

New York State
Department of Environmental Conservation

**2009 Water Quality
Improvement Projects
Program**

**Round 10
Application for
State Assistance Payments**

Application Deadline: October 16, 2009

2009 Water Quality Improvement Projects Program Round 10 Application for State Assistance Payments

INSTRUCTIONS

Use this application to apply for state assistance payments under any of the following project types:

- Municipal Wastewater Treatment Improvement for Cities and Hardship Communities
- Municipal Wastewater Treatment Improvement
- Municipal Wastewater Treatment Improvement for Combined Sewer Overflows (CSO) and Sanitary Sewer Overflows (SSO)
- Statewide Nonagricultural Nonpoint Source Abatement and Control
- Nonagricultural Nonpoint Source Abatement and Control Projects in Coastal Areas Focusing on Addressing Nitrogen and/or Pathogens
- Municipal Separate Storm Sewer Systems (MS4s) Phase II Stormwater Implementation
- Water Quality Management
- Aquatic Habitat Restoration

Applications for agricultural nonpoint source abatement and control projects were due to the Department of Agriculture and Markets on January 5, 2009.

Instructions for Completing Parts A-J

In the event that an MS4 is seeking funding for the installation or application of stormwater management practices AND the development of local laws, outreach, training and other stormwater permit activities, the MS4 should complete two separate applications.

Part A.-Applicant Information

WQIP Applicant: Under the Water Quality Improvement Projects (WQIP) program, the applicant must be a municipality, Not-for-Profit Corporation, or a Soil and Water Conservation District as defined in Appendix 1 of the *Round 10 Information for Applicants*. There is additional information about eligible applicants for the MS4s Phase II Stormwater Implementation Program on page 22 of the *Round 10 Information for Applicants*. Not-for-Profit Corporations are only eligible to apply for Aquatic Habitat Restoration projects.

Federal ID Number: Provide the municipal federal identification number.

Charities Number (Not-for-Profit Corporation only): Provide the charities number if a Not-for-Profit Corporation.

Applicant's Contact Information and Primary Contact Information: Provide the contact information for the applicant. For the primary contact, provide the name, telephone number, and address of the representative whom you want to be notified about the status of the application. It is important to provide a primary contact who will be responsible for taking the necessary next steps if you receive a grant award if it is different than the applicant contact.

Part B - General Project Information

Project Name: Provide a brief working name and description of your project.

Project Type: Mark a single box to indicate how this application should be considered. Definitions of the project types are provided in the *Round 10 Information for Applicants*. Although some projects could be considered to be more than one project type, **select the ONE project type that best describes the purpose of the project.**

MS4 Phase II Stormwater Implementation projects that are designed to implement Stormwater Management Programs (SWMP) should check the MS4 box. Projects installing or applying stormwater management practices should check the Statewide Nonagricultural Nonpoint Source box.

Project Location: Identify the project location by providing the county(ies) and zip code(s). Provide the latitude and longitude for the approximate center of the project area. Include the 11-digit hydrologic unit code (HUC) for the area in which the project is located (see Appendix 1, *Round 10 Information for Applicants* for a definition of HUC). This information will be used to more exactly determine a project's location(s) and relationship to other activities within a given watershed. Also attach an 8 ½ x 11 map **to scale** identifying the project location; this map will be distributed to review teams with the application.

For MS4 Phase II Stormwater Implementation projects, indicate multiple municipalities/SPDES Permittees/MS4s and the county(ies) in which they are located.

Project Schedule: Provide the proposed starting date and the estimated completion date of the project.

Environmental Justice: Identify if the project is located within a potential Environmental Justice area.

Project Description: Provide a brief summary statement that describes the proposed project.

For salt storage facilities: Include the dimensions of the building, the maximum salt/sand storage capacity in tons, and the estimated total annual salt and abrasives in tons to be used at the facility. In addition, if the proposed building is intended for other wintertime uses, such as the storage of equipment or DPW offices, that are not related to deicer storage or loading operations, please provide the approximate percentage of the building floor area dedicated to such other uses.

Operation and Maintenance: Describe how the project will be maintained and redesigned if the original project does not meet the project goals after five years.

Coordinated Approach: Provide brief explanation of how the project contributes to a coordinated approach.

Part C – Project Readiness

List the necessary permits for the project, any enforcement actions that may have been taken against the applicant, the status of obtaining the necessary land to complete the proposed project and the status of the State Environmental Quality Review (SEQR) process.

Part D – DEC Priority Initiatives

Energy Efficiency and Smart Growth: Specify how the proposed project addresses energy efficiency and smart growth principles.

Part E – Clean Water State Revolving Fund (CWSRF)

Clean Water State Revolving Loan Fund: If the project is listed on the Intended Use Plan (IUP), provide the Clean Water State Revolving Loan Fund (CWSRF) project number and indicate whether the applicant has, or will, apply for short or long-term loans.

Projects listed on the CWSRF Intended Use Plan may be eligible for both short and long-term loans under the CWSRF. CWSRF zero interest or low interest loans may be used to finance the local share that will also be funded with Bond Act or Environmental Protection Fund (EPF). The following types of projects are eligible for listing on the IUP:

- Municipal wastewater treatment improvement;
- Nonagricultural nonpoint source; and
- Aquatic habitat restoration projects located in National Estuary Program areas (A description of National Estuary Program areas is provided in Appendix 1 of the *Round 10 Information for Applicants*).

Information on the CWSRF program and assistance on how to list a project on the IUP may be obtained by calling the Environmental Facilities Corporation's toll-free information line (800) 882-9721 (within NYS only) or (518) 402-7433 or on the web at www.nysefc.org.

Part F – Hardship Information

Provide information on the proposed project showing how the project is eligible for a Hardship determination.

Part G – Project Budget and Other Funding Sources

Project Budget

- Fill in the project budget chart, estimating costs for each expenditure category that is eligible for funding. The total project cost may not exceed the authorized amount considered in the applicant's bond resolution or ordinance or State Comptroller's approval where applicable. In cases where the proposed project includes several components and/or involves work in multiple locations, use copies of the budget sheet to provide a budget breakdown for each component or location where work will be performed.
- For Stormwater Phase II Implementation projects use the MS4 budget in Part J instead of Part G. In cases where the proposed project includes several components and/or

involves work in multiple locations, use copies of the budget sheet to provide a budget breakdown for each component or location where work will be performed.

Funding Sources

- It is necessary for all applicants to show **all** sources of long-term funding for each project/component (e.g., municipal contributions, grants, loans, etc.). **NOTE:** While a project might be partially funded from other state or federal grant programs, the Environmental Protection Fund prohibits using other state or federal grant dollars received for the project for the local share of the project. If you intend to apply, have applied, or have received a commitment for other supplemental or alternative grants and loans (e.g., U.S. Department of Agriculture Rural Development grant and/or loan, U.S. Housing and Development (HUD) grant, Clean Water SRF loan; Environmental Protection Fund (EPF) grants from Departments of State or Agriculture & Markets, etc.), please indicate the name of the funding source, the status of funding using the codes provided, and the amount of these funds.

NOTE: The local share requirements for each type of project are outlined in the *Round 10 Information for Applicants*.

For Stormwater Phase II Implementation projects, use Part J instead of Part B.

Part H – Project Personnel

(only Nonagricultural Nonpoint Source and Aquatic Habitat Restoration projects)

Identify the key project personnel that will be involved in the proposed project and what the responsibilities will be.

Part I – Certification

The applicant must certify the information contained in this application is true to the best of his or her knowledge and belief.

Part J – Municipal Separate Storm Sewer Systems (MS4s) Information

Specific MS4 information including cooperating MS4s, MS4 project description and MS4 budget and funding sources should be entered in this section.

****For each question, responses should fit into the allotted space. Do not attach additional sheets except where specifically stated it is allowed. If a question is not applicable to your project, use N/A.**

Submittal of Applications

To be considered for funding you must submit:

- A cover letter requesting Water Quality Improvement Project (WQIP) funding on letterhead of the Municipality, Not-for-Profit Corporation, Soil and Water Conservation District or other eligible applicant.
- One original **double-sided, unbound** application form and **2 copies** which have been endorsed by the individual authorized to do so. The application **must** include the following.
 - 8 ½ x 11 map, **to scale** showing the location of the project.
 - Copy of an enforcement instrument, if applicable.
 - One page Waterbody Data Sheet from DEC's Priority Waterbodies List (PWL): <http://www.dec.ny.gov/chemical/36730.html>
 - Letters of intent from cooperating municipalities, SPDES permittees and MS4s, if applicable (MS4 Stormwater Phase II Implementation projects)
- **It is suggested that two (2) courtesy copies** of all materials be sent to the appropriate Regional Division of Water staff as listed on the back of this application form.

Applications should be mailed to:

Attn: Water Quality Improvement Projects
New York State Department of Environmental Conservation
Division of Water,
625 Broadway, 4th Floor
Albany, N.Y. 12233- 3507

For assistance with applications, contact:

DEC Regional Office, Division of Water
(See page 21 for contact names and phone numbers)

To obtain a copy of the CWSRF IUP Project Listing Form, contact:

Environmental Facilities Corporation at 518- 402-7433 or toll free (in New York State) at 800-882-9721

For additional copies of this application form or the *Round 10 Information for Applicants* package, visit the website at <http://www.dec.ny.gov/pubs/56080.html>

or contact: Water Quality Improvement Projects at (518) 402-8267

**APPLICATION MUST BE POST MARKED BY
October 16, 2009**

Please Note:

**We are unable to accept hand-delivered applications,
facsimile or electronic applications.**

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Application Completion Checklist

A complete application consists of the following:

- Cover letter requesting WQIP funding on letterhead of the eligible applicant.
- **1** original double sided, **complete** unbound application form.
- **2** copies of the **complete** original application endorsed by the authorized representative.
- 8 ½ x 11 map, to scale showing the location of the project.
- Copy of enforcement instrument, if applicable.
- One page Waterbody Data Sheet form DEC's Priority Waterbodies List (PWL: <http://www.dec.ny.gov/chemical/36730.html>)
- Letters of intent from cooperating municipalities, SPDES permittees and MS4s, if applicable (MS4 Stormwater Phase II Implementation projects).
- **2** courtesy copies sent to the appropriate Division of Water staff listed on the back of the application form.

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For DEC Use Only: Type: _____ Region: _____ Project #: _____

2009 Water Quality Improvement Projects Round 10 Application for State Assistance Payments

Part A – Applicant Information:

WQIP Applicant: _____

Federal I.D. Number: _____

Charities Number (Not-for-Profit only): _____

Applicant Contact Information:

Primary Contact Information (if not the same as Applicant Contact):

Name of Applicant Contact Title

Name of Other Contact Title

Mailing Address

Mailing Address

City, State, Zip Code

City, State, Zip Code

() _____ () _____
Phone Number Fax

() _____ () _____
Phone Number Fax

Part B – Project Information:

Project Name: _____

Project Type:

- Municipal Wastewater Treatment Improvement for Cities and Hardship Communities
- Municipal Wastewater Treatment Improvement
- Municipal Wastewater Treatment Improvement for Combined Sewer Overflows (CSO) and Sanitary Sewer Overflows (SSO)
- Statewide Nonagricultural Nonpoint Source Abatement and Control Projects
- Nonagricultural Nonpoint Source Abatement and Control Projects in Coastal Areas Focusing on Addressing Nitrogen and/or Pathogens
- Municipal Separate Storm Sewer Systems (MS4s) Phase II Stormwater Implementation
- Water Quality Management
- Aquatic Habitat Restoration

For DEC Use Only: Type: _____ Region: _____ Project #: _____

Part B – Continued:

Project Location

Project Location: Provide the street address of the proposed project. (Also, include an 8.5 x 11 map):

County(ies): _____

Latitude and Longitude: _____° _____' _____"
_____° _____' _____"

11-digit Hydrologic Unit Code (HUC): _____

(The 11-digit HUC code can be found on the Priorities Waterbodies List Sheet that is requested as an attachment to this application).

Project Schedule

Proposed Start Date:

Expected Completion Date:

For DEC Use Only: Type: _____ Region: _____ Project #: _____

Part B – Continued:
Environmental Justice:

Is the project within an identified Environmental Justice area?

(County maps showing potential Environmental Justice areas can be found on the DEC website at: <http://www.dec.ny.gov/public/899.html>)

Yes

No

If you feel your project is located within a potential EJ area please provide the following:

1) The exact street location where the project is to be implemented (no PO Box).

2) A brief (few sentences) description of how the project will benefit minority or low-income populations that experience disproportionate adverse environmental impacts such as pollution from multiple industrial facilities, sub-standard water quality, concentrated diesel emissions from bus depots or other heavy vehicle traffic, adverse health effects related to environmental impacts (high asthma), lack of access to green benefits such as open space, environmental education or parks, or other such impacts.

Part B – Continued:

Project Description

1. Describe existing conditions and how surface water and/or groundwater quality is being impacted and identify the waterbody being affected.
 - *Attach the Priority Waterbodies List (PWL) Sheet for the identified waterbody. PWL information can be found on the DEC website at: <http://www.dec.ny.gov/chemical/36730.html>*
2. Describe what will be constructed (including dimensions, specifications, etc.), and the approved Best Management Practices (BMPs) and/or Best Available Technologies to be implemented.
 - *Wastewater Treatment Improvement, Combined Sewer Overflow (CSO), or Sanitary Sewer Overflow (SSO) projects involving distinct components or multiple locations, name each and describe each phase or component separately.*
 - *For wastewater projects, provide the location of wastewater discharge.*
 - *For Nonpoint Source projects covering separate waterbodies or watersheds, fill out a separate application for each.*
 - *For Salt Storage Facilities, include the dimensions of the building, the maximum salt/sand storage capacity in tons, the estimated total annual salt and abrasives in tons to be used at that facility. If the proposed building is intended for other wintertime uses, provide the approximate percentage of floor area dedicated to such other uses.*
3. Describe how the project will improve surface water and/or groundwater quality.
4. Describe the expected environmental benefit of the project.
5. Describe what work, if any, has been completed in support of the proposed project. Include, as appropriate, the status of technical reports, conceptual design and construction drawings, plans and specifications, requests for bids, etc.
6. **For Water Quality Management (WQM) projects only:** List annual report(s) that will be completed.

For DEC Use Only: Type: _____ Region: _____ Project #: _____

Part B – Continued:
Coordinated Approach:

- Explain how the project contributes to a comprehensive and coordinated approach to solving water quality impairments and/or restoring aquatic habitat. *Include a brief description of how the project is consistent with water quality policies or recommendations in other plans (e.g., County Water Quality Strategy; an approved Watershed Management Plan; Local Waterfront Revitalization Program; NYS Coastal Nonpoint Pollution Control Program; DEC approved species or habitat management plan or project; and/or New York State's Open Space Conservation Plan).*

Part C - Project Readiness:

Status of Permits

1. List the necessary State and Federal permits and approvals that will be needed for the project.

Type of Permit/Approval	Responsible Agency	Date Permit Application was Submitted	Have the permits/approvals been issued? (Yes/No)	Date permits/approvals issued

Enforcement Status

1. Is the community under enforcement (e.g. consent order) to construct/implement this project?
2. If the community is under enforcement, **attach** a copy of the enforcement instrument.

Status of Land Ownership

If an easement or permission to use or restore the project site is needed, provide documentation of that permission.

For DEC Use Only: Type: _____ Region: _____ Project #: _____

State Environmental Quality Review (SEQR)

- What is the SEQR classification for the project? Type I _____ Unlisted _____ Type II _____
(If your project is a Type II, you have completed the SEQR review. Go to Part D)

- Has the environmental review/SEQR process been commenced? Yes _____ No _____
(e.g. has an Environmental Assessment Form, Part 1, been completed?)

If YES, provide the date of Environmental Assessment Form (EAF), Part 1, completion: _____

- Has a lead agency been established? Yes _____ No _____
If YES, provide the name of the lead agency: _____
and the date the agency was established: _____

- Has a determination of significance been made by the lead agency? Yes _____ No _____

Positive Declaration: _____ Negative Declaration: _____
(If a negative declaration, provide the date the determination was made. You have completed the SEQR review section. Go to Part D.)

- If a positive declaration was issued, has the Draft Environmental Impact Statement (DEIS) been accepted?
Yes _____, Date: _____ No _____

- Has the Final Environmental Impact Statement (FEIS) been accepted? Yes _____, Date: _____ No _____

- Have Findings been prepared? Yes _____, Date: _____ No _____

Part D - DEC Priority Initiatives:

Specify how the proposed project addresses Energy Efficiency and/or Smart Growth principles.

For DEC Use Only: Type: _____ Region: _____ Project #: _____

Part E and Part F are only required with Wastewater Treatment Improvement, Combined Sewer Overflow and Sanitary Sewer Overflow projects.

Part E - Clean Water State Revolving Fund (CWSRF) information:

Existing Clean Water State Revolving Loan

- | | | | |
|----|---|-----|----|
| 1. | Applicant has, or will, apply for a short term loan: | Yes | No |
| | Loan Fund Project Number: | | |
| 2. | Applicant has, or will, apply for a long term loan: | Yes | No |
| | Loan Fund Project Number | | |

Part F - Hardship Information:

If you are applying under the Municipal Wastewater Treatment Improvement for Cities and Hardship Communities category please provide the following information

1. Does the applicant have a current Hardship Determination with the New York State Environmental Facilities Corporation (NYSEFC)?

___ Yes, Attach Hardship Determination.

___ No (Please complete the NYSEFC Financial Hardship Application. The Hardship Policy, as well as the application, can be found on the internet at: http://www.nysefc.org/home/index.asp?page=12&dc_id=66)
2. What is the municipal Median Household Income (MHI) per United States Census 2000? If alternative documentation exists, such as, an income survey, include with this application.
3. What is the municipal population per the United States Census 2000?
4. What is the average annual sewer use rate for residential users per residence? (Attach summary documentation of user rate calculation.)
5. Calculate the ratio:

$$\frac{\text{Average annual sewer use rate for residential users per residence}}{\text{Median Household Income (MHI)}} = \underline{\hspace{2cm}}$$

Part G – Project Budget and Other Funding Sources:

Wastewater Treatment Projects

Project Budget : Fill in the proposed budget sheet below. In cases where a project involves multiple components, use a copy of this budget sheet to provide a budget breakdown for each component, or for each geographic area where work will be performed.

Name of Project Component from Part B - Project Description (if applicable):

Expenditure Category	State Funds Requested	Local Match (State or federal grant dollars previously received for the project may not be used for the applicant's "Local Share")	Other Funding Sources (Include previous State funding committed for this project)	Total Project Costs
1. Construction Costs <i>(may not exceed 85% of Total Construction Costs)</i> (i.e., General, HVAC, Electrical, Plumbing, Excavation)				
2. Municipal Services <i>(construction-related costs only)</i> (i.e. payroll for municipal personnel includes fringe benefits & indirect costs)				
3. Nonpersonal Services <i>(construction-related costs only)</i>				
a. Travel				
b. Equipment				
c. Supplies & Materials				
d. Contractual Services <i>(please include 3rd party contractors)</i>				
f. Other				
Total – All Categories				

For DEC Use Only: Type: _____ Region: _____ Project #: _____

NonAgricultural Nonpoint Source and Aquatic Habitat Restoration Projects

Project Budget : Fill in the proposed budget sheet below. In cases where a project involves multiple components, use a copy of this budget sheet to provide a budget breakdown for each component, or for each geographic area where work will be performed.

Name of Project Component from Part B - Project Description(if applicable):

Expenditure Category	State Funds Requested	Local Share (State or federal grant dollars previously received for the project may not be used for the applicant's "Local Share")	Other Funding Sources (Include previous WQIP funding committed for this project)	Total Project Costs
1. Personal Services (i.e. payroll for municipal personnel includes fringe benefits & indirect costs)				
2. Nonpersonal Services				
a. Travel				
b. Equipment				
c. Supplies & materials				
d. Contractual services				
i. Engineering				
ii. Design				
iii. Other				
e. Land acquisition				
f. Other				
3. Consultant/Contractual Services (e.g. engineering/design, legal, fiscal)				
4. Land Acquisition – (can only be used for local match)				
5. Other (please specify)				
Monitoring (AHR Only)				
Total – All Categories				

Other Funding Sources

Funding Sources:

Funding Source	Grant /Loan	Type (Federal, State, Local, Private)	Status of Funding	\$ Amount
USDA - Rural Development				
Office for Community Renewal (CDBG)				
Clean Water SRF Long-Term Loan				
American Recovery and Reinvestment Act (ARRA)				
Other Bond Act Funds (e.g. Parks and Recreation, Brownfields)				
Other Sources – (specify)				
TOTAL				

Use the following to indicate status:

I - Intend to apply to the supplemental or alternative funding source

P -Have applied to the supplemental or alternative funding source, but have not received a commitment

A - Have received a commitment from the supplemental or alternative funding source

For DEC Use Only: Type: _____ Region: _____ Project #: _____

Only Nonagricultural Nonpoint Source and Aquatic Habitat Restoration Projects

Part H - Project Personnel:

Identify the key personnel for the project, including the name, title and qualifications of the Project Manager, the parties responsible for project oversight, the parties responsible for operation and maintenance, and their experience with a similar type of project.

For DEC Use Only: Type: _____ Region: _____ Project #: _____

Part I – Certification:

Certification Form/Signature

I hereby affirm under penalty of perjury that information provided on this form and attached statements and exhibits is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

(Print Name) _____

(Title) _____ of

(Entity) _____

(Date) _____ (Signature) _____

For DEC Use Only: Type: _____ Region: _____ Project #: _____

**This Section is for
Municipal Separate Storm Sewer Systems (MS4s)
Applicants ONLY**

For DEC Use Only: Type: _____ Region: _____ Project #: _____

Part J – MS4 Project Information:

4. Cooperating MS4s:

Number of traditional (counties, cities, towns, villages): _____

Number of non-traditional (school districts and all others): _____

List traditional MS4s:

List non-traditional MS4s:

For DEC Use Only: Type: _____ Region: _____ Project #: _____

5. **Priority Pollutants:** Check which priority pollutants the project targets and whether the pollutant is a major or minor one.

	Major	Minor	Other
Pathogens			
Nutrients			
Silt and sediment			
Phosphorus			
Other: _____			

6. **High Priority Activities:** check which high priority activities are included in the project.

___ 90% or more of regulated MS4s in a county or Urbanized Area working on one or more of the activities for eligible projects:

- Stormwater retrofits
- Local laws
- Sewer Mapping
- Outreach Material
- Other Activities

___ Review and modification of local laws to encourage application of green infrastructure and smart growth principles.

7. Secondary Priority Activities

___ 40% or more of regulated MS4s in a county or Urbanized Area working on activities identified under eligible projects.

- Stormwater retrofits
- Local laws
- Sewer Mapping
- Outreach Material
- Other Activities

For DEC Use Only: Type: _____ Region: _____ Project #: _____

8. MS4 Implementation Project Applicants:

In the space below:

- Identify what work has already been or is being done for/by the municipalities cooperating in this application.

- Identify the grant or funding sources being used, or that have been applied for, to support that work.

- Describe how this project will coordinate with, complement and build upon the previous planned work.

For DEC Use Only: Type: _____ Region: _____ Project #: _____

6. Narrative Description: Briefly describe each component of the proposed project, including the minimum control measure(s) implemented, which cooperating MS4s are participating, the activities taking place, water quality improvement expected and used of the resource protected or restored.

Project Budget and Funding Sources: MS4 Projects

Project Budget : Fill in the proposed budget sheet below. In cases where a project involves multiple components, use a copy of this budget sheet to provide a budget breakdown for each component, or for each geographic area where work will be performed.

Name of Project Component from Part B – Project Description(if applicable):

Expenditure Category	State Funds Requested	Local Match (State or federal grant dollars previously received for the project may not be used for the applicant's "Local Share")	Other Funding Sources (Include previous WQIP funding committed for this project)	Total Project Costs
1. Personal Services				
a. Salaries & wages				
b. Fringe benefits				
c. Indirect & overhead				
2. Nonpersonal Services				
d. Equipment				
e. Supplies & materials				
f. Travel				
3. Consulting & Other Contractual Services <i>(please specify)</i>				
4. Other <i>(please specify)</i>				
Total – All Categories				

For DEC Use Only: Type: _____ Region: _____ Project #: _____

Part K: Regional Water Contacts

Region	Contact	Office	Phone
1	Tony Leung	Stony Brook	(631) 444-0415
2	Selvin Southwell	Long Island City	(718) 482-4881
3	Natalie Browne	White Plains	(914) 428-2505 ext. 354
4	Andrea Dzierwa	Schenectady	(518) 357-2377
5	Bill Wasilauski	Warrensburg	(518) 623-1200
6	Steve Botsford	Watertown	(315) 785-2513
7	Jim Burke	Syracuse	(315) 426-7500
	Scott Cook	Syracuse	(315) 426-7502
8	Dixon Rollins	Avon	(585) 226-5468
	Nancy Rice	Avon	(585) 226-5453
9	Gerry Palumbo	Buffalo	(716) 851-7070

DEC Regions

