### INSTRUCTIONS FOR THE ON-LINE APPLICATION

The 319 Nonpoint Source (NPS) Management Grant Application 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

This document will provide instructions on how to apply and upload the required documentation in the eGrants application. See the 319 NPS grant program guidance document for instructions on filling out the forms associated with your application that must be uploaded on the addenda tab of the eGrants application.

The instructions contained in this document will assist you in applying for any program offered under the 319 NPS Management Grant solicitation. All information needed for your submission will be contained in this online application.

### No documentation needs to be mailed to DEP.

### **User Tips**

- The Electronic Single Application works best when accessed through Internet Explorer.
- If you allow your screen to sit idle for more than 30 minutes, you will lose the data entered since your last save and will have to re-enter it. Save frequently.
- When completing the application, fields with a "
  " are required fields. If a required field is skipped, you will be notified later in the application to return to that section to complete the field.
- Do not use special characters in the fields such as \, /, \*, &, %, #, etc.
- 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 application round opens April 21, 2023 at 8:00 a.m. Application deadline is on June 23, 2023 at 11:59 p.m. Early applications or those submitted after the deadline will not be accepted.
- If you have questions completing the application, please call the DCED Customer Service Center at 1-800-379-7448 or by email at <u>ra-dcedcs@pa.gov</u>. They are open 8:30 am-5:00 pm EST Monday through Friday.

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*Reminder:* If you have questions completing the electronic application, please call the DCED Customer Service Center at 1-800-379-7448. They are open 8:30 am-5:00 pm EST Monday thru Friday.

### 1. Registration and Login

• If you are a first-time user, click the "REGISTER" button on the left.

# **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 <u>do not</u> 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
PA	KEYSTONE LOGIN
	Registration
	Forgot Password
Learr	n more about Keystone Login

Be sure to **save** the <u>Username</u> and <u>Password</u> you have chosen for future grant applications and other grant-related use.

# 2. Begin a New Application

- Project Name Enter a name for your project.
- Do you need help selecting your program Select "No".
- Click on "CREATE A NEW APPLICATION".

Home Help Contact Us
Submitted Applications User Settings
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
319 NPS Grant Project Name
Do you need help selecting your program?
CREATE A NEW APPLICATION

# 3. Select Program

- Under Program Name, enter "319".
- Click "SEARCH". Look for the 319 NPS Grant program offered by DEP.
- Click Apply.

Home Help Save Print Contact Us	
Program	
Agency: Pennsylvania Department of Community and Economic Development Applicant: Program: DCED	Web Application #: 9253598
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         319         Sort By         Program Name         SEARCH	

# 4. Apply

#### 319 Nonpoint Source Management Grants Program

Pennsylvania Department of Environmental Protection

Eligible applicants: incorporated watershed association; county or municipality; county conservation district; council of governments; educational institution; municipal authority; or other authorized organization (see quidance document).

Ninety-seven percent of water-quality-impaired watersheds in Pennsylvania are polluted because of nonpoint source pollution, such as abandoned mine drainage (AMD), urban and agricultural runoff, atmospheric deposition, on-lot sewage systems, earthmoving, stream hydromodification and timber harvesting. Pennsylvania's Nonpoint Source Management Program established an overall strategy to implement watershed restoration and protection activities. The Section 319 Nonpoint Source Management grant funds are provided by the U.S. Environmental Protection Agency (EPA) and authorized through Section 319(h) of the federal Water Pollution Control Act. The program's primary purpose is to implement Section 319 Program Watershed Implementation Plans (WIPs).

Additional Information: Guidelines

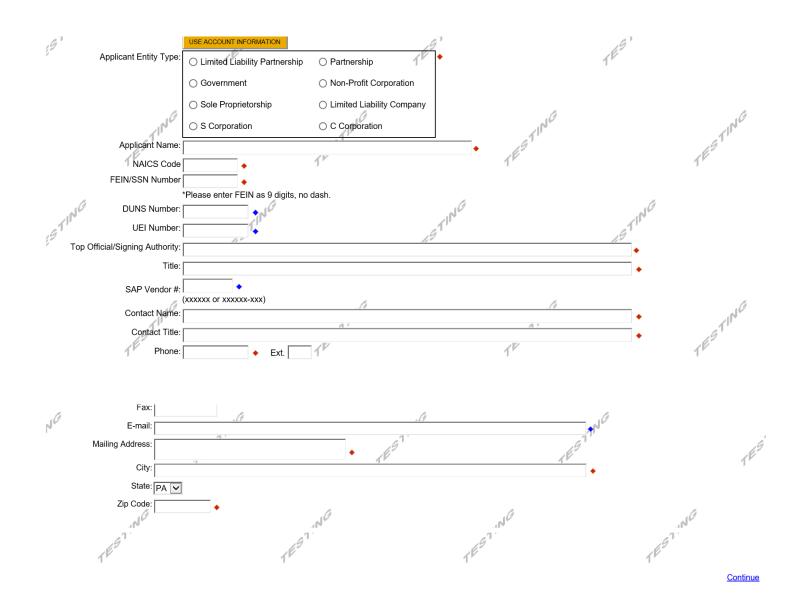
### 5. Applicant Information Tab

Applicant Information To copy your Registration information in	to the application, click the "Use Account INFORMATION	Information" button below.		TESTING
Applicant Entity Type	O Limited Liability Partnership	○ Partnership		TE
	⊖ Government	O Non-Profit Corporation		
	○ Sole Proprietorship	C Limited Liability Company	đ	
~IN <sup>G</sup>	<ul> <li>S Corporation</li> </ul>	C Corporation	TESTING	
Applicant Name			191	
NAICS Code	•	din di seconda di se Seconda di seconda di se	T	
FEIN/SSN Number	r 📃 🔸			
4	*Please enter FEIN as 9 digits, no	dash.		6
UEI Number		and the second s		N
Top Official/Signing Authority	1,9	1, 1		<b></b> •,9 <sup>1</sup>
Title		**		( <b>+</b>
SAP Vendor #	(XXXXX OF XXXXX-XXX)			
Contact Name				•
Contact Title		.14	.10	•
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E-mail				•
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E-mail Mailing Address	197	/ + G <sup>+</sup>		GT
City	<i>I</i> 3 <i>d</i>	lip d		
State	PA 🗸			
Zip Code	•			

\*If your application has a need for a sponsor, the sponsor's information should be filled in on this tab. Your organization's information will be completed on the "Company Tab."

- The Applicant Information section requires data related to the applicant or sponsor for which the application is being submitted.
- Applicant Entity Type select the appropriate type for your organization.
- Applicant Name Enter the organization's name, the name under which the applicant or sponsor legally conducts business.
- NAICS Code From the dropdown box, select the appropriate type. The NAICS code will autopopulate for you.
- FEIN/SSN Number Enter the Federal Tax ID number for the legal County name (no dashes).
- UEI Number (**Required**) Unique Entity ID. Enter the applying organization's unique, 12character alphanumeric identifier assigned to all entities that conduct business with the federal government.
- Top Official/ Signing Authority Enter the name of the individual at your organization who has the authority to enter into a grant agreement with DEP (e.g. the name of President, Chairperson, CEO, etc., of the organization).

- Title Enter that individual's title.
- SAP Vendor# Fill in if known.
- Contact Name Enter the primary contact name for this project.
- Contact Title Enter the primary contact's title for this project.
- Phone and Fax Enter the phone and fax numbers for the primary contact for this project.
- E-mail (Required) Enter the e-mail for the primary contact for this project.
- Mailing address, City, State and Zip Code Enter this information for the organization and primary contact for this project.
- Click "<u>Continue</u>" at the bottom right.



# 04/17/23 6. Company Tab

- If your application requires a sponsor, enter your organization's information on this tab.
- If your application **does not** require a sponsor, click the "Copy from Applicant" button to copy your information over to this tab.
- For information on which applications require a sponsor, see the grant program guidance document.
- Business Specifics Answer optional questions.
- Enterprise Type Select most appropriate type for your application.

Company Ir	nformation					
10		COPY FROM APPLICANT		10		alG
G Comp	oany Entity Type:	C Limited Liability Partnership	⊖ Partnership			TESTING
4"		⊖ Government	O Non-Profit Corporation			TE
		○ Sole Proprietorship	◯ Limited Liability Company			
	,	○ S Corporation	○ C Corporation		П.	
(	Company Name			•	N	
	NAICS Code	•	2TP		e TI	
	FEIN:	•	(ES		CESTING	
	, III	*Please enter FEIN as 9 digits, no	dash.			
	UEI Number:	•				
Top Official/S	igning Authority:					• .6
~1 <sup>0</sup> ~	Title:	, fell		.8		
19	SAP Vendor #:	(XXXXXX OF XXXXX-XXX)	TES			TES,
	Contact Name:					<b>→</b>
	Contact Title:					<b>-</b> +
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6 H.J.	Zip Code:	······································				

# 7. Project Overview

- Project Name The project name will auto-populate from the information you filled in at the beginning of the process. You may change the project name at this time.
- Answer whether or not the project is related to a previously-submitted project and the project's name.
- Enter the name of the person you spoke with at DEP regarding your application.
- If your community is certified through Sustainable Pennsylvania, enter what level.
- Answer whether or not you are interested in applying for more than one funding source.
- Be sure to enter the number of sites if there is more than one project site.
- Click "<u>Continue</u>"

# **Project Overview**

Project Name: 🔶

319 NPS Project Name

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?



**Continue** 

### 8. Project Site

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

. 19	ation(s) please see the <u>Project Overview</u> sect	iop	ESTING
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Site 1	.6		G
1	10-		10
Address:	2 P	11	1
City:			
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Zip Code:	9	TESTING	
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County:	Select County 🗸 🔶		
Municipality:	Select Municipality 🗸 🔶		
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PA House: ♦		Mu2	21 <sup>m</sup>
PA Senate: +	G		G
PA Senate: •	19		TESTING
Designated Areas:	Act 47 Distressed Community	Brownfield	
	Enterprise Zone	Greenfield	
	Keystone Innovation Zone	Keystone Opportunity Zone	
	Prime Agricultural Area	Uses PA Port	
,e	<i>G</i> .	.65	

Click "Continue"

### 9. Project Narrative

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

# **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.

### Provide a brief, concise project description no more than two sentences. +

Provide a brief, concise project description no more than two sentences. Character Count: 0/3000 characters.

### Project Executive Summary +

Project Executive Summary Character Count: 0/4000 characters.

Click "Continue"

Continue

### 10. Program Budget

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

### Spreadsheet Tab

• Click on the Spreadsheet tab. Enter the amount of funding you are requesting from DEP in the appropriate categories.

### **Program Budget**

Please see the Help section for details on how to complete the Program Budget.

|--|

In the Budget Narrative Section located on the Basis of Cost Tab, please indicate the following:

- · amount of cash-match that has already been received by the project applicant
- · amount of cash-match that has been applied for, but not yet received by the project applicant
- amount of match that is expected as in-kind services, etc.

#### In the Budget Spreadsheet, please use whole numbers only, such as \$110,505.00.

#### 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 Please Select a Category ✓	Add Category		319 Nonpoint Source Management Grants Program	Total
319 Nonpoint Source Managen	nent Grants Progra	m - Collapse	\$0.00	
Salaries/Benefits		Remove	\$0.00	\$0.00
Travel		Remove	\$0.00	\$0.00
Equipment and Supplies		Remove	\$0.00	\$0.00
Administration		Remove	\$0.00	\$0.00
Contractual		Remove	\$0.00	\$0.00
Construction		Remove	\$0.00	\$0.00
Total			\$0.00	
-			Budget Total:	\$0.00

**Continue** 

### Click "Continue"

# **Basis of Cost Tab**

- Choose Budget Justification.
- In the Budget Narrative Section located on the Basis of Cost Tab, The narrative must specifically address each of the cost items identified in the Budget Spreadsheet.

Spreadsheet	Basis of Co	ost
asis of Cost 🔶		
	•	hat are identified in the Project Budget.
Appraisals		Bids/Quotations
Budget Justifica	tion 🗌	Contractor Estimates
☐ Engineer Estima dget Narrative ◀	ates 🗌	Sales Agreements
☐ Engineer Estima Idget Narrative ◀ e narrative must spec	ates 🗌	
☐ Engineer Estima Idget Narrative ◀ e narrative must spec	ates 🗌	
☐ Engineer Estima dget Narrative ◀	ates 🗌	
Get Narrative	ates 🗌	
] Engineer Estima dget Narrative narrative must spec	ates 🗌	
☐ Engineer Estima	ates 🗌	

Click "Continue"

# 11. Program Addenda

• Complete all fields and upload all required documents on this tab. Once completed, click <u>Continue</u>.

### 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.

1. Short Title of Project
2. Project Description
3. Applicant/Sponsor Name +
4. Organization Type ◆
If a non-profit organization, does your organization have a. 501(c)(3) status?
b. Pennsylvania Charitable Status?
5. Project Location
a. Enter the latitude and longitude of the project location in decimal degrees Latitude ◆
Longitude 🔶
b. Enter the county(ies) and enter the Municipality(ies) where the project is located County(ies) ◆ Character Count: 0 characters.
Municipality(ies)   Character Count: 0 characters.
6. Tier Level. If this project is located within the Chesapeake Bay Watershed: a. What is the Watershed Implementation Plan (WIP) Tier Level?
b. What is the percentage of the project that will occur within the Chesapeake Bay Watershed?
c. Is the project part of the county's Chesapeake Bay Phase 3 WIP Countywide Action Plan?

If Yes, please list the county

#### 7. Project Type 🔶

- O WIP Implementation (design and/or construction)
- New WIP Development
- Statewide/regional project

a. If project is for WIP implementation, does the project support an EPA approved 319 Watershed Implementation Plan? Existing 319 WIP?

лэц	ing 5
	$\checkmark$

If Yes, please list Character Count: 0 characters.

#### 8. Impairment Sources, Causes and Measurable Environmental Benefits

a. List the Impairment Source(s), Cause(s) and Reach Code for the receiving waters of your project. Use the latest Integrated Report to obtain this information. If a statewide or regional project, summarize impairment sources/causes (reach codes are not needed).

Character Count: 0 characters.

b. Briefly discuss how the proposed project intends to address the listed Impairment Sources and Causes. Please limit your response to 500 words or less. 
Character Count: 0 characters.

c. Measurable Environmental Benefits Nonpoint Source Pollutant Load Reductions O Estimated O Modelled

Nitrogen (lbs./yr.)

Phosphorus (lbs./yr.)

Sediment (tons/yr.)

Aluminum (lbs./day)

Iron (Ibs./day)

Manganese (lbs./day)

Acidity (lbs./day)

)4/17/2	3
	Other (500 words max.) Character Count: 0 characters.
	Length of streambank stabilized or restored (in feet)
	Length of streambank fencing installed (in feet)
	Acres of riparian buffers planted
9. Cor	itacts
Has yo	our organization contacted the county conservation district to discuss the project? 🔶
	$\checkmark$
10. Bı	idget Summary
	a. Enter the match amount I I I I I I I I I I I I I I I I I I I
	b. Upload the Task and Deliverable Budget Worksheet 🔶
	Upload Files Use the control below to select your file. Each file can be no larger than 30MB.
	File 1 Browse
	evailing Wage
	ed, will the project grantee or sponsor abide by Pennsylvania's Prevailing Wage Act? ◆ ✔
12.	Projects on Grantee/Non-Grantee Owned Lands
Will	your project be conducted on land you either own or control? 🔶
	$\checkmark$
	Projects on State-Owned Lands
VVIII	your project be conducted on land owned by commonwealth agencies? ◆
	$\checkmark$
	Have you contacted the appropriate agency?

If yes, identify the person you contacted

#### 14. Land Use Planning

Is this project consistent with local comprehensive land use plans and zoning ordinances under Acts 67 & 68 of 2000?

#### 15. Commonwealth Investment Criteria

Will the project increase job opportunities or foster sustainable businesses?

If yes, provide the anticipated number of new and retained jobs from the project

Number of New Jobs (enter single number, such as 3, do not enter range of numbers)

Number of Jobs Retained (enter single number, such as 3, do not enter range of numbers)

#### 16. Environmental Justice

Is your project located in an area designated as an Environmental Justice community?

### 17. Act 47 Financially Distressed Municipalities

Is your project located in a designated Act 47 Financially Distressed Municipality?

#### 18. AMDTreat Report (AMD only)

Upload the AMDTreat report

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

File 1	Browse	

#### 19. Worker Protection and Investment Certification

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 la	ger than 30MB.				
File 1	Browse				
20. Section 319 Workplan					

Upload the completed "Pennsylvania Department of Environmental Protection Section 319(H) Workplan template" (Word only) +

Ipload Files Jse the control below to select your file. Each file can be no larger than 30M
Вгол

### 21. Location Maps, Site Maps, Aerial Maps, and/or Photos

Upload the location map(s), site map(s), aerial map(s), and/or photos

Upload I Use the	iles e control below to select your file. Each file can be no larger that	n 30MB.
File 1		Browse

### 22. Landowner Letters

Upload any required Landowner Letters, Landowner Access Authorization Forms, or Landowner Letters of Commitment, or Landowner Grantee Agreements.

Upload Files Use the control below to sele	ct your file. Each file can be no la	arger than 30MB.	
File 1		Browse	
23. Letters of Commitment Upload any Letters of Commitmen	t from project partners for identified n	match.	
	· · · · · · · · · · · · · · · · · · ·		
Upload Files Use the control below to sele	ct your file. Each file can be no la	arger than 30MB.	
File 1		Browse	

#### 24. Chesapeake Bay Countywide Action Plan BMP Implementation Form

Upload the Chesapeake Bay Countywide Action Plan BMP Implementation Form

Upload Use the	Files e control below to select your file. Each file can be no larger tha	in 30MB.
File 1		Browse

#### 25. Letters of Support or Additional Information

Upload any letters of support or additional information

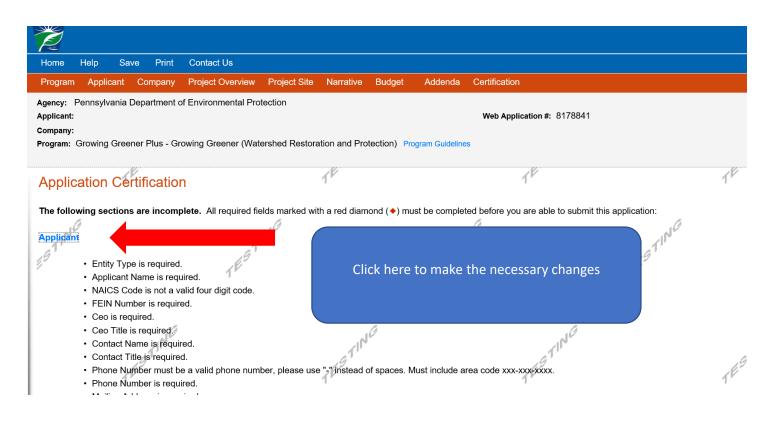
Upload Files Use the control below to select your file. Each file can be no larger than	n 30MB.
File 1	Browse



You may download required documents from DEP's <u>319 Nonpoint Source Management website</u> to obtain a copy of the complete grant guidance document and related application forms, including all required documentation.

### 12. Certification and Submission

- If there is any missing information in your application, your screen will look like the following example.
- Under the orange "Application Certification" heading, it will state, "The following sections are incomplete. All required fields marked with a red diamond must be completed before you are able to submit this application".
- To add/correct the information on your application, click on the section heading to return to the page.



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

Ž									
Home Help	Save	Print	Contact Us						Logout
Program Req	luirements	Applican	t Project Overview	Project Site	Narrative	Budget	Addenda	Certification	
Agency: Pennsy Applicant: Leban Program: 901 Mu	on County		Environmental Protectio g Grant	'n		Web	Application #:	8116130	
Application	16"		polication have been a	amplated Ifw	STIT	wed the en	plication you	may submit it for process	ing Affer
			e to make changes.	ompieted. In yo	ou have revie	ewed the app	plication, you	may submit it for process	ing. Aner
the Applicant, an information is tru make a false stat	this box and rials submitt d I also cer e and corre tement or o ccordance v ments).	typing you ed via the tify that, if a ct and acco vervalue a	Internet and its attachm applying on behalf of the urately represents the s security to obtain a gra	ents are true a e applicant, I ha tatus and econ nt and/or loan f	nd correct and ave verified v	nd accuratel with an autho on of the Ap nmonwealth	y represent th prized represe plicant. I also of Pennsylva	n the single application an ne status and economic co entative of the Applicant ti understand that if I knowi nia, I may be subject to c 3729 and 3802 (relating	ondition of hat such ingly riminal
O <sub>lamanau</sub>		11	e of the company, orga entative.	nization or loca	l governmen S	t.		ESTING	
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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:
  - $\circ$   $\,$  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."

### 13. 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.

Ž							
Home Help Print Contact Us	Logout						
Program Addenda Certification							
Agency: Pennsylvania Department of Environmental Protection Applicant: Lebanon County Program: 901 Municipal Waste Planning Grant	Web Application #: 8116130						
Application Certification Single Application ID #: 201712074962	TESTIC						
The web application has been successfully submitted for processing.							
I hereby oertify 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 a Applications" in the top toolbar.	oplications from the Home page. Click the link labeled "Submitted						
Print Signature Page only Print Entire Application with Signature Page	TING TESTING						
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	You do not need to mail any documentation to DEP. All information needed is contained in your on-line						

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