***Text

Description automatically generated***

**Instructions:** Complete the form with requested information following the instructions in blue. Charts, photographs, etc. may be inserted throughout the document or included as an attachment; be sure that they are clearly labeled. **Please be sure to delete all blue text prior to submittal.**

|  |  |
| --- | --- |
| **1. Project Title and Length** | |
| Project Title: |  |
| Project Length (months): |  |

|  |  |
| --- | --- |
| **2. Applicant Information** | |
| Lead Organization Name: |  |
| Federal ID Number: |  |
| Federal UEI Number (Unique Entity Identifier): |  |

**Project Manager** (Responsible for overseeing project progress)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name and Title: |  | | | | | | |
| Mailing Address: |  | | | | | | |
| Telephone: |  |  | Fax: |  |  | Email: |  |

**Primary Contact** (Responsible for quarterly reporting and grant correspondence, if different than the Project Manager)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name and Title: |  | | | | | | |
| Mailing Address: |  | | | | | | |
| Telephone: |  |  | Fax: |  |  | Email: |  |

**Legal Contact** (officer legally authorized to sign Grant Agreement)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name and Title: |  | | | | | | |
| Mailing Address: |  | | | | | | |
| Telephone: |  |  | Fax: |  |  | Email: |  |

**Financial Contact** (responsible for quarterly invoice reporting and grant funds)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name and Title: |  | | | | | | |
| Mailing Address: |  | | | | | | |
| Telephone: |  |  | Fax: |  |  | Email: |  |

**Alternate Contact(s)** (any additional project team members that should be included on all correspondence)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name and Title: |  | | | | | | |
| Mailing Address: |  | | | | | | |
| Telephone: |  |  | Fax: |  |  | Email: |  |

**Previous 319 implementation projects led by the organization:**

*If applicable, p*lease list the names and years of previously-completed 319 implementation projects led by the lead organization of this proposed project. A description of the projects is **not needed**. Add/remove bullets as necessary.



|  |
| --- |
| **3. Project Area Information** |

**Project Location**

|  |  |
| --- | --- |
| Waterbodies Impacted: |  |
| Watershed Names: |  |
| 12-Digit HUCs: |  |
| Counties: |  |
| Basin: |  |

**Water Quality Impairments Being Addressed:** *(check box to the right for all that apply)*

Only include impairments that will be addressed through the proposed work

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Fecal coliform/*E. coli* |  | Nitrogen |  | Copper |  |
| Shellfish (Fecal coliform) |  | Phosphorus |  | Nickel |  |
| Macroinvertebrates (BIO/Aquatic Life Use) |  | Ammonia |  | Zinc |  |
| pH |  | Turbidity |  | DO |  |

**This Watershed:** *(check box to the right for all that apply)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Has an approved TMDL |  |  |  |
|  | Includes an MS4 |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Water Classification:** |  |  |  |  |  |
| Outstanding Resource Water |  | Trout |  | Shellfish |  |

Below, include the title of the Watershed Plan being implemented. Hyperlink to a digital version of the plan if possible or include a copy of the plan in the attachments.

|  |  |
| --- | --- |
| **Watershed Plan Title:** |  |

**SCDHEC Monitoring Sites and Impairments:** Add or remove rows as necessary

|  |  |  |
| --- | --- | --- |
| Sites for Restoration (Impaired Sites): | **Impaired Site** | **Impairment(s) Type** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Approved TMDL sites that are not supported: | **Impaired Site** | **Impairment(s) Type** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Sites for Protection (Unimpaired Sites): |  | |
|  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **4. Funding Request** | | | |
| 319 Federal Request (60%): | $ |  |  |
| Non-Federal Match (40%): | $ | Match Source(s): |  |
| Total Project Amount (100%): | $ |  |  |
|  |  |  |  |

|  |  |
| --- | --- |
| Additional Federal Funding, if applicable: | $ |
| Additional Federal Funding Source: |  |

|  |
| --- |
| **5. Project Summary** |

In **200 words or less**, provide a general description of the proposed project that would be suitable for a press release. This abstract should be able to stand alone from the rest of the proposal. This section should summarize the water quality concerns, proposed work, stakeholder involvement, and how the project will help achieve the desired environmental outcomes.

**Project Summary:**

Provide an Outcome Statement with a total load reduction goal.

**Outcome Statement**: The ultimate outcome or goal of this project is to

|  |
| --- |
| **6. Watershed Background** |

Describe the watershed, note its significance, key features, etc. Also discuss the watershed’s water quality concerns and explain why the proposed work is important for this watershed. Include load reduction information from a TMDL document, if applicable. Reference applicable sections of the existing Watershed Plan here, including page numbers. Please be sure to cite references when used (listing your references in Section 12 below).

|  |
| --- |
| **7. Best Management Practices (BMPs)** |

Identify the type of BMPs that will be implemented in this project and include a detailed description of each. You may wish to reference the Pollutant Load Estimation Tool [BMP Definitions](https://www.epa.gov/system/files/documents/2023-04/BMP_Description_revised%203-9-23_final%20with%20alt%20text_508.pdf) and [BMP Efficiencies](https://ordspub.epa.gov/ords/grts/r/grtsadm/files/static/v287/BMP%20Efficiency%20References%20Doc%20082023.pdf). Include the anticipated number of BMPs to be installed and proposed location information with as much detail possible. Maintenance plans should include a detail of work to be done and who is responsible for completing it. Also include the estimated pollutant load reductions that can be expected from the BMPs outlined, including calculations and references to the Watershed Plan. (Note: Contact your Watershed Coordinator for assistance with load reduction estimations, as needed.) Add/remove bullets as necessary.

* + **BMP**:

**Description:**

* + 1. **Goal/Number Anticipated Installing**:
    2. **Estimated Pollutant Load Reductions**:
    3. **Maintenance Plan**:
  + **BMP**:

**Description:**

* + 1. **Goal/Number Anticipated Installing**:
    2. **Estimated Pollutant Load Reductions**:
    3. **Maintenance Plan**:
  + **BMP**:

**Description:**

* + 1. **Goal/Number Anticipated Installing**:
    2. **Estimated Pollutant Load Reductions**:
    3. **Maintenance Plan**:
  + **BMP**:

**Description:**

* + 1. **Goal/Number Anticipated Installing**:
    2. **Estimated Pollutant Load Reductions**:
    3. **Maintenance Plan**:

|  |
| --- |
| **8. Detailed Project Description** |

**Project Description**

This section should include most of the detailed information regarding the project. Describe how the Watershed Plan will be implemented for this project. Include a description of the problem your project addresses and the specific activities you seek funding to complete. How will implementation of these BMPs occur? Who will complete the work? Where would the work be done? Reference attached maps when applicable.

**Permits**

*If your proposed work does not require a permit, provide a sentence stating this.*

If your project requires a permit, discuss what permits will be required and who will be responsible for permit acquisition. Will the project result in discharge, excavation, or fill of wetlands or impact state waters? Be sure to contact [the US Army Corps of Engineers](https://www.usace.army.mil/Missions/Civil-Works/Regulatory-Program-and-Permits/Obtain-a-Permit/)*.* Will the project result in excavation/fill or propose activities within a FEMA Special Flood Hazard Area? Visit the [FEMA web page](https://msc.fema.gov/portal/home).

Permits, easements, and engineered plans can take a long time to obtain. If the necessary pre-implementation requirements have not yet been obtained, be sure to include these early on in your project milestones and timeline (Section 9 Element F) to ensure that project implementation can begin in a timely manner.

|  |
| --- |
| **9. Nine Elements of Watershed Plan** |

Describe how the project will implement the nine required elements of the Watershed Plan. This section should reflect how this project will implement the Watershed Plan.

**Element a. Identify causes and sources of pollution that need to be controlled**

Briefly describe (1-2 sentences) the relevant sources/causes as they are identified in the Watershed Plan.

**Element b. Determine load reductions needed**

Identify the determined load reductions from the Watershed Plan and briefly describe how they were obtained.

**Element c. Develop management measures to achieve goals**

Briefly list the types of BMPs that will be implemented to achieve goals as they are listed in the Watershed Plan (e.g. agricultural BMPs, land conservation, etc.).



**Element d. Identify technical and financial assistance needed to implement plan**

**Project Budget:**

Use the budget chart in Attachment 1 to generate the overall project budget.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Federal** | **Non-Federal (Match)** | **Total** |
| **Personnel – Salary** | $ | $ | **$** |
| **Personnel – Fringe** | $ | $ | **$** |
| **Travel** | $ | $ | **$** |
| **Equipment** | $ | $ | **$** |
| **Supplies** | $ | $ | **$** |
| **Contractual** | $ | $ | **$** |
| **Construction** | $ | $ | **$** |
| **Other** | $ | $ | **$** |
| **Indirect**  *(Requires additional documentation)* | $ | $ | **$** |
| **TOTAL** | **$** | **$** | **$** |

**Budget Narrative:**

Explain and justify all costs included in your budget. Discuss, in detail, how federal funds for each category will be spent. Add bullet points as necessary and use N/A for categories not included in the proposed budget. **Be sure to note the source and amount from each source of all match funding.** Reference Attachment 1 – Budget Chart as needed. Include any calculations that are not found in Attachment 1.

Note: When landowners are responsible for cash contributions associated with BMPs, you must explain below how your organization will manage cash flow and reimbursements associated with this. — *Organizations should be able to reimburse the landowner for the 319-funded portion of the BMP prior to receiving reimbursement from SCDHEC.*

|  |  |
| --- | --- |
| Personnel – Salary: |  |
| Personnel – Fringe: |  |
| Travel: |  |
| Equipment: |  |
| Supplies: |  |
| Contractual: |  |
| Construction: |  |
| Other: |  |
| Indirect: |  |

**Element e. Develop information/education component**

Identify and discuss the target audience impacted by the implementation efforts of this project. This should be members of the population contributing to the nonpoint pollution source. Are they congregated in a specific part of the watershed? If applicable, what is the typical age, gender, education level, race, and/or primary language of this audience? This information will be critical in deciding the education needed to ensure maintenance of BMPs. Who could assist with identifying individuals and dissemination of information?

It is critical that BMPs installed in a 319 project be properly maintained. The purpose of the outreach and education component is solely to educate the target audience on the importance of the BMP, possible benefits (not just water quality), and how to maintain it. For example, homeowners receiving septic system repairs may need training on how to properly maintain their systems. In addition to identifying the target audience, this section should describe what information will be provided and how it will be disseminated. Be sure to think about what messages and what formats will be most effective with the identified audience.

Complete the project-specific outreach deliverable chart below. Remove rows that are not relevant to your project and include other items as necessary. Please include all project-specific outreach deliverables that will be produced as part of your project and the anticipated number of each item. For instance, if you anticipate developing and distributing 362 individual flyers, list the number 362 in the “expected number of deliverables” section. If you will have three different flyers, you can list this as: 3 x 362. Specify to whom the deliverable will be given in the last column—such as farmers, septic installers, landowners, general public, etc. ***We highly recommend that all restoration and/or stormwater projects install project-specific, permanent, educational signage. Design for signage, mailouts, press releases, etc. should be approved by NPS staff before printing and/or distribution.***

|  |  |  |  |
| --- | --- | --- | --- |
| **Project Activity** | **Deliverables Associated with Proposed Project Activity** | **Expected Number of Deliverables** | **To Whom Deliverable will be Given** |
| **Project Specific Outreach** | Project Fact Sheets |  |  |
| Public Meetings |  |  |
| Press Releases |  |  |
| Brochures/Flyers |  |  |
| Postcards |  |  |
| Website |  |  |
| Project Signs |  |  |
| Displays |  |  |
| Informational Kiosk |  |  |
| Tours |  |  |
| Stream Clean-Ups |  |  |
| Field Days |  |  |
| Workshops |  |  |
| Newsletters |  |  |
| Other (specify) |  |  |
| Other (specify) |  |  |
| Other (specify) |  |  |
|  |  |  |
|  |  |  |

**Element f. Develop implementation schedule & Element g. Develop interim milestones to track implementation of management measures**

List the milestones for each component of your project in the chart below. Ensure that your milestones are measurable and realistic, as they will be used to track and evaluate your progress as the project continues. **If your project is selected, alteration of milestones once the grant agreement has been signed would require a modification or amendment to the grant agreement, which can take several weeks to process—be sure your milestones are very well-thought out.**

All projects are required to include reporting milestones, which are already provided below. All other milestones should be listed using the number of month by which they will be complete (e.g. Month 5, not March 2017) or with a range illustrating when the milestone will be worked on and completed (e.g. Months 9-14). Keep in mind that these are months after the project starts, counted from the grant agreement signature date.

|  |  |  |
| --- | --- | --- |
| **#** | **Month** | **Milestone** |
| 1 | Quarterly | Submit progress reports, invoices, MBE/WBE forms, and BMP reports per schedule outlined in grant agreement. |
| 2 | Month 1 |  |
| 3 | Month 2 |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |
| 7 |  |  |
| 8 |  |  |
| 9 |  |  |
| 10 |  |  |
| 11 |  |  |
| 12 |  |  |
| 13 |  |  |
| 14 |  |  |
| 15 |  |  |
| 16 |  |  |
| 17 |  |  |
| 18 |  |  |
| 19 |  |  |
| 20 |  |  |
| 21 |  |  |
| 22 |  |  |
| 23 |  |  |
| 24 |  |  |
| 25 | 30 days after project completion | Submit final invoice and final closeout report to DHEC. Submit Final Budget Report within 30 days of project close. |

**Element h. Develop criteria to measure progress toward meeting watershed goals**

How will it be determined that your project was a success? SCDHEC monitoring data? Other locally-collected data? Survey results from participants? Number and extent of BMPs installed? Describe your measures below. Delete any blank lines. This should relate back to your outcome statement and objectives for accomplishment in Section 5.

|  |  |
| --- | --- |
| 1. |  |
| 2. |  |
| 3. |  |
| 4. |  |
| 5. |  |

**Element i. Develop monitoring component**

Discuss the monitoring efforts that will be implemented during and after the proposed work. Include indicators being monitored, timelines/frequency of monitoring, who will complete the work.



|  |
| --- |
| **10. Confirmed Project Partners** |

A committed partner is one that has committed time, materials, equipment, and/or funding to your proposed project. List committed partnering organizations below, and **briefly** describe their role/responsibility with the project. If the organization is providing a contribution of match funding, please list the amount of contribution to the project. Grantees should be aware that the United States Environmental Protection Agency Section 319 of the Clean Water Act Grant funds require a 40% match in non-federal funds. Match can be in the form of cash or in-kind contributions (time, labor, easements, materials, equipment, etc.) from your organization and/or project partners.

All organizations listed here must also submit a Letter of Commitment. Supporting organizations may also submit a Letter of Support but should not be listed here. Please note that Letters of Commitment rank higher than Letters of Support when competing for a 319 Grant. Securing a commitment from an organization scores higher in a ranking scheme when compared to a group simply supporting the project in writing, without a commitment of time, materials, equipment, and/or funding.



|  |
| --- |
| **11. Submittal Requirements** |

Submit the 319 Grant final proposal and all attachments via email in the appropriate file formats to [NPSGrants@dhec.sc.gov](mailto:NPSGrants@dhec.sc.gov) **prior to 3 PM EST on June 20th, 2024**. Emails submitted to other addresses will not be considered, although you may copy [mccartsm@dhec.sc.gov](mailto:mccartsm@dhec.sc.gov). Do not exceed 20 MB for attachments on any email; send multiple emails or include a file sharing link if needed for larger attachments. Confirmation emails will be sent from [NPSGrants@dhec.sc.gov](mailto:NPSGrants@dhec.sc.gov) upon receipt of all proposal-related materials. If you do not receive a confirmation email soon after submitting your proposal, ensure that your email is not undeliverable or still in the Outbox.

**Proposals must be *received* by 3 PM EST on Thursday, June 20th, 2024.**

**Your proposal package must include:** *(Please check items off to ensure you include all necessary components.)*

Required:

* **Proposal Form** – as a Word document, with all applicable sections completed
* **Attachment A: Budget Chart** as an Excel document, with all applicable sections completed
* **Attachment B**: **Watershed Plan** this must be a completed 9-element plan that has been approved by DHEC NPS staff by the proposal deadline. Include a hyperlink to a digital version of the plan in Section 3 or include the plan as an attachment
* **Attachment C: Maps**
  + **Project Location Map -** Submit as a PDF file.
    - Digitally-created
    - Fits on one page of 8.5”x11” paper
    - Includes project watershed/area
    - Legend (includes SCDHEC monitoring sites, waterbodies, towns, watershed boundaries
    - SCDHEC monitoring sites – Sites should be labeled on the map and have a clear differentiation between unimpaired and impaired; impaired sites should be clearly designated by impairment type. These designations may be specified through the required legend.
    - Waterbodies
    - Towns
    - Watershed boundaries
    - Reference map showing location in the state
    - Does your project include an MS4 area?
      * No.
      * Yes.
        + *If yes*, did you include MS4 permit boundaries on the map *and* in the legend?
  + **Locally-Collected Data Map -** Submit as a PDF file. *This map should look the same as the Location Map* ***except*** *that SCDHEC monitoring sites should be replaced with Locally-Collected Monitoring Sites.*
    - Entirely digitally-created
    - Fits on one whole page of 8.5”x11” paper
    - Includes project watershed/area
    - Legend – includes Locally-collected monitoring sites, waterbodies, towns, watershed boundaries
    - Locally-collected monitoring sites – Sites should be labeled on the map and have a clear differentiation between unimpaired and impaired; impaired sites should be clearly designated by impairment type. Sites should also be identified by what entity collected which data. These designations may be specified through the required legend.
    - Waterbodies
    - Towns
    - Watershed boundaries
    - Links to data collected, if available
  + **Pollutant Sources Map** – Submit as a PDF file.
    - Entirely digitally-created
    - Clear and concise
    - Fits on one whole page of 8.5”x11” paper
    - Indicates targeted pollutant sources within the project watershed/area, including confirmed/potential landowners from chart in initial proposal if applicable
    - Legend included
  + **Priority Areas Map(s)**
    - Digitally-created
    - Indicates identified priority areas for specific BMP implementation within the project watershed/area
    - Fits on 8.5”x11” paper. This may require several pages if multiple BMPs are planned. *(I.e. If the proposal is for both septic and agriculture, one map should indicate identified priority areas for septic repair/replacement within the watershed and a second map should indicate identified priority areas for agricultural BMPS within the watershed.)*
* **Attachment D: Commitment Letters** – Submit as a PDF file. Include a Letter of Commitment from each confirmed project partner listed in Section 9
* **Does your project include an MS4 area?**
  + **No.**
  + **Yes. Attachment E: Letter of Assurance**
    - Applicants must include a signed Letter of Assurance on official letterhead from the permit holder verifying that activities proposed for a 319 project represent practices that are “above and beyond” NPDES permit requirements and will not be counted as compliance in any NPDES permit reports.
* **Attachment F: Additional Information for Indirect Billing** – A grantee intending to claim indirect costs must provide documentation and confirm in writing to SCDHEC’s 319 Grant Program that they operate according to an “indirect cost rate proposal” that conforms to the applicable “Cost Principles” established under either OMB Circulars A‐21, A‐87, and A‐22, or 2 CFR 200 Subpart E (applicable principles will be specified in an executed grant agreement). A copy of the current approved indirect rate agreement from the appropriate federal cognizant organization must be attached with any proposal including indirect costs. This applies to both the lead organization and cooperators. As a Subrecipient, if Grantee (Subrecipient) utilizes an indirect cost rate, the Grantee (Subrecipient) must provide a current copy of the approved indirect cost rate letter from its federal cognizant agency OR use the 10% de minimis rate as stated in 2 CFR 200.414(f). Otherwise, only direct charges will be allowed under the terms and conditions of this Grant Agreement.

|  |
| --- |
| **12. References** |

List references cited, if applicable.Add/remove bullets as necessary.