



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
CLEAN VESSEL ACT GRANT PROGRAM
CLEAN VESSEL ACT GRANT APPLICATION



The Clean Vessel Act (CVA) Grant Application is an Adobe Acrobat fillable form that allows submission of completed applications via email. [Adobe Reader 8.0 or higher](#) is required to submit the application.

Terms and Conditions

Please review the following terms **before** completing the application form on the next page. **Check boxes indicate additional documentation required to be submitted with the application to be considered complete.** Detailed instructions can be found at the [CVA Program website](#).

Work may not begin until an Agreement is fully executed by DEP and the facility has been formally informed that the project may begin.

Public Access and Fees:

The facility must agree to provide public access to the pumpout equipment, regardless of membership status. Facilities are encouraged to offer pumpout services free of charge. However, should a fee be required to use the pumpout equipment it cannot exceed \$5.00 per vessel pumped, for the life of the executed Agreement, as well as 5 years beyond the Agreement's completion date.

Permits:

Grantees are required to submit copies of applicable permits to the CVA Program in order to receive reimbursement for any permitted activities performed within the scope of the project.

Vendor Registration:

Private businesses and governmental entities must be registered and active with the State of Florida - Department of Management Services, My Florida Marketplace Vendor System. Register at <https://vendor.myfloridamarketplace.com>.

Business Registration:

Private businesses (not applicable to governmental entities) must be registered and active with the State of Florida – Division of Corporations/Sunbiz. If applicable, register/activate the Fictitious Name being used. Register at: <https://efile.sunbiz.org/onlmenu.html>.

W-9 Form and Substitute W-9 Filing:

Private businesses and government entities are required to submit a copy of their W-9 form with their grant application **and** file the facility's substitute W-9 with My Florida Marketplace. File substitute W-9s at: <https://flvendor.myfloridacfo.com>.

Insurance:

A current Certificate of Insurance that includes the Florida Department of Environmental Protection as an additional insured must be submitted with the grant application submission. Facilities must be insured by carriers licensed in or eligible to do business in Florida, and must maintain applicable Commercial General Liability, Automobile Liability, and Worker's Compensation coverage. See the [CVA Application Supporting Documents](#) webpage for detailed instructions.

Florida government applicants, which are self-funded for liability insurance, may provide an official letter-head, from the city or county CFO confirming the governmental entity as self-insured, as an alternative.

Vendor Quotes:

Two competitive quotes for any purchase of goods or services that exceed \$2,500 and over need to be submitted along with the grant application submission. See the [CVA Application Supporting Documents](#) webpage for detailed instructions on procurement requirements.

- **Allowable Expenses:**

Expenses for permits, site preparation, equipment purchase and installation, renovation, operations, maintenance and repair, sewage hauling, required CVA signage, and educational materials are allowed for reimbursement.

- **Signage:**

The grantee must purchase and display at least one pumpout operation sign with accreditation information and one pumpout symbol sign. Both signs must be posted no later than the time of your final payment submission or before any operations funding is expended, whichever is earlier.

- **DEP District Site Visit:**

DEP District Coordinator may visit the facility to determine if any permits are needed for the proposed project. As well as to ensure the proposed pumpout location allows for proper sewage disposal. This will not be a regulatory inspection, but it must be conducted as a federal grant requirement.

Facility Information

Facility Name:			
Owning Entity:		FEIN:	
Facility Address:			
City:	State:	County:	Zip Code:
Mailing Address (if different):			
City:	State:	County:	Zip Code:
Facility Phone Number:		Facility E-mail Address:	
Facility Contact:		Contact E-mail Address:	
Contact's Title:		Facility Website:	
Facility's coordinates (in decimal degrees)?		Latitude:	Longitude:
Find your facility's coordinates here: http://www.latlong.net/			
Total number of slips currently have at the facility:		Wet:	Dry: Mooring:
Of the total slips, how many are:		Transient:	Dedicated to one Owner:
Name of the common/local waterbody where the facility is located:			
Proposed pumpout projects is for an:		Existing Facility Facility currently under construction	Proposed Facility (<i>Not yet under construction</i>)
Facility Type (check all that apply):		Marina Dockminium Other	Boat Ramp Mooring Field Boatyard Yacht/Boat Club
Is the facility a designated:		Clean Marina Clean Retailer	Clean Boatyard None Resilient Marina
If none, are you interested in learning more about the Clean Marina Program		Yes	No
Is the facility owned/ operated by a self-insured government entity?		Yes	No
Does the facility allow public access to docking and marina services?		Yes	No
Does the facility currently have pumpout equipment?		Yes	No
If yes, was the current equipment purchased through a past CVA grant?		Yes	No
Will the proposed pumpout project be replacing the current equipment?		Yes	No
Does the facility have a State Lands Lease?		Yes	No
If yes, what is the submerged land lease number:			

Project Description

Anticipated project state date:		Anticipated project completion date:		
Requested equipment type (check all that apply):		Stationary Unit Lift Station	Pumpout Vessel Dump Station	Portable Unit Portable Toilet Waste Station
Where on the premises will the pumpout/dumpout be located?		On Dock		On Land
Number of pumpout connections to be installed through this project?				
Disposal method for the proposed pumpout/dumpout/boat sewage?				
Directly to a permitted wastewater treatment facility				
Directly to an on-site sewage treatment system				
Directly to an on-site septic tank				
Into holding tank, then transported to permitted wastewater treatment facility				
Availability of pumpout/dumpout services?		Monday Friday	Tuesday Saturday	Wednesday Sunday Thursday 24 hours a day
Between the hours of:		and		

Estimated Project Budget

See the [Estimated Project Budget](#) page on our website for more information.

Tasks	Category	Total Amount	75% grant	25% Match
Permits	Miscellaneous Expenses			
Site Preparation	Contractual Services			
	Salaries			
Renovation	Contractual Services			
	Salaries			
Equipment Purchase	Equipment Purchase			
Equipment Installation	Contractual Services			
	Salaries			
Operations of Equipment	Contractual Services			
	Salaries			
Maintenance and Repair	Contractual Services			
	Salaries			
	Miscellaneous Expenses			
Sewage Hauling	Contractual Services			
Pumpout Signage	Miscellaneous Expenses			
	Salaries			
Educational and Instructional Materials	Miscellaneous Expenses			
	Total Project Amount 100%			
	Total Grant Award Amount (up to 75%)			
	Total Match Amount (no less than 25%)			

Note: The facility should include estimated hourly rate of pay for all in-house labor costs when calculating any salaries tasks above. Only the *direct* hourly rate of pay for the facility's employees are reimbursable. Thus, the facility **shall not be reimbursed for wage multipliers** (i.e. fringe benefits, overhead, indirect, and/ or general and administrative rates). To request reimbursement for hourly rate of pay, the costs shall be itemized by employee position, hourly rate of pay, and the associated activity using the table below. At its discretion, the Department may request additional supporting documentation.

Hourly Rate of Pay for Grant Reimbursement

See the [Hourly Rate of Pay for Grant Reimbursement](#) page on our website for information.
(Skip this chart if the proposed project's budget does not include in-house labor costs)

Position Title	Rate/Hour	# Hours	Total Salary (automatically calculated)
Example: Operations Worker	\$12.00	150	\$1,800.00

Briefly summarize the proposed project and how grant funds will be used to complete the project.

- If the proposed project is requesting funds for equipment purchase, include pump types, and sizes.
- If the proposed project is requesting funds for any type of piping, list all piping sizes and lengths
- If equipment is being replaced, ensure that the current equipment and proposed equipment are thoroughly described.
- Rough sketches or Engineering Plans are highly encouraged to be submitted with application. Indicate where pumpout systems will be located at the facility.

Example Summary:

ABC Marina plans to install one stationary pumpout to service resident and visiting boaters. The pumpout will be installed on the dock with piping to service each boat slip. The proposed pumpout equipment will be purchased and installed by contractors. All permits will be obtained by the facility before the installation of the equipment, and during the grant award period. The plumbing and electrical wiring will be installed by local contractors. We plan to purchase and install the signs ourselves utilizing marina staff time. ABC would also like to apply for funds to operate and maintain the equipment once installed.

As an authorized agent for _____, I verify that this facility is in regulatory compliance with the Florida Department of Environmental Protection, and all local, state, and federal permits and approvals applicable to the project specified in this application will be obtained **before** beginning work or purchasing any equipment.

Name:

Title:

Date:

Submission Instructions

- When you are satisfied with your entries and ready to submit the application, save a copy of the application form for your records by using the 'Save As' option under the 'File' menu.
- Once saved, click on the 'Submit Application' button below.
- An e-mail window will appear with the application attached.
- Before sending the email, **attach all required documentation listed on page one of the instructions**, along with the application. All document attachments are requested to be in PDF file, clearly titled with your facility's name.
- **Your application will not be processed or approved until all required documentation is received and approved.**

If you are unable to submit the application with the submission button above –
Email the completed application and required documentation to: Clean.Vessel.Act@dep.state.fl.us
OR

Fax the completed application and required documentation to: 1-866-340-4683

Electronic submission is highly encouraged, however should you be unable to submit the completed application and required documentation via email and/or fax, please contact the Clean Vessel Act office at Clean.Vessel.Act@dep.state.fl.us or 850-245-2100 to request a paper copy.

For help or further instruction visit the [Clean Vessel Act Website](#), or call us at
850-245-2100.