc. ♦

Upload Files

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

File 1  No file chosen

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, please 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

[Continue](#)

Click “Continue”

## 12. 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.

### 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

- Mailing Address is required.

#### Project Site Location(s)

- Project Site 1: PA House District is required.

#### Project Narrative

- Please provide a detailed schedule of activities is required.

#### Addenda

- Please attach any supporting documents has not been uploaded.
- Upload worker protection form has not been uploaded.

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



**13. 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 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

#### 14. 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 username 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 online submission.

#### Application Certification

Single Application ID #: 202408016049

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 # 202408016049 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](#)

- **Congratulations!** You have completed the online application.