

**TEXAS STATE SOIL AND WATER CONSERVATION BOARD
Flood Control Structural Repair Grant Program**

FORM NUMBER: TSSWCB-FC-1A
Effective Date: September 1, 2015

APPLICATION FOR STRUCTURAL REPAIRS

Use this application to request financial assistance for conducting structural repairs on flood control dams as defined by Texas Administrative Code, Title 31, Chapter 529, Subchapter B. Do not use this form to request grant funds to provide a portion of the matching funds required for a federal rehabilitation project or federal Emergency Watershed Protection Program project being performed by the USDA-Natural Resources Conservation Service. Funds for matching rehabilitation projects may be requested by submitting Form Number TSSWCB-FC-2; funds for matching Emergency Watershed Protection Program projects may be requested by submitting Form Number TSSWCB-FC-3.

ADMINISTRATIVE FORM

One Administrative Form must be completed for each application. An individual Technical Form [Form Number TSSWCB-FC-1B] must be completed for each flood control dam for which repair grant funds are requested. The combination of an Administrative Form, all associated Technical Forms, and all other required documentation constitutes a complete application.

Submit completed applications to:
TSSWCB
Attention: Flood Control
P.O. Box 658
Temple TX 76503

For assistance in completing this application, contact:
TSSWCB Flood Control Department
(254) 773-2250
www.tsswcb.state.tx.us/floodcontrol

THIS SPACE FOR TSSWCB USE ONLY

Soil and Water Conservation District (SWCD) information:

Provide the following information for the Soil and Water Conservation District (SWCD) that is a sponsor of the flood control dam or dams that are specified on Technical Forms submitted with this Administrative Form. To request grant funds for dams where another SWCD is a sponsor, complete another Administrative Form and submit it with the appropriate Technical Forms as a separate application.

SWCD Name:	<input type="text"/>		
SWCD Number:	<input type="text"/>	SWCD City:	<input type="text"/>
Chairman First Name:	<input type="text"/>	SWCD Zip Code:	<input type="text"/>
Chairman Last Name:	<input type="text"/>	SWCD Phone Number:	<input type="text"/>
SWCD Address:	<input type="text"/>	SWCD Fax Number:	<input type="text"/>
SWCD Office/Suite Number:	<input type="text"/>	SWCD Email Address:	<input type="text"/>

Authorized Representative information:

Provide the following information for the individual that the SWCD and other sponsors have mutually agreed should be the point of contact for all inquiries the Texas State Soil and Water Conservation Board (TSSWCB) may have regarding this application. The authorized representative must be an individual affiliated with one of the sponsors.

First Name:	<input type="text"/>	Last Name:	<input type="text"/>
Organization:	<input type="text"/>		
Address:	<input type="text"/>	Zip Code:	<input type="text"/>
Office/Suite Number:	<input type="text"/>	Phone Number:	<input type="text"/>
City:	<input type="text"/>	Fax Number:	<input type="text"/>
State:	<input type="text"/>	Email Address:	<input type="text"/>

Provide the following information for the additional sponsors of flood control dams for which Technical Forms have been submitted (with this Administrative Form). Space for up to four additional sponsors has been provided below. All sponsors of each flood control dam must be listed below.

Non-SWCD Sponsor #1 information:

Entity Name:	<input type="text"/>	State:	<input type="text"/>
Contact Person:	<input type="text"/>	Zip Code:	<input type="text"/>
Address:	<input type="text"/>	Phone Number:	<input type="text"/>
Office/Suite Number:	<input type="text"/>	Fax Number:	<input type="text"/>
City:	<input type="text"/>	Email Address:	<input type="text"/>

Non-SWCD Sponsor #2 information:

Entity Name:	<input type="text"/>	State:	<input type="text"/>
Contact Person:	<input type="text"/>	Zip Code:	<input type="text"/>
Address:	<input type="text"/>	Phone Number:	<input type="text"/>
Office/Suite Number:	<input type="text"/>	Fax Number:	<input type="text"/>
City:	<input type="text"/>	Email Address:	<input type="text"/>

Non-SWCD Sponsor #3 information:

Entity Name:	<input type="text"/>	State:	<input type="text"/>
Contact Person:	<input type="text"/>	Zip Code:	<input type="text"/>
Address:	<input type="text"/>	Phone Number:	<input type="text"/>
Office/Suite Number:	<input type="text"/>	Fax Number:	<input type="text"/>
City:	<input type="text"/>	Email Address:	<input type="text"/>

Non-SWCD Sponsor #4 information:

Entity Name:	<input type="text"/>	State:	<input type="text"/>
Contact Person:	<input type="text"/>	Zip Code:	<input type="text"/>
Address:	<input type="text"/>	Phone Number:	<input type="text"/>
Office/Suite Number:	<input type="text"/>	Fax Number:	<input type="text"/>
City:	<input type="text"/>	Email Address:	<input type="text"/>

Project Description

Provide a description of the overall project. Include information such as the type of repair(s) needed, the number of flood control dams involved, and the length of time the repair need has been known to the local sponsors. Use this space to narratively provide any additional information the TSSWCB may find useful when considering the importance of this project.

Project Schedule:

Use this space to describe the anticipated length of time, schedule of events, and target completion date for all work to be completed through structural repair grant funds. Fiscal Year 2016 grant funds obligated prior to August 31, 2016 must be dispersed prior to August 31, 2018 (without exception).

Contracting Preferences / Organization of Partners:

Use this space to describe the preferable organization of contracting between the TSSWCB and local sponsors. Specify preferences for which local sponsors should enter into contracts with the TSSWCB for activities such as construction, land rights acquisition, or other allowable activities. The TSSWCB has designed this program to allow for significant flexibility for contracting with different types of local sponsors so that the most appropriate and efficient mechanisms are available for grant funds obligation.

Grant Funds Requested for Design and Construction:

Use this table to summarize the total engineering design and construction costs for all repair activities specified on each Technical Form submitted with this Administrative Form. List in order of highest local priority to lowest local priority (for cases where available funding is not sufficient to complete all repairs on all dams).

NID ID Number	Design Cost Estimate	Construction Cost Estimate	Total Estimated Cost Per Dam
1	\$	\$	\$
2	\$	\$	\$
3	\$	\$	\$
4	\$	\$	\$
5	\$	\$	\$
6	\$	\$	\$
7	\$	\$	\$
8	\$	\$	\$
9	\$	\$	\$
10	\$	\$	\$
11	\$	\$	\$
12	\$	\$	\$
13	\$	\$	\$
14	\$	\$	\$
15	\$	\$	\$
16	\$	\$	\$
17	\$	\$	\$
18	\$	\$	\$
19	\$	\$	\$
20	\$	\$	\$

Total Design Cost Estimate	Total Construction Cost Estimate	Grand Total
\$	\$	\$

Anticipated Costs for Purchasing Easements and Land Rights:

Is it anticipated that easements or other land rights will need to be acquired in order to perform the structural repairs identified in this application? Yes No

If "yes," characterize the anticipated type, extent, and cost:

Associate anticipated costs with specific flood control dams if this application addresses more than one dam.

TOTAL ESTIMATED COST OF PURCHASING EASEMENTS AND LAND RIGHTS

\$

Other Costs:

Are any costs other than those related to engineering design, construction, administration, easements, or land rights acquisition anticipated in order to perform the structural repairs identified in this application? Yes No

If "yes," describe the other anticipated costs:

TOTAL ESTIMATED AMOUNT OF OTHER COSTS

\$

ESTIMATED GRAND TOTAL FOR PROJECT: \$

Calculation of Non-State Matching Funds Requirement:

In accordance with Texas Administrative Code, Title 31, Chapter 529, Subchapter B, 5% of the total cost of the proposed repairs must be provided through funds not appropriated by the Texas Legislature. The amount of match funding required for the repairs in this application is provided below.

Amount of match funding required from non state appropriated sources: \$ **5%**

Amount of State Grant Funds Requested from the TSSWCB: \$ **95%**

Characterize sources of match funding and describe any communications with the sources and their willingness to contribute funds. Obligation of required matching funds will be formalized during contracting.

Grant Funds for Administrative Services under 31 TAC 529:

In accordance with Texas Administrative Code, Title 31, Chapter 529, Subchapter B, administrative costs in an amount not to exceed 5% of the total costs for design, construction, easement and/or land rights acquisition, or other costs approved by the TSSWCB are allowable. Exact administrative fee amounts and the request process will be negotiated between the TSSWCB and selected applicants at the time of contracting.

Sponsor Certification Signatures

31 TAC §529.55 (c) requires that all applications must have certification signatures by authorized individuals from all sponsors identified in the applicable watershed agreement with O&M responsibility for the flood control dam(s) on which repairs are proposed acknowledging and approving the application prior to it being submitted to the State Board for consideration. Certification by signature means the sponsor agrees to cooperate on the project with the other sponsors, may consider entering into a contract with the State Board relating to the project's completion, and is aware that the State Board may not pay more than 95-percent of the total project cost. Where one or more of the sponsors listed on the watershed agreement is no longer formally in existence, the remaining sponsors should contact the State Board prior to submitting an application for additional guidance.

SWCD Signature:

_____	_____
Signature	Date
<input type="text"/>	<input type="text"/>
<input type="text"/>	

<p>Non-SWCD Sponsor #1 Signature:</p> <table border="0" style="width: 100%;"> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td style="text-align: center;">Signature</td> <td style="text-align: center;">Date</td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td colspan="2"><input type="text"/></td> </tr> </table>	_____	_____	Signature	Date	<input type="text"/>	<input type="text"/>	<input type="text"/>		<p>Non-SWCD Sponsor #2 Signature:</p> <table border="0" style="width: 100%;"> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td style="text-align: center;">Signature</td> <td style="text-align: center;">Date</td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td colspan="2"><input type="text"/></td> </tr> </table>	_____	_____	Signature	Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	
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Authorized Representative Certification Signature

31 TAC §529.55 (d) requires that each application must identify one individual as the person that will represent all sponsors identified on the application. The authorized representative shall be the single point of contact for all communications regarding an application.

_____	_____
Signature	Date
<input type="text"/>	<input type="text"/>
<input type="text"/>	

Application Organization and Attachments:

A complete application for TSSWCB consideration should be assembled in the following manner.

1. ADMINISTRATIVE FORM (Form Number TSSWCB-FC-1A)
 2. ALL APPLICABLE TECHNICAL FORMS (Form Number TSSWCB-FC-1B)
 - 2(a). FLOOD CONTROL DAM BREACH ANALYSES (after each corresponding Technical Form submitted)
 - 2.(b). FLOOD CONTROL DAM SAFETY INSPECTION REPORTS (after each corresponding Technical Form submitted)
 - 2.(c). COLOR PHOTOGRAPHS OF EACH REPAIR NEED (after each corresponding Technical Form submitted)
 3. WATERSHED AGREEMENT(S)
 4. OPERATION AND MAINTENANCE AGREEMENT(S)
 5. ANY ADDITIONAL REPORTS OR INFORMATION (if applicable and available)
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Submitting an Application:

Submit completed applications with original signatures to:

TSSWCB
Attention: Flood Control
P.O. Box 658
Temple TX 76503

Assistance in Preparing an Application:

Contact TSSWCB Flood Control Programs
(254) 773-2250 (ask for Flood Control Staff)

OR

Send Email to:

lmunz@tsswcb.state.tx.us
jfoster@tsswcb.state.tx.us
sbednarz@tsswcb.state.us

(Send email to all persons for quickest response)