APPLICATION INSTRUCTIONS FOR STATE GRANT FOR THE CLOSURE OF PUBLIC UNLINED LANDFILLS UNDER RSA 149-M

SECTION I - APPLICANT INFORMATION

If this is the first grant application filed by the City/Town for the landfill, please check **Initial**. If this is a subsequent filing, reporting additional expenditures either due to a partial application filed prior to this date, or the discovery of past eligible closure costs not previously reported, please check **Supplemental**.

Complete Section I by filling in the Facility Name, Address, Waste Management Permit Number, and Groundwater Permit Number.

SECTION II - APPLICANT CERTIFICATION AND AGREEMENT

Section II must be signed and dated by an authorized representative approved by the governing body of the municipality. The signature must be notarized.

SECTION III - CITY/TOWN APPROVAL

Attach to the application a **certified** copy of the warrant article, corporate resolution, or other legally binding document, as appropriate, authorizing the landfill closure project.

SECTION IV - CLOSURE INFORMATION

Lines 1 through 3 - List the information as requested.

Line 4 - landfill closure is considered complete when:

- Certification of completion and acceptance of landfill closure has been declared by the city/town; **and**
- All authorized closure activities have been completed and paid; **and**
- No additional closure activities are anticipated, excluding post-closure monitoring commitments.

If landfill closure is determined to be **complete**, proceed to Section V and Schedule A. **Note: If As-Builts have not been submitted to DES under separate cover, please attach to the application.**

If landfill closure is determined **not to be complete**, proceed to Section V and Schedule B.

SECTION V - ELIGIBLE CLOSURE COST INFORMATION

Line 1 - Fill in the dates for the period in which the request for reimbursement of eligible costs covers.

Begin date is the date of the first invoice submitted for reimbursement in this application request.

End date is the date of the last invoice submitted for reimbursement in this application request.

Lines 2 through 5 - On the appropriate line, report eligible hydrogeological, engineering, construction, and other costs for which reimbursement is being requested. Costs should be divided into: (a) Amount paid in cash, (b) Amount financed, and (c) Total costs for that activity ((a) + (b)).

Line 6 - Add columns 2a through 5a for total eligible costs paid in cash, columns 2b through 5b for total eligible costs financed, and columns 2c through 5c for total eligible costs associated with the landfill closure through the end date reported.

Attach all signed contracts and change orders pertaining to the closure of the landfill.

NOTE: All costs reported as eligible must be documented with invoices and proof of payment in order for eligibility to be considered. Invoices and proof of payment should total Line 6c.

Examples of eligible costs include, but are not limited to:

- Pre-closure hydrogeological investigation
- Pre-closure engineering investigation
- Construction design
- Closure construction
- Construction supervision

Examples of non-eligible costs include, but are not limited to:

- Land acquisition, except for land which is necessary to the physical elements of closure
- Meals and Lodging
- Finance or interest charges as a result of delinquent payments
- Legal costs
- Fiscal costs, such as employee benefits, social security, etc.
- Administrative costs, such as day-to-day business operations
- Preparation of the grant application

Lines 7a through 7c - List the amounts (if any) financed by an SRF loan, municipal bond or other methods. For any financed amounts, an institution generated amortization schedule must be attached to the application.

Line 8 - List all sources and contributions received toward the cost of closure of the landfill.

Examples of contribution sources include, but are not limited to:

- The U.S. Farmers Home Administration
- Rural Development Administration
- Housing and Urban Development
- Community Development Block Grant
- Contributions from private third parties, including but not limited to potentially responsible party (PRP) groups formed to collectively participate in the closure of the landfill.

SCHEDULE A - CERTIFICATION OF COMPLETION AND ACCEPTANCE OF LANDFILL CLOSURE

Complete Schedule A, only if you answered yes to question 4 of Section IV.

Complete Schedule A by filling in the Facility name and address.

Acceptance of the landfill closure project must be acknowledged by the authorized representative of the governing body as well as the consulting P.E. firm.

SCHEDULE B - ESTIMATED FUTURE ELIGIBLE LANDFILL CLOSURE COST OBLIGATIONS

Complete schedule B, only if you answered no to question 4 of Section IV.

Line 1 - Facility Name.

Line 2 - Note the projected date of completion of the landfill closure project.

Line 3a through 3d - List all future eligible costs you expect to incur. No costs reported here should appear in Section V of this application.

Line 3e - Total of Lines 3a through 3d.

NOTE: All future costs reported as eligible will need to be documented with invoices and proof of payment upon the applicant's request for reimbursement at a later date.

If you need guidance in preparing the application, please call the Compliance Assurance Section at (603) 271-2925.

For DES Use Only
Date App. Filed_____
G&C Approved Date_____
Grant Amount_____
Grant Number_____
Site Number_____

NEW HAMPSHIRE
DEPARTMENT OF ENVIRONMENTAL SERVICES
WASTE MANAGEMENT DIVISION

APPLICATION FOR STATE GRANT FOR THE CLOSURE OF PUBLIC UNLINED LANDFILLS UNDER RSA 149-M

SECTION I - APPLICANT INFORMATION

Filing Status: Initial _____ Supplemental _____

The City/Town of _____ with a principal place of business at _____ ("Applicant") hereby makes application to the State of New Hampshire for reimbursement of certain eligible closure costs of a public unlined landfill described as follows:

1) Facility Name: _____

Address: _____

City/Town: _____, NH Zip: _____

Waste Management Division Permit No.: _____

Groundwater Permit No.: _____

SECTION II - APPLICANT CERTIFICATION AND AGREEMENT

The attached statements and exhibits are hereby made part of this application and the undersigned Representative of the Applicant certifies that the information in the application is true, correct, and complete to the best of his/her knowledge and belief. By signature of this application, the municipality, if awarded a grant, agrees that it: 1) has closed or shall close the subject landfill in accordance with plans and specifications approved by the DES pursuant to RSA 149-M and the NH Solid Waste Rules; 2) shall provide post closure monitoring and maintenance of the landfill in accordance with the facility permit issued by DES; and 3), recognizes that failure to close or monitor a landfill in accordance with RSA 149-M, the NH Solid Waste Rules, and the facility permit shall result in the loss of grant payment.

The undersigned representative further certifies that by formal action of the governing body he/she has been authorized to file this application on behalf of the applicant.

_____ _____
Signature of Authorized Representative Date

_____
Printed or Typed Name and Title of Authorized Representative

On this _____ day of _____, 20_, before me personally appeared _____, authorized representative for the City/Town of _____, who is known to me personally or has satisfactorily proven his/her identity and who acknowledges that he/she did execute the foregoing document and that the same is his/her free act and deed.

Notary Public _____ My Commission Expires:_____

SECTION III - CITY/TOWN APPROVAL TO CLOSE LANDFILL

Attach a **certified** copy of the warrant article, corporate resolution or other legally binding document, as appropriate, authorizing the landfill closure project.

SECTION IV - CLOSURE INFORMATION

1) Engineering Consultant: _____

2) Construction Firm: _____

3a) Date of Bid Advertisement: _____

b) Date Contract was awarded: _____

c) Date Construction began: _____

4) Is this Landfill closure complete? Yes or No

If yes, please complete **Section V and Schedule A "Certification of Completion and Acceptance of Landfill Closure" and, if not previously filed, attach As-Builts to the application**.

If no, please complete **Section V and Schedule B "Future Eligible Landfill Closure Cost Obligations."**

SECTION V - ELIGIBLE CLOSURE COST INFORMATION

1. Request for reimbursement of Eligible Costs covers the period from _____ to _____
(See application instructions for begin and end date clarification) begin date end date

	Cash (a)		Financed (b)		Total (c)
2. Eligible Hydrogeological costs paid:	$_____	+	$_____	=	$_____
3. Eligible Engineering costs paid:	$_____	+	$_____	=	$_____
4. Eligible Construction costs paid:	$_____	+	$_____	=	$_____
5. Eligible Other costs paid:	$_____	+	$_____	=	$_____
6. Total Eligible Closure Costs paid:	$_____ (total column a)	+	$_____ (total column b)	=	$_____ (total column c)

If Line 6b is greater than **$0.00**, please complete question 7.

Note: Attach copies of all contracts, invoices, and proof of payment of all eligible costs for which reimbursement is being requested.

7. Eligible financed closure costs were procured through:

a. State Revolving Fund Loan: $_____

b. Municipal Bond Issue: $_____

c. Other: _____ $_____

d. Total eligible closure costs financed (lines 7a through 7c): $_____

Note: Attach institution generated amortization schedule(s) for financed amount(s).

8. Has the applicant received contributions from other sources toward the cost of the landfill closure? Yes or No

If yes, list the source(s) and the amount(s): _____

_____

SCHEDULE A

CERTIFICATION OF COMPLETION AND ACCEPTANCE OF LANDFILL CLOSURE

Facility Name: _____

Address: _____

City/Town: _____, NH Zip: _____

The facility referenced above was closed in accordance with the approved plans and specifications and is complete. The municipality is satisfactorily performing post-closure monitoring and maintenance in accordance with the facility permit and the work has been accepted by the _____
(Governing Body)

Governing Body Authorized Representative _____

Type or Print Name and Title _____

Date _____

Consulting P.E. Firm Authorized Representative _____

Type or Print Name and Title _____

Date _____

SCHEDULE B

ESTIMATED FUTURE ELIGIBLE LANDFILL CLOSURE COST OBLIGATIONS

1) Facility Name: _____

2) What is the projected date of completion of the landfill closure project? _____

3) Estimated **future** eligible landfill closure costs to be paid:

   a) Hydrogeological costs: $ _____

   b) Engineering costs: $ _____

   c) Construction costs: $ _____

   d) Other costs: $ _____

   e) Total (lines 3a through 3d) $ _____

4) Estimated **future** eligible landfill closure costs to be paid in cash (not financed):

   $ _____

5) Estimated **future** eligible landfill closure costs to be financed:

   a) State Revolving Fund Loan: $ _____

   b) Municipal Bond Issue: $ _____

   c) Other:_____ $ _____

   d) Total (lines 5a through 5c) $ _____