

Small Public Water System Emerging Contaminant Grant Application

Please complete this form and return to the Maine Drinking Water Program. Contact Eduard Chenette at (207) 592-0456 or e-mail Eduard.Chenette@maine.gov with any questions.

PWS Name: _____ PWSID: _____

Contact: _____ Date: _____

Email Address: _____ Telephone: _____

Mailing Address: _____ Town: _____

County: _____ State: _____ Zip Code: _____

1. **Describe the Project:** *Include brief description of proposed improvements, existing treatment if any, project cost estimate and implementation schedule. Attach additional pages if needed.*

2. **Project Cost:** *Approximately how much money is needed to complete your project?*

3. **Describe any Cost Sharing:** *Will any other source of funds contribute money to fund a portion of the project costs?*

4. **Previous loans/and grants:** *Has this system received previous SRF Project funding?*

5. **Sample results from a certified laboratory indicating both initial and confirmation PFAS levels must be included with this application.** *Attach copies of lab results to this application.*

Initial sample date: _____ Initial result: _____ Confirmation sample date: _____ Confirmation result: _____

Signature: _____ Title: _____

Print Name: _____ Date: _____

**MAIL OR EMAIL
APPLICATION TO:**

DRINKING WATER PROGRAM
11 STATE HOUSE STATION
286 WATER STREET, 3RD FLOOR
AUGUSTA, ME 04333-0011

OR Eduard.Chenette@maine.gov