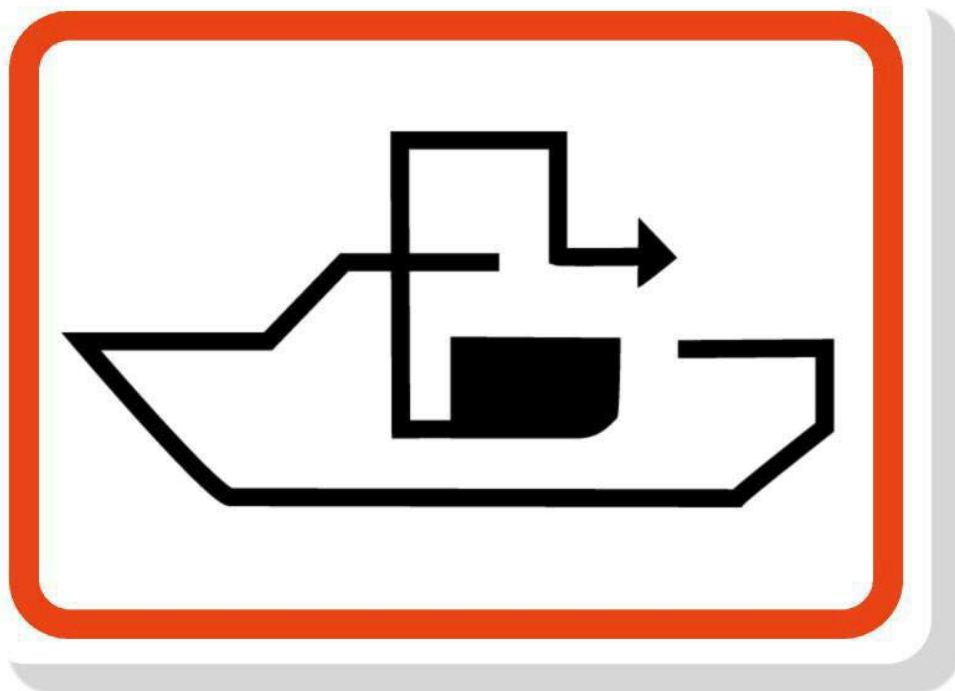




Florida Department of Environmental Protection

Clean Vessel Act Grant Application & Instructions



Keep Florida's Water Clean

A CVA Grant can be used to reimburse 75% of your cost expenditure in the following categories:

Permits	Operations of pumpout equipment
Site preparation	Maintenance and repairs
Renovation	Sewage hauling
Equipment purchase	Pumpout signage
Equipment installation	Educational materials

Before applying for a CVA grant, please note that:

1. Federal marina facilities are not eligible to receive CVA funds.
2. Facilities must provide public access to the pumpout equipment and allow public usage.
3. Fees for using the pumpout equipment cannot exceed the allowable federal maximum per pumpout set by [50 CFR §85.44](#), for the life of the equipment. Any fees collected should be used to defray the cost of operations, maintenance and repair of the pumpout equipment, and the facility must be displayed in the [Pumpout Nav app](#) for the public to easily find it and use it.
4. If applying for equipment, the Quarterly Pumpout Log must be submitted for five (5) years following the agreement end date.
5. Facilities must display a pumpout operational accreditation sign in a visible location on or adjacent to the pumpout system and one international pumpout symbol sign visible from the waterway. See [Signage Requirements](#), [Code of Federal Regulations](#).
6. Any federal grant that involves a Federal financial assistance program for “infrastructure,” requires that all manufactured products used in the project (including all iron and steel) be “produced” in the United States, and that all construction materials used in the project be “manufactured” in the United States. Source: [BABA Memo](#).
7. Grant-funded work **cannot** start before an agreement is in place.

A complete CVA application consists of: 1] Filled-out application
2] Copy of the supporting documents and registrations, which include:

Business registration

Private businesses must be registered with the State of Florida, Division of Corporations/Sunbiz. If your facility has not yet registered, please register at [DOS.MyFlorida.com/Sunbiz](https://dos.myflorida.com/sunbiz).

Vendor registration

All applicants must register with the State of Florida Department of Management Services, MyFloridaMarketPlace vendor system. If your facility is not a registered vendor, please register at Vendor.MyFloridaMarketplace.com.

W-9 Form and Substitute W-9

Submit a copy of the W-9 form and file the facility’s substitute W-9 with MyFloridaMarketPlace. If the facility has not yet filed its substitute W-9, please file it at [Florida’s Chief Financial Officer website](#).

Insurance

All 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 workers’ compensation coverage in accordance with Florida law and paragraph 8 to Attachment 2, Special Terms and Conditions. A current Certificate of Insurance (COI) must be submitted with the grant application and maintained throughout the grant period. The Florida Department of Environmental Protection must be listed as both an Additional Insured and the Certificate Holder. [For more details visit our website](#).

If the applicant is a Florida governmental entity that is self-funded for liability insurance, then the applicant must provide in writing, on official letterhead, from the applicant’s chief financial officer a statement confirming the governmental entity as self-insured.

Engineering plans or drawing of proposed project site

Provide a drawing of your project with the proposed pumpout equipment, stanchions/connections and sewer connections marked. It can be an aerial photo or drawing from your survey. Use Google Earth if needed.

Vendor quotes

Applicants must submit two (2) written quotes from two (2) different vendors for any equipment or service costs that exceed \$2,500. The lowest quote should be chosen, and all quotes should be submitted with the application package.

Federal Funding Accountability and Transparency Act (FFATA) Form

If you request more than \$30,000 in grant funding, please complete the [FFATA form](#). To complete this form, your facility will need a unique entity ID (UEI) number; if your facility does not yet have one, you can register at SAM.gov.

Clean Vessel Act Grant Application Form

Facility General Information

Facility Name:				Federal Employer ID #:			
Facility Address:				UEI #:			
City:		State:		ZIP Code:		County:	
Phone Number:							
Facility Website:							
Facility Email:							
Mailing Address (if different):							
City:		State:		ZIP Code:		County:	

Contact Responsible for CVA Grant Application and Project Implementation Information

Name:				Title:			
Address:							
City:		State:		ZIP Code:			
Phone Number:				Email Address:			
Is the contact person:	<input type="checkbox"/> Consultant	<input type="checkbox"/> Contractor	<input type="checkbox"/> Facility Employee	<input type="checkbox"/> Other			

Facility Owner Information

Name:				Title:			
Address:							
City:		State:		ZIP Code:			
Phone Number:				Email Address:			
Is the facility owned/operated by a self-insured governmental entity (state, county or city)?	<input checked="" type="radio"/> Yes	<input type="radio"/> No					

Marina Boating Facility Information

Facility Type (check all that apply):	<input type="checkbox"/> Marina	<input type="checkbox"/> Boatyard	<input type="checkbox"/> Yacht/Boat Club	<input type="checkbox"/> Pumpout Business
	<input type="checkbox"/> Dockominium	<input type="checkbox"/> Boat Ramp	<input type="checkbox"/> Mooring Fields	
Name of the common/local waterbody where the facility is located:				

Facility Access:

☐ Existing Marina Facility ☐ Facility currently under construction ☐ Proposed Marina Facility (not under construction)

Total number of slips at the facility? Wet: Dry: Mooring:

Of the total number, how many are: Open to the public: Dedicated to one owner?

Does the facility allow public access to docking and marina services? ☐ Yes ☐ No

Does the facility have live-aboards? ☐ Yes ☐ No If yes, approximately how many?

Does the facility have houseboats? ☐ Yes ☐ No If yes, approximately how many?

How many slips are available for: Vessel under 26' Vessels 26' to 40' Vessels over 40'

Facility's Current Pumpout Information

Does the facility currently have pumpout equipment? ☐ Yes ☐ No

If yes, please describe the current equipment:

☐ Stationary Pumpout ☐ Pumpout Vessel ☐ Lift Station
☐ Portable Pumpout Unit ☐ Dump Station/
Portable Toilet Dump ☐ Holding Tank

Is the pumpout equipment currently operational? ☐ Yes ☐ No

Will the proposed pumpout project replace the current equipment? ☐ Yes ☐ No

Are permits required for the proposed project? ☐ Yes ☐ No

Will the proposed pumpout project be in addition to the current equipment? ☐ Yes ☐ No

Was the current equipment purchased through a past CVA grant? ☐ Yes ☐ No

If yes, what was the agreement number?

Proposed Pumpout Project Information

Type of pumpout equipment requesting (check all that apply):
☐ Stationary Pumpout ☐ Pumpout Vessel ☐ Lift Station ☐ Pumpout Service
☐ Portable Pumpout Unit ☐ Dump Station/
Portable Toilet Dump ☐ Holding Tank

Where on the premises will the pumpout/dumpout be located? ☐ On dock ☐ On land

Number of pumpout connections to be installed through this project?

Will there be connections available to all slips? ☐ Yes ☐ No

How many new connections will be available to the public?

Disposal method for pumpout/dumpout/boat sewage?

Note: On-site septic tanks are not authorized ([section 381.0065, F.S.](#))

- ☐ Directly to a permitted wastewater treatment facility (sewer) Domestic Wastewater Collection Permit #:
- ☐ Directly to an on-site sewage treatment system
- ☐ Into holding tank, then transported to permitted wastewater treatment facility

Describe your hours of operation for pumpout/dumpout services?

If funded, how many pumpouts/dumpouts are expected each week?

Pumpout fees requested (maximum allowed [50 CFR §85.44](#)):

Anticipated project timeline:

Project Location:

Project Location Coordinates (in decimal degrees): Latitude: °

Longitude: °

Proposed project scope of work. Utilizing your design plans and permitting requirements, briefly summarize the proposed pumpout project and how grant funds will be used to complete the project:

For Example: ABC Marina plans to install one (1) stationary pumpout to service resident and visiting boats. The pumpout will be installed on the dock with 150' piping and 20 connections to service each boat slip. The proposed pumpout equipment will be purchased and installed by contractors. 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 also would like to apply for funds to operate and maintain the equipment once installed.

Estimated Project Budget

Tasks	Category	Total Amount	75% grant (Automatically calculated)	25% match (Automatically calculated)
Permits	Miscellaneous Expenses			
Site Preparation	Contractual Services			
	Salaries			
Renovation	Contractual Services			
	Salaries			
Equipment Purchase	Equipment			
	Supplies			
Equipment Installation	Contractual Services			
	Salaries			
Operations of Equipment	Contractual Services			
	Salaries			
Maintenance and Repair	Contractual Services			
	Supplies			
	Salaries			
Sewage Hauling	Contractual Services			
Pumpout Signage	Miscellaneous Expenses			
	Salaries			
Education and Instructional Materials	Miscellaneous Expenses			
Total:				

Hourly Rate of Pay for Grant Reimbursement

[Visit the DEP website](#) for detailed instructions on how to complete this [hourly rate of pay for grant reimbursement](#) table. (Please skip this chart if the proposed project budget does not include in-house labor or salary costs).

Note: The facility should include estimated hourly rate of pay for all in-house labor costs when calculating any salaried task. Only the direct hourly rate of pay for the facility's employees are reimbursable. 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 the hourly rate of pay, the costs shall be itemized by employee position, the hourly rate of pay, and the associated activity using the table below. At its discretion, DEP may request additional supporting documentation.

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

Program Interest and Outreach:

How did you learn about the CVA Grant Program?

- | | | |
|---------------------------------------|--|------------------------------------|
| <input type="checkbox"/> DEP Workshop | <input type="checkbox"/> DEP Website | <input type="checkbox"/> DEP Staff |
| <input type="checkbox"/> Radio/TV Ad | <input type="checkbox"/> Another Marina Owner/Operator | <input type="checkbox"/> Vendor |

If you would like to receive Clean Boating educational materials to share with your community, please select the desired option:

- | | | | | |
|---|--|--|-----------------------------------|--|
| <input type="checkbox"/> CVA Fact Cards | <input type="checkbox"/> Clean Boater Habits | <input type="checkbox"/> Boater Pledge Cards | <input type="checkbox"/> Stickers | <input type="checkbox"/> Children/Youth Boater activity (Officer Snook) book |
|---|--|--|-----------------------------------|--|

Submission Authorization:

The undersigned certifies that:

1. This application is, in all respects, fair and submitted in good faith without collusion or fraud;
2. If selected through this application process, the recipient will work in good faith and in partnership with the Department of Environmental Protection to manage its subcontractors in a timely and accurate manner;
3. Any funds awarded as a result of this application process will not be used as matching funds for other grants;
4. The undersigned has full authority to legally bind the applicant.

As an authorized agent for the above entity, I verify that this facility is in regulatory compliance with the Florida DEP and all local, state, and federal permits and approvals applicable to the project specified in this application.

Name:

Title:

Sign:

Date:

Submission Instructions

- When you are satisfied with your entries and ready to submit the application, click the Submit button below.
- An email window will appear. Attach all required documentation along with the application. It is helpful if all document attachments are clearly titled with your facility's name. Your application will not be processed or approved until all required documentation is received.
- If you are unable to submit the application with the submission button below, you can email the completed application and required documentation to Clean.Vessel.Act@FloridaDEP.gov

Florida Department of Environmental Protection
Office of Resilience and Coastal Protection
Clean Vessel Act Grant Program
2600 Blair Stone Road MS-235 Tallahassee, FL 32399-2400
For help or further instruction, please visit
the [Clean Vessel Act website](https://www.floridadep.gov/clean-vessel-act) or call us at 850-245-2094