



NYS Dept. of Environmental Conservation
Division of Solid & Hazardous Materials
Bureau of Waste Reduction & Recycling
625 Broadway, Albany, NY 12233-7253



New York State
Environmental Protection Fund

Municipal Waste Reduction and Recycling Program Application Package

Coordination and Education Projects



TABLE OF CONTENTS

INSTRUCTIONS AND GENERAL INFORMATION

- 1.0 INTRODUCTION.....Page 1
What does this program do ?
 - 2.0 ELIGIBILITY INFORMATION.....Page 1
Is my community eligible ? How much can we get ?
 - 3.0 HOW TO PREPARE AN APPLICATION.....Page 4
What information do I need to send in ?
- THE FOLLOWING FORMS ARE INCLUDED FOR YOUR USE:
- Application Cover Sheet
 - Application Checklist
 - Project Budget Format
 - Recycling Coordinator Questionnaire
 - Sample Resolution
 - Sample Certificate of Recording Officer
- 4.0 THE GRANT PROCESS.....Page 8
How does it work and how do I apply?
 - 5.0 MINORITY/WOMEN'S BUSINESS ENTERPRISE (M/W/BE) AND
EQUAL EMPLOYMENT OPPORTUNITIES (EEO) REQUIREMENTS...Page 9
 - 6.0 INSTRUCTIONS FOR REPORTING.....Page 11
 - 7.0 LIST OF D.E.C. REGIONAL CONTACTS

FORMS FOR USE IN FILING AN APPLICATION

SEND COMPLETED APPLICATIONS OR PRE-APPLICATIONS TO:

**Division of Solid & Hazardous Materials
Municipal Waste Reduction and Recycling Program
625 Broadway
Albany, NY 12233-7253**

**Please also send a copy to your local DEC Regional Office
(Addresses are included in this Application Package.)**



1.0 INTRODUCTION

Passage of the Environmental Protection Act in 1993 created the Environmental Protection Fund (EPF), a continuing source of funds dedicated specifically for environmental projects, including programs such as the Municipal Waste Reduction and Recycling (MWR&R) Program to help municipalities meet environmental goals.

The EPF allows the Department of Environmental Conservation (DEC) to provide MWR&R funding to local governments for waste reduction and recycling projects. **The overall goal of this program is to assist municipalities in expanding local waste reduction and recycling programs, and increase participation in those programs.** The MWR&R assistance program can help fund the costs of:

- Capital Investment in facilities and Equipment
- Recycling Coordinator Salaries and Public Education
- Waste Reduction Capital or Educational Projects
- Household Hazardous Waste Collection and Disposal Programs.

This application package is ONLY for Recycling Coordinator Salary/Public Education projects or for Waste Reduction projects . If you are interested in a different type of project, please call 518-402-8705 to request a different application.

2.0 ELIGIBILITY INFORMATION

Who is eligible to apply ?

- ◆ Counties, Cities, Towns, Villages
- ◆ Local Public Authorities
- ◆ Local Public Benefit Corporations (organizations established by State law)
- ◆ School Districts, Supervisory Districts & Improvement Districts
- ◆ Native American Tribes or Nations residing in New York State
- ◆ Any combination of the above

By law, private sector companies, not-for-profit organizations, and State agencies are NOT eligible to apply for MWR&R grants

What will this program pay for?

This program provides **50 percent reimbursement** on eligible project costs for planning, educational and promotional activities to increase public awareness of and participation in recycling and waste reduction. Applicants must incur all expenses and subsequently request reimbursement under a contract between NYSDEC and the applicant.

Are there other restrictions on eligibility ?

1. Costs must have been incurred AFTER April 1, 2000.
2. Requests cannot exceed \$2 million per project.



Some examples of eligible Recycling Coordination/Education projects include:

1. Salary/fringe benefits of a dedicated Recycling Coordinator
2. Direct costs for recycling public education/promotion/outreach
3. Specific consultant services, that cannot be carried out by the Coordinator.

Who is a "Recycling Coordinator"?

In order to be considered a Recycling Coordinator, a person must be a municipal employee primarily responsible for the development, coordination and implementation of activities necessary for recycling, including:

1. planning, monitoring and modifying the local recycling program,
2. developing public education and promotion tools,
3. implementing outreach strategies,
4. establishing, monitoring and improving recyclables marketing,
5. tracking and reporting,
6. fostering inter-governmental coordination,
7. developing enforcement strategies, and
8. managing financial aspects of the municipal recycling program

Individuals who perform only one or two of the above functions cannot be considered a Recycling Coordinator.

Who is NOT a "Recycling Coordinator"?

1. Persons involved in coordination/management of all solid waste within a municipality
2. Persons whose primary work is recyclables handling or facility operations.
3. Persons who are temporary employees or interns

What is public education/promotion/outreach?

1. Recycling guides, mailers, brochures, and webpages.
2. Advertising on TV, radio, newspaper, billboards, etc.
3. Recycling signs and displays
4. Give-a-ways, children's shows, County Fair fees, America Recycles Day items
5. Other media for educating the public on the benefits and methods of recycling.

The purpose of this funding is to improve, promote and expand RECYCLING or WASTE REDUCTION. If significant portions of an item are not designed to promote waste reduction or recycling, the item is not eligible.



Some examples of eligible Waste Reduction projects include:

- 1. Municipally-run Materials Exchanges**
- 2. Backyard Composting Promotion**
- 3. Business/Institutional Waste Audits**
- 4. Waste Reduction Challenges**

What is a Waste Reduction Project?

A waste reduction project is a project undertaken to reduce the volume or toxicity of materials entering the municipal solid waste stream, by reducing the volume or toxicity of such materials at the point of generation. Waste reduction projects include planning and educational or promotional activities to increase public awareness of:

1. methods to prevent the generation of waste;
2. the recovery and reuse of certain materials
3. the use of refillable or reusable packaging;
4. audits of procedures and practices, resulting in the elimination or reduction of materials disposed;
5. substitution of non-toxic household products; and
6. the promotion of backyard or on-site composting

What is NOT Waste Reduction?

1. Compaction of solid waste or recyclables
2. Disposal of solid waste materials other than HHW

The purpose of this funding is to improve, promote and expand RECYCLING or WASTE REDUCTION. If significant portions of an item are not designed to promote waste reduction or recycling, the item is not eligible.



3.0 HOW TO PREPARE AN APPLICATION

The items described in this section must be included in your application.

A. **Application Cover** signed by the authorized representative of the municipality. Use the Cover Page included with this Application Package. Please also complete the APPLICATION CHECKLIST on the back of the Cover Page.

B. **Project Description** Write a narrative description by answering the following questions:

1. Where is the **service area of the project** ?
 - (a) Provide the location, population, numbers and types of households covered by your program, as well as any commercial, industrial and institutional populations to be served.
 - (b) Briefly describe how your program collects recyclables or prevents waste.
 - (c) What materials are collected, and how much is collected annually?
2. What are the **overall objectives or goals** of this project?
Be specific. Do not simply say "increased recycling" or "decrease waste."
 - (a) What changes are expected for your waste reduction and recycling program if this grant is approved?
 - (b) What will be done to add new materials or new participants to your program?
3. What is the **scope of work** of this grant project?
 - (a) If you are asking for Recycling Coordinator salary, what tasks will be done by the Recycling Coordinator to expand and improve your recycling program?
 - (b) If you are seeking promotional funding, **what** will you be promoting, and **why** are you promoting it?
 - (c) What work products (brochures, mailers, advertisements, promotional items, etc.) will be developed by this project and how will they be used?

Send in a copy of any completed work products.

Please ensure that ALL the items requested in your budget are fully described in your scope of work.

C. **Recycling Coordinator Questionnaire and Job Description**

1. Please complete the **Recycling Coordination Questionnaire Form**.
2. If Recycling Coordinator funding is requested please also provide a **Recycling Coordinator job description** for the position. The job description **MUST**:
 - (a) Provide the person's **name and official title**, if the Coordinator is an employee.
 - (b) Be specifically written **for the person** designated as Recycling Coordinator;
 - (c) Include **ALL activities** to be performed by the individual; and
 - (d) Indicate the **percentage of time** dedicated to each activity.



D. Project Budget **Please review this page prior to preparing your budget. It contains answers to Frequently Asked Questions.**

Use the Budget Form in this Application Package (or a similar format).

1. Please design your budget to provide a **sufficient balance of educational, promotional, and outreach resources, materials and activities for the Recycling Coordinator to utilize** in educating the public about recycling.

The project budget should include these educational, promotional, and outreach costs as separate cost items in support of the overall project.

One example of a well balanced grant request is \$50,000 for recycling coordinator costs paired with at least an additional \$50,000 of recycling educational, promotional or outreach costs.

2. Budgets may be proposed for any reasonable **length of time**.
 - (a) 1-3 year terms are typical.
 - (b) For multi-year budgets, please provide a budget in chart format indicating which year costs will be incurred.
3. **Fringe benefits** should be listed as a percentage of salary.
 - (a) Do not include a cost item for general "overhead," as this is not eligible.
 - (b) If the Fringe Benefit Rate is over 35%, include a list of the annual benefit dollar amounts and subcategories which comprise the overall benefit rate.
4. For **mixed-use costs**, containing both recycling and non-recycling components:
 - (a) indicate the percentage of the item that is related to recycling;
 - (b) pro-rate the cost accordingly; and
 - (c) include the rationale or basis for the pro-ration percentage.
5. General **operating costs** for facilities and offices, including **mileage costs** for travel within the applicant's service area are not eligible.
6. If the project involves **subcontracting** for educational, planning, public relations, or other consultant services, please submit the following items:
 - (a) reasons why the applicant's employees/volunteers are unable to provide such services;
 - (b) a list of at least three firms qualified to provide such services; and
 - (c) if available, the proposed request for proposals (RFP)
7. At the time of payment, you will be asked to provide copies of invoices, bills, checks, receipts, or other proof of expense. Any items you have obtained at no charge or **items for which no bill is available** should not be included in the budget since they cannot be reimbursed later..



Remember the purpose of these funds is to promote and expand the 3R's.

Limit your request to costs needed to instruct the public on the benefits and methods of reduction, reuse and recycling.

Please refrain from requesting funds for promoting your organization, for educating the public on solid waste collection, or for other activities that are inconsistent with the core purpose of this grant program.

E. Implementation Schedule

When will various phases of the project be operational?

Include the following information:

1. an estimated **start date** for the project
2. the milestones outlining project progress and accomplishments;
3. the estimated **end date** of the project.

ALL your grant related expenses must fall between the start and end dates.

F. Certified Resolution

This is the legal document authorizing you to file an application.

If it is not completed correctly, your application CANNOT be approved.

USE THE RESOLUTION LANGUAGE PROVIDED IN THIS APPLICATION PACKAGE. IT HAS BEEN PRE-APPROVED BY DEC LEGAL STAFF. If you change the language, the revision might NOT be approvable to DEC.

1. Fill in the blanks according to the instructions in parentheses under each blank.
2. Pass the resolution via the governing body.
3. Make five (5) copies of the resolution for the submittal to the DEC.
4. Certify all five (5) copies. The recording officer must complete the certifications:
 - (a) Enter an **original signature** on **each** copy
 - (b) Affix or **emboss the seal** of the governing body to **each** copy
5. Submit all five (5) certified resolutions (with original signatures and seals on each) to the DEC with the application package by placing them after the Application Cover Sheet.

NOTE: The person signing the application and contract must be the person authorized by the resolution.

G. Local Recycling Law

A copy of the municipality's current local source separation law or ordinance adopted pursuant to NYS General Municipal Law (GML section 120-aa).

If you sent in a recent copy of your local recycling law in a previously approved MWR&R grant application, you may request a waiver of this requirement.



H. **Minority/Women's Business Enterprise and Equal Employment Opportunity Requirements** (M/WBE & EEO)

If the grant amount you are seeking is **\$12,500 or more**, please complete the tables at the end of this Application Package.

I. **Other Information**

The following items are required by various State laws, rules, or policies. They only require **a paragraph or two** to complete. Please be brief.

1. **Solid Waste Planning Compliance**

Briefly explain whether the proposed project is consistent with the State Solid Waste Management Plan and Local Solid Waste Management Plan for the service area. For applicants who are "planning units", Solid Waste Plan Compliance Reports should be up-to-date at the time of the application.

2. **Other Financial Assistance**

Describe efforts undertaken, whether successful, unsuccessful, or pending, to secure state, federal, or other financial assistance, direct or indirect for this project.

3. **Small Business Impacts**

Describe efforts undertaken by the municipality to **minimize adverse impacts** of the project, or any components thereof, on **small businesses**. Projects funded by this State grant program and conducted by local governments should NOT displace local privately-established small businesses.

4. **General Municipal Law Bidding Compliance**

Write a sentence that certifies:

"All products and services under this project will be purchased in accordance with the New York State General Municipal Law (GML) and other applicable laws."



4.0 THE GRANT PROCESS - AN OVERVIEW

4.1 The Pre-application

1. Applicants may submit a pre-application so that DEC can determine if a project is conceptually eligible.
2. The DEC maintains a "waiting list" comprised of eligible pre-applications received. A position on the waiting list is not to be interpreted as a guarantee or promise of future funding from the State.
3. The date on which the DEC Albany Office (Division of Solid & Hazardous Materials) receives a pre-application will determine the applicant's position on the waiting list. If a pre-application is sent to any other DEC office, the applicant will not receive credit for the pre-application until it reaches the DEC Albany Office.
4. The DEC will accept pre-applications (and final applications) for qualifying MWR&R projects from applicants on an ongoing, first-in-first-out basis.

4.2 The Final Application

1. Upon availability of funding, the DEC will send written notice of such availability to pre-applicants in the order they appear on the waiting list.
2. Upon receiving notice from DEC that funding is available, the applicant must submit a full final application for State assistance to DEC within 60 calendar days of the date of notice from DEC.
3. If an applicant decides to go ahead with the project prior to receiving notice from DEC that funding is available, the applicant is encouraged to prepare a full final application as the project develops.
4. Only applicants who submit complete final applications, as determined by the DEC, will be entitled to remain on the waiting list and be eligible for state assistant payments.
5. Project applications will be reviewed by DEC and may be approved, disapproved or recommended for modifications.
6. The DEC may require additional information from an applicant as may be necessary to complete a project application.
7. Failure to submit additional required information in a timely manner as determined by the DEC will result in an applicant being removed from the waiting list and having the application disapproved.

4.3 The Contract

1. Upon approval by the DEC of a project application, a municipality must enter into a contract with the DEC to obtain State assistance.
2. Contracts are drafted by DEC, sent to the grantee for signing, and executed by DEC, the State Attorney General and the State Comptroller.

4.4 Progress Reporting

1. The contract will include a requirement for progress reporting on recycling coordination/education activities and annual reporting on the amount of materials recycled on forms supplied by NYSDEC.

4.5 Payment Procedures

1. Upon execution and implementation of a contract for State assistance, the municipality may request reimbursement for the costs of completed portions of the project.
2. Reimbursement requests are to be submitted in a format supplied by DEC. DEC may require that reimbursement requests be accompanied by a summary detailing recyclable materials or compost materials marketing accomplishments.
3. Upon receipt of a reimbursement request, the DEC will review the request for the following:
 - a. compliance with the contract scope of work;
 - b. progress reports and work completed;
 - c. results of on-site inspections and/or audits by DEC;
 - d. compliance with all conditions of the contract.
4. Upon completion of the review, the DEC will approve, disapprove or modify the amount of funds reimbursed, and the municipality will be sent a check from the Office of State Comptroller.
5. All permits or registrations required under the Environmental Conservation Law or other state or federal laws, rules, and regulations must be obtained by the grantee prior to payment.
6. For final payments, the municipality is required to submit a "certificate of completion," in a format supplied by the DEC. The final payment request will be considered incomplete until the DEC receives the certificate of completion.
7. The DEC may conduct a final inspection of the project before making a final payment.



5.0 MINORITY & WOMEN'S BUSINESS ENTERPRISE (M/WBE) AND EQUAL EMPLOYMENT OPPORTUNITIES (EEO) REQUIREMENTS

- A. If the State share of your application is less than \$12,500, M/WBE and EEO goals will NOT be assigned to your project. You do NOT need to submit the Utilization Plan Forms. However, please review the following information:**

In order to facilitate M/WBE participation on all State assisted contracts, the procurement of services of \$10,000 or less may be made on the basis of a single solicited proposal if the price is reasonable. As a general rule, reasonableness of price is determined in the following ways:

1. By comparing the solicited price with the price for the same or similar services within the last six months;
2. By comparing the price with those of other prospective contractors; or
3. By comparing the solicited price to prices listed in publications such as the "Means Build Construction Cost Data" catalog.

Finally, the recipient of the State assistance may establish reasonableness by reviewing the type of work that was previously accepted by the Department at a similar cost, or, if the supplier can justify the price of the product by the current market value of the same product.

- B. If the State share of your application is \$12,500 or more, M/WBE and EEO goals will be assigned to your project. Please complete the M/WBE Utilization Plan chart forms at the end of this application package and include the forms when you submit your final application. If you have questions on these forms, please call DEC's M/WBE office at 518-402-9311.**

- C. When you are ready to search for MWBE vendors, use the following instructions to access and perform a Search in the online M/WBE Directory**

Accessing the M/WBE vendor online database:

Carefully type the following into your browser window: <http://205.232.252.35/>
OR

Go to <http://www.empire.state.ny.us> (The Empire State Development Agency) and use the following series of links:

1. in the black area on the left side select "**Services for Business**".
2. scroll over to the right and down and click on "**Establish and Promote Your Minority or Women-Owned Business**"
3. Scroll over to the right and down and click on "**Minority/Women's Business**"
4. Scroll down the third paragraph and click on "**Search the Directory**"

**Performing the MWBE vendor online Search:**

Call 518-402-9311 if you require additional assistance.

1. **Select Business Locations:** Choose All, Upstate, Downstate or Out-of State
2. **Select Economic Development Regions:** Select ALL or a specific region or if you wish to choose specific counties within a region (to select more than one county in that region hold the **control button and click with the mouse on each of the counties**). Do this for each of the regions you wish to select. If you have no preference, go to the next step.
3. **Select Business Market Areas:** If you wish to choose a specific market area or several market areas - select them here or - click on **“All Areas”**.
4. **Select Business Certification Types:** Choose **ALL** in most cases unless you're specifically looking for MBE, WBE or M/WBE.
5. **Select Gross Sales:** Click on sales amount or click on **ALL**.
6. **Select Product or SIC (Standard Industrial Classification) Codes:** Scroll inside the gray bar of Product Codes box. They are in alphabetical order by product or service. Scroll inside the gray bar to select SIC Codes box. They are in numeric order. You can pick either an individual listing or multiple listings (by holding the Control button down and clicking on each of the product codes/SIC Codes selected. Once you have selected all your listings, click on the Search button. Some sample codes that may be of interest include, but are not limited to:
 - 0005 | ADVERTISING/MARKETING
 - 0480 | CONTAINERS, CUSTOM FABRICATED
 - 0716 | WASTE REDUCTION CONSULTANT
 - 0955 | ADVERTISING SPECIALTIES
 - 1099 | WEB SITE DESIGN AND MARKETING
 - 3557 | Industrial Trucks, Tractors
 - 3993 | Signs and Advertising Specialties
 - 7336 | Commercial Art and Graphic Designi
7. Once your search is completed the display will be: **Showing 1 thru 1 of Record 1, Showing 1 thru 2 of Record 2, etc.** You may now print a report or perform new search. New search will bring you back to Select Business Location. If you want to print a particular firm as a result of your search click on the company name and maximize the screen. To print entire report, click on Print Report, File, Print, OK.

You can also perform a Search through Individual Listings:

Click on Full Screen (upper left-hand side of tool bar), scroll to bottom of Directory Page and search by Federal ID Number, Company Name, Telephone Number, Fax Number, Company Contact, State or Zip Code. You can then select Start of Field or Any Part of Field. Click on **Perform Lookup**.



6.0 INSTRUCTIONS FOR REPORTING

This information is NOT necessary when you are applying for a grant.

After Recycling Coordinator/Education funding is approved, grantees are required to complete progress reports as follows:

PROGRESS REPORTS You may complete Progress Reports in **one** of three ways:

1. Photocopy the blank Progress Report Form. Complete the form.
Send the completed copy **by fax to 518-402-8791**.

- OR -

2. Photocopy the blank Progress Report Form. Complete the form.
Send the completed copy **by mail** to:

NYSDEC Bureau of Waste Reduction & Recycling
MWR&R Progress Report
625 Broadway, 9th Floor
Albany, NY 12233-7253

- OR -

3. You may also work with the DEC project manager to establish e-mail reporting.
Talk to you DEC grant project manager if you wish to pursue this option.

ANNUAL REPORTS:

If the grantee is a "**Planning Unit**", the grantee is required to complete, in a timely manner, the **Annual Recycling Report** upon request by DEC. This will usually occur during January or February. Planning Units are municipalities who are responsible for solid waste planning within a geographical area of New York State.

If the grantee is **NOT a "Planning Unit"**, the grantee is required to obtain a release letter from the local Planning Unit indicating that the grantee's recyclables tonnage amounts are incorporated into the Annual Recycling Report of the Planning Unit. This letter should be sent to DEC via method 1 or 2 above. This must be done every year during the term of the grant contract.
Annual reports cannot be e-mailed.



**New York State Department of Environmental Conservation
MUNICIPAL WASTE REDUCTION AND RECYCLING PROJECT
PROGRESS REPORT FORM**

A Progress Report is due on the seventh day of January and July during the term of the Grant Contract. The due dates may be modified upon mutual agreement by DEC and the grantee. You may use this form, or a similar format Use additional sheets if necessary.

Grantee _____ Contract Number C30_____

Period Covered by this report _____ to _____

Person completing this report _____

1. Please list the objectives/activities from the **Scope of Work** of your contract. For each objective, please provide a brief description of the activities and accomplishments completed toward the objective during the period covered by this report. Also, send copies of any completed work products.

2. Please list the objectives from the **Recycling Coordinator Responsibilities** from your contract. Provide a brief description of the recycling coordinator's activities and accomplishments completed during the period covered by this report.

3. What improvements, accomplishments or milestones can you report for your overall waste reduction or recycling program during the period of this report?

7.0 REGIONAL CONTACTS FOR MUNICIPAL WASTE REDUCTION & RECYCLING PROGRAM

Region	Counties	Contact Person	Address	Phone
1	Nassau Suffolk	Janet Kolodziejski	SUNY @ Stony Brook, 50 Circle Rd. Stony Brook, NY 11790-3409	631-444-0375
2	New York City (Bronx, Kings, New York, Queens, Richmond)	Ken Brezner (RS&HME)	1 Hunters Point Plaza 4740 21st Street Long Island City, NY 11101-5407	718-482-4996
3	Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, Westchester	Theresa Laibach	21 South Put Corners Road New Paltz, NY 12561-1696	845-256-3141
4	Albany, Columbia, Delaware, Greene, Montgomery, Otsego, Rensselaer, Schenectady, Schoharie	Richard Forgea (RS&HME)	1130 North Westcott Road Schenectady, NY 12306-2014	518-357-2346
5	Clinton, Essex, Franklin, Fulton, Hamilton, Saratoga, Warren, Washington	Gus Carayiannis	Route 86, P.O. Box 296 Ray Brook, NY 12977-0296	518-897-1241 518-623-1200
6	Herkimer, Jefferson, Lewis, Oneida, St. Lawrence	Jennifer Lauzon	State Office Building 317 Washington Street Watertown, NY 13601-3787	315-785-2513
7	Broome, Cayuga, Chenango, Cortland, Madison, Onondaga, Oswego, Tioga, Tompkins	Timothy DiGiulio (RS&HME)	615 Erie Blvd. West Syracuse, NY 13204-2400	315-426-7419
8	Chemung, Genesee, Livingston, Monroe, Ontario, Orleans, Schuyler, Seneca, Steuben, Wayne, Yates	Gary Maslanka	6274 E. Avon-Lima Road Avon, NY 14414-9519	716-226-2466
9	Allegany, Cattaraugus, Chautauqua, Erie, Niagara, Wyoming	Efrat Forget	270 Michigan Avenue Buffalo, NY 14203-2999	716-851-7220

(RS&HME: Regional Solid & Hazardous Material Engineer)

January 31, 2008

**FOLLOWING THESE INSTRUCTIONS
ARE BLANK FORMS THAT SHOULD
BE USED TO FULFILL THE
REQUIREMENTS OF THIS SECTION.**

**PLEASE TEAR THEM OUT
OR COPY THEM.**



New York State Department of Environmental Conservation
Environmental Protection Fund
MUNICIPAL WASTE REDUCTION AND RECYCLING PROJECT
APPLICATION COVER PAGE

Project No. _____ Date Rec'd _____
(DEC use only) (DEC use only)

Applicant: _____ County: _____

Applicant types(s):

- | | | |
|----------------------------------|--|---|
| <input type="checkbox"/> City | <input type="checkbox"/> County | <input type="checkbox"/> Local Public Authority |
| <input type="checkbox"/> Town | <input type="checkbox"/> School District | <input type="checkbox"/> Local Public Benefit Corporation |
| <input type="checkbox"/> Village | <input type="checkbox"/> Other District | <input type="checkbox"/> Native American Tribe/Nation |

Total Project Cost: \$ _____	State Share Request: (50%) \$ _____
------------------------------	-------------------------------------

Project Name or Title: _____

Project Manager: _____
(name & title of Municipal Employee who can provide project information)

Address: _____ Phone: _____

_____ E-mail: _____

_____ Federal Tax ID _____

Population of project service area _____ DEC Region _____

Project category: (check all that apply)

- Recycling Coordinator Waste Reduction
 Recycling Education Composting

Is the application checklist included in this application? YES NO

CERTIFICATION: I do hereby certify that the information in this application and in the attached certified copies of resolutions, other statements, and exhibits is true, correct and complete to the best of my knowledge and belief.

_____ (Date) _____ (Signature of authorized representative)

Name and Title of Authorized Representative _____
(name & title as appears on the Certified Resolution)

**Municipal Waste Reduction and Recycling (MWR&R) Program
COORDINATION/EDUCATION PROJECT
APPLICATION CHECKLIST**

Name of Person _____
 Completing this checklist _____ Phone _____

**Use this checklist to ensure that your application is complete.
 Incomplete applications will not be approved.
 Submit ALL documentation below.
 Place a check (✓) in the corresponding box of the first column.**

Included in application	DEC approved	Application Component
		Application Cover Signed by Authorized Representative
		Project Description - 1. Project Service Area
		Project Description - 2. Project Objectives & Goals
		Project Description - 3. Scope of Work
		Recycling Coordination Questionnaire, if applicable, use enclosed form
		Recycling Coordinator Job Description, if applicable
		Project Budget - Use enclosed Form or similar format
		Implementation Schedule (incl. Start and End Dates of the grant)
		Resolution 5 Certified Copies submitted Seal embossed OR original signature on each certificate form
		Local Recycling Law (Check here <input type="checkbox"/> if previously submitted)
		Paragraph describing State/Local Solid Waste Plan Compliance
		Paragraph describing Other Financial Assistance
		Paragraph describing Small Business Impacts
		Sentence certifying General Municipal Law Bidding Compliance
		M/WBE-EEO Charts Call 518-402-9311 for assistance with this item

**Send ONE original of the application to the DEC Central Office AND
 Send ONE copy of the application to your DEC Regional Office**

**Municipal Waste Reduction and Recycling (MWR&R) Program
Coordination/Education Project Budget Format**

*Please use this form, or create a similar format for your budget.
If you wish to obtain a self-calculating, electronic Budget Form in Excel or Lotus format,
please e-mail ajribeir@gw.dec.state.ny.us and ask for the "blank budget spreadsheet"*

Period Covered by this Grant Request _____ to _____

Note: For multi-year budgets, please provide yearly breakdowns of costs.

Personal Services/Recycling Coordinator Salary Year 1 Year 2 Year 3

Percentage of time dedicated
to recycling and waste reduction _____%

1. Annual Salary Amount:
2. Fringe Benefits
Percentage Rate: _____%

**Public Education/Promotion/Outreach Expenses
(Non-personal Services)** Year 1 Year 2 Year 3

Type of Expense
(please describe each item fully in your scope of work)

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Add more items as needed.

Total Expenses - \$ _____

State Aid Requested (50% of Total Expenses) - \$ _____

Percent of Project Budget for personal service costs _____%

Percent of Project Budget for non-personal service costs _____%

Please review the Budget Instruction Page before preparing your budget.

Recycling Coordination Questionnaire

Answer these questions about the coordination of your recycling program.

1. Who is the person primarily responsible for **planning, monitoring and modifying** the local recycling program?

2. Who is the person primarily responsible for developing **public education and promotion tools** for the recycling program such as brochures, flyers, calendars, mailers, etc?

3. Who is the person primarily responsible for developing and implementing **outreach strategies** for the recycling program?

4. Who is the person primarily responsible for establishing, monitoring and improving recyclables marketing by **seeking new markets or spot marketing** your recyclables?

5. Who is the person primarily responsible for **tracking and reporting** of recycling statistics to Federal, state and local authorities and the general public?

6. Who is the person primarily responsible for **fostering inter-governmental coordination** to maintain or improve the recycling program?

7. Who is the person primarily responsible for **developing enforcement strategies** (not the person who writes tickets)?

8. Who is the person primarily responsible for the overall solid waste management program of the municipality?

Don't forget to also provide a Recycling Coordinator job description
(See Instructions - Page 4 of 11)

RESOLUTION

Resolution Authorizing the Filing of an Application for a State Grant-In-Aid for a Municipal Waste Reduction and/or Recycling Project and Signing of the associated State Contract, Under the Appropriate Laws of New York State.

WHEREAS, the State of New York provides financial aid for municipal waste reduction and municipal recycling projects; and

WHEREAS _____

(Legal Name of Applicant)

herein called the MUNICIPALITY, has examined and duly considered the applicable laws of the State of New York and the MUNICIPALITY deems it to be in the public interest and benefit to file an application under these laws; and

WHEREAS, it is necessary that a Contract by and between THE PEOPLE OF THE STATE OF NEW YORK, herein called the STATE, and the MUNICIPALITY be executed for such STATE Aid;

NOW, THEREFORE, BE IT RESOLVED BY

(Governing Body of Applicant)

1. That the filing of an application in the form required by the State of New York in conformity with the applicable laws of the State of New York including all understanding and assurances contained in said application is hereby authorized.
2. That _____
(**TITLE** of Applicant's designated Authorized Representative)

is directed and authorized as the official representative of the MUNICIPALITY to act in connection with the application and to provide such additional information as may be required and to sign the resulting contract if said application is approved by the STATE;

3. That the MUNICIPALITY agrees that it will fund its portion of the cost of said Municipal Waste Reduction and Recycling Project.
4. That five (5) Certified Copies of this Resolution be prepared and sent to the NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION, ALBANY, NEW YORK 12233-7253, together with ONE complete application.
5. That this resolution shall take effect immediately.

CERTIFICATE OF RECORDING OFFICER

That the attached Resolution is a true and correct copy of the Resolution,
authorizing the signing of an application for State Aid, authorizing the signing of a
State Contract, and assuring funding of the municipal portion of the cost of the
project as regularly adopted at a legally convened meeting of the

(Name of Governing Body of the Applicant)

duly held on the _____ day of _____, 200____,

and further that such Resolution has been fully recorded in the

_____ in my office.
(Title of Record Book)

In witness whereof, I have hereunto set my hand this _____ day
of _____, 200_____.

If the Applicant has an Official Seal,
Impress here.

Signature of Recording Officer

Title of Recording Officer

**MINORITY AND WOMEN'S BUSINESS-EQUAL EMPLOYMENT
OPPORTUNITY PROGRAM WORKPLAN**

Policy Statement

The _____ commits to carrying out the intent of the New York State
(Name of Contractor or Municipality)
Executive Law, Article 15-A which assures the meaningful participation of Minority and
Women-Owned Business Enterprises (M/WBE) in contracting and the meaningful participation of
minorities and women in the workforce on activities financed by public funds.

Minority Business Officer

_____ is designated as the Minority Business Enterprise Officer
(Name of Designated Officer)
responsible for administering the Minority and Women's Business-Equal Employment
Opportunity (M/WBE-EEO) program.

M/WBE Contract Goals

_____ % Minority Business Enterprise Participation

_____ % Women's Business Enterprise Participation

EEO Contract Goals

10% Minority Labor Force Participation

10% Female Labor Force Participation

(Authorized Representative)

Title: _____

Date: _____

**M/WBE-EEO WORKPLAN
NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION**

Contractor or Municipality			Grant/Project Number	
Address		City		Zip Code
Authorized Representative			Authorized Signature	
Address		City	Zip Code	Phone No.
Minority Business Enterprise Officer				Fax No.
Project Description (list separate contracts & estimates)				
Contract No.	Description			Estimate
_____	_____			_____
_____	_____			_____
_____	_____			_____

PROJECTED EEO AND M/WBE CONTRACT SUMMARY

	%	Amount		%	No./Employees
1. Total Project Dollar Value			5. Total Employees		
2. MBE Project Goal			6. Total Minority Employees/Goal		
3. WBE Project Goal			7. Total Female Employees/Goal		
4. M/WBE Totals Combined			8. EEO Total Combined		

OFFICE OF MINORITY & WOMEN'S BUSINESS PROGRAMS USE ONLY

Proposed Goals		Date Approved	Date Disapproved	Initials
MBE (%)	EEO-Minorities (%)			
WBE (%)	EEO-Women (%)			

Call **518-402-9311** for help in completing this or the following page.

Number/Types of Contracts	Contract Breakdown	Amount

SAMPLE

Number/Types of contracts	Contract Breakdown	Amount
<u>General Construct.</u> (Contract No. 1)	Paving Demolition Paving Masonry Miscellaneous Metals Glazing Excavation and Backfill Fencing Concrete Finishing Reinforcing Steel Roofing Waterproofing	\$150,000 30,000 200,000 260,000 50,000 3,000 210,000 12,000 20,000 240,000 658,000 30,000 <hr/> \$1,273,000
<u>Electrical</u> (Contract No. 2)	Underground Duct Banks Equipment Supply Lightening Protection	110,000 260,000 20,000 <hr/> 390,000
<u>H.V.A.C.</u> (Contract No. 3)	Electrical Wiring Ductwork Controls Equipment Supply	10,000 45,000 25,000 60,000 <hr/> 140,000
<u>Plumbing</u> (Contract No. 4)	Underground Piping Equipment Supply	20,000 25,000 <hr/> 45,000
<u>Sewer Rehab</u> (Contract No. 5)	Cleaning & TV Inspection Joint Testing & Sealing Chemical Root Treatment Manhole Rehabilitation Excavation & Backfill Pavement Replacement Material Supply	35,000 45,000 4,000 8,000 6,000 12,000 5,000 <hr/> 115,000
<u>Sewer Rehab.</u> (Contract No. 6)	Cleaning & TV Inspection Joint Testing & Sealing Chemical Root Treatment Manhole Rehabilitation Excavation & Backfill Pavement Replacement Material Supply	58,000 126,000 3,000 15,000 3,000 2,800 1,000 <hr/> 208,800
	Total	\$2,171,000

This form entitles the applicant to be considered for a waste reduction/recycling grant administered by the NYSDEC. It is NOT a full application. Upon notice from NYSDEC the applicant will be required to complete a full application.

Step1 Provide some identifying information:

Applicant _____		DEC Region _____
		County _____
Check Applicant type(s):		
County <input type="checkbox"/>	City <input type="checkbox"/>	Town <input type="checkbox"/>
Local Public Authority <input type="checkbox"/>	Village <input type="checkbox"/>	
School District <input type="checkbox"/>	Local Public Benefit Corporation <input type="checkbox"/>	
Other District <input type="checkbox"/>	Native American tribe or nation (in NYS) <input type="checkbox"/>	

Project Name or Description: _____	
Project Manager: _____ (name & title of Municipal Employee who can provide project information)	
Address: _____	Phone: _____
_____	E-mail: _____

Project category: (check all that apply)	
Recycling Coordinator <input type="checkbox"/>	Waste Reduction <input type="checkbox"/>
Recycling Education <input type="checkbox"/>	Composting <input type="checkbox"/>
Total project cost \$ _____	State Share Request (50% of total) \$ _____
Do you currently have a Recycling Coordinator ? YES <input type="checkbox"/> NO <input type="checkbox"/>	
If yes, please include the person's name and official title in your scope of work.	

Step 2. Provide a brief SCOPE OF WORK for your project. (one paragraph)

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Municipal Waste Reduction & Recycling Coordination/Education Pre-Application (continued)
Step 3. Describe what will be ACCOMPLISHED with this grant (one paragraph).

Step 4. Provide a BUDGET.

You may fill in the form below or submit a separate attachment for your budget.

Period Covered by this Grant Request _____ **to** _____
Personal Services/Recycling Coordinator Salary
 Percentage of person's time dedicated to recycling _____ %

Description of expense	Year 1	Year 2	Year 3	Total
Recycling Coordinator Salary				
Fringe Benefits at _____ %				

Subtotal Coordinator Expenses - \$ _____

Public Education/Promotion/Outreach Expenses

Description of expense	Year 1	Year 2	Year 3	Total

Attach an additional chart, if necessary

Subtotal Educational Expenses - \$ _____

Total Expenses - \$ _____

State Aid Requested (50% of Total Expenses) - \$ _____

Municipal Waste Reduction & Recycling Coordination/Education Pre-Application (continued)

Step 5: Carefully read the following information.

1. Completing a "Pre-Application" is NOT a guarantee of funding.
2. The project manager will be notified when funding becomes available for the project. At that time, a full final application must be completed in order to receive funding.
3. Failure to submit the final application with all required information will result in the project being disapproved and removed from the waiting list.
4. Upon approval by the DEC of a final application, a municipality must enter into a contract with the NYSDEC to obtain funding.
5. Applicants must incur all expenses and request State reimbursement at a 50% rate. Proof of payment is necessary to receive State reimbursement.
6. If this file is being e-mailed to DEC, it will only be considered received if a confirmation reply is received by the applicant.

Check this box if you understand the terms listed above.
Pre-applications cannot be accepted unless the box is checked.
Call 518-402-8705 if you do not understand these items.

Step 6: Submit this entire form:

E-mail the completed form to dshmwrr@gw.dec.state.ny.us

If you do not receive a reply confirmation, the pre-application will not be considered received. Please re-send by regular mail.

OR Print this entire document and send by US Mail to:

Recycling Grants
Division of Solid & Hazardous Materials
625 Broadway
Albany, NY 12233-7253

Municipal Waste Reduction and Recycling Program Pre-Application Frequently Asked Questions

What will this program fund?

Personal services (salary/fringe benefits of a Recycling Coordinator); direct costs for waste reduction or recycling public education/promotion/outreach; and specific consultant services, that cannot be carried out by the Coordinator. Purchases of dedicated recycling or composting facilities and equipment are also eligible.

Call 518-402-8705 for the CAPITAL PROJECTS application. This program will reimburse the grantee for up to 50% of the eligible costs of the project.

Who is eligible to apply?

Counties, cities, towns, villages, local public authorities or local public benefit corporations (as established by State law), school districts, supervisory districts, Native American tribes or nations residing in New York State, or any combination of the above. Private sector companies, not-for-profit corporations or State agencies are **not** eligible for this program.

What is the status of funding for the program?

Funding is appropriated in the annual State budget. DEC maintains a waiting list of projects in anticipation of monies becoming available in future budgets. Please call 518-402-8705 for a more precise funding status.

How can my community apply?

Applicants need only complete a "Pre-application" and submit the required information, as outlined on the "Pre-application." This will insert your project on the waiting list until funding becomes available.