

Instructions for the On-line Application

The 319 Nonpoint Source (NPS) Management grant 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://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 for completing the forms associated with your application that must be uploaded as part of the addenda for 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 within this electronic application.

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.
- The application round opens April 22, 2024 at 8:00 am. Application deadline is June 21, 2024 at 11:59 pm. Applications submitted prior to April 22 or those submitted after the June 21, 2024 deadline will not be accepted.
- 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. Operating hours are Monday through Friday from 8:30 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.	Applicant Information Tab	Pages 6-7
6.	Company Tab	Pages 8-9
7.	Project Overview Tab	Page 10
8.	Project Site Tab	Page 11
9.	Narrative Tab	Page 12
10.	Budget	Pages 13-14
11.	Program Addenda Tab	Paged 15-21
12.	Certification and Submission	Pages 22-23
13.	Application Receipt Verification	Page 24

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. Operating hours are Monday through Friday from 8:30 am to 6:00 pm EST.

1. Registration and Login

- Go to ESA login page <https://www.esa.dced.state.pa.us/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.
 - **Customers of all other agencies:** Please contact the Enterprise eGrants Customer Service Center. Representatives are available Monday through Friday, from 8:30 AM until 6:00 PM, at 833-448-0647. Email inquiries can also be sent to egrantshelp@pa.gov.

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](#)

4/8/2024

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?

Yes▼

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 “ 319 Nonpoint Source (NPS) Management grant application 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.

319 Nonpoint Source Management Grants Program  [Apply](#)

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 guidance document).

There are 52.6 percent of Pennsylvania's water-quality-impaired watersheds polluted from 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

***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 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 (**Required**) – 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 Top Official/Signing Authority.
- 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 (**Required**) – 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 the 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](#)

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 Information

COPY FROM APPLICANT

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

Company Name: _____

NAICS Code: _____

FEIN: _____
*Please enter SSN/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: _____

Business Specifics

Current # of Full-time

Employees:

(In PA):

(World Wide):

Minority Owned: No Yes - (Ethnicity is optional) N/A

▼

Woman Owned: No Yes N/A

Total Sales \$:

Total Export Sales \$:

R&D Investment: (% of Budget)

Employee Training Investment: (% of Budget)

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 from information at the beginning of the application. You may change the project name at this time.
- Answer whether the project is related to a previously submitted project and list that project’s name, if applicable.
- If applicable, enter the DEP contact name if you contacted someone regarding this project.
- If your community is certified through Sustainable Pennsylvania, enter the applicable level.
- Answer if you are interested in applying for more than one funding source.
- Site Locations – Default setting at 1. Only needs filled in if more than one site location exists for this project.

Project Overview

Project Name: ◆

319

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 ▼



[Continue](#)

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 and PA Senate – 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”

4/8/2024

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.

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.

[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
- 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.

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

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	319 Nonpoint Source Management Grants Program	Total
Please Select a Category ▼		
Add Category		
319 Nonpoint Source Management Grants Program - 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 on “Continue”

b. Basis of Cost Tab

- Click Budget Justification
- Provide a brief narrative of the cost of each requested item identified in the Budget Spreadsheet.

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.

- Appraisals Bids/Quotations
- Budget Justification Contractor Estimates
- Engineer Estimates Sales Agreements

Budget Narrative ♦

The narrative must specifically address each of the cost items identified in the Budget Spreadsheet.

Character Count: 0



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 project do not meet the requirements listed below, please try [changing your program](#).

1. Short Title of Project ♦

2. Project Description ♦

Please limit your response to no more than two sentences.

Character Count: 0/300 characters.

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 ◆

- WIP Implementation (design and/or construction)
- WIP Revision
- Statewide/regional project

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

Existing 319 WIP?

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. Calculated or Measurable Environmental Benefits

Nonpoint Source Pollutant Load Reductions

- Estimated Modelled

Nitrogen (lbs./yr.)

Phosphorus (lbs./yr.)

4/8/2024

Sediment (tons/yr.)

Aluminum (lbs./day)

Iron (lbs./day)

Manganese (lbs./day)

Acidity (lbs./day)

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. Contacts

Has your organization contacted the county conservation district to discuss the project? ◆

10. Budget Summary

a. Enter the match amount ◆

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 No file chosen

11. Prevailing Wage and Davis-Bacon Act

If funded, will the project grantee or sponsor abide by Pennsylvania's Prevailing Wage and/or Davis-Bacon Act? ◆

12. Projects on Grantee/Non-Grantee Owned Lands

Will your project be conducted on land you either own or control? ◆

13. Projects on State-Owned Lands

Will your project be conducted on land owned by commonwealth agencies? ◆

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. Environmental Justice

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

16. Act 47 Financially Distressed Municipalities

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

17. 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.

File 1 No file chosen

18. Section 319 Workplan

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

Upload Files

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

File 1 No file chosen

19. Location Maps, Site Maps, Aerial Maps, and/or Photos

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

Upload Files

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

File 1 No file chosen

20. 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 select your file. Each file can be no larger than 30MB.

File 1 No file chosen

21. Letters of Commitment

Upload any Letters of Commitment from project partners for identified match.

Upload Files

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

File 1 No file chosen

22. Chesapeake Bay Countywide Action Plan BMP Implementation Form

Upload the Chesapeake Bay Countywide Action Plan BMP Implementation Form

Upload Files

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

File 1 No file chosen

23. 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 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.

[Company](#)

- Mailing Address is required.

[Addenda](#)

- Applicant Name is required.

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 #: 202308295136

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 # 202308295136 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
P.O. Box 8776
Harrisburg, PA 17105-8776

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

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