



MAINE CDC DRINKING WATER PROGRAM

Department of Health & Human Services

286 Water Street, Augusta ME 04333
www.medwp.com • (207) 287-2070 • TTY: 711



SMALL SYSTEM COMPLIANCE LOAN FUND (SSCL)

A qualifying water system may receive up to a \$50,000 grant to cover project costs for infrastructure projects that are needed to achieve compliance with a current or future standard of the Safe Drinking Water Act, excluding the Total Coliform Rule.

The loan needs to meet all requirements for a standard construction loan, including contract documents, environmental review, capacity review, Davis-Bacon wage rates, American Iron and Steel (AIS), and other applicable requirements. The loan term would be set at 100 percent principal forgiveness.

Criteria for eligibility: Projects that must be completed to meet a current or future Safe Drinking Water Act Rule requirement are eligible for a Small System Compliance Loan (SSCL). This includes public water systems with Radon levels above 4,000 pCi/L for Community systems and 40,000 pCi/L for Non-Transient, Non-Community (NTNC) systems (Maine has a Maximum Exposure Guideline (MEG) of 4,000 pCi/L for Community systems). The loan may be used to purchase capital items or for engineering design of a water treatment system. All equipment or materials purchased must remain the property of the water system or other public entity. Examples of eligible projects may include, but are not limited to:

- Installation of a replacement well in order to meet a current or future Safe Drinking Water Act Rule, excluding the Total Coliform Rule,
- Installation of a water treatment system in order to meet a current or future Safe Drinking Water Act Rule, excluding the Total Coliform Rule.

Eligible Water Systems: All community public water systems (except those regulated by the Public Utilities Commission) with a population of 500 or less, and all not-for-profit, non-transient, noncommunity (NTNC) water systems. Examples include mobile home parks, apartment buildings, nursing homes, and not-for-profit schools.

Eligible Project Costs: Costs associated with the project that can be paid with loan funds include contractor labor, materials, equipment, and legal fees associated with the creation of the loan. Materials and costs for operation and maintenance are not eligible for reimbursement.

Non-eligible project costs: Loans will not be awarded for projects that involve the maintenance of water system infrastructure, maintenance of treatment facilities, or costs that are part of normal system operation. Also, the water system may not be reimbursed for its own equipment use or water system employee labor costs, even if the work is in support of an eligible project. Loans will not be awarded retroactively for completed projects.

Application Deadline: Water systems may apply at any time. If more requests for money are received than we have allocated for the Small System Compliance Loan Program, funds will be

made available on a first-come, first-served basis, and the applicant's ability to implement the improvements on a timely basis.

How to Apply: Submit a SSCL application to the Maine Drinking Water Program to obtain approval for the overall project (Appendix A). Following preliminary approval, work with DWP and your selected contractor to complete all requirements for the award (Appendix B). In addition to the DWSRF loan application, the Owner must also complete a Drinking Water SRF Application with the Maine Municipal Bond Bank (MMBB). This should occur early in the timeline, shortly after obtaining project preliminary approval. A copy of the MMBB application is available online: https://mmbb.formstack.com/forms/dwsrf_forgiven. Once the grant is in place and the project is approved for construction, work may proceed.

Special Requirements: All projects must comply with the following requirements in order to remain eligible for funding. See Appendix B for more detail.

- Capacity Review
- Environmental Review
- Davis Bacon Wages
- American Iron and Steel Competitive Procurement
- DWP Drinking Water System Change Application
- Fill out a [MMBB Loan application](#) after receiving an award letter.
- Competitive quotes for non-treatment projects (ex. Drilling a new well)
- Signage Requirements (Appendix F)

How to get reimbursed: A Pay Requisition for reimbursement must be submitted to the Maine Drinking Water Program. The pay requisition shall include:

- The small system compliance loan Reimbursement Request Form (Appendix G of the SSCL Info Sheet)
- Date of post-installation/construction inspection by DWP PWS Inspector
- Copies of invoices for reimbursable costs up to the award amount;
- Davis Bacon and American Iron and Steel documentation

How can I get more information? Contact Eduard Chenette at (207) 592-0456 or e-mail Eduard.Chenette@maine.gov.

APPENDIX A: SSCL Application

Small System Compliance Loan Application

Please complete this form and return it to the Maine Drinking Water Program at Eduard.Chenette@maine.gov. If you have any questions regarding the loan application, please contact Eduard Chenette at (207) 592-0456 or Eduard.Chenette@maine.gov.

PWS NAME: _____ PWSID#: _____

CONTACT: _____ TELEPHONE: _____

E-MAIL ADDRESS: _____ DATE: _____

ADDRESS: _____ TOWN/CITY: _____ STATE: _____ ZIP CODE: _____

1. **Describe the Project:** *Include a brief description of proposed improvements, existing treatment, if any, the name of the water treatment design professional, and the implementation schedule.*

2. **Describe Estimated Cost and Cost Sharing.** *Describe the estimated cost of the project, and **provide any quote(s) that you have received.** Will any other source of funds contribute money to fund a portion of the project costs?.*

3. **Previous loans/and grants.** *Has this system received previous SRF Project funding?*

4. **Submit laboratory analytical results with your application. A grant award cannot be processed until the laboratory analytical results are reviewed.**
I have submitted lab results with my application

Signature: _____ Title: _____

Print Name: _____ Date: _____

**MAIL OR EMAIL
APPLICATION TO:**

DRINKING WATER PROGRAM
11 STATE HOUSE STATION
286 WATER STREET, 3RD FLOOR
AUGUSTA, ME 04333-0011
ATTN: EDUARD CHENETTE
Eduard.Chenette@maine.gov

APPENDIX B: Federal and State Requirements for Award

To qualify for receipt of a Small System Compliance Loan, the project must meet ALL of the following requirements. If some of the requirements are not met, you will not be reimbursed for the completed work.

Submittal of Plans & Specifications

Projects involving treatment changes must be accompanied by a Drinking Water System Change Application. **All projects over \$10,000 must have plans and specifications stamped and signed by a Maine Professional Engineer.**

Change Application accessible at: <https://www.maine.gov/dhhs/mecdc/healthy-living/health-and-safety/drinking-water-safety/public-water-systems/changes-to-public-water-systems>

Your DWSRF Project Manager must provide written approval of the plans prior to any alterations of the water system taking place.

Completion of an Environmental Review

Every project seeking federal or state funding is evaluated for its potential environmental impacts. An Environmental Determination must be issued prior to any physical modification of a project site and prior to receiving grant funds for the reimbursement of construction costs. The Environmental Review Process for SSCL Projects is as follows:

Step 1: Work with the DWP Grants Coordinator to complete a CATEX Environmental Review Worksheet.

Step 2: Once your submittal has been reviewed, you will be provided with a Determination Notice, which must be published in a local newspaper of community-wide circulation. The Owner must provide their Project Manager with a dated copy of the published notice. There is a 15-day public comment period following the date of publication – no alterations may be made to the water system until after this comment period is complete.

**The cost of running the newspaper notice is reimbursable by the grant program, so keep records of any expenses incurred.*

For more information on the Environmental Review process and all necessary forms, reference the latest version of the DWSRF Project Guide, available:

https://www.maine.gov/dhhs/mecdc/sites/maine.gov.dhhs.mecdc/files/dwp/SRF_ProjectGuide_RevE_03122024.pdf.

Completion of a Capacity Review

A Capacity Review assesses the technical, managerial, and financial capacity of a water system to ensure that it has sufficient capacity. The intent of the Capacity Development Program is to prevent the creation of nonviable public water systems, to identify systems at risk, and to assist systems in acquiring, enhancing, and maintaining system capacity. The DWSRF Program may require the Owner to make changes to their proposed project, system operation, or management, prior to receipt of a

grant, or may condition the grant award as a means of attaining and/or maintaining the required capacities.

Capacity Reviews are conducted by the DWP Capacity Development Coordinator and take place shortly after preliminary grant approval. The Capacity Development Coordinator will reach out directly to the Owner to conduct this review.

Payment of Davis-Bacon Wage Rates to all Qualifying Workers

The Davis-Bacon Act (DBA) was enacted by Congress on March 3, 1931, to assure local workers a fair wage and to provide local contractors a fair opportunity to compete for local federal government contracts. Contractors and subcontractors must pay laborers and mechanics employed directly upon the site of the work at least the locally prevailing wages (including fringe benefits), listed in the Davis-Bacon wage determination in the contract, for the work performed. Locally prevailing wage rates are determined by the US Department of Labor (USDOL). The wage determination for a given project can be found at: <https://sam.gov/content/wage-determinations> by searching the county in which the project is located and the applicable construction type. Projects that involve the installation of water treatment in non-municipal settings are considered “Building” construction, while installation of water mains is considered “Heavy” construction. The Owner or Consulting Engineer should reach out to their DWSRF Project Manager if there are any questions on what type of construction the project falls under.

Certified Payrolls must be provided to the DWP Grants Coordinator using Department of Labor form WH-347 (Appendix D). The Grants Coordinator should review the payroll as soon as possible to catch any underpayments in a timely manner. Weekly Payroll Labor Standards Compliance Review forms for each week of work must be included in the Payment Requisition. Forms must be provided for the work performed by the Contractor as well as any Subcontractors. For larger-scale projects, labor interviews with the Contractor’s employees are to be conducted by the Consulting Engineer to determine whether the Davis-Bacon wage rates and other labor standards are being fully complied with, and that there is no misclassification of employees.

EXEMPTION: If work is to be performed by an owner of a business (i.e., a plumber who owns their own business and is doing the work themselves with no assistance), they do not need to pay themselves the Davis-Bacon Rates and are not required to report their own payroll. The owner-operator must provide a signed Davis-Bacon Owner-Operator Exemption Certification, available in Appendix D.

EXEMPTION: If the total project cost (labor + materials) is less than \$2000, Davis-Bacon Wage Rates will not apply.

Material Procurement Compliance with American Iron and Steel (AIS)

The American Iron and Steel (AIS) provision requires Drinking Water State Revolving Fund (DWSRF) assistance recipients to use iron and steel products that are produced in the United States. A certification letter from the product manufacturer must accompany all iron and steel products permanently incorporated into a project. A sample letter is available in Appendix E. For more details, exemptions, and waivers, please see: <https://www.epa.gov/cwsrf/state-revolving-fund-american-iron-and-steel-ais-requirement>.

Signage Requirements

To enhance public understanding of the benefits of the DWSRF Program, EPA requires projects to display signage with information about the program. Please see Appendix F for signage options.

APPENDIX C: Water Treatment Resources

A - Z water systems

New Gloucester, ME
Tel: 207-721-8620

Aerus

Augusta, ME
Tel: 207- 622-0125

Air & Water Quality, Inc.

Ellsworth, ME Freeport, ME
Tel: 207-664-5200 Tel: 800-698-9655

Atlantic Water Solutions

Alfred, ME
Tel: 800-696-9355

Dunbar Water

Sanford, ME
Tel: 1-866-755-7225

Ever clean water systems

Fairfield, ME
Tel: 207-341-1001

Forest Pump & Filter Co., Inc.

Rochester, NH
Tel: 603-332-9037

Lowry Systems

Blue Hill, ME
Tel: 800-434-9080

Mainely Water LLC

Hampden, ME
Tel: 207-907-9772

Norlen's Water Treatment, LLC

Orrington, ME
Tel: 800-339-7873

The Water Doctors, LLC

Brunswick, ME
Tel: 207-443-8080

Ward Water

Steep Falls, ME
Tel: 207-675-3272

Water Treatment Equipment, Inc.

Yarmouth, ME
Tel: 207-846-5061

Please note that this is only a partial list provided for reference and is not an official endorsement of these water treatment professionals. Services and prices may vary. Contact information is only as accurate as provided to the Program. You may check the yellow pages of your local telephone directory under "Water Treatment" to find additional water treatment professionals.

APPENDIX D: Davis-Bacon Documents

Janet T. Mills
Governor

Sara Gagné-Holmes
Commissioner



Maine Department of Health and Human Services
Maine Center for Disease Control and Prevention
11 State House Station
286 Water Street
Augusta, Maine 04333-0011
Tel; (207) 287-8016; Fax (207) 287-9058
TTY: Dial 711 (Maine Relay)

Davis-Bacon Owner-Operator Exemption Certification

I, _____, am the owner-operator of the bona fide business
(Owner Name Printed)
_____ and have been contracted to perform labor on a
(Business Name)
treatment works project located at _____ in the town of
(Name of Public Water System)
_____, Maine. I certify that I own at least 20-percent equity interest in the
(Town)
enterprise in which employed and am actively engaged in its management. I am thereby exempt from Davis-Bacon Act prevailing wage rates per Title 29 CFR 5.2(m). A copy of my business license will be provided to the Maine Drinking Water Program if requested.

☐ I will not have anyone else assist me with the work.

☐ I will have others assist me with the work. They are subject to Davis-Bacon Act prevailing wage rates under the classification of _____. Certified payrolls will
(Plumber, Electrician, Carpenter, etc.)
be provided to the Maine Drinking Water Program to validate the prevailing wage rates are met.

Signature: _____

Date: _____

Federal Tax ID Number: _____

U.S. Department of Labor

Wage and Hour Division

Davis-Bacon and Related Acts Weekly Certified Payroll Form

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Unless otherwise noted, the information requested is specific to the named project below.

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



Rev. January 2025

OMB No.: 1235-0008

Expires: 01/31/2028

☐ SUBMISSION OF FINAL DBRA CERTIFIED PAYROLL FORM

☐ PRIME CONTRACTOR

☐ SUBCONTRACTOR

PROJECT NAME				PROJECT NO. or CONTRACT NO.			CERTIFIED PAYROLL NO.			PRIME CONTRACTOR'S/SUBCONTRACTOR'S BUSINESS NAME															
PROJECT LOCATION				WAGE DETERMINATION NO.			WEEK ENDING DATE			PRIME CONTRACTOR'S/SUBCONTRACTOR'S BUSINESS ADDRESS															
(1A)	(1B)	(1C)	(1D)	(1E)	(2)	(3)	(4)				(5)	(6A)	(6B)	(6C)	(7A)	(7B)	(8)			(9)					
WORKER ENTRY NO.	WORKER LAST NAME	WORKER FIRST NAME	WORKER MIDDLE INITIAL	WORKER IDENTIFYING NO.	(J) JOURNEYWORKER (RA) REGISTERED APPRENTICE	LABOR CLASSIFICATION	ST = STRAIGHT TIME OT = OVERTIME	(TOP) DAYS OF WORK WEEK (BOTTOM) DATES							TOTAL HOURS WORKED FOR WEEK	HOURLY WAGE RATE PAID FOR ST AND OT	TOTAL FRINGE BENEFIT CREDIT	PAYMENT IN LIEU OF FRINGE BENEFITS	GROSS AMT EARNED	GROSS AMT EARNED FOR ALL WORK	DEDUCTIONS FOR ALL WORK				NET PAY TO WORKER FOR ALL WORK
								HOURS WORKED EACH DAY													TAX WITH-HOLDINGS	FICA	OTHER (MUST SPECIFY, SEE INSTRUCTIONS)	TOTAL DEDUCTIONS	
							ST																		
							OT																		
							ST																		
							OT																		
							ST																		
							OT																		
							ST																		
							OT																		
							ST																		
							OT																		
							ST																		
							OT																		
							ST																		
							OT																		
							ST																		
							OT																		

While use of Form WH-347 itself is optional, covered contractors and subcontractors performing work on Federal or federally assisted construction contracts are required by the DBRA regulations and the contract clauses to submit payroll information on a weekly basis. The Copeland Act (40 U.S.C. § 3145) requires contractors and subcontractors performing work on Federal or federally financed construction contracts to, on a weekly basis, "furnish a statement on the wages paid each employee during the prior week." U.S. Department of Labor (DOL) Regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors and subcontractors to submit weekly certified payrolls to the appropriate Federal agency if the agency is a party to the contract (or, if the agency is not such a party, to the applicant, sponsor, owner, or other entity, as the case may be, that maintains such records, for transmission to the Federal agency). Each certified payroll must be accompanied by a signed "Statement of Compliance" (e.g., page 2 of the WH-347 or another document with identical wording) indicating that the certified payrolls are accurate and complete, and that each laborer or mechanic has been paid not less than the required Davis-Bacon prevailing wage rate(s) (including any fringe benefits) for the work performed. DOL and contracting agencies receiving this information review the information to determine whether workers have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210 (over)

PROJECT NAME			PROJECT NO. or CONTRACT NO.		PAYROLL NO.		PRIME CONTRACTOR'S/SUBCONTRACTOR'S BUSINESS NAME																																																																																																																																																																							
PROJECT LOCATION					WEEK ENDING DATE		CERTIFYING OFFICIAL'S NAME AND TITLE																																																																																																																																																																							
I paid or supervised the payment of the laborers or mechanics working on the above project during the stated time period. I certify the following:																																																																																																																																																																														
☐	The payroll information submitted with this statement is correct and complete for the above project during the above period, and the wage and fringe benefit rates paid to the workers, including credit taken for the reasonably anticipated costs of a bona fide fringe benefit plan, fund or program, are not less than the applicable wage and fringe benefits rates for the classification(s) of work actually performed, as specified in the wage determination(s) incorporated into the contract.																																																																																																																																																																													
☐	All regular payrolls and all other basic records that the contractor is required to maintain for this payroll period are complete and accurate and will be made available upon request from the agency or the Department of Labor.																																																																																																																																																																													
☐	The classifications reported for each laborer or mechanic are the classification(s) of work that each worker actually performed.																																																																																																																																																																													
☐	Any workers paid as apprentices during the above period are duly registered in a bona fide apprenticeship program registered with the Office of Apprenticeship, Employment and Training Administration, United States Department of Labor ("OA"), or a State Apprenticeship Agency ("SAA") recognized by Department of Labor. I have verified the registered apprenticeship program information provided below as accurate and applicable to any apprentices identified on page 1 of this form.																																																																																																																																																																													
APPRENTICESHIP PROGRAM NAME					REGISTERED		NAME OF LABOR CLASSIFICATION																																																																																																																																																																							
					☐ OA ☐ SAA																																																																																																																																																																									
					☐ OA ☐ SAA																																																																																																																																																																									
					☐ OA ☐ SAA																																																																																																																																																																									
☐	Fringe benefits have been paid in cash and/or to bona fide fringe benefit plans, funds, or programs. Where the contractor is claiming an hourly credit for their contributions to or reasonably anticipated costs of a bona fide fringe benefit plan, fund, or program, provide plan information and the hourly credit claimed for each worker listed on the previous page of this form.																																																																																																																																																																													
HOURLY CREDIT FOR FRINGE BENEFITS <i>If an amount is listed in (6B) on the first page of this certified payroll form, enter the hourly credit claimed under each plan name, type and number for each worker and check whether the plan is funded or unfunded.</i> <table border="1"> <thead> <tr> <th rowspan="4">NAME OF WORKER</th> <th>FB NAME</th> <th></th> <th>FB NAME</th> <th></th> <th>FB NAME</th> <th></th> <th>FB NAME</th> <th></th> <th>FB NAME</th> <th></th> <th>FB NAME</th> <th></th> <th rowspan="4">TOTAL HOURLY CREDIT</th> </tr> <tr> <th>FB TYPE</th> <th></th> <th>FB TYPE</th> <th></th> <th>FB TYPE</th> <th></th> <th>FB TYPE</th> <th></th> <th>FB TYPE</th> <th></th> <th>FB TYPE</th> <th></th> </tr> <tr> <th>PLAN NO.</th> <th></th> <th>PLAN NO.</th> <th></th> <th>PLAN NO.</th> <th></th> <th>PLAN NO.</th> <th></th> <th>PLAN NO.</th> <th></th> <th>PLAN NO.</th> <th></th> </tr> <tr> <th>☐ Funded ☐ Unfunded</th> <th></th> <th>☐ Funded ☐ Unfunded</th> <th></th> <th>☐ Funded ☐ Unfunded</th> <th></th> <th>☐ Funded ☐ Unfunded</th> <th></th> <th>☐ Funded ☐ Unfunded</th> <th></th> <th>☐ Funded ☐ Unfunded</th> <th></th> </tr> </thead> <tbody> <tr> <td></td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>\$</td> </tr> <tr> <td></td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>\$</td> </tr> <tr> <td></td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>\$</td> </tr> <tr> <td></td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>\$</td> </tr> <tr> <td></td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>\$</td> </tr> <tr> <td></td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>\$</td> </tr> <tr> <td></td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>\$</td> </tr> <tr> <td></td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>Hourly Credit</td> <td>\$</td> <td>\$</td> </tr> </tbody> </table>													NAME OF WORKER	FB NAME		FB NAME		FB NAME		FB NAME		FB NAME		FB NAME		TOTAL HOURLY CREDIT	FB TYPE		FB TYPE		FB TYPE		FB TYPE		FB TYPE		FB TYPE		PLAN NO.		PLAN NO.		PLAN NO.		PLAN NO.		PLAN NO.		PLAN NO.		☐ Funded ☐ Unfunded		☐ Funded ☐ Unfunded		☐ Funded ☐ Unfunded		☐ Funded ☐ Unfunded		☐ Funded ☐ Unfunded		☐ Funded ☐ Unfunded			Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	\$		Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	\$		Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	\$		Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	\$		Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	\$		Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	\$		Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	\$		Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	\$
NAME OF WORKER	FB NAME		FB NAME		FB NAME		FB NAME		FB NAME		FB NAME			TOTAL HOURLY CREDIT																																																																																																																																																																
	FB TYPE		FB TYPE		FB TYPE		FB TYPE		FB TYPE		FB TYPE																																																																																																																																																																			
	PLAN NO.		PLAN NO.		PLAN NO.		PLAN NO.		PLAN NO.		PLAN NO.																																																																																																																																																																			
	☐ Funded ☐ Unfunded		☐ Funded ☐ Unfunded		☐ Funded ☐ Unfunded		☐ Funded ☐ Unfunded		☐ Funded ☐ Unfunded		☐ Funded ☐ Unfunded																																																																																																																																																																			
	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	\$																																																																																																																																																																	
	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	\$																																																																																																																																																																	
	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	\$																																																																																																																																																																	
	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	\$																																																																																																																																																																	
	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	\$																																																																																																																																																																	
	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	\$																																																																																																																																																																	
	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	\$																																																																																																																																																																	
	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	Hourly Credit	\$	\$																																																																																																																																																																	
☐	All workers on the project have been paid the full weekly wages earned, and no rebates or deductions have been or will be made either directly or indirectly, other than permissible deductions as defined in 29 CFR part 3.																																																																																																																																																																													
ADDITIONAL REMARKS																																																																																																																																																																														
SIGNATURE OF CERTIFYING OFFICIAL					DATE		TELEPHONE NUMBER			EMAIL ADDRESS																																																																																																																																																																				
							(____) ____ -____																																																																																																																																																																							
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION (SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF TITLE 31 OF THE UNITED STATES CODE), AS WELL AS DEBARMENT FROM FUTURE FEDERAL AND FEDERALLY-ASSISTED CONTRACTS. INFORMATION REPORTED IN CERTIFIED PAYROLLS MAY BE SUBJECT TO DISCLOSURE IN RESPONSE TO A FREEDOM OF INFORMATION ACT REQUEST.																																																																																																																																																																														

APPENDIX E: AIS MATERIALS



From the “Consolidated Appropriations Act, 2014”

H.R. 3547 (PL113-76, enacted 1/17/2014)

USE OF AMERICAN IRON AND STEEL

“SEC. 436. (a)(1) None of the funds made available by a State water pollution control revolving fund as authorized by title VI of the Federal Water Pollution Control Act (33 U.S.C. 1381 et seq.) or made available by a drinking water treatment revolving loan fund as authorized by section 1452 of the Safe Drinking Water Act (42 U.S.C. 300j–12) shall be used for a project for the construction, alteration, maintenance, or repair of a public water system or treatment works unless all of the iron and steel products used in the project are produced in the United States.

(2) In this section, the term “iron and steel products” means the following products made primarily of iron or steel: lined or unlined pipes and fittings, manhole covers and other municipal castings, hydrants, tanks, flanges, pipe clamps and restraints, valves, structural steel, reinforced precast concrete, and construction materials.

(b) Subsection (a) shall not apply in any case or category of cases in which the Administrator of the Environmental Protection Agency (in this section referred to as the “Administrator”) finds that—

(1) applying subsection (a) would be inconsistent with the public interest;

(2) iron and steel products are not produced in the United States in sufficient and reasonably available quantities and of a satisfactory quality; or

(3) inclusion of iron and steel products produced in the United States will increase the cost of the overall project by more than 25 percent.

(c) If the Administrator receives a request for a waiver under this section, the Administrator shall make available to the public on an informal basis a copy of the request and information available to the Administrator concerning the request, and shall allow for informal public input on the request for at least 15 days prior to making a finding based on the request. The Administrator shall make the request and accompanying information available by electronic means, including on the official public Internet Web site of the Environmental Protection Agency.

(d) This section shall be applied in a manner consistent with United States obligations under international agreements.

(e) The Administrator may retain up to 0.25 percent of the funds appropriated in this Act for the Clean and Drinking Water State Revolving Funds for carrying out the provisions described in subsection (a)(1) for management and oversight of the requirements of this section.

(f) This section does not apply with respect to a project if a State agency approves the engineering plans and specifications for the project, in that agency’s capacity to approve such plans and specifications prior to a project requesting bids, prior to the date of the enactment of this Act.”



**CERTIFICATION BY THE OWNER
OF COMPLIANCE WITH THE
USE OF AMERICAN IRON AND STEEL LAW**
enacted on 1/17/2014

(To be attached to each Utility Construction SRF requisition submitted for payment)

We, the Owner named, _____, having obtained funding from the State of Maine, State Revolving Fund (SRF), for the Utility Construction Project named _____, hereby submit to the SRF program, certification from each contractor working on the Utility Construction Project that the use of American Iron and Steel in the construction of the project complies with the law, or that a waiver has been obtained from the U.S. Environmental Protection Agency. Thereby, it is to the best of the Owner's knowledge that the costs being requested with this SRF requisition #_____are in compliance with the Use of American Iron and Steel Law.

Signature of Official

Printed name

Date

Attachment: Certification by Contractor



CERTIFICATION BY CONTRACTOR
OF COMPLIANCE WITH THE
USE OF AMERICAN IRON AND STEEL LAW
enacted on 1/17/2014

(To be attached to each Utility Construction payment application)

We, the Prime Contractor and Subcontractors, as named below, hereby certify that the use of American iron and steel in the utility construction of the Project named _____, being requested in the Utility Construction payment application (or invoice) # _____ and dated _____, complies with the Use of American Iron and Steel Law, or that a waiver been obtained from the U.S. Environmental Protection Agency.

Prime Contractor Name: _____

_____ Signature of Official	_____ Printed name	_____ Date
--------------------------------	-----------------------	---------------

<u>Subcontractor Name</u>	<u>Signature of Official</u>	<u>Date</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Sample Step Manufacturer Certification

(Documentation must be provided on company letterhead)

Date

Company Name

Company Address

City, State Zip

Subject: American Iron and Steel Step Manufacturer Certification

Project Name _____

I, _____ (company representative), certify that the _____
(melting, bending, coating, galvanizing, cutting, etc.) process for _____
(manufacturing or fabricating) the following products and/or materials shipped or provided for
the project is in full compliance with the American Iron and Steel requirement as mandated in
EPA's State Revolving Fund Programs.

Item, Products and/or Materials:

1. _____
2. _____
3. _____

Such process took place at the following location: _____(address)

If any of the above compliance statements change while providing material to this project we
will immediately notify the prime contractor and the engineer.

Company representative

Signature

Date

State Revolving Fund (SRF)
American Iron and Steel - De Minimis Tracking Form

The EPA has issued a public interest waiver for De Minimis incidental components. An Owner wishing to use this waiver should consult with their contractor(s) to maintain an itemized list to track the components covered under De Minimis. The Owner may create their own format for the list or use this sample form.

Owner: _____

Loan #: _____

Project Name: _____

NOTE: The De Minimis waiver is only applicable to the cost of materials for the entire project. Do not include other project costs (labor, installation costs, etc.) in the "Total Cost of Materials". The total cost of a material may be based on estimated, or if available, actual costs.

Funds used for de minimis incidental components cumulatively may comprise no more than a total of 5 percent of the total cost of the materials used in and incorporated into a project; the cost of an individual item may not exceed 1 percent of the total cost of the materials used in and incorporated into a project.

Total Cost of Materials:		5% Limit:		1% limit:	
--------------------------	--	-----------	--	-----------	--

Manufacturer & Component Description	Part/Model #	Quantity (if applicable)	Cost per Unit (if applicable)	Component's Total Cost	Invoice or receipt attached

Use additional sheets as necessary

**Total Cost of Components
deemed to be De Minimis:**

--

Completed by:

Company: _____

Name: _____

Title: _____

Signature: _____

Date: _____

APPENDIX F: Signage Requirements

SSCL Signage Requirements:

All DWSRF-funded Emerging Contaminant projects are required to comply with the EPA signage requirement. The primary objective of this requirement is to enhance public understanding of the positive benefits of DWSRF funding to public water systems.

The guidelines present a number of options that communities can explore to implement EPA's signage policy. The selected option should remain cost-effective and be accessible to a broad audience. If English is not the predominant language where the project is taking place, the sign should be translated as needed.

You will be required to present the Drinking Water Program with the signage option you select, as well as proof of displaying/posting.

Information that must be included in the chosen signage:

- Name of facility, project, and community
- State SRF administering the program
- The project is wholly or partially funded with EPA funding
- Brief description of the project
- Brief description of the water quality benefits the project will achieve

Standard Signage Option:

The recipient is required to place a sign at construction sites supported by this award displaying the EPA logo in a manner that informs the public that the project is funded in part or wholly by the EPA. The sign must be placed in a visible location that can be directly linked to the work taking place and must be maintained in good condition throughout the construction period. An example sign can be found in Appendix F of this document.

Posters, brochures, or wall signage in a public building or location:

Smaller projects, projects located in rural areas, and other efforts may find that it is more cost-effective and practical to advertise efforts through the creation of a poster or smaller sign. The poster or brochure should be visible and should display a website or other source of information for individuals who are curious about the SRF program.

Posters or brochures should be placed in a public location that is accessible to a wide audience of community members, including but not limited to:

- Town or City Hall
- Community Center
- Locally owned or operated park or recreation facility

- Public library
- County/municipal government facility
- Court house or other public meeting space

Newsletter, periodical, or press release:

For communities where there is no suitable public space or where advertisement through signage is unlikely to reach community members effectively, projects can be advertised in a community newsletter or similar periodical.

If the recipient decides on a public or media event to publicize the project, EPA must be provided with at least ten working days' notice of the event and provided with the opportunity to attend and participate in the event.

Insert a pamphlet in the water bill:

Utilities can consider including a single-page insert within their water bill that is mailed to residents and users in their area. This approach would effectively publicize the project to those individuals directly benefiting from it. The flyer or insert could emphasize the financial savings that the community achieved by utilizing the SRF program funding.

Online & social media publicity:

Many communities are increasingly finding that the online forum is the most cost-effective approach to publicizing their SRF-funded projects to reach a broad audience of stakeholders. Online 'signage' should follow the minimum information guidelines listed above and may appear on the town, community, or facility website if available. In some cases, communities may be active on social media such as Facebook or Instagram. These online announcements/notices may be appropriate for settings where physical signage would not be visible to a wide audience.

Example Language:

The language below is available for use in posters, pamphlets, brochures, press releases, or online materials.

"Construction of upgrades and improvements to the [Name of facility. or Project Location] were financed by the Drinking Water State Revolving Fund. The DWSRF program is administered by Maine CDC Drinking Water Program with joint funding from the U.S. Environmental Protection Agency and the state of Maine. This project will [description of project] and will provide water quality benefits [details specifying particular benefits] for [community residents, students, and businesses] in and near [name of town, city, or facility]. DWSRF programs operate around the country to provide states and communities with the resources necessary to maintain and improve the infrastructure that protects our valuable water resources nationwide."

Temporary Construction Sign for DWSRF Projects

WHITE BACKGROUND

Project Title (include Town / District name)

Water System Name:

Contractor:

Total Project Cost:

Financed by:

**DWSRF Program: Maine Department of Health and Human Services, and
Maine Municipal Bond Bank**

 **EPA** United States Environmental Protection Agency

 **SRF**
State Revolving Loan Fund

This institution is an equal opportunity provider

BLACK LETTERING

WAVE
BLUE, PMS 655 FADING TO 30% SCREEN
GREEN, PMS 627 @ 30% SCREEN DARKENING
TO 100% SCREEN THEN BACK TO 30% SCREEN

MINIMUM SIGN DIMENSIONS: 1200 x 2400 x 19 MM (4' x 8' x 3/4")

EXTERIOR PLYWOOD (A-B GRADE)

MINIMUM LETTERING SIZE: 5 CM (2-INCHES)

APPENDIX G: Reimbursement Request Form



MAINE CDC DRINKING WATER PROGRAM

Department of Health & Human Services

286 Water Street, Augusta ME 04333
www.medwp.com • (207) 287-2070 • TTY: 711



Small System Compliance Loan (SSCL) Reimbursement Request Form

Public Water System Name: _____ PWSID# _____

Owner's Contact Information:

Name: _____ Title: _____

Address: _____

Phone #: _____ Email: _____

Project Completion Date: _____

Date project was inspected by a Drinking Water Program Representative: _____

Name of Inspector: _____

I have enclosed documents and/or proof of completion of the following:

Summary list of eligible expenses and total cost

Documentation of the project's paid expenditures (receipts, invoices, etc.). Payments of grant awards are on a reimbursement basis only.

AIS Owner Certification, AIS Contractor Certification, **AND** AIS Deminimus Tracking Sheet

Davis-Bacon Payroll Form WH-347 **AND/OR** Davis-Bacon Owner-Operator Exemption Form

Upon receipt of the above materials, we will authorize an electronic transfer for an amount up to the awarded sum by the Maine Municipal Bond Bank. All incomplete projects will be closed one year after the grant award unless a request for an extension has been submitted in writing to the Drinking Water Program and approved. Submit this completed form, along with supporting documents, to your Grant Coordinator.

Owner's Signature: _____

Name Printed: _____

Date _____

[For DWP Administrative Use Only]

Approved Date: _____

Approved by: _____

Approved Amount: _____