WATER/WASTEWATER ADVISORY COMMITTEE
WATER/WASTEWATER PRE-APPLICATION GUIDANCE AND FORM

All potential water and wastewater applicants requesting state-administered grant or loan funds to finance water/wastewater projects must complete a Water/Wastewater Advisory Committee (WWAC) pre-application form. General procedures for completing the pre-application form are provided below.

1: Applicant/Owner: Complete all fields for the owner of the proposed water/wastewater project. Information must include the name and title of the individual representing the Applicant/Owner of the proposed project, address, city, zip code, county, phone number, fax number, and a current email address.

Engineering Firm (Optional): This section should be completed if the Applicant/Owner is working with or plans to work with an Engineering Firm on the proposed project. If the Applicant/Owner has an Engineering representative that works with the entity internally, include their information here.

2: Select all types that may apply to the proposed project. If "Other" is selected, provide details in the space provided and/or more information may be included in the project description.

3 - 9: Complete all fields for the proposed system and/or community. Information for most Arkansas municipalities can be found at https://local.arkansas.gov .

10: Total Project Cost including all funding sources. The amount should include construction, engineering, contingency, and any other cost associated with the proposed project.

11: Select the Agency or Agencies the Applicant/Owner would like to request funding from and the amount from each. If "Other Funding Source" is selected, please provide information in the project description about this source of funding. If the Applicant/Owner does not know from which agencies funding will be requested, do not check any of the agencies and leave the amount fields blank.

12: A brief description of the proposed project and work to be implemented. Include additional information from number 2 that will better explain the type of proposed project should be added. Additional pages of description information may be attached if necessary.

13: Include the proposed project's location and if applicable, the proposed project's new service area. Maps can be submitted as an attachment if necessary.

14: Include a brief description of the project and the need for it and include any recent inspection information and/or enforcement actions.

15. Water Rate Study – Please provide information about completing and submitting the Water Rate Study (Act 605 of 2021)

16: Complete the fields for the estimated project schedule (time frame) for the proposed project from funding application to construction completion. Please provide additional information as needed in the space provided.

17: Authorized signature of the Applicant/Owner Representative listed in Section 1 and the name and title of the application preparer's signature and date.

Submit to: AGRI.wwac@arkansas.gov

WATER / WASTEWATER ADVISORY COMMITTEE
PRE-APPLICATION FORM

1. Applicant / Owner:	Optional:
Representative & Title:	Engineering Firm:
Address:	Project Engineer:
City & ZIP Code:	Address:
County:	City & ZIP Code:
Phone:	Phone:
E-Mail Address:	E-Mail Address:
PWS/NPDES Number:	UEI Number:

2.Application Type: (Mark all that apply):

	Wastewater LMI Service Hookups
	New Wastewater Collection System or Extension
	Rehab Existing Wastewater Collection System
	New Wastewater Treatment Plant
	Rehab Existing Wastewater Treatment Plant
	Wastewater Planning and Development Only Funding
	Wastewater Emerging Contaminants
	Water LMI Service Hookups
	New or Rehab Water Supply
	New Water Treatment Plant
	Rehab Existing Water Treatment Plant
	New Water Distribution System or Extension
	Rehab Existing Water Distribution System
	New Water Storage Tank
	Rehab Water Storage Tank
	Water Meter Replacement/Upgrade
	Water Planning and Development Only Funding
	Water Lead Service Line Inventory or Replacement
	Water Emerging Contaminants
	Other

3. Number of Existing Customers:
4. Number of New Customers: (Proposed Project)
5. Population of City/Town or Rural Area:
6. Population Change since last Census:
7. Median Household Income: (Existing Service Area)
8. Median Household Income: (New Service Area, if applicable)
9. Arkansas Senate District:
Arkansas House District:
U.S. Congressional District:

10. Anticipated Proposed Total Project Funding Amount (Total Funding including Construction, Engineering, Contingency, Etc.)	$
11. Indicate the Agencies which you intend to request funding and how much from each: (leave blank if unknown) ANRC Funding:	$
ANRC Funding – Emerging Contaminates	$
ANRC Funding – Infrastructure Lead Service Line	$
Sewer Overflow and Stormwater Reuse Municipal Grant (OSG)	$
Small Water Grant (WIN-Small Disadvantaged)	$
Water & Sewer Treatment Facility Grant Program (WSTFGP) (State Matching Grant)	$
Arkansas Economic Development Commission Community Development Block Grant (CDBG) Program	$
USDA, Rural Development:	$
Communities Unlimited:	$
Water Finance Exchange (WFX)	$
Rural Water Financing Agency (RWFA)	$
Other Funding Source:	$

12. Brief Description of Proposed Project (Attach Additional Pages, as necessary):

13. Proposed Project Location and Proposed New Service Area, if applicable (Attached map):

14. Brief Description of the Project –Need for the Project - Including the Status of Recent Inspections and/or Enforcement Actions:

15. Water Rate Study (Act 605 of 2021) –
Has the water system completed their Water Rate Study for Act 605 of 2021? ☐ Yes ☐ No
Has the water system submitted their Water Rate Study for Act 605 of 2021 to ANRD? ☐ Yes Date No ☐

16. Proposed Schedule for the Project:

Funding Application: _____

Submission of Plans and Specifications: _____

Construction Start: _____

Construction Completion: _____

Additional Information:

17. I, the undersigned representative of the applicant or grant recipient, certify that the information contained herein, and any attached statements, exhibits and reports are true, correct, and complete to the best of my knowledge and belief. I also understand and acknowledge that the WWAC may request additional information including a full Preliminary Engineering Report.

Applicant Signature: _____ Date: _____

Application Preparer Signature: _____ Date: _____
Preparer's Name, Title and contact information:

Submit to: AGRI.wwac@arkansas.gov