

**STATE OF CONNECTICUT, DEPARTMENT OF PUBLIC HEALTH**  
**Drinking Water State Revolving Fund (DWSRF)**  
**Small Loan Program Eligibility Application**

DWS Project # \_\_\_\_\_

**NOTE: This form is only to be used for projects estimated to cost less than \$100,000. Projects estimated to cost \$100,000 or more must use the [DWSRF Project Eligibility Application](#). The Drinking Water Section (DWS) will make the final determination as to whether a project qualifies for the Small Loan Project Program.**

**Please note that this application is used only to determine eligibility and is not a loan application.**

Full Legal Name of Public Water System (PWS)		PWSID Number
<b>Representative Authorized to Sign Loan Agreement</b>		
Name:		Title:
Mailing address:		
Telephone #:		Fax #:
Email Address:		
<b>Authorized Project Representative (if different than Representative Authorized to Sign Loan Agreement)</b>		
Name:		Title:
Mailing address:		
Telephone #:		Fax #:
Email Address:		
Is this PWS a Community System or a Not-for-Profit water company? <input type="checkbox"/> Yes <input type="checkbox"/> No If a Not-for-Profit, complete the "Not-for-Profit Water Company Determination Form" & submit a copy with the eligibility application(s) (Only one copy per PWS is necessary.)		
Population served by the Public Water System (number of persons):		
Population served by this proposed project (number of persons):		
Please provide a brief description of the proposed project:		
Does your project involve any structural improvements?: Construction of new buildings <input type="checkbox"/> Other <input type="checkbox"/> Please Specify: Building Additions <input type="checkbox"/> Building Alterations <input type="checkbox"/> Heavy Equipment Operations <input type="checkbox"/> Site work <input type="checkbox"/>		
Will this project address any regulatory violations or deficiencies identified in a sanitary survey report by the DPH? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If yes, attach the appropriate documentation.		

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<b>Project Components and Associated Costs:</b>	
Project Equipment or Components (purchase only)	\$
Installation	\$
Legal Costs	\$
Permits or Easements	\$
Other Costs (please specify):	\$
DWSRF Funding Requested	\$
<b>Estimated Total Cost of Project (In dollars):</b>	<b>\$</b>
Reminder: If the project is estimated to cost \$100,000 or more, the <a href="#">DWSRF Project Eligibility Application</a> must be submitted instead of this eligibility application.	
Will other sources of funding (non-DWSRF) be used to pay for a portion of this project?      Yes <input type="checkbox"/> No <input type="checkbox"/>	
If Yes, please specify the amount(s) and source(s) of other funding:	
If project is over \$100,000 then it does not qualify for the Small Loan Program. The <a href="#">DWSRF Project Eligibility Application</a> will need to be filled out and submitted instead.	
Do you have an Asset Management Plan for your water system?      Yes <input type="checkbox"/> No <input type="checkbox"/>	
If Yes, please provide a copy.	
Do you have a Fiscal Management Plan for your water system?      Yes <input type="checkbox"/> No <input type="checkbox"/>	
If Yes, please provide a copy.	
Provide the location (street address) of the proposed project:	
Is the project going to be located on property owned by the PWS?      Yes <input type="checkbox"/> No <input type="checkbox"/>	
If no, please provide legal easement documentation, otherwise the project is ineligible for funding.	
Project estimated start date:	completion date:
Does the PWS have the authority to enter into a loan agreement with CT DPH?      Yes <input type="checkbox"/> No <input type="checkbox"/>	

**Authorized Representative Signature\*:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Submit an electronic copy of all application materials via email to [DPH.CTDWSRF@ct.gov](mailto:DPH.CTDWSRF@ct.gov) or on a USB flash drive or CD submitted with the paper copy.**

**Questions regarding application materials should be directed to the following:**

**Administrative Questions: Theodore Dunn, DPH (860) 509-7333**

**Financial Questions: Office of the State Treasurer, Debt Services Division (860) 702-3000**

**Technical Questions: DPH DWSRF Unit Engineer (860) 509-7333**

\* Representative Authorized to Sign Loan Agreement or Authorized Project Representative