

PLEASE NOTE THAT THE COMMUNITY DOES NOT HAVE TO BE PERMITTED OR HAVE A SEWER SYSTEM TO FILL OUT THIS SURVEY OR BE ELIGIBLE FOR FUNDING ASSISTANCE.

SECTION 1 – COMMUNITY INFORMATION:

- Write in the **COMMUNITY NAME**.
- Enter the **DATE** the survey was filled out.
- List contact **PHONE** number in case there are questions, or something cannot be read.
- List the person's **NAME & TITLE** that filled out the survey.
- **AWIN** (Assessing Wastewater Infrastructure Needs) **Substantiality Risk** – obtained from the NDEE website at <http://deg.ne.gov/NDEQProg.nsf/OnWeb/AWIN>. Once there, click on the [AWIN Sustainability Risk List](#) link in the middle of the page. Locate your community's name, then in the third column, identify the Sustainability Risk and mark the corresponding box on the CW Needs Survey.
- **NPDES PERMIT ID** – If you have a current wastewater permit, write it here. It is a nine-digit number starting with NE and followed by seven numbers (example: NE1234567).
- List the year in which the **LAST FACILITY PLAN** or **PRELIMINARY ENGINEERING REPORT** was created.
- List the current residential and commercial/industrial sewer base rates and any additional charges, indicating the unit for an additional charge.
- Check the box that corresponds to the **TYPE OF WASTEWATER TREATMENT FACILITY** the community operates (Please note that there are three types of Lagoons).

SECTION 2 – COMPLIANCE: This covers required regulatory activities that may impact wastewater needs. Check the yes or no box that corresponds to your answer. It is all right to check yes if you have been informed that one of these items will be coming/happening in the near future:

- **COMPLIANCE SCHEDULES** found in the National Pollutant Discharge Elimination System (NPDES) permit. It will include specific dates and/or milestones.
- **LETTER OF NON-COMPLIANCE** from NDEE concerning the wastewater treatment facility that would impact future modifications that is unresolved.
- Other enforcement actions may include a **Consent Order, Administrative Orders**, or **REFERRED TO THE ATTORNEY GENERAL** for issues requiring upgrades, modifications, repairs, or other unresolved needs.

SECTION 3 – GENERAL INFORMATION: Check the yes or no box that corresponds to your answer.

- **Project Status** for any projects you may have just completed or are still working on.
- **Community Planning** to let us know if you have a **Sewer Asset Management** or **Capital Improvement Plan**.

SECTION 4 – SEWER CONNECTIONS: Write the number in the appropriate box.

- This number will address how many users **Connections** are receiving service – **Residential** and **Commercial/Industrial**.
- If you do not have any **Cluster Systems** or **Onsite Septic Systems** –leave the boxes blank.

SECTION 5 – CONSIDERATIONS: Check the yes or no box that corresponds to your answer.

- “**Public Health Problem**” refers to the protection from disease, injury, and disability.
- “**Water Quality Problem**” refers to impairment on the receiving water body.
- Is the community interested in **CWSRF Funding**?
- Finally, estimate the time the **Construction Project** will **start**.

SECTION 6 – PROJECT (S): Addresses the type of potential project(s) the community is considering or would like to do in the future.

- Check the yes or no box that helps indicate what type of project the community is considering: **Wastewater Treatment Facility** and/or **Sanitary Sewer, Non-Point Source Control and/or Storm Sewer Collection**, or a **Green Infrastructure** project. Green projects can cover four categories: green infrastructure, water efficiency, energy efficiency, or environmentally innovative. Green projects include infiltration & inflow repairs, water meter installation, or land application of treated wastewater.
- Check yes or no if your community wants an invitation to apply for a CWSRF Planning Grant. A community may use a **Planning Grant** to pay for creating a Preliminary Engineering Report (PER) or Facility Plan (FP) to determine which upgrades are necessary. It is available to communities of fewer than 10,000 people, which have not received a Planning Grant in the past five years. **Please ONLY check yes if your community is very likely to apply if invited.**
- Write the **project description(s)** in the provided space and the **estimated cost** for each project(s). Be sure to add information about the desire to conduct a study or create a Facility Plan/Preliminary Engineering Report. If you need additional space, write it out on a separate piece of paper and include it with your submission.

SECTION 7 – ADDITIONAL INFORMATION:

- Write out any additional Information regarding engineering that was done previously.

SECTION 8 – LOCAL OFFICIAL’S CERTIFICATION:

- This is where the local official must fill out their **name** – printed & signature.
- Enter an **email** address for the official that signed the survey.
- Write in the **date** the survey was signed; and
- The **title** of the official that signed the survey.

SECTION 9 – PREPARED BY: If the community received help from a consultant or an engineer to fill out the survey, this is where their information should be provided.

- The Consultant/Engineer should fill out their **name** – printed & signature.
- Enter their work **email** address.
- Write in the **date** the survey was signed by them; and
- The **title** of the consultant/engineer that assisted with the survey.

Thank you!

COMPLETED CW NEEDS SURVEYS **MUST BE POSTMARKED BY** THE DUE DATE OF **JANUARY 15, 2022**, TO:

STATE REVOLVING FUND SECTION, NDEE P.O. Box 98922 LINCOLN, NE 68509-8922

ALTERNATIVELY, E-MAIL IT TO: NDEQ.SRF@NEBRASKA.GOV.

ALL CW NEEDS SURVEYS POSTMARKED AFTER THE DUE DATE WILL BE RANKED WITH ZERO PRIORITY POINTS FOR USE IN THE 2023 NEBRASKA INTENDED USE PLAN (IUP).