**Notice of No-Significant Impact (NONSI) Request**

**Wastewater Projects**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **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 a SRF Planning Document | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **3.** | | Provide proof of advertisement, public meeting minutes, and comments received during the meeting (if any) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **4.** | | Provide a copy of any correspondence sent and/or received from other State agencies (if any) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |