



# LOUISIANA REVOLVING LOAN FUND PROGRAM

LOUISIANA DEPARTMENT OF NATURAL RESOURCES

*(January 2019)*

## Application Forms

Grant No. EE 0007475

CFDA: 81.041





**Louisiana Revolving Loan Fund Program  
Form A Applicant Information**

**Applicant Information**

Applicant Full Name	DUNS Number Required	SAM/CAGE Number Required
Mailing Address	City	Zip Code + 4
Primary Contact Name	Title	E-mail Address
Telephone Number	Fax Number	FEIN (Tax ID#) Required

**Project Site Information**

Project Title	Primary Activity (e.g. Commercial / Industrial)	
Project Site Address	City	Zip Code + 4
Total land area (acres)	Size of facility (sq.ft)	
Electric utility	Gas utility	

**Applicant Signature**

I hereby certify that I am authorized to submit this application and that the information presented in this application is true and accurate. In addition, I agree to abide by all the terms and conditions described in the Louisiana Department of Natural Resources - Louisiana Revolving Loan Fund Program Guidelines”, and Regulations application forms, and all supporting documents.

Name	Signature	Date
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**Note for Governmental /Political Subdivisions:**

Check HERE to confirm that this proposed project has the support of the local governing body AND attach a copy of the applicants current budget describing the method of loan repayment along with this application.

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**Louisiana Revolving Loan Fund Program  
Form B Project Information**

**Project Information**

Provide information regarding how the loan will be spent.

Proposed Project Start Date: \_\_\_\_\_

Proposed Project Completion Date: \_\_\_\_\_

Brief Project Description:

**Metrics Activity**

Complete this section after working through Application Forms C through F.

Jobs Created or Retained:	_____	FTE
Annual Energy Savings:	_____	kWh
Annual Gasoline/Diesel savings	_____	Gallons
Annual GHG Emissions Reduced:	_____	CO <sub>2e</sub>
Cost-Effectiveness:	_____	MMBTU/ \$1,000
Project Simple Payback	_____	Years

**Financial Information**

	Amount (\$)	Percent (%)
Loan Funds Requested	\$	%
Applicant Contribution	\$	%
Total Project Cost	\$	100%

**Louisiana Revolving Loan Fund Program  
Form B Project Information**

**Project Narrative and Benefits**

Provide a description of how the proposed loan will be used. Discuss the proposed project for which funding is requested, including goals and objectives, the overall impact and benefits of the project and a statement of work (required tasks and activities). Applicants should describe the existing system and the proposed energy efficiency measures. The narrative may be used to explain budget details.

**Louisiana Revolving Loan Fund Program  
Form B Project Information**

**Project Timeline**

Provide a proposed timeline for project milestones or events; including project start and end date.

Date	Milestone/ Event

**Louisiana Revolving Loan Fund Program  
Form C Energy Usage Information**

**This Page for CNG Refueling & Vehicle Project Applicants ONLY**

**Gasoline/Diesel Displacement**

	Gasoline	Diesel
Annual Gallons Used or Gasoline Gallon Equivalents Dispensed		

**GHG Emissions Reduced (Gasoline)**

(A) Annual Gasoline Displacement (Gallons)	(B) Conversion Factor	GHG Emissions Reduced (Metric Tons of CO <sub>2</sub> e) = (A) X (B)
	0.00217	

**GHG Emissions Reduced (Diesel)**

(A) Annual Diesel Displacement (Gallons)	(B) Conversion Factor	GHG Emissions Reduced (Metric Tons of CO <sub>2</sub> e) = (A) X (B)
	0.00228	

**Cost-Effectiveness**

(A) Annual Gasoline & Diesel Displacement (Gallons)	(B) Loan Funds Requested (\$)	Cost-Effectiveness (Gallons/\$) = (A) / (B)

**Louisiana Revolving Loan Fund Program  
Form C Energy Usage Information**

**Energy Usage**

Provide information regarding the total annual energy usage of the facility.

	Electricity	Natural Gas	Gasoline	Diesel	Kerosene	Propane	Wood	Coal	Other:
Total paid for the last 12 months	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total usage for the last 12 months	kWh	GGE	Gallons	Gallons	Gallons	GGE	Bush Cords	Tons	Measured

**Technical Assistance**

On an as needed basis, the Department will provide technical assistance to applicants which require guidance completing application forms, specifically calculating annual energy savings. Applicants may request assistance by sending an e-mail to [larlf@la.gov](mailto:larlf@la.gov).

**Louisiana Revolving Loan Fund Program  
Form D Efficiency Measures**

**Efficiency Measures**

For every energy efficiency measure to be implemented, Applicants must complete all tables included in this form. Applicants may print out additional copies of the tables as needed.

- **Energy Efficiency Measure:** identify the new equipment to be purchased and installed that will replace, upgrade or retrofit the existing equipment. Identify the existing equipment to be replaced, upgraded or retrofitted.
- **Equipment Cost:** identify the cost of purchasing the new equipment required to implement the energy efficiency measure.
- **Installation Cost:** identify the labor cost related to installing the energy efficiency measure.
- **Annual Energy Savings:** identify the expected annual energy savings (in kWh) to be achieved by replacing existing equipment with the proposed equipment.
- **Average Utility Rate:** identify the average annual utility rate that was paid to the utility company during the previous year for facility operations.
- **Total Cost:** includes equipment and installation costs.
- **Simple Payback:** represents the amount of time it will take to recover the project's investment through reduced or avoided energy costs. It is calculated by dividing equipment and installation costs (\$), by annual energy savings x average annual utility rate.

		(A)	(B)	(C)	(D)	(E)	(F) = (A*B) + (C)	(G) = (F) / (D*E)
	Energy Efficiency Measure/ Equipment	Equipment Unit Cost (\$)	Quantity	Installation Cost (\$)	Annual Energy Savings (kWh)	Average Annual Utility Rate (\$/kWh)	Total Cost (\$)	Simple Payback (years)
1	New:  Replaces:							
2	New:  Replaces:							
3	New:  Replaces:							

**Louisiana Revolving Loan Fund Program  
Form D Efficiency Measures**

		(A)	(B)	(C)	(D)	(E)	(F) = (A*B) + (C)	(G) = (F) / (D*E)
	Energy Efficiency Measure/ Equipment	Equipment Unit Cost (\$)	Quantity	Installation Cost (\$)	Annual Energy Savings (kWh)	Average Annual Utility Rate (\$/kWh)	Total Cost (\$)	Simple Payback (years)
4	New:  Replaces:							
5	New:  Replaces:							
<b>Totals</b>								

**Bundled Simple Payback**

Use the information from above to complete the table below.

(F)	(D) * (E)	-----
Sum of Total Cost	Sum of Annual Energy Savings X Average Annual Utility Rate	Bundled Simple Payback

Return form to: Louisiana Department of Natural Resources, Technical Assessment Division, P.O. Box 94396 Baton Rouge, Louisiana 70804-9396.

**Davis Bacon-Act:**

1. Have you determined that your project is exempt from the federal Davis-Bacon Act prevailing wage requirements?  
☐ Yes (please continue to question 2).  
☐ No (please continue to question 4).
  
2. ☐ The proposed project is exempt from Davis-Bacon Act prevailing wage requirements because it falls within the following category or categories:  
  

☐ All project activities will be performed by the governmental agency's own employees.  
☐ Project activities do not include work done on a public building or public work by laborers and mechanics employed by a construction contractor or construction subcontractor.  
☐ All project work will be performed by executive, administrative, and professional employees, such as legal counsel, financial advisors, supervisors, or employees undertaking any of the following activities: market surveys and marketing, tracking and reporting energy savings, conducting home energy ratings, energy audits, or building commissioning inspections.  
☐ Other, specify: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
3. Have you confirmed your determination that Davis-Bacon Act prevailing wage requirements do not apply to your project with the United States Department of Labor (DOL)?  
☐ Yes (please attach any supporting documentation from DOL).  
☐ No (please attach any other documentation that supports your determination).
  
4. If Davis-Bacon Act prevailing wage requirements apply to individuals employed on your project, including individuals employed by subcontractors, then provide the name and contact information of the contact person who will be **responsible for submitting certified payroll information to the Louisiana Department of Natural Resources on a weekly basis for all such individuals**. It is the Subgrantee's responsibility to ensure that all certified payroll records are accurate, complete and submitted in a timely manner.

**Signature:**

**Name of Contact Person:**

**Title & Organization or Co.**

**City or Parish:**

**Email and Phone:**

**Subgrantee DUNS#:**

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The following table, which will document and identify the job classifications of positions the Subgrantee intends to hire in support of its project, is based on DOL wage determinations. DOL Prevailing Wage Determinations are available at <http://www.wdol.gov/dba.aspx#0>

<b>DOL Job Classification</b>	<b>Number of Individuals Employed in Classification</b>	<b>Tasks to be Performed</b>	<b>Wage Determination</b>

The Louisiana Department of Natural Resources reserves the right to request additional information in order to clarify answers provided on this form.

**This form was completed by:**

City/Parish/Company  
or Organization: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Project \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_

*Check HERE if a list of the latest Davis Bacon Wage Determinations were provided to DNR with this project application.  
What Date were these Davis Bacon Wage Determinations downloaded from the above website: \_\_\_\_\_*

**Louisiana Revolving Loan Fund Program  
Form E Energy Metrics**

**Jobs Created or Retained**

Labor Activity	(A) Proposed Start Date	(B) Proposed Completion Date	(C) Working Days between Start Date and Completion Date (days)	(D) = (C) x 8 Cumulative Hours on a Full-Time Schedule (hrs)	(E) Hours Worked on Labor Activities (for this project) (hrs)	(F) = (E) / (D) Jobs Created or Retained (FTE)
Installation of Equipment						
<b>Total</b>						

**Annual Energy Savings and GHG Emissions Reduced**

	(A) Annual Energy Savings (kWh)	(B) GHG Emission Factor (MT CO <sub>2</sub> e/kWh)	(C) = (A) x (B) GHG Emissions Reduced (MT CO <sub>2</sub> e)
<b>Total</b>		0.00083462	

**Cost-Effectiveness**

(A) Annual Energy Savings (kWh)	(B) Conversion Factor	(C) Loan Funds Requested (\$)	(D)=(A)X(B)/(C) Cost-Effectiveness (MMBtu/\$1,000)
	3.413		

**Louisiana Revolving Loan Fund Program  
Form F Project Budget**

**Budget Summary**

<b>Budget Item</b>	<b>(A) Loan Funds Requested (\$)</b>	<b>(B) Contribution (\$)</b>	<b>(C) = (A) + (B) Total Costs (\$)</b>
<b>Labor/Services</b>			
<b>Equipment</b>			
<b>Materials</b>			
<b>Other (a)...</b> <i>(please explain below)</i>			
<b>Other (b)...</b> <i>(please explain below)</i>			
<b>Total</b>	\$	\$	\$

Other budget items:

**Detailed Budget**

**Equipment/Materials:** List all items of equipment to be purchased with a total valued greater than \$100. Identify the manufacturer of the equipment as well as the model and the rated capacity, if applicable. Applicants must include a copy of the manufacturer's specifications for every proposed piece of equipment for which funds are being requested.

<b>Equipment/Material</b>	<b>Make/Model and Manufacturer</b>	<b>Quantity</b>	<b>Unit Cost (\$)</b>	<b>Total Cost (\$)</b>	<b>Loan Funds Requested<sup>1</sup> (\$)</b>
<b>Total</b>				\$	\$

**Louisiana Revolving Loan Fund Program  
Form F Project Budget**

**Other:** List all other costs associated with project implementation not included in the above categories. The Department reserves the right to not provide loan funds for other costs not included in the above categories.

<b>Purpose</b>	<b>Loan Funds Requested (A)</b>	<b>Required Contribution (B)</b>	<b>Total Cost (\$) (C)</b>
<b>Total</b>			<b>\$</b>

**Applicant Contribution**

List the sources of funding that will be contributed toward this project, including funding contributed by financial partners and other funds. Identify the date when the funds were received or will be received by the Applicant.

The Applicant must provide letters from each financial partner or funding entity indicating the amount of their support and the project commencement date expected for their partnership. In the event of funding by private foundations or public sources, if such a letter is not yet available, indicate the anticipated source and provide supporting documents or guidelines for the anticipated source.

<b>Source</b>	<b>Date of award</b>	<b>Total Funds (\$)</b>	<b>Letter Provided (Y/N)</b>
			Y    N
			Y    N
			Y    N
			Y    N
			Y    N
<b>Total</b>		<b>\$</b>	

**Louisiana Revolving Loan Fund Program  
Form H Waste Stream**

**Waste Stream Description**

Indicate if the proposed project will generate a waste stream. For activities that will generate a waste stream, describe the waste and your methodology for waste handling and disposal.

**Louisiana Revolving Loan Fund Program  
Form I National Environmental Policy Act**

**Applicability of NEPA to the Proposed Project**

Please refer to **Exhibit E** of the Program Guidelines for the complete EF-1

☐ The proposed project is categorically excluded from NEPA because it falls within the following category and does not involve "extraordinary circumstances" within the meaning of 10 C.F.R. Section 1021.410:

☐ Funding energy efficiency retrofits, provided that projects are limited to: Installation of insulation; installation of energy efficient lighting; HVAC upgrades; weather sealing; purchase and installation of ENERGY STAR appliances; replacement of windows and doors; high efficiency shower/faucet upgrades; and installation of solar powered appliances with improved efficiency.

☐ Development, implementation, and installation of onsite renewable energy technology that generates electricity from renewable resources, provided that projects are limited to:

- Solar Electricity/Photovoltaic - appropriately sized system or unit on existing rooftops and parking shade structures; or a 60 KW system or smaller unit installed on the ground within the boundaries of an existing facility.
- Wind Turbine - 20 KW or smaller.
- Solar Thermal - system must be 20 KW or smaller.
- Solar Thermal Hot Water - appropriately sized for residences or small commercial buildings.
- Ground Source Heat Pump - 5.5 tons of capacity or smaller, horizontal/vertical, ground, closed-loop system.
- Combined Heat and Power System - boilers sized appropriately for the buildings in which they are located.
- Biomass Thermal - 3 MMBTUs per hour or smaller system with appropriate Best Available Control Technologies (BACT) installed and operated.

☐ Installation of alternative fueling pumps and systems (but not underground storage tanks) installed on existing facilities (other than a large biorefinery): purchase of alternative fuel vehicles

☐ The proposed project falls within the categories listed above but may involve "extraordinary circumstances" within the meaning of 10 C.F.R Section 1021.410, for the following reason(s)

☐ The EF-1 Environmental Questionnaire has been completed and attached. A copy of the EF-1 is provided in Exhibit E of the Program Guidelines as well as at the end of this document.

☐ The proposed project is not categorically excluded, for the following reason(s)

**Louisiana Revolving Loan Fund Program  
Form I National Environmental Policy Act**

**Description of Project Site**

Does your project involve a building or structure included in the National Register of Historic Places (NRHP) or one eligible for inclusion in the NRHP?

☐

Yes

☐

No

If the proposed project involves a building or structure listed on or eligible for the NRHP, Applicant must complete additional information in Item 5 of the EF-1 Environmental Questionnaire (Exhibit D of the Program Guidelines).

Has Item 5 of the EF-1 been completed for projects on or eligible to be included in the NRHP?

☐

Yes

☐

No

All applicants must complete the below sections regardless of answers to the above two questions.

Provide information on the facility:

Site Name	Site Address	Age of Original Structure (Year Built/Constructed)

Brief Description of Facility:

# Attachment E – EF-1 Environmental Questionnaire





**OFFICE OF ENERGY EFFICIENCY AND RENEWABLE ENERGY**  
**ENVIRONMENTAL QUESTIONNAIRE**

(To be completed and e-mailed back to [larlf@la.gov](mailto:larlf@la.gov))

SECTION I. PROJECT SUMMARY	
NEPA Control Number:	
Project Title:	
Prime Recipient:	
Other Participants (Subrecipients, Contractors, etc.):	
FOA Number:	
Award Number:	
DOE Technical Project Officer:	
DOE Grant Management Specialist (if known):	

  

SECTION II. BACKGROUND AND INSTRUCTIONS
<p>Pursuant to the U.S. Department of Energy's National Environmental Policy Act (NEPA) Implementing Regulations (10 CFR Part 1021), the Office of Energy Efficiency and Renewable Energy (EERE) is required to evaluate the potential environmental impact of projects that it is considering for funding. EERE must determine at the earliest possible time whether any proposed project will require further environmental review (i.e., an environmental assessment or an environmental impact statement) or whether the proposed project qualifies for a categorical exclusion under 10 CFR § 1021.410.</p> <p><b>You are required to answer the questions below for the project as a whole, including all work to be performed by the Prime Recipient and its Subrecipients and Contractors. You may <u>not</u> limit your responses to work performed by the Prime Recipient unless directed to by DOE.</b> In completing this questionnaire, you must provide specific information regarding the nature of your proposed action, including information on its size, operations, and the types and quantities of air emissions, wastewater discharges, solid wastes, land disturbances, etc. You should identify the location(s) of the proposed action and describe the activities that would occur at each location.</p> <p>The form should be completed and signed by the Principal Investigator for the project, but may be completed and signed by another member of your organization who has sufficient knowledge of the project to answer the questions truthfully and accurately.</p> <p>Failure to fully and adequately complete this form will slow EERE's environmental review of your project. Please note that false statements or misrepresentations may result in civil and/or criminal penalties under 18 U.S.C. § 1001.</p>

**1a. In the box below, please provide a brief summary of the proposed project. Please specify if this project is part of a larger project or connected to another project.**

**1b. Is there other federal government involvement outside of EERE in any aspect of this project (e.g., funding, permit approvals, technical assistance, project will occur on federally-administered lands)?**

Yes ☐ | No ☐

*If you checked "Yes", please list the agency, describe the nature of its involvement and provide a point of contact at the agency, if known.*

*Explanation:*

**1c. Is the proposed project limited exclusively to intellectual, academic, or analytical activities?**

Intellectual, academic, and analytical activities include but are not limited to:

- Literature searches and information gathering
- Data analysis
- Computer modeling
- Analytical reviews
- Conceptual design
- Feasibility studies
- Document preparation
- Data dissemination
- Paper studies

*Answer “No” to this question if the proposed project involves any physical experiments, prototypes, pilot-scale projects, demonstration projects, field tests, land-disturbing activities, construction or similar activities.*

Yes ☐ | No ☐

*If you checked “Yes”, describe the proposed activities:*

*Explanation:*

***If you checked “Yes,” proceed directly to Section IV (Certification By Proposer) and complete the information and signatures as requested. If you checked “No,” you must complete the entire questionnaire.***

**2a. Is the project definition complete at this point (i.e., all sites and activities are known)?**

**Yes** ☐ | **No** ☐

*If you checked “Yes”, complete the remainder of the questionnaire. If you checked “No”, please describe those sites and/or activities/tasks that are yet to be defined and complete the remainder of the questionnaire to the best of your knowledge.*

*Explanation:*

**2b. In the chart below, please identify and describe the following five types of identifying information concerning project activities to be performed: (1) each location where work will be performed under the funding agreement, including address or coordinates, names of facilities, and whether this is the Prime Recipient, Subrecipient or Contractor location; (2) the nature of the location (e.g., urban, industrial, suburban, agricultural, university campus) and the current condition and/or use of the site; (3) the types of activities to be conducted at that location; (4) land administration (e.g., BLM, USFWS, DOD, state, private) and (5) the scale of each activity, by reference to the following categories:**

- **Small scale:** activities appropriately categorized as “lab” or “bench” scale, typically conducted in indoor facilities.
- **Pilot Plant:** downsized model of a fully integrated demonstration or commercial operation or facility that provides data to inform a final design of a larger facility.
- **Other:** activities that, by reason of their nature, scope, or duration, do not fall into one of the above two categories.

**Question 2b.**

<b><i>(1) List all Project Locations (Address or coordinates, Facility Name, Indicate Prime Recipient, Subrecipient or Contractor)</i></b>	<b><i>(2) Nature of Location and Current Condition/Use</i></b>	<b><i>(3) Activities to be Performed at each Location</i></b>	<b><i>(4) Land Administration</i></b>	<b><i>(5) Scale of Each Activity</i></b>
Example: Smith Laboratory College Park, MD	Example: Dedicated University Laboratory Facility	Example: Activities will include fabrication and analysis of a gallium-nitrate battery apparatus. The GaN battery requires a specific nanoarchitecture that will be generated using computer equipment in the lab. Analysis requires various tests involving battery cycles and charge capacity.	Example: BLM, USFWS, DOD, state, private	Example: Small scale

**2c. In the box below, please identify and describe: (1) any known or potential health and safety hazards to the public or project workers that may result from or are associated with your project; and (2) any efforts that will be taken to mitigate these hazards.**

Example: The project will involve the use and handling of various hazardous materials, including metals and industrial solvents. All such handling will occur in-lab, and our organization has dedicated hazardous material handling and disposal practices, so the project activities that involve these materials would pose no risk to the public. All hazardous materials would be managed in accordance with federal, state, and local environmental regulations.

Example: Existing corporate health and safety policies and procedures would be followed including employee training, proper protective equipment, engineering controls, monitoring, and internal assessments. Additional policies and procedures would be implemented as necessary as new health and safety risks are identified. This would help ensure compliance with applicable health and safety regulations, and minimize health and safety risks to employees and the public.

*Explanation:*

**2d. In the box below, please identify and describe: (1) any physical modification of existing facilities or construction of new facilities that will occur under the project; and (2) any change in the use, mission, or operation of existing facilities arising out of or resulting from work under the project.**

Example: To accommodate testing facilities necessary for the project, the current testing facility will have to be expanded by approximately 4,500 sq./ft.

Example: A room within our facility that has served as a dedicated wind tunnel will be modified to serve as an environmental test chamber. This will require the adaptation of the chamber's construction to partition off part of the room and seal it to allow generated environmental fluctuations within.

*Explanation:*

**2e. In the box below, please identify and describe any existing, modifications to, or new permits, licenses or authorizations that would be required to perform project activities (such as environmental permits, operating permits, or drilling permits).**

Example: The project will generate small amounts of effluent waste which will be discharged into the Potomac River, requiring our organization to secure the requisite discharge permit pursuant to state and federal regulations.

Example: The project activities will be conducted for the next three years; in that time, we will be required to replace our current solid waste disposal permit with an updated permit that may alter the nature of what and how we are permitted to dispose of solid waste.

Example: The project activities will take place in marine navigable waters and will require permits from the U.S. Coast Guard and the U.S. Army Corps of Engineers.

*Explanation:*

**2f. Please list the estimated quantities of materials used (e.g., feedstock, chemicals, water) and produced by the project (e.g., biofuel).**

*Explanation:*

**3. Is the project near, around or involve any of the following environmentally sensitive resources?**

Please indicate below any and all environmentally sensitive resources that could be adversely affected by any project activities. (See Attachment 1 for select environmental sensitive resource descriptions).

- |   |  |
|---|--|
| <input type="checkbox"/> Historical, archeological or cultural resources (includes listed and eligible resources over 50 years old or of cultural significance) | <input type="checkbox"/> Populations of low income or minorities (Environmental Justice)   |
| <input type="checkbox"/> Threatened or endangered species (whether proposed or listed by state or federal governments), including their habitat                 | <input type="checkbox"/> Migratory birds, Golden or Bald Eagles  |
| <input type="checkbox"/> Marine mammals or essential fish habitat   | <input type="checkbox"/> Depletion of a non-renewable resource   |
| <input type="checkbox"/> Floodplains or wetlands  | <input type="checkbox"/> Areas having a special designation, (e.g., federal and state designated wilderness areas, national parks, national natural landmarks, wild and scenic rivers, state and federal wildlife refuges, and marine sanctuaries) |
| <input type="checkbox"/> Tribal lands or resources of Tribal interest/sensitivity   | <input type="checkbox"/> Prime farmland, unique farmland, or other farmland of statewide or local  |
| <input type="checkbox"/> Ocean resources (e.g., coral reefs)  | <input type="checkbox"/> Special sources of water (e.g., sole source aquifers)   |
| <input type="checkbox"/> Land resources (e.g., tundra, rainforests)   |  |
| <input type="checkbox"/> Coastal zones  |  |

*If you checked any boxes above, please provide a detailed description below of: (1) the resources that could be affected; and (2) how project activities may affect those resources.*

*Explanation:*

**4. Does the project involve any of the following activities or areas of concern?** Please indicate below any and all activities or areas of concern that exist in the vicinity of your project, are required for your project, or could affect your project. (See Attachment 1 for descriptions of each activity or area of concern).

- |   |   |
|---|---|
| <input type="checkbox"/> Clearing or excavation     | <input type="checkbox"/> Polychlorinated biphenyls (PCBs) |
| <input type="checkbox"/> Dredge and/or fill         | <input type="checkbox"/> Navigable air space              |
| <input type="checkbox"/> Pre-existing contamination | <input type="checkbox"/> Underground storage tanks        |
| <input type="checkbox"/> Pesticide use              | <input type="checkbox"/> Underground extraction/injection |
| <input type="checkbox"/> Asbestos                   |   |

*If you checked any boxes above, please provide a detailed description below of: (1) each activity or area of concern; and (2) the effects of each activity or area of concern on your project and/or the surrounding area.*

*Explanation:*

**5. Is there any public opposition, concern, uncertainty or scientific controversy concerning the environmental effects of any project activities?**

Yes ☐ | No ☐

*If you checked "Yes," please describe the nature of the uncertainty or controversy. Please note that uncertainty means that the potential environmental effects are not well known, and controversy means that effects are known but in dispute.*

*Explanation:*

**6. Would the proposed project use, result in, or require the management, storage, transport or disposal of radioactive, toxic, or hazardous chemicals, waste, or other materials that require special handling?**

Yes ☐ | No ☐

*If you checked "Yes," please provide a detailed description of: (1) the materials; (2) approximate quantity; (3) their role in the project; and (4) storage, transport, and disposal procedures for each material. Hazardous chemicals and materials include those which, because of their quantity, concentration, or physical, chemical, or infectious characteristics, may increase the risk of mortality or pose a substantial threat to human health or the environment when improperly stored, transported, disposed of, or otherwise managed.*

*Explanation:*

**7. Please describe: (1) any and all solid wastes that will be generated by the project; (2) how they will be handled on site; and (3) the method of their disposal.**

It is presumed that every project will generate solid wastes, so applicants answering “none” must explain why no waste will be generated. Under federal law, “solid waste” includes any: (1) garbage; (2) refuse; (3) sludge from a waste treatment plan, water supply treatment plant, or air pollution control facility; or (4) other discarded material, including solid, liquid, semisolid, or contained gaseous materials resulting from industrial, commercial, mining and agricultural operations. See 42 U.S.C. § 6903(27). Subject to regulatory exemptions and exclusions, “discarded materials” include those materials which are: (1) abandoned (i.e., disposed of, incinerated, or stored for later treatment); (2) recycled; or (3) inherently waste-like. See 40 CFR § 261.2(a)(2).

*Explanation:*

**8. Would the project involve the use or development of recombinant DNA or genetically engineered microorganisms, plants, animals, or similar technologies?**

Yes ☐ | No ☐

*If you checked “Yes,” please provide a detailed description of: (1) the genetic modifications; (2) the safety procedures in place for their handling and use over the course of the project; and (3) how they will be disposed of at the project’s conclusion.*

*Explanation:*

**9. Does the project involve the use of any nanoscale materials or nanotechnology?**

Yes ☐ | No ☐

*If you answered “Yes,” please describe: (1) the nanoscale materials used; (2) potential risks those materials may pose; and (3) how they will be disposed of.* Nanotechnology is defined as research and technology development at the atomic, molecular, or macromolecular levels using a length scale of approximately one to one hundred nanometers in any dimension; the creation and use of structures, devices and systems that have novel properties and functions because of their small size; and the ability to control or manipulate matter on an atomic scale.

*Explanation:*

**10. Please quantify, to the extent possible, all emissions into the ambient air resulting from project activities.** Potential emissions include, but are not limited to, greenhouse gas emissions, particulate matter and airborne pollutants. Sources of emissions can include stationary sources, such as boilers, process heaters, generators, solvent usage, etc. or mobile sources, such as vehicles. It is presumed that every project will result in some emissions being released into the ambient air, so applicants answering “none” must explain why no emissions will be released. Please indicate if the project site is within an attainment or non-attainment area. Non-attainment areas are designated parts of the country where air pollution levels persistently exceed the national ambient air quality standards. See [42 U.S.C. 7501\(2\)](#).

*Explanation:*

**11. Would the project involve activities or deployments into marine/freshwater aquatic environments?**

Yes ☐ | No ☐

*If you checked “Yes,” please provide a detailed description of: (1) the activities or deployment; (2) where and when is this activity planned; and (3) what permit/authorizations have been or will be acquired for this activity.*

*Explanation:*

**12. Would the project result in the release of pollutants or other contaminants into any water resources (e.g., surface water, including lakes, rivers, creeks, and wetlands, and ground water)?**

Yes ☐ | No ☐

*If you checked “Yes,” please provide a detailed description of the: (1) pollutants or contaminants to be released; and (2) the water resources that may be affected. Under federal law, the term “pollutant” means dredged spoil, solid waste, incinerator residue, sewage, garbage, sewage sludge, munitions, chemical wastes, biological materials, radioactive materials, heat, wrecked or discarded equipment, rock, sand, cellar dirt and industrial, municipal, and agricultural waste discharged into water. See 33 U.S.C. § 1362(6). The term “contaminant” means any physical, chemical, biological, or radiological substance or matter in water. See 42 U.S.C. § 300f(6).*

*Explanation:*

**13. Would the project result in discharge to a publicly owned treatment works, a sewage treatment plant, soils, retention ponds, or Waters of the United States or a state?**

Yes ☐ | No ☐

*If you checked "Yes", in the box below please quantify and characterize pollutants, including toxic pollutants as defined in 40 CFR 129.4, and thermal discharges. Also indicate if the activity qualifies as a stormwater "discharge associated with industrial activity" as defined in 40 CFR 122.26(b)(14). These non-point source discharges include runoff from manufacturing, processing or raw material storage areas. Additionally, indicate if the activity qualifies as stormwater "discharge associated with construction activity." This is triggered when greater than one acre of land is disturbed (e.g. clearing, excavating, stockpile and laydown areas, access roads, etc.) during construction activities. See 40 CFR 122.26(b)(14)(x) and (b)(15).*

**14. Would the project have the potential to generate noise impacts to sensitive receptors (such as hospitals, schools, daycare facilities, and elderly housing), adjacent communities, employees working at the project site, and/or wildlife?**

Yes ☐ | No ☐

*If you checked "Yes," please provide a description of: (1) the receptors that may be impacted; (2) the level of noise generated (in A-weighted decibels (dbA)) to each receptor; and anticipated duration.*

*Explanation:*

**15. Would the proposed project have the potential to result in any community-based impacts, including:**

- **visual impacts**
- **socioeconomic impacts**
- **changes in local employment**
- **changes in local traffic patterns or density**
- **new transportation access**
- **new utility lines or right-of-ways**
- **other impacts to community services**

**Yes** ☐ | **No** ☐

*If you checked "Yes," please provide a description of: (1) the communities affected; and (2) what effects the project will have.*

*Explanation:*

**16. Please provide a detailed description of how the project will be decommissioned at its conclusion, including the disposition of equipment and materials.**

*Explanation:*

#### SECTION IV. CERTIFICATION BY PROPOSER

I hereby certify that I am authorized to submit, and I do so hereby submit, the information in this questionnaire on behalf of the lead organization named below. I certify that the information provided herein is accurate and complete as of the date shown below. I understand that false statements or misrepresentations may result in civil and/or criminal penalties under 18 U.S.C. § 1001. If I receive any information that would indicate that any of the above-referenced answers are no longer correct or complete, I agree to notify EERE immediately.

Name	
Title	
Prime Recipient	
Signature	
Date	

EERE ENVIRONMENTAL QUESTIONNAIRE  
ATTACHMENT 1

**Definitions for Question 3 – Environmentally Sensitive Resources**

**Historical, Archeological or Cultural Resources.** The National Historic Preservation Act, the Historic Sites, Buildings and Antiquities Act; the American Indian Religious Freedom Act, and the Archeological Recovery Act provide for the preservation of sites, buildings, structures, or objects of historic, archeological, or architectural significance designated by Indian, federal, state, or local governments or listed or eligible for listing on the National Register of Historic Places. The Archeological Resources Protection Act, Antiquities Act, and Native American Graves Protection and Repatriation Act also apply if the proposed action is on federal and tribal land. This item should be checked "yes" if a proposed action is in an area that meets any of the above, or if an archeological survey has not been performed. Provide documentation of any consultation or State Historic Preservation Officer determination letters if available. If this information is not available or a survey has not been conducted recently, DOE may require such a survey to be conducted prior to any proposed project implementation.

**Threatened/Endangered (T/E) Species and/or Critical Habitat.** The Endangered Species Act provides for protection of animals, birds, fish, plants, and other living organisms that are in danger of extinction. A list of T/E species is provided in 50 CFR Part 17. Consultations with the U.S. Department of Interior Fish and Wildlife Service (FWS) and the corresponding state agency should be documented. This item should be checked "yes" if any state- or federally-listed or proposed threatened or endangered species or critical habitat is located in the potential area of affect, or could be indirectly affected by the proposed action. If the status of T/E species at the proposed project location is unknown, please contact the local or state office of the FWS to obtain a listing of potential species and habitats found in the area.

**Floodplains.** Flood plains are lowlands adjoining inland and coastal waters with a 1 percent or greater chance of inundation in any given year. Indicate "yes" if the proposed project location is in or adjacent to a floodplain area. If documentation is available noting the floodplain boundaries, please provide a copy. Appropriate documentation of the 100 year floodplain [or 500 year floodplain for certain "flood critical" actions] boundaries include: Flood Insurance Rate Maps or Flood Hazard Boundary Maps prepared by the Federal Emergency Management Agency (FEMA) of the U.S. Department of Homeland Security. Executive Order 11988 Floodplain Management requires federal agencies to avoid incompatible development in floodplains, and consider the conformance of the proposed action to floodplain standards, potential effects of the proposed actions on floodplains, and potential effects of floodplain modifications on other local properties and improvements.

**Wetlands.** Wetlands are areas inundated by surface or groundwater with a frequency sufficient to support a prevalence of vegetative or aquatic life that requires saturated or seasonally saturated soil conditions for growth and reproduction. [10 CFR 1022.4]. Wetlands generally include swamps, marshes, bogs, and similar areas such as sloughs, potholes, wet meadows, river overflow, mudflats, and natural ponds. Man-made ponds can qualify as wetlands if invasion of appropriate flora or fauna has occurred. Appropriate documentation of presence or absence of wetlands within the area of project effect includes: FWS National Wetlands Inventory; U.S. Department of Agriculture Soil Conservation Service Local Identification Maps; U.S. Geological Service (USGS) Local Identification Maps; USGS Topographic Maps; state wetland inventories; and Regional or local government sponsored wetland and land use inventories. Executive Order 11990 Protection of Wetlands requires federal agencies to consider the effects of proposed actions on wetlands, and to avoid, to the extent possible, destruction and modification of wetlands. If the status of land in or around the proposed project location is unknown, please contact the state or local U.S. Army Corps of Engineer's office.

**Coastal Zones.** Coastal zones are the coastal waters and adjacent shorelands of the Great Lakes, and the Atlantic, Pacific, and Arctic Oceans, Gulf of Mexico, and Long Island Sound. The term "coastal state" includes the states bordering on those bodies, plus Puerto Rico, the Virgin Islands, Guam, the Commonwealth of Northern Mariana Islands, and the Trust Territories of the Pacific Islands and American Samoa. Coastal states have authority regarding actions, which directly affect coastal zones, in accordance with the Department of Commerce regulations promulgated under the Coastal Zone Management Act. Federal activities and federal development projects must be consistent with state coastal zone management (CZM) programs to the maximum extent possible. Federal activities are those performed by or on behalf of a federal agency in the exercise of its statutory responsibilities, but do not include the issuance of a federal license or permit or the granting of federal assistance. Indicate "yes" if the proposed action is located in a coastal zone State or is in the vicinity of a coastal zone State. If a consistency determination has been obtained, or a written "negative determination" (indicating that a consistency determination is not required) please provide a copy. See 15 CFR 930.

**Migratory Birds, Golden or Bald Eagles.** Other federal and state laws that protect wildlife species include the Bald and Golden Eagle Protection Act and the Migratory Bird Treaty Act. Examples of protected migratory birds include Canadian geese and great blue herons. This item should be checked "yes" if the proposed action may directly or indirectly impact any of these species or their habitats. If the status of other protected species is unknown in the proposed project location, please contact the local or state office of the FWS to obtain a listing of potential species and habitats found in the area.

**Depletion of a Non-Renewable Resource.** Non-renewable resources are naturally occurring substances (e.g., metals, minerals, fossil fuels) that are in limited supply and cannot be replaced or regenerated. The exhaustion or threatened exhaustion of such resources could have significant ramifications. Indicate "yes" if the proposed action would involve a resource that is in limited supply.

**Areas Having a Special Designation.** Various federal laws restrict the ability of federal agencies to aid developments affecting national wilderness areas, national memorial parks, national parks, national monuments, national primitive areas, national preserves, national recreational areas, national wild and scenic rivers, national grasslands, national wildlife refuges, national forests, national lakeshore or seashore, and national trails. Indicate "yes" if any of these areas of special environmental or natural significance is located in close proximity to the proposed project location and describe the specific special designation.

**Prime Farmland, Unique Farmland, or Other Farmland of Statewide or Local Importance.** The Farmland Protection Policy Act requires federal agencies to consider ways to lessen the effects of proposed actions that convert or adversely affect prime farmland which is not currently classified or designated for future urban development or water storage. Prime farmland is land that has the best combination of physical and chemical characteristics for producing food, feed, fiber, forage, oilseed, and other agricultural crops with minimum inputs of fuel, fertilizer, pesticides, and labor, and without intolerable soil erosion. Prime farmland also includes land that possesses the above characteristics but is being used currently to produce livestock and timber. Prime farmland does not include lands designated for future urban development, such as land that has been identified for commercial, industrial, or residential development by zoning code, ordinance, or a comprehensive land use plan.[7 U.S.C. 4201(c)(1)] The U.S. Department of Agriculture Natural Resource Conservation Service (NRCS) field office serving the area can provide assistance in determining whether a proposed location or site meets the definition of Prime farmland. Form AD 1006, the Farmland Conversion Impact Rating Form, available at NRCS offices, should be used for this purpose.

**Special Sources of Water.** Through the Safe Drinking Water Act, EPA and states designate Critical Aquifer Protection Areas and Sole or Principal Source Aquifers, and State-designated Wellhead Protection Areas in accordance with 42 U.S.C. 300h-6(b), 42 U.S.C. 300h-3(e), and 42 U.S.C. 300h-7(e), respectively. Such areas are accorded special protection to assure the quality and availability of public water supplies. Indicate "yes" if the proposed action is located in an area designated for protection (e.g., is included in an area wide groundwater quality protection plan), or would constitute a potential source of contamination within an existing or expected wellhead protection area serving a public water supply. If aquifer designations are not known for the proposed project area, contact the environmental protection office for the State.

## Definitions for Question 4 – Activities or Areas of Concern

**Clearing or Excavation.** Clearing or excavation refers to the removal of vegetation, soil, sediments, or disturbance of land surfaces and subsurfaces including cutting, burning, digging, grading, filling, or blasting. Provide the estimated area to be affected, the quantity of material to be added or removed, and the planned disposition of spoils. Describe the potential for runoff or erosion, any control techniques to be employed, and the distance to nearby surface water bodies, including wetlands.

**Dredge and/or Fill.** Dredge and/or fill is the excavation of material from waters of the United States. Filling is the discharge of material into waters of the United States to change the bottom elevation. Waters of the United States are all interstate waters, and intrastate lakes, rivers, streams, mudflats, wetlands, sloughs, plays, or natural ponds. These activities include "ocean dumping" as regulated under Sections 102 and 103 of the Clean Water Act, construction of dams, dikes, piers, or others that could alter the course of waters of the United States. Also included is any shore activity with the potential for runoff to waters of the United States. If available, include documentation of appropriate consultation(s), e.g., with the U.S. Army Corps of Engineers under Section 404 of the Clean Water Act or Sections 9 and 10 of the Rivers and Harbors Act; and with EPA [40 CFR Parts 220-233].

**Pre-Existing Contamination.** Indicate if the proposed action will disturb hazardous substances, pollutants, contaminants, or Comprehensive Environmental Response and Liability Act (CERCLA)-excluded petroleum and natural gas products that pre-exist in the environment. Quantify and characterize such pre-existing substances, including whether they are present above background or regulatory levels. Also quantify the volume of contaminated materials (e.g. soil, sediment, groundwater, debris, etc.) which would require transport to a properly permitted treatment, storage, or disposal facility as the result of the proposed action.

**Pesticide Use.** A pesticide is a substance intended for preventing, destroying, repelling, or mitigating any type of pest including insects, rodent nematode, fungus, or weed, and any substance intended for use as a plant regulator, defoliant, or desiccant. While the Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA) imposes no requirements on private applicators, commercial pesticide applicators must be certified by the state or U.S. EPA. Additionally, FIFRA requires that certain pesticides known as "restricted use pesticides" (listed in 40 CFR 152.175) to only be applied by certified applicators. If either commercial or private pesticide application, or the utilization of restricted use pesticides are anticipated, indicate "yes". If a private application is anticipated, document measures to be undertaken to assure safe storage, use, and disposal.

**Asbestos.** If the proposed action includes demolition or renovation of an existing building, you must determine if asbestos is present. Common asbestos containing building materials may include but are not limited to floor tile, mastics, wall board, joint compound, acoustic ceiling tiles, thermal insulation, spray-on fire proofing, glazing, caulking, roof flashing, felts, and mastics. Demolition and renovation activities that may impact asbestos containing building materials are regulated by the U.S. Occupational Health and Safety Administration (OSHA) through the Asbestos in Construction Standard and asbestos air emissions from asbestos abatements are regulated by the EPA as a hazardous air pollutant under the Clean Air Act (CAA). Include a description of measures to be undertaken to comply with asbestos removal requirements of 29 CFR 1926.1100 and 40 CFR 61 (Subpart M).

**Polychlorinated Biphenyls (PCBs).** PCBs are a family of man-made organic chemicals that were domestically manufactured from 1929 until banned in 1979 due to their toxicity and persistence in the environment. Given their non-flammability, chemical stability, high boiling point, and electrical insulating properties, PCBs were largely used as dielectric and coolant fluids in transformers, capacitors, electric motors, etc. Manufacture, processing, transport, use, marking, storage, and disposal of PCBs are regulated by EPA [40 CFR Part 761] in accordance with the Toxic Substances Control Act. Some states also regulate PCBs as hazardous waste. If the proposed action involves replacement or removal of capacitors, transformers, voltage regulators, circuit breakers, switches, cables, electromagnets, or other electrical equipment, presence or absence of PCBs should be ascertained. A "yes" indication should be supported with information on the anticipated concentration and quantity of PCB oil, and the intended method/location of disposal.

**Navigable Air Space.** The U.S. Department of Transportation Federal Aviation Administration (FAA) regulates objects which invade navigable air space or otherwise constitute an obstruction to air navigation, and determines whether such activities constitute a navigation hazard. Indicate "yes" if the proposed action involves construction or alteration more than 200 feet above ground level, any construction or alteration in instrument approach areas, and other construction or alteration identified in 14 CFR 77.13. Document notification of the appropriate Manager, Air Traffic Division, of the FAA Regional Office for the area within which the construction or alteration will be located. Copies of FAA Form 7460-1 Notice of Proposed Construction or Alteration may be obtained from the regional FAA office or electronically through FAA's website.

**Underground Storage Tanks.** Indicate "yes" if 10 percent or more of tank volume (including the volume of underground pipes) will be beneath surface of the ground. Indicate if installation, use, or removal of underground storage tanks is anticipated, and whether tank use is/was for storage/collection of hazardous waste, heating oil, other petroleum or petroleum-based substances, stormwater, or wastewater. Describe any leak detection/monitoring methods to be used for storage of hazardous waste or regulated petroleum products like gasoline or diesel.

**Underground Extraction/Injection.** Underground extraction/injection is the subsurface emplacement of fluids through a bored, drilled, or driven well, or through a dug well where the depth of the well is greater than the largest surface dimension. If the proposed action involves construction or use of an injection well, indicate "yes," and describe the class of the well as defined in 40 CFR 146.5, the type and quantity of contaminants (e.g., waste disposal, hydrocarbon or mineral extraction) and whether the injection involves an exempt aquifer as defined in 40 CFR 146.4.



# Attachment F – National Historic Preservation Act (NHPA) State Historic Preservation Office (SHPO) Reporting Form

**NOTE:**

Pages 1 - 4 that follow only apply to renovations to existing building structures. If the proposed project will include any improvement work to other than existing building structures, pages 5 & 6 must be submitted to the Louisiana SHPO for their approval of the proposed work. This approval is often a lengthy process therefore it is highly recommended that once a project has been approved for funding by the Louisiana Department of Natural Resources, the project manager immediately start the SHPO approval process.





# Louisiana Revolving Loan Fund State Historic Preservation Office Form

## Property Information

### Project Property Location

Zip

City

State

Street Address

Project Title

### Applicant Information

City/Parish/Company

or Organization

Primary Contact Name

Title

Phone & e-mail

Mailing address same as above if not fill out below:

Zip

City

State

Street Address

Parish /County

### Notes:

## Step 1: Qualifying Questions

**A** Year property constructed (yyyy)

Approx property age (years)

Is property more than 50 years old? ☐ Yes ☐ No

**B** Is property located in a Federal Historic Register District (select one) ☐ Yes ☐ No

If the answer to *both* A & B is "No", further review is not required. Skip to step 4: Certification.

## Step 2: Review proposed work

If the answer to *either* A or B above is "Yes", you must review the *exempt work list* to confirm that all the proposed work scope is exempt from SHPO review. After reviewing your work scope against the exempt work list, answer the following

**C** Is *all* the work proposed for the project included on the exempt work list? ☐ Yes ☐ No

If the answer to C is "Yes", no further review is required. Skip to step 4: Certification.

## Step 3: SHPO Review

If the answer to C is "No", your project must be reviewed by SHPO. Fill out the SHPO Cover Letter and submit to your local SHPO office for review.

## Step 4: Certification

*By signing this form you certify that the above statements are true and accurate.*

Version 7/10/15

Authorized Contact Name

Authorized Contact Signature

Date

# Exempt Work List

The following work items are exempt from SHPO review. For your project, indicate "y" if the item is **included** in your project work scope. Indicate "n" if the item is **excluded** from your project work scope. Project scope items for your project that are not noted on this list **will require SHPO review prior to implementation**.

Included in work scope  
(Check BOX if Yes)

## A. Permitted Exterior Work

1 Air sealing of the building shell (including caulking, weather-stripping, and other air infiltration control measures on windows and doors, and installing thresholds in a manner that does not harm or obscure historic windows or trim).	
2 Thermal insulation (such as non-toxic fiberglass and foil wrapped, in walls, floors, ceilings, attics, and foundations in a manner that does not harm or	
3 Removable transparent film on windows, solar screens, or window louvers, in a manner that does not harm or obscure historic windows or trim).	
4 Reflective roof coating in a manner that closely resembles the historic materials and form, or with materials that restore the original feature based on historic evidence, and in a manner that does not alter the roofline, or where not on a primary roof elevation or visible from the public right-of-way.	
5 Storm windows or doors, and wood screen doors in a manner that does not harm or obscure historic windows or trim.	
6 In-kind replacement or repair of primary windows, doors and door frames that closely resemble existing substrate and framing	
7 Repair of minor roof and wall leaks prior to insulating attics or walls, provided repairs closely resemble existing surface composite	
8 Repairing or replacing in kind existing driveways, parking areas, and walkways with materials of similar appearance	
9 Excavating to gain access to existing underground utilities to repair or replace them, provided that the work is performed consistent with previous	
10 Ventilating crawl spaces	
11 Upgrade exterior lighting (replacement with metal halide bulbs, LEDs, or others) along with ballasts, sensors and energy storage devices <b>not visible</b>	

## B. Permitted Interior Work

### 1. Energy efficiency work within the building shell:

a. Thermal insulation in walls, floors, ceilings, attics, crawl spaces, ducts and foundations	
b. Plumbing work, including installation of water heaters and water conserving fixtures	
c. Electrical work, including improving lamp efficiency	
d. Sealing air leaks using weather stripping, door sweeps, and caulk and sealing major air leaks associated with bypasses, ducts, air conditioning units,	
e. Repair or replace water heaters	
f. Adding adjustable speed drives such as fans on air handling units, cooling tower fans, and pumps	
g. Install insulation on water heater tanks and water heating pipes	
h. Install solar water heating systems, provided the structure is not visible from the public right of way	
i. Install waste heat recovery devices, including desuperheater water heaters, condensing heat exchangers, heat pump and water heating heat recovery systems, and other energy recovery equipment	
j. Repair or replace electric motors and motor controls like variable speed drives.	
k. Incorporate other lighting technologies such as dimmable ballasts, day lighting controls, and occupant controlled dimming	
l. Adding or replacing existing building controls systems including HVAC control systems and the replacement of building-wide pneumatic controls with digital controls, thermostats, dampers, and other individual sensors like smoke detectors and carbon monoxide detectors (wired or non-wired)	
m. Replacement of existing HVAC equipment including pumps, motors, boilers, chillers, cooling towers, air handling units, package units, condensers, compressors, heat exchangers that do not require a change to existing ducting, plumbing, electrical, controls or a new location, or if ducting, plumbing, electrical and controls are <b>on the rear of the structure or not visible from any public right of way</b> .	
n. New installation of non-hard wired devices including photo-controls, occupancy sensors, carbon dioxide, thermostats, humidity, light meters and other	

### 2. Work on heating and cooling systems:

a. Clean, tune, repair or replace heating systems, including furnaces, oilers, heat pumps, vented space heaters, and wood stoves	
b. Clean, tune repair or replace cooling systems, including central air conditioners, window air conditioners, heat pumps, and evaporative coolers	
c. Install insulation on ducts and heating pipes	
d. Conduct other efficiency improvements on heating and cooling systems, including replacing standing pilot lights with electronic ignition devices and	
e. Modify duct and pipe systems so heating and cooling systems operate efficiently and effectively, including adding return ducts, sealing duct work, replace diffusers and registers, replace air filters, install thermostatic radiator controls on steam and hot water heating systems	
f. Install programmable thermostats, outdoor reset controls, UL listed energy management systems or building automation systems and other HVAC	

### 3. Energy efficiency work affecting the electric base load of the property:

a. Convert incandescent lighting to fluorescent	
b. Add reflectors, LED exit signs, efficient HID fixtures, and occupancy (motion) sensors	
c. Replace refrigerators and other appliances	

### 4. Health and safety measures:

a. Installing fire, smoke or carbon dioxide detectors / alarms	
b. Repair or replace vent systems on fossil-fuel-fired heating systems and water heaters to ensure that combustion gasses draft safely to outside	
c. Install mechanical ventilation, in a manner not visible from the public right of way, to ensure adequate indoor air quality if house is air-sealed to	

\*PA is the programmatic agreement that exempts each item from SHPO review. It is included for reference and auditing purposes only.

## Additional Work List

List below all project scope items that are ***not included*** in the list above. For example, installing new exterior siding, installing new roofing, or painting the exterior.

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# Section 106 Cover Letter

Mr. Phil Boggan  
Deputy State Historic Preservation Officer  
Louisiana Office of Cultural Development  
P.O. Box 44247  
Baton Rouge, LA 70804-44247      email to: [section106@crt.state.la.us](mailto:section106@crt.state.la.us)

Dear Mr. Broggan

The Louisiana Department of Natural Resources (LDNR) will be managing the disbursement of State Energy Program funding (from which LRLP funds are drawn) allocated by the U.S. Department of Energy (DOE) according to the 2009 American Recovery and Reinvestment Act (ARRA).

Applicant Contact Information:

<i>name</i>	<input type="text"/>	<input type="text"/>
<i>address/email</i>	<input type="text"/>	<input type="text"/>
<i>City, State, Zip</i>	<input type="text"/>	<input type="text"/>

Agency Contact Information: *name* Louisiana Department of Natural Resources  
Technology Assessment Division  
*Attention:* Louisiana Revolving Loan Fund Program  
*address/email* P.O. Box 94396 [larlf@la.gov](mailto:larlf@la.gov)  
*City, State, Zip* Baton Rouge, LA 70804-9693

Description of the Area of Potential Effects (APE): *The APE is "the geographic area or areas within which an undertaking may cause changes in the character or use of historic properties, if any such properties exist." For single family homes, this is generally the area within 1/4 mile of the home. See fact sheet for additional information*

	Latitude
	Longitude

*The APE is an area extending north/south from Front St to 3rd Street and east/west from Ivy St to Orange St. As shown on the attached map, the project is located in the approximate center of the APE.*

Describe all historic properties within the APE: *Historic properties are any buildings/structures 50 years old or more.*

This image shows a blank sheet of white paper with horizontal ruling lines. On the left side, there are numbers from 1 to 18, each aligned with a specific line. The lines are evenly spaced and extend across the width of the page. The numbers are printed in a simple, black font.

*use an additional piece of paper if necessary*

Describe the project work scope in detail.

Detailed design plans are attached

☐ Yes  
☐ No

Photos of all hiistoric properties in  
the APE are attached

☐ Yes  
☐ No

\_\_\_\_\_  
*Authorized Contact Name*

\_\_\_\_\_  
*Authorized Contact Signature*

\_\_\_\_\_  
*Date*

# Request for Taxpayer Identification Number and Certification

Give Form to the  
requester. Do not  
send to the IRS.

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____  <input type="checkbox"/> Other (see instructions) ▶ _____	
	<input type="checkbox"/> Exempt payee	
	Address (number, street, and apt. or suite no.) City, state, and ZIP code List account number(s) here (optional)	
Requester's name and address (optional)		

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number								
			-				-	

Employer identification number								
			-					

## Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

### Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

**Note.** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,
- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

**Foreign person.** If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

**Nonresident alien who becomes a resident alien.** Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

**What is backup withholding?** Persons making certain payments to you must under certain conditions withhold and pay to the IRS a percentage of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

### **Payments you receive will be subject to backup withholding if:**

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see *Special rules for partnerships* on page 1.

## **Updating Your Information**

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

## **Penalties**

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

## **Specific Instructions**

### **Name**

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

**Sole proprietor.** Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name/disregarded entity name" line.

**Partnership, C Corporation, or S Corporation.** Enter the entity's name on the "Name" line and any business, trade, or "doing business as (DBA)" name on the "Business name/disregarded entity name" line.

**Disregarded entity.** Enter the owner's name on the "Name" line. The name of the entity entered on the "Name" line should never be a disregarded entity. The name on the "Name" line must be the name shown on the income tax return on which the income will be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a domestic owner, the domestic owner's name is required to be provided on the "Name" line. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on the "Business name/disregarded entity name" line. If the owner of the disregarded entity is a foreign person, you must complete an appropriate Form W-8.

**Note.** Check the appropriate box for the federal tax classification of the person whose name is entered on the "Name" line (Individual/sole proprietor, Partnership, C Corporation, S Corporation, Trust/estate).

**Limited Liability Company (LLC).** If the person identified on the "Name" line is an LLC, check the "Limited liability company" box only and enter the appropriate code for the tax classification in the space provided. If you are an LLC that is treated as a partnership for federal tax purposes, enter "P" for partnership. If you are an LLC that has filed a Form 8832 or a Form 2553 to be taxed as a corporation, enter "C" for C corporation or "S" for S corporation. If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301.7701-3 (except for employment and excise tax), do not check the LLC box unless the owner of the LLC (required to be identified on the "Name" line) is another LLC that is not disregarded for federal tax purposes. If the LLC is disregarded as an entity separate from its owner, enter the appropriate tax classification of the owner identified on the "Name" line.

**Other entities.** Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name/disregarded entity name" line.

## Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the "Business name/disregarded entity name," sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

**Note.** If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
2. The United States or any of its agencies or instrumentalities,
3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,
7. A foreign central bank of issue,
8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
9. A futures commission merchant registered with the Commodity Futures Trading Commission,
10. A real estate investment trust,
11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
12. A common trust fund operated by a bank under section 584(a),
13. A financial institution,
14. A middleman known in the investment community as a nominee or custodian, or
15. A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 5 and 7 through 13. Also, C corporations.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 7 <sup>2</sup>

<sup>1</sup> See Form 1099-MISC, Miscellaneous Income, and its instructions.

<sup>2</sup> However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney, and payments for services paid by a federal executive agency.

## Part I. Taxpayer Identification Number (TIN)

**Enter your TIN in the appropriate box.** If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**Note.** See the chart on page 4 for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at [www.ssa.gov](http://www.ssa.gov). You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at [www.irs.gov/businesses](http://www.irs.gov/businesses) and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting [IRS.gov](http://IRS.gov) or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note.** Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

**Caution:** A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

## Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, below, and items 4 and 5 on page 4 indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on the "Name" line must sign. Exempt payees, see *Exempt Payee* on page 3.

**Signature requirements.** Complete the certification as indicated in items 1 through 3, below, and items 4 and 5 on page 4.

**1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.** You must give your correct TIN, but you do not have to sign the certification.

**2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.** You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

**3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

**4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

**5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

### What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee <sup>1</sup>
b. So-called trust account that is not a legal or valid trust under state law	The actual owner <sup>1</sup>
5. Sole proprietorship or disregarded entity owned by an individual	The owner <sup>3</sup>
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulation section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulation section 1.671-4(b)(2)(i)(B))	The trust

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name and you may also enter your business or "DBA" name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 1.

\*Note. Grantor also must provide a Form W-9 to trustee of trust.

**Note.** If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

### Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

### Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to [phishing@irs.gov](mailto:phishing@irs.gov). You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: [spam@uce.gov](mailto:spam@uce.gov) or contact them at [www.ftc.gov/idtheft](http://www.ftc.gov/idtheft) or 1-877-IDTHEFT (1-877-438-4338).

Visit [IRS.gov](http://IRS.gov) to learn more about identity theft and how to reduce your risk.

### Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

