INFRASTRUCTURE REVOLVING LOAN FUND (Fund C) LOAN APPLICATION

I.	GEN	NERAL PROJECT SUMMAR	Y
	1.	PROJECT TITLE	
		PROJECT NUMBER (WX or SX #)	
	2.	LEGAL APPLICANT	
		Applicant Name:	
		Street/P.O. Box:	
		City, State & Zip Code:	
		Telephone:	
		Email:	
		County:	
		Contact Person:	
	3.	APPLICATION CONTACT (Consultant, Area Developme	
		Name:	
		Title:	
		Firm:	
		Street/P.O. Box:	
		City, State & Zip Code:	
		Telephone:	
		Email:	

4.	ENGINEERI	NG FIRM			
	Name:				
	Street/P.O. Box	x:			
	City, State, Zip	Code:			
	Telephone:				
	Contact Person	:			
	Email:				
5.	(this description	RIPTION OF PRO on will be reviewed tould be consistent	d against the	e existing projec	ct profile for the
6.	FINANCING	PACKAGE PROI	POSED Rate		
Source	Amount	Loan/Grant	%	Term	Status
Fund C		Loan	3%	20 years	Application
TOTAL	\$				
7.	CERTIFICATION To the best of	of my knowledge rue and correct.	and belief,		contained in this
			Date		

KENTUCKY INFRASTRUCTURE AUTHORITY PROJECT BUDGET PROJECT

Cost Classification		Infrastructure Revolving Fund (Fund C)	Other Funding Source A	Other Funding Source B	Other Funding Source C	Local Funds	Total Project Cost
1	Administrative Expenses (Including Interim Financing)						
2	Legal Expenses						
3	Land, Appraisals, Easements, Right-of-Way						
4	Relocation Expense & Payments						
5	Planning						
6	Engineering Fees - Design						
7	Engineering Fees - Construction						
8	Engineering Fees - Inspection						
9	Construction						
10	Equipment						
11	Contingency						
12	Other						
	Total						
Fund	ing Sources	Amount	Date Committed				
Α							
В							
С							
				-	Signature		_
Pleas	e identify all sources and amounts of	Local Funding	Amount	1	g. /a.a. o		
1	-			1	Title		<u> </u>
2				1			
3					Date		_

II. GENERAL PROJECT INFORMATION

or failure?		
Yes Yes If yes, describe.	No	
Is the applicable inf	rastructure system under sanction t	from any enforcement ag
	NoN/A ude deadlines, fines imposed and	whether the project will
Are easements or la	nd acquisition needed for the proje	ct?
Yes Explain status of ear	No Number of Parcels ch parcel.	
	ined the necessary land, indicate i	f hv·
If applicant has obta	med me necessary fand, morcale i	

YesNo	
If no, explain status.	
Does the Public Service Commission have ju	urisdiction over this project?
YesNo If yes, describe their role and estimated sche	dule of review.
RENT INFRASTRUCTURE SYSTEM ANA	ALYSIS
er each question as it relates to the system at	
er each question as it relates to the system at	ffected by the proposed infrastruction. Number of customers add
er each question as it relates to the system af pment.	ffected by the proposed infrastruction. Number of customers add
er each question as it relates to the system af opment. Number of existing customers, if any:	ffected by the proposed infrastruction. Number of customers add
Residential	ffected by the proposed infrastruction of customers additional fractions of the customers and the customers are customers.
er each question as it relates to the system af opment. Number of existing customers, if any: Residential Business	ffected by the proposed infrastruction of customers additional fractions of the customers and the customers are customers.
er each question as it relates to the system af apment. Number of existing customers, if any: Residential Business Industrial	ffected by the proposed infrastruction of customers additional fractions of the customers and the customers are customers.
Per each question as it relates to the system aforment. Number of existing customers, if any: Residential Business Industrial Total System capacity:	ffected by the proposed infrastruction of customers additional fractions of the customers and the customers are customers.
Per each question as it relates to the system aforment. Number of existing customers, if any: Residential Business Industrial Total	ffected by the proposed infrastruction of customers additional fractions of the customers and the customers are customers.
Per each question as it relates to the system aforment. Number of existing customers, if any: Residential Business Industrial Total System capacity: Type of system	
reach question as it relates to the system affirment. Number of existing customers, if any: Residential Business Industrial Total System capacity: Type of system Design	ffected by the proposed infrastru-

III.

	3.	Method of treatment employed. If a new method is proposed, describe.				
	4.	Operator Certification:				
		Number of certified operators required for system				
		Level of certification required				
		Number of operators employed by system				
		Are all operators properly certifiedYesNo				
		The un operations properly certained10				
IV.	FINA	NCIAL ANALYSIS				
	1.	Are revenues and expenses for this system accounted for separately from other utility services?	er			
		YesNo If no, explain.				
	2.	Identify all revenues, other than service fees, which are dedicated to the syste	m.			
		A \$				
		B \$				
		C \$				
	3.	Is there outstanding debt on the system?YesNo				
		A. Source	_			
		B. Principal outstanding				
		C. Annual debt requirement	<u>.</u>			
		D. Date of final payment				
		Attach a copy of debt service schedule(s).				

	YesNo es, attach a copy.						
Are syste	water or sewer services provided by other corem?	mmunities or districts to this					
	YesNo						
Atta	ch copy of service agreements and briefly des	scribe terms.					
	s this system provide services to other commu	inities or districts?					
	YesNo	Amount of					
Com	munity/District # of Customers	Revenue Derive					
		\$ \$					
		\$ \$					
		Ψ					
Atta	ch copy of service agreement(s) and briefly de	escribe terms.					
	Rate structure (attach copy of current and any proposed rate ordinance).						
Rate	structure (attach copy of current and any pro	posed rate ordinance).					
Rate	structure (attach copy of current and any pro- Current 4,000 gallon rate	posed rate ordinance). \$					
A.		\$					
	Current 4,000 gallon rate						
A. B.	Current 4,000 gallon rate Proposed 4,000 gallon rate	\$ \$					
A. B. C.	Current 4,000 gallon rate Proposed 4,000 gallon rate Average usage/bill	\$ \$					

	YesNo If yes, list.		
	·	6 Service Revenu	<u>e</u>
Com	pare rates with other providers in your area.		
Oper	ration and Maintenance.	<u>Year</u>	Cos
A.	Annual operation and maintenance costs for last 3 years.		\$
B.	Estimated total cost after project completion.		\$
C.	Current annual funding requirements for depremaintenance reserves.	eciation, and oper	ation and
	Are operation and maintenance payments requ	nired by prior bon	d or
D.	ordinance?		
D.		No	

	E.	Are operation and	maintenance functions assigned to another party?
		YesYes	No tails of the agreement.
	F.	Provide a copy of proposed funding.	the current operating budget of the system affected by the
10.	Tap f	fee amounts. Residential	\$
	B.	Commercial	\$
	C.	Other	\$
	D.	How collected	\$
12.	List a	any security availabl	le to support the proposed debt, if applicable. This ma
			es or projected revenues.
IMPL		NTATION SCHED	ULE
1.	Antic	cipated engineering d	lesign time required (including plan review).

	Contract #/Name/Description	Estimated Amount
		\$
		\$
		\$
	Anticipated bid advertising date(s).	
	Anticipated bid opening date(s).	
	Anticipated construction start date(s).	
	Anticipated construction completion date(s)	
	Will force account labor be used?	
	YesNo	
	If yes, list activities.	
	List any construction or bid requirements relate	ed to other funding sources, whi
	List any construction or bid requirements relate could affect timely implementation.	ed to other funding sources, whi
AN		ed to other funding sources, whi
ese	could affect timely implementation.	
ese	could affect timely implementation. NAGEMENT CAPACITY e questions relate to compliance with statutory	
ese	could affect timely implementation. NAGEMENT CAPACITY e questions relate to compliance with statutory cant. Answer each question as appropriate.	mandates placed on each type
ese	could affect timely implementation. NAGEMENT CAPACITY e questions relate to compliance with statutory cant. Answer each question as appropriate. Audit Requirement.	mandates placed on each type

VI.

	B.	Date of last audit completed:
	C.	Attach four (4) of the most recent financial statements, current year-to-date unaudited financials and current budget.
2.	All O	ther Applicants
	A.	Explain designation of responsibility for financial accountability and personnel administration.
	B.	Have any public meetings been held on the proposed project or service fee increases in the last six months?
		YesNo If yes_provide minutes

VII. CAPITAL INVESTMENT

Federal/State Funding History.

List all federal and state funding (grant and loan) awarded to the jurisdiction during the last five (5) years for infrastructure or economic development projects.

YEAR	PROJECT	SOURCE	AMOUNT