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**Thank you for joining!**  
**We will begin soon**

**Lead Service Line Funding  
& Technical Assistance**

**Q&A Session**

**1:00 - 3:00 PM**

# Lead Service Line Funding & Technical Assistance Q&A Session

Presented by  
Leticia Padilla, Laura Wadsworth, & Owen Bratton  
Water Resource Control Engineers  
Division of Financial Assistance (DFA)



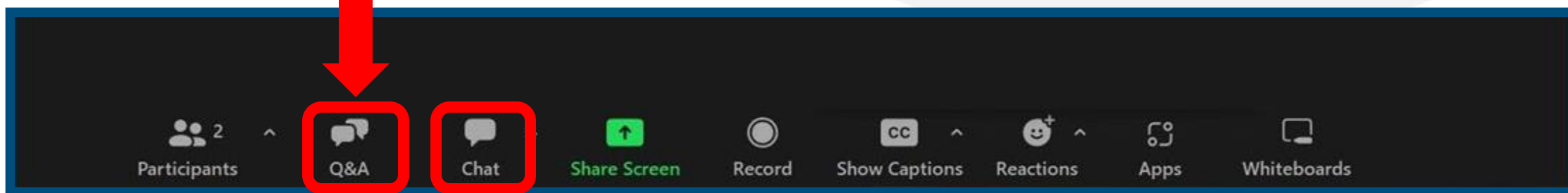
October 20, 2023 – 1:00 - 3:00 PM

# Meeting Logistics

- This meeting is being recorded. Slide PDFs are available.
- Please mute yourself when not speaking.
- Please turn off your camera when not speaking.
- Please make sure your screen name reflects your actual name.
- Please rejoin the meeting if you get disconnected.

# Meeting Logistics

- Questions will be answered at the end of our presentation.
- Use the **“Q&A”** function to add questions to the queue.



- Use the **“Chat”** function if you need tech support; or email us at [OPP-SAFER@waterboards.ca.gov](mailto:OPP-SAFER@waterboards.ca.gov).

# Q&A Panel Members

- **Division of Financial Assistance**

Michael Downey

Kim Dinh

Lisa Machado

- **Division of Drinking Water**

Kurt Souza

- **Office of Chief Counsel**

Jean Fung

# Agenda

- Lead Service Line (LSL) Funding Program
- Funding Eligibility
- Disadvantaged Communities
- New LSL Application and Financial Package
- New Technical, Managerial, and Financial (TMF) Form
- Technical Assistance (TA) for LSL Inventory
- How to Apply
- Links to Additional Information
- Q&A Session

# Lead Service Line Funding Program

- Bipartisan Infrastructure Law

		FFY 2022	FFY 2023
Principal Forgiveness	49%	\$122,552,430	\$14,038,500
Zero percent loans	25%	\$62,542,500	\$7,162,500
Set-asides	26%	\$65,027,820	\$7,449,000
<b>TOTAL</b>	<b>100%</b>	<b>\$250,107,000</b>	<b>\$28,650,000</b>



# Lead Service Line Funding Program

## **Eligible Applicants:**

- Community Water Systems (CWS)
- Non-Profit Non-Transient Non-CWS

## **Eligible Projects:**

- Complete LSL Inventories
- Replacement Projects



# Funding Eligibility

- Identification, planning, design, and replacement of lead service lines and fittings
- Lead goosenecks, pigtails, connectors, and galvanized service lines downstream from lead
- Replace the entire lead service line(Includes customer portion)

# Federal Requirements

- Davis-Bacon Prevailing Wage
- American Iron and Steel
- Build America Buy America
- Environmental Federal Cross-Cutters

# Disadvantaged Community

- A community with an annual Median Household Income (MHI) that is less than 80 percent of the statewide annual MHI
- The entire service area of a CWS, or a community therein
- Eligible for up to 100% Principal Forgiveness

# LSL Application

- **NEW** application specific to LSL funding
- Highlights:
  - Inventory or Replacement
  - General Applicant Information
  - Proposed Schedule
  - Managerial Information
  - Comprehensive Response to Climate Change Acknowledgement

## Lead Service Line Application Package

☐ INVENTORY (PLANNING)

☐ REPLACEMENT (CONSTRUCTION)

I. APPLICANT INFORMATION			
Project Name:			
Applicant (Entity) Name:			
Water System Number:			
Water Supply Permit Number:			
Street Address:	City:	State:	Zip+4 Code:
Mailing Address:	City:	State:	Zip+4 Code:
Applicant Total Population:			
Applicant Total Number of Service Connections: Residential:		Commercial:	
Industrial:		Other:	
Current year median household income (MHI):			
Congressional District(s):			
State Senate District(s):			
State Assembly District(s):			
Unique Entity ID:		Federal Tax ID No.:	
Authorized Representative Name:		Title:	
Phone No.:		Email Address:	
Contact Person Name:			
Phone No.:		Email Address:	
Local Counsel Name:			
Phone No.:		Email Address:	
II. PROJECT INFORMATION AND PROPOSED SCHEDULE			
Estimated Amount of Financial Assistance Requested:			
<b>Other Funding Sources</b>			
List any other funding sources for this project, along with the amount of additional funding and date of availability			
For Lead Service Line Inventory			
Include Scope of Work (Label as Attachment L1)			
For Lead Service Line Replacement			

# Environmental Application Package

- Same form and review process as DWSRF
- Inventory projects with soil disturbance are subject to National Historic Preservation Act Section 106 review
- Lead agency prepares the CEQA documents

**Environmental Planning Application**

Applicant (Entity) Name: \_\_\_\_\_

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

Project Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_

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**I. California Environmental Quality Act (CEQA) Status**

1. Has a CEQA document been completed which identifies any portion of the planning project?

**NOTE: All funded projects must be circulated at the Office of Planning and Research, State Clearinghouse (OPR)**

☐ Yes - Document name: \_\_\_\_\_  
 Lead agency approval date: \_\_\_\_\_  
 State Clearinghouse Number: \_\_\_\_\_

**ENVIRONMENTAL PACKAGE  
(CONSTRUCTION)**

I. GENERAL INFORMATION	
Applicant (Entity) Name:	_____
Project Title:	_____
Environmental Contact Person:	_____
Phone:	_____
Email:	_____
Project Description:	<div style="height: 100px; border: 1px solid black;"></div>

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II. CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA) STATUS
CEQA Lead Agency <sup>1</sup> :
Environmental Document Status:
Is the project categorically or statutorily exempt? <input type="checkbox"/> Yes or <input type="checkbox"/> No
Has the CEQA process started for this project <sup>2</sup> ? <input type="checkbox"/> Yes or <input type="checkbox"/> No
Has compliance with the federal cross-cutting requirements started? <input type="checkbox"/> Yes or <input type="checkbox"/> No
Provide the State Clearinghouse Number <sup>3</sup> :
What type of CEQA document (Negative Declaration, Mitigated Negative Declaration, ...)

# LSL Financial Package

- Simplified
- Project identifying information
- 6 fields to fill out
- Necessary Attachments

## LEAD SERVICE LINE FINANCIAL PACKAGE

☐ INVENTORY (PLANNING) ☐ REPLACEMENT (CONSTRUCTION)

Applicant (Entity) Legal Name:				
Pledged Revenues And Fund(s) For The Project:				
Project Name:				
Contact Person:				Phone: ( )
1. Amount of Assistance Requested: \$				
2. Term Requested ( <input type="checkbox"/> N/A):				
Inventory: <input type="checkbox"/> 5-Year <input type="checkbox"/> 10-Year				
Replacement: <input type="checkbox"/> 20-Year <input type="checkbox"/> 30-Year				
3. Other Project Funding Sources				
Name and Type of Funding Sources	Amount	Applied	Approved	Received
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Active Service Connections				
Service Connection Type	Number of Service Connections	Average Monthly Billing (Last 12 months) Per Connection (If applicable)		
Residential				
Commercial				
Industrial				
Other				
TOTAL				
Rate increase effective date for projected monthly service charges:				
5. Discussion of Material Events, Material Obligation Conditions, and Any Debt Limit				
Identify any current prior material events such as bankruptcy, defaults, litigation, grand jury findings, unscheduled draws on reserve funds, substitution of insurers or their failure to perform, unscheduled draws on credit enhancements, actions taken in anticipation of filing Chapter 9, rating changes, relevant conditions in material obligations, and any local debt limit.				

# TMF Assessment Certification Form for LSL Funding

- Technical, managerial, and financial (TMF) capacity
- LSL projects contribute to TMF capacity
- Form is intended to make meeting the TMF requirements easy

## TMF Assessment Certification Form For Lead Service Line (LSL) Funding State Water Resources Control Board (SWRCB)

Water System Name: \_\_\_\_\_ Water System Number: \_\_\_\_\_

- The Authorized Representative of the water system must sign this form to certify that the below information is correct.
- Check the appropriate boxes below to indicate whether the water system satisfies each TMF element, as described in the TMF Instructions at [https://www.waterboards.ca.gov/drinking\\_water/certlic/drinkingwater/documents/instructions\\_tmf\\_assessment.pdf](https://www.waterboards.ca.gov/drinking_water/certlic/drinkingwater/documents/instructions_tmf_assessment.pdf). Please note that the designation of elements as either Mandatory or Necessary in the linked TMF Instructions does not apply to this form.
- A water system can be directed to complete a full or partial TMF assessment at the discretion of the Division Financial Assistance (Division).
- ~~Small disadvantaged~~ water systems that do not have adequate TMF capacity may be referred to the technical assistance program. Systems other than ~~small disadvantaged~~ water systems may be required address TMF capacity as a condition of receiving funding. The specific requirements of the TMF Instructions may be modified for the LSL program at the discretion of the Division.

**Does your water system satisfy the following requirement?**

	Yes	No
<b><u>Technical Capacity</u></b>		
1. Consolidation Feasibility:	<input type="checkbox"/>	<input type="checkbox"/>
2. System Description:	<input type="checkbox"/>	<input type="checkbox"/>
3. Certified Operators:	<input type="checkbox"/>	<input type="checkbox"/>
4. Source Capacity Assessment:	<input type="checkbox"/>	<input type="checkbox"/>
5. Operations Plan:	<input type="checkbox"/>	<input type="checkbox"/>
6. Training:	<input type="checkbox"/>	<input type="checkbox"/>
<b><u>Managerial Capacity</u></b>		
7. Ownership:	<input type="checkbox"/>	<input type="checkbox"/>
8. Water Rights:	<input type="checkbox"/>	<input type="checkbox"/>
9. Organization:	<input type="checkbox"/>	<input type="checkbox"/>
10. Emergency Response Plan:	<input type="checkbox"/>	<input type="checkbox"/>
<b><u>Financial Capacity</u></b>		
11. Budget Projection/Capital Improvement Plan:	<input type="checkbox"/>	<input type="checkbox"/>
12. Budget Control:	<input type="checkbox"/>	<input type="checkbox"/>

To the best of my knowledge, I certify that I am authorized to submit this TMF form, and that all information provided is accurate:

Printed Name, Title of Authorized Representative: \_\_\_\_\_

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



# Technical Assistance (TA)

- Prioritizes Small CWSs and DACs
- Aims to assist with inventorying work
- New "Request for Lead Service Line Assistance" form
  - DFA now accepts TA requests
  - Assistance to begin in early 2024

# Request LSL TA

- LSL specific technical assistance form

## REQUEST FOR LEAD SERVICE LINE ASSISTANCE

**Instructions:** If an item is not relevant or unknown, enter "N/A" or "unknown."

Please e-mail the completed form to: [DFA-LSLR@Waterboards.ca.gov](mailto:DFA-LSLR@Waterboards.ca.gov)

Date of Submittal: \_\_\_\_\_ Name of Requestor: \_\_\_\_\_

**A. Public Water System Name:** \_\_\_\_\_

Public Water System No.: \_\_\_\_\_ County: \_\_\_\_\_

Number of Service Connections: \_\_\_\_\_ Service Area Population: \_\_\_\_\_

Type of System: ☐ Community Water System; ☐ Nontransient Noncommunity Water System

(Select one: ☐ nonprofit; ☐ for profit)

Estimated Median Household Income (MHI): \$ \_\_\_\_\_ (Source: \_\_\_\_\_)

Service Area Map(s) included (required): ☐

Division of Drinking Water District/Local Primacy Agency overseeing this system: \_\_\_\_\_

**B. Request:** Please select the tasks for which assistance is being requested.

	Utility-side	Customer-side	Paperwork
Historical Records Review	<input type="checkbox"/>	<input type="checkbox"/>	-
Visual Inspections	<input type="checkbox"/>	<input type="checkbox"/>	-
CCTV Inspections of Service Lines	<input type="checkbox"/>	<input type="checkbox"/>	-
Customer Self-identification Surveying	-	<input type="checkbox"/>	-
Inventorying Procedure Training Materials	-	-	<input type="checkbox"/>
Preparing Outreach Materials	-	-	<input type="checkbox"/>
Template Access Agreement	-	-	<input type="checkbox"/>
Completing Lead Service Line Inventory Form	-	-	<input type="checkbox"/>
Prepare Lead Service Line Replacement Plan	-	-	<input type="checkbox"/>
Application for LSL Replacement Funding	-	-	<input type="checkbox"/>
Other (Please Specify): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**C. Contact Information:** Please provide a contact for correspondence regarding this request.

Name	Title/Organization	
Mailing Address	City/State	Zip Code
Phone Number	E-mail Address	

Lead Service Line Request Form, updated 08/28/2023

# How to Apply

- Submit Lead Service Line Application materials in the FFAST system by **December 31, 2023**
- Applications will continue to be accepted after this initial deadline but waiting period may increase
- Email LSL Technical Assistance requests to [DFA-LSLR@waterboards.ca.gov](mailto:DFA-LSLR@waterboards.ca.gov)
- Lead and Copper Rule Revision deadline: October 16, 2024

# Additional Information

- Link: [Lead Service Line Replacement Funding Program | California State Water Quality Control Board](#)
- Supplemental IUP: [2023-24 IUP Supplemental \(ca.gov\)](#)
- Application is found at the following website:  
[Lead Service Line Replacement Funding Program | California State Water Quality Control Board](#)
- Application Packages can be found at: [DWSRF Policy](#)
- Applications should be submitted via the  
[Financial Assistance Application Submittal Tool \(FAAST\)](#)

# Contacts



DFA-  
LSLR@waterboards.ca.gov



Stay informed – [subscribe](#) for email update



Visit [LSLR Funding Program](#) webpage

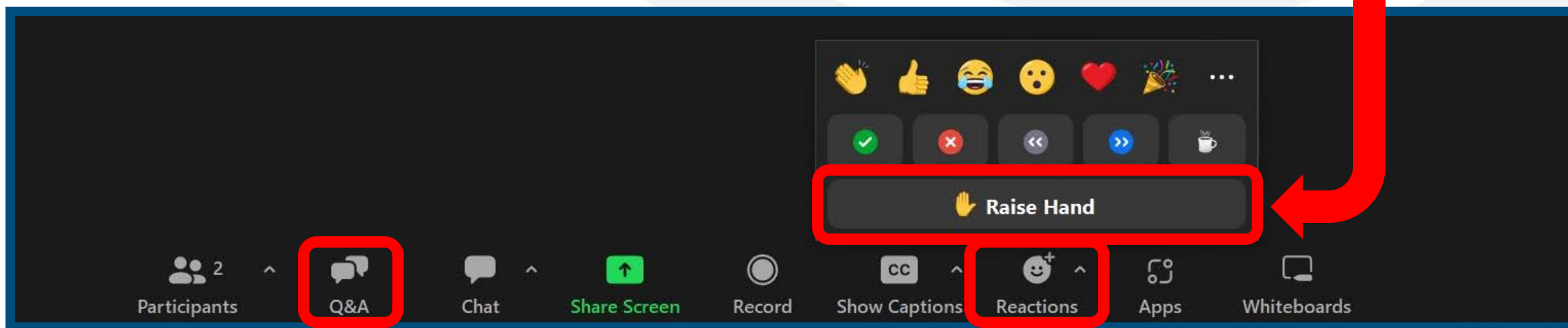


## **To Subscribe:**

- Enter email address and name
- Click on "Financial Assistance"
- Check boxes for "Drinking Water State Revolving Fund"
- Click the "Subscribe" button

# QUESTIONS?

- Click the “**Reactions**” function, then “**Raise Hand**”.



- Or click the “**Q&A**” function to type your question.

Questions after the meeting? Contact: [DFA-LSLR@waterboards.ca.gov](mailto:DFA-LSLR@waterboards.ca.gov)



**Thank you and please contact  
us with any questions!**

**DFA-LSLR@waterboards.ca.gov**



**STATE WATER BOARDS**

**DIVISION OF FINANCIAL ASSISTANCE**