

**COMMONWEALTH OF PENNSYLVANIA
BROWNFIELDS FUNDING APPLICATION**

APPLICANT INFORMATION		
Entity Name:		
Address:		
Project Contact	Name:	Title:
	Phone:	Email:
Type of Entity:		
Year Incorporated (if applicable):		
Fiscal Year End:		

PROJECT INFORMATION		
Project Title:		
Project Description:		
List any prior application for Commonwealth funds submitted for this project (include project number, aliases, etc):		
(1)		
(2)		
(3)		
Contacts:		
Sponsoring Municipality	Municipality:	Address:
	Contact:	Title:
	Phone:	County:
	Fax:	Email:
	Letter of Support Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Other Sponsor	Name:	Address:
	Contact:	Title:
	Phone:	County:
	Fax:	Email:
	Letter of Support Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No	

PROJECT INFORMATION		
Other Sponsor	Name:	Address:
	Contact:	Title:
	Phone:	County:
	Fax:	Email:
	Letter of Support Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Engineer/ Consultant	Company:	Address:
	Contact:	Email:
	Phone:	Fax:
Attorney	Firm:	Address:
	Contact:	Email:
	Phone:	Fax:
Financial Advisor	Company:	Address:
	Contact:	Email:
	Phone:	Fax:
Other _____	Company:	Address:
	Contact:	Email:
	Phone:	Fax:

SITE INFORMATION	
Street Address:	
Municipality(ies):	
County:	Acreage:
Tax Parcel Nos.:	
USGS Quadrangle:	
Latitude:	Longitude:
PA House District:	PA Senate District:
Is site located in any of the following:	<input type="checkbox"/> Brownfield <input type="checkbox"/> Grayfield <input type="checkbox"/> Enterprise Zone <input type="checkbox"/> Keystone Opportunity (Expansion) Zone <input type="checkbox"/> Keystone Innovation Zone <input type="checkbox"/> Municipality designated for revitalization

SITE INFORMATION	
Has a site map been provided with this application? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Current Site Use:	
Current Owner(s):	
Current Operator(s):	
Are all current owners and operators participating in this project? If not, please explain.	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Applicant's ownership interest in the site (present or past):	
Existing Permits	Type: _____ ID#: _____
	Type: _____ ID# _____
	Type: _____ ID# _____
Past Use:	
Environmental Assessment(s) Performed:	
Known Contamination:	
Suspected Contamination:	
Water Quality Impact:	
Has a Notice of Intent to Remediate (NIR) been completed?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Planned Future Use:	
Is the site located in an area for which a comprehensive land use plan has been developed?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is the planned future use consistent with the comprehensive plan? (Provide a letter from the appropriate county or regional planning agency in support of response.)	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Has local municipality adopted zoning ordinances consistent with comprehensive plan? (Provide a letter from the appropriate county or regional planning agency in support of response.)	
<input type="checkbox"/> Yes <input type="checkbox"/> No	

SITE INFORMATION

Is planned future use consistent with local zoning? (Provide a letter from the municipality in support of response.)

Yes No

PLANNING CONSULTATION

Date Held:

Attendees:

Name:	Representing:
Phone:	Email:
Name:	Representing:
Phone:	Email:
Name:	Representing:
Phone:	Email:
Name:	Representing:
Phone:	Email:
Name:	Representing:
Phone:	Email:
Name:	Representing:
Phone:	Email:
Name:	Representing:
Phone:	Email:

PROJECT COSTS	AMOUNT	FUNDING SOURCES		
		Commonwealth	Other Public	Private
Assessment:				
Design/Engineering:				
Remediation:				
Infrastructure:				
Sewer				
Drinking Water				
Storm Water				
Other				
Permits:				
Land:				
Buildings:				
Equipment:				
Contingency:				
Administration:				
Legal:				

PROJECT COSTS	AMOUNT	FUNDING SOURCES		
		Commonwealth	Other Public	Private
Financial/Accounting:				
Interest:				
Other:				
Total:				

PROJECT SCHEDULE	Start Date	Complete Date
Assessment		
Design		
Remediation		
Infrastructure		
Redevelopment		
Occupancy		

ECONOMIC BENEFITS					
Total Net New Full-Time Jobs Created:					
Employer:					
Contact:			Title:		
Business Type:			NAICS Code:		
Address:					
Phone:			Email:		
Fax:			Website:		
Current Employment:	Site:	Statewide:	US:	Worldwide:	
Type of New Job Created:			No. of Positions:	Average Wage:	
(1)					
(2)					
(3)					
Employer:					
Contact:			Title:		
Business Type:			NAICS Code:		
Address:					
Phone:			Email:		
Fax:			Website:		
Current Employment:	Site:	Statewide:	US:	Worldwide:	
Type of New Job Created:			No. of Positions:	Average Wage:	
(1)					

ECONOMIC BENEFITS		
(2)		
(3)		
Other Economic Benefits:		
Are the infrastructure improvements included in the project necessary for the efficient and cost-effective operation of a private company?		<input type="checkbox"/> Yes <input type="checkbox"/> No

OTHER REQUIREMENTS	
Is applicant willing to require compliance with nondiscrimination and equal employment opportunity requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is applicant willing to provide security to cover a low-interest loan from the Commonwealth? Explain.	<input type="checkbox"/> Yes <input type="checkbox"/> No

AGENCY INFORMATION	
PENNVEST Project ID #:	
PENNVEST Project Specialist:	
DEP eFACTS Primary Facility #:	
DEP eFACTS Activity #:	
DEP Contact:	
DCED Project ID #:	
DCED Contact:	