

Department of Ecology WASTE 2 RESOURCES PROGRAM

Application for Remedial Action Grant

	PART I - GE	ENERAL IN	IFORMATION			
1. APPLICANT INFO	ORMATION					
Name	ort of Skagit	Addres	S 15400 Diverset Duisi T	20. 7 240		
	or or orașic		_15400 Airport Drive, I (Street or PO Box No.)	20 Box 348		
Dept/Div			Burlington, WA 98233			
0.5	0001050		(Town/City, State and ZIP+4)			
Tax ID Number 91	-0784860	•				
Applicant Type (Che			_			
☐ City [County	ose District)	Other (Specify)			
2. PROJECT INFOR	RMATION					
SITE NAME NO	orthern State Hospital	E RANK	N/A FACILITY SITE I	D 65415931 WRIA		
3. PROJECT COST		4. PRO	JECT PERIOD			
A. Total Project	Costs \$325,000	Fror	n March, 2014	(Date of earliest costs incurred)		
B. Total Grant El	igible Costs \$325,000	То	December, 2014	(Projected completion date)		
C. Total Grant or (State Share)	Loan Requested \$200,000		e Match Percent Requested bical is 50%)	60%		
5. AGREEMENT RE						
processor;						
Independent.	Remedial Action Grant- VCP #		Oversight Remedial Action Gr	rant		
☐ Safe Drinking	Water Action Grant Area	awide Groun	dwater Contamination Grant	☐ Derelict Vessel Grant		
Standard or Extraordinary Financial Hardship Loan						
X Integrated Planning Grant ☐ Other						
5A. For Oversight Remedial Action Grants: Project objectives will include:						
New substant	tial economic development	Habitat resto	pration	☐ Public recreation		
6. INVESTMENT IN ENVIRONMENT (Environmental benefits resulting from the proposed project)						
☐ Restore or Protect Designated Beneficial Uses						
☐ Eliminate a Public Health Emergency						
☐ Other * Note: See Appendix 5 of RA Grant Guídelines for assistance.						
Does the preject address a set of the file						
7. PROJECT LOCAT	IION		affect the Puget Sound?			
County	Skagit County		LAT/LONG	48.530730, -122.208771		
Street Address	24909 Hub Drive		Legislative District(s)	District 39		
	Sedro-Woolley , WA 98284		Congressional District (s)	District 1		

If you need this publication in another format, please call the Waste 2 Resources Program at (360) 407-6900. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

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8. CLEANUP A	GREEMENT ASSOCIATED WITH THE PI	ROJECT AND ITS ESTIMATED	COMPLETION DATE		
☐ Consent Decree, Ecology/EPA ☐ Agreed Ord		reed Order, Ecology	Administrative Order, EPA		
☐ Prospective Purchaser Agreement ☐ Enforceme		orcement Order, Ecology/EPA	Other		
	e: If your agreement is final, provide with your application. Official Document		nber and include a signed copy of the		
questions about	PROJECT MANAGER (For technical the site or project. Ecology Site Manager's This is a local government contact.)		I CONTACT (For questions about payment Grant Manager's primary contact. This is a contact.)		
Name	Patricia H. Botsford-Martin	Name			
Title	Executive Director, Port of Skag:	it Title			
Address	15400 Airport Drive, PO Box 348	Address			
	Burlington, WA 98233				
Telephone (Include Area	Code)	Telephone (Include Area Code)			
Email Address patsym@portofskagit.com Email Address					
11. Authorized	signatory for grant – Who is authorized	by your organization to sign g	rant agreements?		
Signatory Name	Patricia H. Botsford-Mart	in .	·		
Signatory Title:	Executive Director, Port	of Skagit			
Please Note: So a city or county o	me recipients require a special signatory p council, or port district. I require a specia	age for their agreements that allow	ws signature approval by multiple members of		
12. OTHER REG	QUIRED INFORMATION. The following in necessary to submit all of this at the tin	nformation is needed prior to do ne of application. (Attach separ	rafting your grant agreement. For Oversight ately or email to the grant manager.)		
• 10 Year	r Grant Forecast (oversight grants)- For	recast template: <u>http://www.ecy</u>	.wa.gov/biblio/ecy070352.html		
• Spendi	ng Plan (oversight, integrated planning	ı)- Spending plan template: <u>htt</u> ı	o://www.ecy.wa.gov/biblio/ecy070108.html		
Copy o	f cleanup agreement, e.g. agreed order,	consent decree, AOC (oversig	ht grants)		
Copy of the No Further Action letter (independent remedial action grants)					
Copy of final cleanup report (independent remedial action grants)					
Copies of all invoices (independent remedial action grants)					
 Copy of any special signatory pages required for your agreement (all agreements/recipient dependent) 					

PART II – PROJECT AND BUDGET INFORMATION SECTION A – Narrative Statement

Attach detailed site information on separate page. This should include:

- Short history/background of the site (site location, past and current site uses, ownership, contaminants of concern)
- Historic or current cleanup agreements relevant to the site (state or federal, consent decrees, agreed orders)
- Site's current status
- Overview / summary of the remedial activities performed in the past and those planned for the future.
- Outcomes expected, including planned land use
- · Any existing agreements with consultants that will be grant funded
- Any existing scope of work approved by Ecology

SECTION B - Proposed Scope Of Work

Please Note: Provide specific details for each activity you want considered for grant funding.

~The grant manager approves costs during the payment process~

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TASK NAME AND ACTIVITIES DESCRIPTION Your Grant Manager may request more detail Attach additional pages and add tasks as needed	TOTAL PROJECT COST	AMOUNT REQUESTED FROM ECOLOGY	AMOUNT/ SOURCE OF OTHER FUNDING	ESTIMATED START DATE	ESTIMATED COMPLETION DATE
Grant and Project Administration (Recipient staff costs required to manage the grant and project.)	-				
 Assessment & Investigations (Costs incurred planning and implementing site investigations, including Remedial Investigations (RI).) 	\$95,000	\$57,500	\$37,500	March 1, 2014	Sept 1, 2014
 Feasibility Study (FS) (Costs required to plan and implement the FS and analysis of cleanup alternatives.) 	\$15,000	\$15,000	\$ 0	March 1, 2014	Dec 31, 2014
 Cleanup Actions (Costs required to plan and implement the cleanup actions for the site; this includes the Cleanup Action Plan (CAP).) 					
 Source Control (Costs required to investigate and control the causes of contamination at the site.) 	·				
 Monitoring (Costs of planning and installing systems, and up to one year of long-term monitoring.) 		•			
7. Independent Remedial Actions Actions performed subject to the department's review under the VCP or incorporated as part of the order or decree.	1				
Integrated Planning Grant Activities (Includes planning and public outreach)	\$215,000	\$127,500	\$ 87,500	March 1, 2014	Dec 31, 2014
 Past Costs Costs incurred prior to the signature date on the order/decree. Work that will be approved by Ecology to be incorporated into the order/decree. 	·				
10.Other (describe)	125,000				
				March 1,	Dec 31,
TOTALS	\$325,000	\$200,000	\$125,000	2014	2014

SECTION C – BUDGET FUNDING SOURCE						
CONTRIBUTIONS, MATCH, AND OTHER GRANTS						
Amount and source of any other gran	ts that fund the same ac	tivities	\$ 125,000	Source of funds	Local gov't	
,			\$	Source of funds		
Amount of any contribution from ano	thar natantially liable nor	eu (DLD)	\$ N/A	Source of funds		
Amount of any contribution from ano	ther potentially hable par	ty (FLF)	\$			
				Source of funds		
Amount of anticipated future contribu	itions from other PLPs		\$.N/A	Source of funds		
Financial / Legal Contact regardin	g PLP Contributions and	Insurance Com	npany Settlen	nents		
				·		
Fax						
Email			·			
MATCHING FUNDS BY SOURCE	Amount	Description				
Cash	\$125,000 Port of Skagit, City of Sedro-Woolley, and Skagit County					
General Obligation Bonds	N/A					
Insurance Settlements	N/A					
Local Improvement District (LID)	N/A				·	
Revenue Bonds	N/A					
Non-Ecology Grants (Identify)	N/A	***************************************				
Other (Describe)	N/A	***************************************		· · · · · · · · · · · · · · · · · · ·	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
TOTAL MATCHING FUNDS	N/A					
	**************************************	ITAN MIR I	AMPRICATION OF			
	PART III — CERTIFICA					
The undersigned representative certifies that the information submitted herewith is true and correct to the best of his/her knowledge and belief, and is authorized to sign and submit this application on behalf of their organization. (Consultants cannot sign or apply on behalf of a local government.)						
The applicant agrees that if a grant is awarded on the basis of this application or any revision or amendment thereof, it will comply with all applicable statutory provisions and with the applicable terms, conditions, and procedures of the Department of Ecology grant regulation Ch. 173-322 WAC, and of the grant agreement.						
The applicant certifies that they understand that the Remedial Action Grant Program Guidelines, Ecology Publication No. 07-07-032, http://www.ecy.wa.gov/biblio/0707032.html , are applicable to any agreement resulting from this application.						
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Patricia H. Botsford-Martin, Executive Director Signature of Authorized Representative Typed Name and Title					· · · · · · · · · · · · · · · · · · ·	
January 10, 2014 (360) 757.0011						
Date		Tele	phone No. (inc	clude area code)		

