

**FORM A – PROPOSAL COVER SHEET**

**SOLID WASTE ALTERNATIVES PROGRAM  
Project Requests Greater than \$25,000**

Project Title: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ County: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_ PO Box: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Applicant Type:

Local Government

Private For Profit

Private Not For Profit

Amount of Funding Requested: \$ \_\_\_\_\_

Amount of Applicant Cash Match Committed: \$ \_\_\_\_\_

Total Project Cost: \$ \_\_\_\_\_

OPTIONAL: Value of Other Project Related Applicant Resources \$ \_\_\_\_\_

Identify: \_\_\_\_\_

Facility Location: \_\_\_\_\_

Project Service Area Description: \_\_\_\_\_

Is the targeted solid waste currently landfilled?  Yes  No

Is the targeted solid waste landfilled in Iowa?  Yes  No

Signature: \_\_\_\_\_ Printed: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

**FORM B – PROJECT NARRATIVE**

**SOLID WASTE ALTERNATIVES PROGRAM**

**Project Requests Greater than \$25,000**

**NOT TO EXCEED 8 PAGES OF TEXT – FOLLOW OUTLINE – USE HEADINGS**





**FORM D – BUDGET NARRATIVE**

**SOLID WASTE ALTERNATIVES PROGRAM  
Project Requests Greater than \$25,000**

Applicant Name: \_\_\_\_\_

Applicants are required to submit a budget narrative that details specific budget line items and their role in the project.

Applicants are encouraged to discuss other resources committed to the proposed project. \_\_\_\_\_

# FORM E

## COMPREHENSIVE PLANNING AGENCY REVIEW AND COMMENT FORM

### SOLID WASTE ALTERNATIVES PROGRAM Project Requests Greater than \$25,000

See Application Guidelines for appropriate Comprehensive Planning Agency contact information

Applicant Name: \_\_\_\_\_ Date Application Received: \_\_\_\_\_

Comprehensive Planning Area Agency Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_

1. Is the proposed project consistent with the solid waste comprehensive plan or Environmental Management System participant goals? Please elaborate.
2. Is the Agency aware of other entities currently diverting the targeted materials? If yes, please describe any potential adverse effects.
3. Is all or a portion of the targeted solid waste materials currently landfilled? If not, please elaborate.
4. Can the project, as proposed, be considered to have a regional impact on the targeted solid waste stream? If not, is there the potential for it to be expanded to have a regional impact and how?
5. Does the responsible agency feel the project is viable as proposed, given current and projected populations, the available solid waste stream, and current and proposed landfill diversion activities? Please elaborate.
6. Other Comments

## Applicant Disclosure

The Applicant must provide the following information. This is a continuing disclosure requirement from application submittal through agreement end date (if funding is awarded).

1. During the last three (3) years, has the Applicant received written notification from a state agency that a debt is owed to a state agency or a debt is being enforced through the Income Offset Program (including the state child support recovery unit if the Applicant is an individual) that will in any way impact receipt of monies awarded through this program?

Yes     No

If yes, provide the date by which the Applicant will or has satisfied debts owed to or being collected by the state.

2. During the last three (3) years, has the Applicant had a contract for goods and/or services terminated for any reason, or has the Applicant received a notice of breach, notice of default, or similar notice?

Yes     No

If yes, provide full details related to the termination or notice.

3. During the last three (3) years, describe any damages or penalties or settlements pertaining to contract disputes under any of the Applicant's existing or past contracts as it relates to goods and/or services performed that are similar to the goods and/or services contemplated by this application. If so, indicate the reason for the penalty, damages or exchange of property, goods, or services and the estimated amount of the cost of that incident to the Applicant.

4. During the last three (3) years, list and summarize all litigation, threatened litigation, administrative or regulatory proceedings, or similar matters to which the Applicant or its officers have been a party. Any such matter commencing after submission of an application, and with respect to the successful Applicant after the execution of a contract, must be disclosed in a timely manner in a written statement to the Department's contract officer.

I hereby certify that the information on this form is complete and accurate, to the best of my knowledge:

Name: \_\_\_\_\_

Title \_\_\_\_\_