PRIORITY LIST ATTACHMENT FORM

1. **Name of facility receiving improvements:** _____

2. **Location of facility receiving improvements:**

_____

_____

_____

3. **Please check why this project is needed - *check all that apply***

(Enforceable Requirement Code)

☐ A Project is needed to meet requirements of existing NPDES permit

☐ B Project is needed to meet requirements of NPDES permit when issued

☐ C Project is needed to meet Best Practical Wastewater Treatment Technology

☐ D Project is not needed to meet any enforceable requirements of the Clean Water Act

☐ Y The project in its entirety satisfies the enforceable requirements of the Clean Water Act

☐ P Portions of the project do not satisfy the enforceable requirements of the Clean Water Act

4. **Please check project type**

(Project Type Code)

☐ PS Point Source Discharge

☐ BR Brownfields Remediation

☐ NPS Non-Point Source Discharges

5. **Please provide the following population information**

a. Population to benefit from project: _____

b. Population served by the system: _____

6. **Please provide the following information for wastewater volume**

a. Designed flow for the project: _____ mgd

b. Design flow for System: _____ mgd

c. Amount of wastewater flow eliminated and/or conserved by this Project: _____ mgd

7. **Please check all items that this project will address.**

(Needs Category)

☐ I Secondary Wastewater Treatment

☐ II Advanced Wastewater Treatment

☐ III-A Infiltration/Inflow (I/I) Correction

☐ III-B Sewer Replacement/Rehabilitation

☐ IV-A New Collector Sewers and Appurtenances

☐ IV-B New Interceptor Sewers and Appurtenances

☐ V Combined Sewer Overflow (CSO) Correction

☐ VI Storm Water Management Program

☐ VI-A Stormwater Conveyance Infrastructure

☐ VI-B Stormwater Treatment Systems

☐ VI-C Green Infrastructure

☐ VI-D General Stormwater Management

☐ VII-A NPS Control: Agriculture (Cropland)

☐ VII-B NPS Control: Agriculture (Animals)

☐ VII-C NPS Control: Silviculture

☐ VII-E NPS Control: Ground Water Protection (Unknown Source)

☐ VII-F NPS Control: Marinas

☐ VII-G NPS Control: Resource Extraction

☐ VII-H NPS Control: Brownfields

☐ VII-I NPS Control: Storage Tanks

☐ VII-J NPS Control: Sanitary Landfills

☐ VII-K NPS Control: Hydromodification

☐ VIII Confined Animals (Point Source)

☐ IX Mining (Point Source)

☐ X Recycled Water Distribution

☐ XII Decentralized Wastewater Treatment Systems

☐ XIII Planning

Over Please →

8. Please check discharge types that apply to your system

- ☐ Wetland
- ☐ Surface Water (Stream, River, Lake)
- ☐ Groundwater
- ☐ Land Application
- ☐ Other/Reuse
- ☐ Eliminates Discharge
- ☐ No Change/No Discharge
- ☐ Seasonal Discharge

9. Please identify any benefits and indicate if it's the primary or secondary focus of the project.

(Other uses and outcomes)	**Protection**	**Restoration**
☐ Infrastructure Improvement	Primary or Secondary	Primary or Secondary
☐ Regionalization/Consolidation	Primary or Secondary	Primary or Secondary
☐ Water Reuse/Recycling/Conservation	Primary or Secondary	Primary or Secondary
☐ Groundwater Protection	Primary or Secondary	Primary or Secondary
☐ Drinking Water Supply (e.g., groundwater source)	Primary or Secondary	Primary or Secondary
☐ Other Public Health/Pathogen Reduction	Primary or Secondary	Primary or Secondary
☐ Wetland Restoration	Primary or Secondary	Primary or Secondary
☐ Security	Primary or Secondary	Primary or Secondary
☐ Industrial	Primary or Secondary	Primary or Secondary
☐ Other	Primary or Secondary	Primary or Secondary

10. Total Project Cost: _____

11. Other Funding Sources for this Project:

Funding Source	$ Amount	Secured or Unsecured