



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION

APPLICATION FOR QUICK RESPONSE REPAIR

SECTION I

To be completed by task applicant:

Date:		Name of Applicant Organization:	
Contact Person:		Address: _____ _____	
Telephone:	Fax:	E-Mail:	
Original Project Title _____			
Contract/Agreement Number(s) (if any) _____			
Project Location (township, county, watershed) Attach copy of topographic map showing site location _____			
Funding source(s) _____			
Year(s) funded _____			
Description of original project: _____ _____ _____ _____ _____			
Describe nature of problem and proposed repair: _____ _____ _____ _____ _____ _____ _____ _____ _____			

Justification for need for Quick Response funding (failure to act quickly will likely result in serious environmental consequences or will contribute to further damage of a project):

Does an operations, maintenance and repair plan exist? Yes No

Proposed Contractor Name:	Contractor Address: _____ _____
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Contractor Telephone:	Contractor Fax:	Contractor E-Mail:
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Contractor FEIN #/SAP Vendor # :	Contractor's Cost Estimate (attach copy): \$
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Landowner permission required. **Attach copy of signed landowner agreement**

Are permits required for this repair? <input type="checkbox"/> Yes <input type="checkbox"/> No	Matching Funds
If yes, have they been obtained? <input type="checkbox"/> Yes <input type="checkbox"/> No	\$

Contact person signature _____	Date _____
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FORWARD THIS DOCUMENT AND ATTACHMENTS TO APPROPRIATE DEP REGIONAL WATERSHED MANAGER OR DISTRICT MINING WATERSHED MANAGER. (SEE ATTACHED)

SECTION II

To be completed by DEP Regional Watershed Manager or District Mining Watershed Manager:

Is **project** eligible for GGII funding? (applicant eligibility should not be evaluated) Yes No

Do you agree this project is in need of quick response funds? (failure to act quickly will likely result in serious environmental consequences or will contribute to further damage of a project) Yes No

AUTHORIZATION FOR QUICK RESPONSE REPAIR AND REIMBURSEMENT FORM

<u>SECTION I</u>		Grant No. _____
To be completed by WPCAMR:		Funding <u>QR9</u>
Application Number:	Name of Applicant Organization:	
Contact Person:	Address: _____ _____	
Telephone:	Fax:	E-Mail:
You are authorized to proceed with quick response repair as submitted in your application dated _____ in the amount of \$ _____ All work must be completed by: _____		
Signature: _____	Date: _____	
FORWARD THIS DOCUMENT TO THE APPLICANT		
<u>SECTION II</u>		
<u>Instructions to Applicant:</u>		
You must retain this form in order to receive reimbursement.		
Prior to commencing construction, notify your DEP Regional Watershed Manager or District Mining Watershed Manager.		
Upon completion of construction, contact your DEP Regional Watershed Manager or District Mining Watershed Manager to arrange a site inspection. This is a mandatory requirement for reimbursement.		
This form and contractor invoices must be provided to the DEP Regional Watershed Manager or District Mining Watershed Manager at site inspection.		
Reimbursement will only occur if repair is satisfactorily completed in accordance with the Application as determined by the DEP Regional Watershed Manager or District Mining Watershed Manager at site inspection.		
I hereby assign payment rights to: _____		
Amount of Reimbursement Requested: \$ _____	Date Work Completed _____	
Signature: _____	Date: _____	
<u>SECTION III</u>		
<u>To be completed by DEP Regional Watershed Manager or District Mining Watershed Manager:</u>		
Site visit conducted?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Authorize payment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If no, please provide comments and notify Jon Smoyer at 814-472-1884.		
DEP Regional Watershed Manager/District Mining Watershed Manager:		
Name (print):	Telephone:	E-mail:

EMAIL THE COMPLETED APPLICATION FOR QUICK RESPONSE AND REIMBURSEMENT FORM, ALONG WITH CONTRACTOR INVOICE, TO:

Andrew P. McAllister Email: andy@wpcamr

WPCAMR
P.O. Box 295
Luxor, PA 15662

SECTION IV

Instructions for WPCAMR:

If payment is authorized by DEP Regional Watershed Manager or District Mining Watershed Manager, proceed with payment to applicant and submit necessary documentation to Jon Smoyer for reimbursement.

If payment is not authorized, email all relevant documentation to:

Jon Smoyer Email: Josmoyer@pa.gov
Bureau of Abandoned Mine Reclamation
Cambria District Office
286 Industrial Park Road
Ebensburg, PA 15931-4119