



**CATEGORICAL EXCLUSION (CE) REQUEST
WASTEWATER PROJECTS**

SECTION I – FUNDING SOURCE(S):

- 1. Project name:
- 2. Funding: CWSRF ARC ARPA
State Fiscal Recovery Fund Other: _____
- 3. Loan/Grant number:
(from agency administering the loan/grant)
- 4. Anticipated loan/grant amount:

SECTION II – LOAN/GRANT APPLICANT:

- 1. Name of municipality, county, etc. requesting the loan/grant:
- 2. Street address/P.O. Box:
- 3. City: 4. State: 5. Zip: 6. County:
- 7. Contact person:
- 8. Title:
- 9. Phone Number:
- 10. Email:

SECTION III – PROJECT ENGINEER:

- 1. Firm name:
- 2. Street address:
- 3. City: 4. State: 5. Zip:
- 6. Contact person:
- 7. Phone number:
- 8. Email:

SECTION IV – DOCUMENTS NEEDED:

- 1. Provide map showing project location and including project coordinates.
- 2. Provide project description/preliminary engineering report
- 3. Provide a copy of any correspondence sent and/or received from other State agencies (if any)