**2020 CDBG WATER PROJECT TECHNICAL INFORMATION**

Project Name:

Applicant Name:

E-mail: Phone:

Engineer Name:

E-mail: Phone:

Project Type:  Source Capacity  Treatment Plant Capacity  Storage Capacity

Water Loss  Pressure  Quality and Operations

Complete the following information for existing and under-construction facilities which relate to the proposed project using the dates of the most recent audit.

This technical application should be sealed by a professional engineer, licensed in Tennessee.

1. **Detailed project description, including condition of existing facilities:**
2. **Description of project location:**
   1. Attachment A: Project Map
3. **Detailed project cost including proposed funding sources:**
4. **Project Schedule:**
5. **Measurement:** Using AWWA Free Water Audit Software results (Use most recent audit):
   1. Non-Revenue Water as percent by cost of operating system (%):
   2. Validity Score:
   3. Do you track water loss on a monthly basis?  Yes  No
   4. How often are master meters hydraulically calibrated?
   5. Attachment B: Monthly water loss data, if available (12 months)
   6. Attachment C: AWWA Free Water Audit Software report
6. **Mapping:**
   1. Is the current water system map up to date?  Yes  No
   2. Date of last revision:
   3. Attachment D: PDF of system map. Identify existing or proposed DMAs or bypass meters if applicable.
7. **Planning/Repair**: Include selected items in detailed project description above.
   1. Does the utility have a leak detection and repair program including:
      1. Locating and Repairing Leaks using a systemized method:  Yes  No

Explain method:

* + 1. Method to isolate and measure flow in sections of the system through District Metered Areas, bypass meters or a comparable method?  Yes  No
    2. Installing/Utilizing software management:  Yes  No

Name of software:

Explanation of how software is used:

* 1. Does the proposed project include:

1. Locating and Repairing Leaks using a systemized method:  Yes  No
2. Method to isolate and measure flow in sections of the system through District Metered Areas, bypass meters or a comparable method?  Yes  No
3. Installing/Utilizing software management:  Yes  No

Name of software:

Explanation of how software will be used:

1. **Problem being addressed (complete only sections a-f that apply to the proposed project):**
   1. Source Capacity

|  |  |  |
| --- | --- | --- |
| Type and Capacity of Source (GPD) | Existing | Proposed |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| Subtotal: |  |  |
| Average Daily Demand (GPD): |  |  |
| Peak Daily Demand (GPD) |  |  |

Average Daily Demand/Existing Source Capacity (%):

1. Water Treatment Plant Capacity

|  |  |  |
| --- | --- | --- |
|  | Existing | Proposed |
| Design Capacity (GPD): |  |  |
| Average Daily Demand (GPD): |  |  |
| Peak Daily Demand (GPD): |  |  |
| Average Daily Pumping Time(hours): |  |  |
| Average Daily Demand/Design Capacity (%): |  |  |

1. Storage Capacity

Total Storage Capacity (MG with clearwell):

Total Distribution Storage Capacity (MG without clearwell):

Total Storage Capacity/Average Daily Demand (%):

1. Pressure

Number of customers:

Number of customers below 20 psi:

Number of customers below 20 psi/Number of customers (%):

1. Water Loss

Water Purchased and/or Produced (MGY):

Total Water Sold (MGY):

Water loss = Water Pumped and/or Produced – Water Sold (MGY):

Water loss/Water pumped (%):

Is the proposed project in an isolated, measured section of the system such as a DMA?  Yes  No If yes, percent water loss in section:

(Based on a minimum of 6 months.)

Quality and Operations

List the categories that best describe your project. Clearly describe how the proposed project will improve the conditions of the selected items, including if the applicant considers this project urgent, high, medium or low priority according to the following descriptions:

Urgent Priority: Problems that are posing health risks now

High Priority: Problems resulting in possible health risk if not corrected

Medium Priority: Problems not posing a health risk but are improvements to the system

Low Priority: Regular maintenance items or issues not affecting water quality

Please check the categories that best describe your project:

Frequent and persistent bacteriological contamination of the water supply posing an immediate health threat

Gross chemical or radiological contamination of the water supply having immediate health impact

Existing facilities are experiencing operational problems due to deterioration of facilities – such problems have resulted in the degradation of water quality or quantity such that the health and wellbeing of water customers are affected. (Requires detailed and/or appropriate documentation demonstrating and immediate threat.)

Continuing MCL and/or SMCL violations

Trihalomethane control techniques

Addition of filtration to unfiltered surface water sources

Presence of carcinogens thought to pose a long term health risk of 1 in 100,000 or higher risk

Existing facilities are experiencing operational problems due to deterioration of facilities – such problems have the potential to result in degradation of water quality or quantity such that the health and wellbeing of water customers may be affected. (Requires detailed documentation of problem.)

Addition of redundancy

Addition of standby power

Upgrading of older facilities not posing a current risk

Control of taste and odor and/or removal of contaminants thought to pose a lower risk

Addition of facilities not affecting water quality or quantity

Regular maintenance items – replacement of equipment

Other

Technical Application Checklist:

Technical application using format above, sealed by a professional engineer licensed in Tennessee

Attachment A: Project Map

Attachment B: Monthly water loss data, if available (12 months)

Attachment C: AWWA Free Water Audit Software report

Attachment D: PDF of system map. Identify existing or proposed DMAs or bypass meters if applicable.

Attachment E: Engineer’s Opinion of Probable Costs for the proposed project