



**2a. Provide estimated costs for the project by line item:**

Construction Cost	_____	Other	_____
Engineering Design	_____	Contingencies	_____
Construction Engineering	_____	Legal & Abstracting	_____
Inspection	_____	Soils Investigations	_____
		<b>Total Project Cost</b>	_____

**2b. Loan Origination & Financial Integrity Assurance Contract:**

Non Taxing Applicants (RWD):      Applicants Pledging Tax Authority (City):

Loan Reserve (10%)	_____	
Loan Origination Fee (0.25%)	_____	_____
F.I.A.C. (RWD Only 1%)	_____	
<b>Total Loan Amount</b>	<b>\$</b> _____	<b>\$</b> _____

Note: to determine the total loan amount when borrowing the loan reserve, Origination Fee, and F.I.A.C. divide the total project cost (subtracting other funding sources if any) by .8875. Use the total loan amount and the listed percentages to calculate the costs of the individual items. To determine the total loan amount when borrowing only the Origination Fee divide the total project cost (subtracting other funding sources if any) by .9975.

**3. List all anticipated funding sources which are intended to be utilized to complete this project:**

Amount of loan requested from the Kansas Public Water Supply Loan Fund	_____
Other Funding Source(s), if any	_____
<b>Total Funding</b>	<b>\$</b> _____

**4. What is the proposed project schedule? If dates are known, include them in the appropriate Column:**

Proposed / Actual Date:

Notice of Public Hearing Application	_____
Date of Public Hearing	_____
Environmental Letters Sent	_____
Completion of Project Planning	_____
Plans Submitted to KDHE	_____
Bid Opening	_____
Notice of Award	_____
Start of Construction	_____
Completion of Construction	_____

**5. List any major expansions and/or improvements in the existing system in the past 10 years:**

Year:	Project Title / Description:
_____	_____
_____	_____
_____	_____

**6. Number of Customers:**

Year	Residential	Commercial	Other	Stock Water	Total

**7. Present source of water and/or any contractual agreements (include water supply contract):**

**8. Does your water utility have any single customer which provides 5% or more of the utility's revenue from water sales?** Yes\_\_\_ No\_\_\_ If YES, please provide name(s) of customer(s):

**9. Have you distributed requests for the Environmental Comments (Review)?** Yes\_\_\_ No\_\_\_  
 If NO, are you in the process of preparing and submitting a review to agencies? Yes\_\_\_ No\_\_\_

**10. Water Production History (previous 3 years):**

Year	Gallons Produced/ Purchased	Gallons Sold	Gallons Flushed or Accounted For	Water Loss	Unaccounted for Water Loss Ratio

**11. Sources of Revenue: Please attach the following information:**

Most recently adopted water rate \_\_\_\_\_  
 Any previous water rate in effect during the last 4 years \_\_\_\_\_  
 Proposed water rate adjustment, if any \_\_\_\_\_

12. Are water revenues used to support other operations? Yes\_\_\_\_ No\_\_\_\_

13. Provide 2 copies from each of the last three years of financial statements (If audited financial statements for the most recent year are not complete please provide unaudited statements): \_\_\_\_\_

14. Have you issued bonds that were rated or insured? Yes\_\_\_\_ No\_\_\_\_

If YES, provide the date, rating, and agency or insurance for any issues in the last 5 years: \_\_\_\_\_

\_\_\_\_\_

15. Have you ever been delinquent or defaulted on any bond or loan payment? Yes\_\_\_\_ No\_\_\_\_

If YES, please attach a statement of explanation: \_\_\_\_\_

16. List Outstanding Debt / Lease (if any) AND attach payment schedule:

Lender / Bond Issue	Amount Outstanding	Payment Amount	Payment Frequency	Interest Rate	Years Remaining or Maturity

17. Assessed Valuation (for Cities):

Equalized Assessed Valuation of Taxable Tangible Property

Tangible Valuation of Motor Vehicles

**Total**


I certify that I am authorized to sign this application on behalf of the governing body. To the best of my knowledge and belief, the data in this application is true and accurate.

\_\_\_\_\_  
Signature and Title of Authorized Official

\_\_\_\_\_  
Print or Type Name and Title

\_\_\_\_\_  
Attest: City Clerk or Secretary of RWD Board

\_\_\_\_\_  
Date

Note: Return Part I with 2 copies of the last three years of financial statements and any other attachments to:  
**KDHE, Attn: Water Supply Loan Fund, 1000 SW Jackson; Suite 420; Topeka, KS 66612-1367.**

# Kansas Public Water Supply Loan Fund

**Program Year**

Loan Application: **Part II of III**

City or RWD Name:

Name **AND TITLE** of contact person for this project:  
(Should be an elected official or employee of the applicant.)

Street Address or Post Office Box:

City: State, and Zip Code:

Telephone Number: Fax Number: E-mail:

<i>For Agency Use</i>	
Date received by KDHE:	_____
Project Number:	_____

1. Public hearing notice. The public hearing date for local participation/review of this project application was held on \_\_\_\_\_. Attach a copy of Proof of Publication showing it was advertised 30 days prior the scheduled hearing, and the minutes from the public hearing.
2. Attach resolution by the governing body of intent to proceed with project.
3. The applicant agrees to comply with relevant provisions of the Civil Rights Act of 1964, the Kansas Act against Discrimination, the Americans with Disabilities Act, and the Uniform Relocation Assistance and Real Property Acquisition Policies (40 CFR part 4).
4. Environmental Assessment has been completed: Yes\_\_\_\_ No\_\_\_\_
5. EPA Form 4700-4, Preaward Compliance Review Report, has been completed and attached.
6. EPA From 6600-06, Certification Regarding Lobbying, has been completed and attached.

I certify that I am authorized to sign this application of behalf of the governing body. To the best of my knowledge, and belief, the data in Part II is true and accurate.

\_\_\_\_\_  
Signature and Title of Authorized Official

\_\_\_\_\_  
Print or Type Name and Title

\_\_\_\_\_  
Attest: by City or Secretary of RWD Board

\_\_\_\_\_  
Date

Note: Return this section with attachments to: **KDHE, Attn: Water Supply Loan Fund, 1000 SW Jackson; Suite 420; Topeka, KS 66612-1367.**  
If you have any questions concerning this application, contact KDHE at 785-296-5514.

# Kansas Public Water Supply Loan Fund

Loan Application: **Part III of III**

**Program Year**

Part III of the Loan Application will address the technical and managerial capacity to ensure that the system meets present and foreseeable regulations.

City or RWD Name:

\_\_\_\_\_

Name and title of contact person for this project:

\_\_\_\_\_

Street Address or Post Office Box:

\_\_\_\_\_

City: \_\_\_\_\_ State, and Zip Code: \_\_\_\_\_

Telephone Number:

\_\_\_\_\_

Fax Number:

\_\_\_\_\_

Date received by KDHE: \_\_\_\_\_

Project Number: \_\_\_\_\_

E-mail:

\_\_\_\_\_

*Technical Capacity requests information concerning adequacy of the water source or water purchase contracts and general information about the physical infrastructure aspect of the utility.*

What is your water source? (Please check the appropriate boxes.)

Surface\_\_\_\_ Ground\_\_\_\_ Purchased\_\_\_\_

Are water rights sufficient and secured?

Yes\_\_\_\_ No\_\_\_\_

Do you have a source water protection plan?

Yes\_\_\_\_ No\_\_\_\_ Source Water is Purchased \_\_\_\_\_

Do your operators have the appropriate level of certification?

Yes\_\_\_\_ No\_\_\_\_

Has your system had a violation of drinking water regulations in the last year?

Yes\_\_\_\_ No\_\_\_\_

Does your system have an operation and maintenance plan?

Yes\_\_\_\_ No\_\_\_\_

*Managerial Capacity considers the accountability of the governing body. You should be aware of your responsibilities as an owner, council member or board member.*

Does your system have a capital improvement plan that projects future capital needs for at least 5 years?

Yes\_\_\_\_ No\_\_\_\_

Does your system have written personnel policies?

Yes\_\_\_\_ No\_\_\_\_

Does your system include written job descriptions signed by the employees?

Yes\_\_\_\_ No\_\_\_\_

Does your system have formal operational policies (payments/collections, main extension connections)?

Yes\_\_\_\_ No\_\_\_\_

Does the governing body approve expenses prior to payment being issued?

Yes\_\_\_\_ No\_\_\_\_

Are at least two signatures required to purchase goods and services?

Yes\_\_\_\_ No\_\_\_\_

I certify that I am authorized to sign this application on behalf of the governing body. To the best of my knowledge and belief, the data in Part III is true and accurate.

\_\_\_\_\_  
Signature and Title of Authorized Official

\_\_\_\_\_  
Print or Type Name and Title

\_\_\_\_\_  
Attest: by City or Secretary of RWD Board

\_\_\_\_\_  
Date

Note: Return this section to: **KDHE, Attn: Water Supply Loan Fund, 1000 SW Jackson; Suite 420; Topeka, KS 66612-1367.**  
If you have any questions concerning this application, contact KDHE at 785-296-5514.