

State of California
CALIFORNIA REGIONAL WATER QUALITY CONTROL
BOARD

SANTA AN REGION

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ENHANCED COMPLIANCE ACTIONS (ECA)

Application

(Please review the General ECA Requirements before completing this form; please provide all relevant information that could be used for evaluating your application.)

The following information is needed for consideration of an ECA project for funding under the Water Board's Enforcement Policy.

I. Information about the Entity Requesting ECA Funds

Name of ECA Proponent: _____
Address: _____
Contact Name: _____
Phone number: _____ Fax: _____
E-mail address: _____

II. ECA Project Details

Name of the Project:

Project Summary: (include project goals, costs, milestones, and completion dates. You may attach the details on a separate sheet.)

Is this a capital improvement or operational improvement project that is required by law?
(If yes, this project will not qualify for ECA funds)

Project Deliverables: (interim and final reports, analytical results, model runs, etc.)-

III. Total project cost and the amount of ECA money requested: (include a breakdown of project costs such as overhead/project management, design/consultation, construction/implementation, sample collection/analysis, report preparation; indicate other funding sources, if any. For other funding sources, indicate if the funds have been committed, any restrictions on the funds, and the amount.)

IV. ACL/MMP Action Pertaining to this ECA request:
