

Application for Federal Assistance SF-424

Version 02

*1. Type of Submission:

- Preapplication
- Application
- Changed/Corrected Application

*2. Type of Application:

- New
- Continuation
- Revision

* If Revision, select appropriate letter(s)

*Other (Specify)

3. Date Received:

4. Applicant Identifier:

1-62-600-1445-D

5a. Federal Entity Identifier:

*5b. Federal Award Identifier:

State Use Only:

6. Date Received by State:

7. State Application Identifier:

8. APPLICANT INFORMATION:

*a. Legal Name: State of Tennessee Department of Environment and Conservation

*b. Employer/Taxpayer Identification Number (EIN/TIN):

62-6001445

*c. Organizational DUNS:

87-835-5437

d. Address:

*Street 1: 401 Church Street

Street 2: 4th Floor L & C Tower

*City: Nashville

County: Davidson

*State: Tennessee

Province: _____

*Country: USA

*Zip / Postal Code: 37243

e. Organizational Unit:

Department Name:

Department of Environment and Conservation

Division Name:

Division of Underground Storage Tanks

f. Name and contact information of person to be contacted on matters involving this application:

Prefix: _____ *First Name: Stanley

Middle Name: R.

*Last Name: Boyd

Suffix: _____

Title: Director

Organizational Affiliation:

TDEC - Division of Underground Storage Tanks

*Telephone Number: 615-532-0945

Fax Number:

*Email: Stan.Boyd@tn.gov

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***9. Type of Applicant 1: Select Applicant Type:**

A.State Government

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

*Other (Specify)

***10 Name of Federal Agency:**

Environmental Protection Agency, Region 4

11. Catalog of Federal Domestic Assistance Number:

66.805

CFDA Title:

ARRA Leaking Underground Storage Tank Trust Fund Program

***12 Funding Opportunity Number:**

*Title:

13. Competition Identification Number:

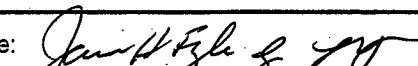
Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

All districts in Tennessee

***15. Descriptive Title of Applicant's Project:**

Provide for the investigation and cleanup of the leaking petroleum underground storage tanks.

Application for Federal Assistance SF-424		Version 02
16. Congressional Districts Of:		
*a. Applicant: TN-005	*b. Program/Project: TN-all	
17. Proposed Project:		
*a. Start Date: 5/15/2009	*b. End Date: 9/30/2011	
18. Estimated Funding (\$):		
*a. Federal	_____	\$4,681,000
*b. Applicant	_____	
*c. State	_____	
*d. Local	_____	
*e. Other	_____	
*f. Program Income	_____	
*g. TOTAL	_____	\$4,681,000
19. Is Application Subject to Review By State Under Executive Order 12372 Process?		
<input checked="" type="checkbox"/> a. This application was made available to the State under the Executive Order 12372 Process for review on <u>5/18/2009</u>		
<input type="checkbox"/> b. Program is subject to E.O. 12372 but has not been selected by the State for review.		
<input type="checkbox"/> c. Program is not covered by E. O. 12372		
20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U. S. Code, Title 218, Section 1001)		
<input checked="" type="checkbox"/> ** I AGREE		
** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions		
Authorized Representative:		
Prefix: _____	*First Name: <u>James</u>	
Middle Name: <u>H.</u>		
*Last Name: <u>Fyke</u>		
Suffix: _____		
*Title: Commissioner		
*Telephone Number: 615-532-0106		Fax Number: _____
* Email: Jim.Fyke@tn.gov		
*Signature of Authorized Representative: 		*Date Signed: <u>4/14/09</u>

Application for Federal Assistance SF-424

Version 02

***Applicant Federal Debt Delinquency Explanation**

The following should contain an explanation if the Applicant organization is delinquent of any Federal Debt.

BUDGET INFORMATION - Non-Construction Programs

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		Total (g)
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	
1. LUST Trust	66.805	\$	0	\$ 4,681,000	0	\$ 4,681,000.00
2.						0.00
3.						0.00
4.						0.00
5. Totals		\$	0	\$ 4,681,000	0	\$ 4,681,000.00

SECTION B - BUDGET CATEGORIES

Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY			Total (5)
	(1) Federal	(2) State	(3)	
a. Personnel	\$	0	0	0.00
b. Fringe Benefits	\$	0	0	0.00
c. Travel	\$	0	0	0.00
d. Equipment	\$	1,260,000	0	\$ 1,260,000.00
e. Supplies	\$	0	0	0.00
f. Contractual	\$	3,421,000	0	\$ 3,421,000.00
g. Construction	\$	0	0	0.00
h. Other	\$	0	0	0.00
i. Total Direct Charges (sum of 6a-6h)	\$	4,681,000	0	\$ 4,681,000.00
j. Indirect Charges	\$	0	0	0.00
k. TOTALS (sum of 6i and 6j)	\$	4,681,000	0	\$ 4,681,000.00
7. Program Income	\$			\$ 0.00

Authorized for Local Reproduction

Standard Form 424A (Rev 7-2009)
Prescribed by OMB Circular A-102

BUDGET JUSTIFICATION WORKSHEET

You must provide a detailed cost justification for the estimated budget amounts reflected in Section B of your SF-424A application form. This detailed information will enable the EPA project officer to perform the required analysis to determine if the costs are reasonable and necessary. You may use the following format or a format of your choice to provide this information.

[NOTE: Please indicate any pre-award costs with a star (*).]

a. PERSONNEL

POSITION	NUMBER	SALARY	WORK YEARS	AMOUNT
a. PERSONNEL TOTAL	0	\$ 0	0	\$ 0

b. FRINGE BENEFITS

BASE	\$ 0
RATE	X 30%
b. FRINGE BENEFITS TOTAL	\$ 0

c. TRAVEL

<p>If the grant is not for a continuing environmental program or if travel is not well documented in the work plan, provide a breakdown of the number of trips, destinations, number of travelers, etc. to document estimated travel costs.</p>
<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
<p>c. TRAVEL TOTAL: \$ 0</p>

OBJECT CLASS CATEGORIES WORKSHEET

d. EQUIPMENT

Tangible, non-expendable, personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit. Please list equipment items (i.e., vehicles, boats, etc.) and provide adequate detail to enable the EPA project officer to make an eligibility determination and to verify cost. For "equipment" with a cost of less than \$5,000 per unit, list under supplies.

ITEM	NUMBER	COST PER UNIT	TOTAL
Eighteen (18) dual phase extraction corrective action systems to be used to remediate petroleum contamination at fifteen (15) LUST Trust sites in Tennessee. TDEC currently has a contract, won thru the bidding process, with MK Environmental, to build and deliver corrective action systems to approved leaking underground storage tank sites.	18	\$ 70,000	\$ 1,260,000
d. EQUIPMENT TOTAL:			\$ 1,260,000

e. SUPPLIES

List by groups (as appropriate), such as office supplies, lab supplies, field supplies. If the cost for a particular group is over \$50,000, please provide a list of the more costly items or subsets.

e. SUPPLIES TOTAL	\$ 0

OBJECT CLASS CATEGORIES WORKSHEET

f. CONTRACTUAL

List each planned contract and the type of services/project activity to be procured. Agreements/contracts with other governmental agencies (state, local or Federal) should be listed under category h. OTHER.	
TDEC currently has contracts with three (3) UST corrective action contractors.	\$ 3,421,000
The contracts run through 11/30/2011.	
f. CONTRACTUAL TOTAL	\$ 3,421,000

g. CONSTRUCTION (N/A)

h. OTHER

List other items that would not be appropriately included elsewhere, such as costs for maintenance, operations, repairs, motor pools, rental, training, publication, and printing, and Intergovernmental Agreements	
h. OTHER TOTAL	\$ 0

i. TOTAL DIRECT COSTS: (Sum of categories A through H)	\$ 4,681,000
j. INDIRECT COSTS: \$0 (RATE: 19.93%)	\$ 0
k. TOTAL PROPOSED COSTS: (Sum of categories I through J)	\$ 4,681,000
FEDERAL FUNDS REQUESTED:	
<u>100%</u>	\$ 4,681,000
RECIPIENT SHARE OF TOTAL PROPOSED COSTS:	
<u>0%</u>	\$ 0

ASSURANCES - NON-CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- | | |
|--|---|
| <ol style="list-style-type: none"> 1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application. 2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives. 3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. 4. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. 5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F). 6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), which prohibits discrimination on the | <ol style="list-style-type: none"> basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VII of the Civil Rights Act of 1968 (42 U.S.C. 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application. 7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases. 8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds. |
|--|---|



KEY CONTACTS FORM

Authorized Representative: *Original awards and amendments will be sent to this individual for review and acceptance, unless otherwise indicated.*

Name: **James H. Fyke**
 Title: **Commissioner**
 Complete Address: **Tennessee Department of Environment and Conservation**
401 Church Street
1st Floor L & C Annex
Nashville, Tennessee 37243
 Phone Number: **(615) 532-0106**
 E-Mail Address: **Jim.Fyke@tn.gov**

Payee: *Individual authorized to accept payments.*

Name: **Tom Eck**
 Title: **Director, Division of Fiscal Services**
 Mail Address: **401 Church Street**
18th Floor L & C Tower Nashville, Tennessee 37243
 Phone Number: **(615) 532-0290**
 E-Mail Address: **Tom.Eck@tn.gov**

Administrative Contact: *Individual from Sponsored Program Office to contact concerning administrative matters (i.e., indirect cost rate computation, rebudgeting requests etc.)*

Name: **Tom Eck**
 Title: **Director, Division of Fiscal Services**
 Mailing Address: **401 Church Street**
18th Floor L & C Tower Nashville, Tennessee 37243
 Phone Number: **(615) 532-0290**
 FAX Number: **(615) 259-4862**
 E-Mail Address: **Tom.Eck@tn.gov**

Principal Investigator: *Individual responsible for the technical completion of the proposed work.*

Name: **Stanley R. Boyd**
 Title: **Director, Division of Underground Storage Tanks**
 Mailing Address: **401 Church Street**
4th Floor L & C Tower Nashville, Tennessee 37243
 Phone Number: **(615) 532-0945**
 FAX Number: **(615) 532-9759**
 E-Mail Address: **Stan.Boyd@tn.gov**
 Web URL: **www.tn.gov/environment/ust**



ADDITIONAL KEY CONTACTS

(Use as many sheets as needed.)

Major Co-Investigators: *Individual responsible for the completion of major portions of the proposed work.*

Name: **Cynthia H. Greene**
Title: **Environmental Program Manager 2, Division of Underground Storage Tanks**
Mailing Address: **401 Church Street**
4th Floor L & C Tower Nashville, Tennessee 37243
Phone Number: **(615) 532-0945**
FAX Number: **(615) 532-9759**
E-Mail Address: **Cindy.Greene@tn.gov**
Web URL: **www.tn.gov/environment/ust**

Major Co-Investigators: *Individual responsible for the completion of major portions of the proposed work.*

Name: **Susan E. Watts**
Title: **Environmental Specialist 6, Division of Underground Storage Tanks**
Mailing Address: **401 Church Street**
4th Floor L & C Tower Nashville, Tennessee 37243
Phone Number: **(615) 532-0945**
FAX Number: **(615) 532-9759**
E-Mail Address: **Susan.Watts@tn.gov**
Web URL: **www.tn.gov/environment/ust**

Major Co-Investigators: *Individual responsible for the completion of major portions of the proposed work.*

Name: **Geina L. Skinner**
Title: **Environmental Protection Specialist 4, Division of Underground Storage Tanks**
Mailing Address: **401 Church Street**
4th Floor L & C Tower Nashville, Tennessee 37243
Phone Number: **(615) 532-0945**
FAX Number: **(615) 532-9759**
E-Mail Address: **Geina.Skinner@tn.gov**
Web URL: **www.tn.gov/environment/ust**

U.S. Environmental Protection Agency

CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

The prospective participant certifies to the best of its knowledge and belief that it and its principals:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
- (b) Have not within a three year period preceding this proposal been convicted of or had a civil judgement rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- (d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.

I understand that a false statement on this certification may be grounds for rejection of this proposal or termination of the award. In addition, under 18 USC Sec. 1001, a false statement may result in a fine of up to \$10,000 or imprisonment for up to 5 years, or both.

James H. Fyke, Commissioner

Typed Name & Title of Authorized Representative

Signature of Authorized Representative

Date

I am unable to certify to the above statements. My explanation is attached.

ASSURANCES - NON-CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.


PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

Note: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of the project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§ 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 795), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§ 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§ 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. § 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply with the provision of the Hatch Act (5 U.S.C. §§ 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§ 276a-7), the Copeland Act (40 U.S.C. §§ 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§ 327-333), regarding labor standards for federally assisted construction subagreements.

10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplain in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§ 1451 et seq.); (f) conformity of Federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. § 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§ 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.)
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§ 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL 	TITLE Commissioner
APPLICANT ORGANIZATION Tennessee Department of Environment and Conservation	DATE SUBMITTED 4/14/09

United States Environmental Protection Agency
 Washington, DC 20460
 Preaward Compliance Review Report for
 All Applicants Requesting Federal Financial Assistance

FORM Approved
 OMB No. 2090-0014
 Expires 4-30-99

Note: Read instructions on reverse side before completing form.

I. A. Applicant (Name, City, State) State of TN Department of Environment and Conservation, Nashville, TN 37243-0438	B. Recipient (Name, City, State)	C. EPA Project No.
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II. Brief description of proposed project, program or activity.
 Assist the State of Tennessee in Environmental Concerns

III. Are any civil rights lawsuits or complaints pending against applicant and/or recipient?
 If yes, list those complaints and the disposition of each complaint.

Isabella Ford-Charge of Discrimination in Federal District Court-pending.
 Kerrie Mirante-EEOC Charge-Dismissed-She has 90 days from the date she received notification to file a lawsuit to pursue her allegations.

Yes No

IV. Have any civil rights compliance reviews of the applicant and/or recipient been conducted by any Federal agency during the two years prior to this application for activities which would receive EPA assistance?
 If yes, list those compliance reviews and status of each review.

Yes No

V. Is any other Federal financial assistance being applied for or is any other Federal financial assistance being applied to any portion of this project, program or activity?
 If yes, list the other Federal Agency(s), describe the associated work and the dollar amount of assistance.

Yes No

VI. If entire community under the applicant's jurisdiction is not served under the existing facilities/services, or will not be served under the proposed plan, give reasons why.

N/A

VII. Population Characteristics		Number of People
1. A. Population of Entire Service Area	2002 Estimate	5,797,289
B. Minority Population of Entire Service Area		1,275,403
2. A. Population Currently Being Served		
B. Minority Population Currently Being Served		
3. A. Population to be Served by Project, Program or Activity		
B. Minority Population to be Served by Project, Program or Activity		
4. A. Population to Remain Without Service		
B. Minority Population to Remain Without Service		

VIII. Will all new facilities or alterations to existing facilities financed by these funds be designed and constructed to be readily accessible to and usable by handicapped persons?
 If no, explain how a regulatory exception (40 CFR 7.70) applies.

N/A

Yes No

IX. Give the schedule for future projects, programs or activities (or of future plans), by which services will be provided to all beneficiaries within applicant's jurisdiction. If there is no schedule, explain why.

N/A

X. I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

A. Signature of Authorized Official <i>B. Cheryl G. Tol</i>	B. Title of Authorized Official Commissioner	C. Date 8/5/04
--	---	-------------------

For the U.S. Environmental Protection Agency

Approved Disapproved

Authorized EPA Official <i>Freida M. Lockhart</i> <i>Freida M. Lockhart</i>	Date 8/9/04
--	----------------

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

James H. Fyke, Commissioner

TYPED NAME & TITLE OF AUTHORIZED REPRESENTATIVE

James H. Fyke, Commissioner
SIGNATURE OF AUTHORIZED REPRESENTATIVE

4/14/09
DATE

____ I am unable to certify to the above statements. My explanation is attached.