



## Idaho Department of Environmental Quality

### Drinking Water Emerging Contaminants

### Letter of Interest and Rating Form

#### Fiscal Year 2025

### Section I. Project Information

This funding is intended to address emerging contaminants in drinking water with a preference for addressing per- and poly-fluoroalkyl substances (PFAS) in accordance with the Bipartisan Infrastructure Law. DEQ is also providing funding for contaminants on any of EPA’s contaminant candidate lists that do not have a maximum contaminant level. Contaminants with established action levels or maximum contaminant levels, except PFAS, are not eligible for this funding but are eligible under the Drinking Water State Revolving Fund.

Eligible projects include planning, design, and construction of or upgrades to treatment facilities; new source development; consolidation with another system; infrastructure for pilot testing treatment alternatives; and development of new community systems for individuals with private wells or surface water intakes.

Provide complete and accurate answers to receive the highest possible rating for your project. When possible, DEQ recommends that you work closely with your engineering consultant to complete this form. If you would like help completing this form, please contact DEQ at [grants.loans@deg.idaho.gov](mailto:grants.loans@deg.idaho.gov) to discuss technical assistance opportunities.

#### A. System Identification

Public Water System Number:		
System Name:		
System Address:		
City:	State:	Zip:
Is the system located wholly within incorporated city limits?		Yes    No
What City?	County:	
System Phone:	System Email:	
Population Served:	Owner’s Name:	
Owner’s Phone:	System Ownership:	For Profit    Not-for-Profit
Name/Title of System contact (if different from owner):		
Contact’s Address:		
City:	State:	Zip:
Contact’s Phone:	Contact’s Email:	
Do you have a predesignated, licensed, designated responsible charge operator for your system as described in the “Idaho Rules for Public Drinking Water Systems” ( <a href="#">IDAPA 58.01.08.554</a> )?		
		Yes    No
Name: _____		License Number: _____

<b>B. Project Readiness</b>	
Determine your community's readiness for Drinking Water State Revolving Fund (SRF) funding assistance by answering the following questions:	
1.	Is your system current with all payments of fines, State Revolving Fund loans, penalties or fee assessments due to the DEQ? <span style="float: right;">Yes    No</span>
2.	<p>Has your community completed a DEQ-approved drinking water facility plan (with a final environmental determination) in the last five years? <span style="float: right;">Yes    No</span></p> <p>Date of approval:</p> <p><b>OR</b></p> <p>Is your community already in the process of developing a new planning document and environmental determination that will be completed and submitted to the DEQ for approval by December 31, 2024? <span style="float: right;">Yes    No</span></p> <p><b>OR</b></p> <p>Are you proposing this loan to finance a planning document and environmental determination? <span style="float: right;">Yes    No</span></p>
3.	Is the primary purpose of the project to address emerging contaminants? <span style="float: right;">Yes    No</span>
<p><b>If NO to questions 1, 2 or 3, <u>do not complete or submit this form to DEQ.</u></b> If you are interested in receiving a drinking water planning grant, fill out the Drinking Water Planning Grant Letter of Interest (LOI) form.</p>	
<p><b>If YES to questions 1, 2 and 3, Complete all applicable sections of this form.</b></p>	
4.	When will your project be ready to begin design? _____
5.	<p>When will your project be ready to begin construction? _____</p> <p>Provide a brief explanation of the project timeline:</p>
6.	<p>Was the planning document funded by the system or by an agency other than DEQ? <span style="float: right;">Yes    No</span></p> <p>Provide a brief explanation of the project timeline:</p>
<p><b>If YES, the planning document may need modifications to meet SRF Program requirements. See Outline and Checklist for Planning Document found in the Customer Handbook at <a href="http://www.deq.idaho.gov/SRF">www.deq.idaho.gov/SRF</a>.</b></p>	

7.	Has a final environmental determination been issued? <span style="float: right;">Yes    No</span>		
	<b>IF YES</b> , provide the environmental document title (if separate from the planning document), date submitted to the DEQ, and DEQ environmental determination date:		
	Title: _____		
	Submittal Date: _____	Determination date: _____	
<b>C. Project Costs</b>			
1.	Project funding requested from DEQ's Emerging Contaminant Funds:	\$ _____	
	Project funding from other sources:	\$ _____	
	Estimated total project cost:	\$ _____	
2.	Briefly describe or attach indicators or actions reflecting the community's interest or readiness to proceed on this project (e.g., minutes from public hearings):		
3.	If you have already contacted an engineer about your project, indicate your status and provide contact information for the engineer (or firm):		
	<input type="checkbox"/> Discussed with engineer <input type="checkbox"/> Obtained quote from engineer <input type="checkbox"/> Signed contract with engineer		
	Engineer: _____		
	Address: _____		
	City: _____	State: _____	Zip: _____
	Phone: _____	Fax: _____	
Email: _____			

**Continue to Section II. Integrated Priority Rating System**

## Section II. Integrated Priority Rating System

Answer the questions below and provide the requested documentation. Applicants or their consultants are encouraged to contact DEQ before the submittal deadline for assistance in answering the questions. **Rating will be done on the basis of the answers and documentation provided.**

### A. Project Description

1.	The project will address per- and poly-fluoroalkyl substances (PFAS). <i>25 points</i> Description:
2.	The project will address cyanotoxins. See more information at <a href="#">EPA fact sheet</a> . <i>15 points</i> Description:  <b>Provide documentation of the results for your water system using EPA-certified methods.</b>
3.	The project will address a contaminant or contaminants on any of the <a href="#">EPA Contaminant Candidate Lists</a> other than PFAS or cyanotoxins listed above. <i>5 points</i> Identify the contaminants: _____  <b>Provide documentation of the results for your water system using EPA-certified methods.</b>
4.	The contaminant listed above has a published EPA health advisory. <i>10 points</i>
5.	Your production sources are impacted by contaminants listed above such that the system is unable to meet maximum day demands with these sources. <i>10 points</i> Description:

B. Affordability / Disadvantaged Status																			
<p><u><a href="#">IDAPA 58.01.12.020.02.f. Affordability</a></u>. Points shall be given when current system user charges exceed state affordability guidelines. Up to 10 points</p>																			
<p>Provide information for Section II.F. If you qualify as a disadvantaged community, you will receive 10 points.</p>																			
1.	How many equivalent dwelling unit (EDU) connections does your system serve? _____																		
2.	<p>What is the current average user rate? \$/month/EDU _____</p> <p>Type of rate structure:      Flat fee      Consumptive Use      Other: _____</p>																		
3.	What is the most recent date that user rates have been increased:																		
4.	<p>Median household income. Instructions:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%;">a.</td> <td>Go to <a href="https://censusreporter.org/locate/">https://censusreporter.org/locate/</a>.</td> </tr> <tr> <td>b.</td> <td>Either select "Use your current location" or enter an address for any residence or location in your community and select the choice provided by the application.</td> </tr> <tr> <td>c.</td> <td>Hover your cursor over each item in the list on the left of the screen and view the corresponding green area represented on the map.</td> </tr> <tr> <td>d.</td> <td>Click on the smallest and most representative area for your community either on the map or in the list for the data.</td> </tr> <tr> <td>e.</td> <td>Scroll down to economics and enter the median household income (MHI): \$ _____ <b>If there was N/A for median income, choose the next largest area from the list.)</b></td> </tr> <tr> <td>f.</td> <td>Provide the data to the DEQ. Either take a screenshot of the data (Label attached documents as "Section II.F, part number(s)") and include it with your application or provide the citation (scroll to the bottom of the page and copy/paste the information after "Citation") here:</td> </tr> <tr> <td>g.</td> <td> <p>Does the income level generally reflect your community's average MHI?</p> <p><b>Yes</b>, it is generally representative of the community.</p> <p><b>No</b>, contact the DEQ grant and loan program (<a href="mailto:grants.loans@deq.idaho.gov">grants.loans@deq.idaho.gov</a>) for other means to evaluate your community's MHI.</p> </td> </tr> <tr> <td>h.</td> <td> <p>If the annual residence user does not exceed 2% of the community's MHI, but exceeds 1.5% of the community's MHI, you can still qualify if the community's unemployment rate exceeds the statewide average and the community's population is decreasing.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%;">i.</td> <td>Provide evidence from the U.S. Census Bureau of Labor Statistics, or Idaho Department of Labor showing the area's unemployment rate and</td> </tr> </table> </td> </tr> </table>	a.	Go to <a href="https://censusreporter.org/locate/">https://censusreporter.org/locate/</a> .	b.	Either select "Use your current location" or enter an address for any residence or location in your community and select the choice provided by the application.	c.	Hover your cursor over each item in the list on the left of the screen and view the corresponding green area represented on the map.	d.	Click on the smallest and most representative area for your community either on the map or in the list for the data.	e.	Scroll down to economics and enter the median household income (MHI): \$ _____ <b>If there was N/A for median income, choose the next largest area from the list.)</b>	f.	Provide the data to the DEQ. Either take a screenshot of the data (Label attached documents as "Section II.F, part number(s)") and include it with your application or provide the citation (scroll to the bottom of the page and copy/paste the information after "Citation") here:	g.	<p>Does the income level generally reflect your community's average MHI?</p> <p><b>Yes</b>, it is generally representative of the community.</p> <p><b>No</b>, contact the DEQ grant and loan program (<a href="mailto:grants.loans@deq.idaho.gov">grants.loans@deq.idaho.gov</a>) for other means to evaluate your community's MHI.</p>	h.	<p>If the annual residence user does not exceed 2% of the community's MHI, but exceeds 1.5% of the community's MHI, you can still qualify if the community's unemployment rate exceeds the statewide average and the community's population is decreasing.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%;">i.</td> <td>Provide evidence from the U.S. Census Bureau of Labor Statistics, or Idaho Department of Labor showing the area's unemployment rate and</td> </tr> </table>	i.	Provide evidence from the U.S. Census Bureau of Labor Statistics, or Idaho Department of Labor showing the area's unemployment rate and
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		ii.	Provide evidence of a declining population such as comparing current census data to previous census data or using the population percent change from the U.S. Census QuickFacts.
<b>Label attached documents as “Section II.F, part number(s)”.</b>			
<b>Note:</b> <i>If the annual residential user rates do not exceed 2% of the community’s MHI, but exceed 1.5% of the community’s MHI, you can still qualify if the community’s unemployment rate exceeds the statewide average and the community’s population is decreasing.</i>			

**Continue to Section III. Authorized Submitter**

Section III. Authorized Submitter			
Are you willing to allow us to share your LOI with other federal funding agencies?		Yes	No
<b>I understand that if awarded funding, costs incurred prior to the award are not eligible for reimbursement unless a written request and justification are submitted to and approved by DEQ.</b>			
I certify that, to the best of my knowledge, all information provided here is valid and correct:			
Submitter Name:		Title:	
Company:		Date:	
If the submitter is different from the system contact, does the submitter have the authority to submit this LOI on behalf of the system contact?		N/A	Yes No

**Attach to your Drinking Water Letter of Interest (if applicable)**

**AND**

**Return completed form by January 12, 2024, to:**

Idaho Department of Environmental Quality

Attn: LaDonn Kaylor

1410 North Hilton St.

Boise, ID 83706

[grants.loans@deq.idaho.gov](mailto:grants.loans@deq.idaho.gov)

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