CLEANUP AND ABATEMENT ACCOUNT (CAA) FUNDING APPLICATION
TIER 1

Instructions for Applicants

The Cleanup and Abatement Account (CAA) may be utilized to assist eligible entities with projects that address the cleanup or abatement of pollution impacting waters of the State. Applicants must complete all applicable sections of this form and provide supporting documentation where requested. The information submitted will be used by the State Water Resources Control Board to evaluate eligibility, project readiness, and funding priority.

Before completing this application, applicants are encouraged to review the CAA program guidance and eligibility requirements available here: CAA Guidelines.

Applicants should complete only the sections relevant to the project type:

Tier 1 – Emergency Cleanup Projects

For immediate response actions needed to address urgent threats to public health or water quality.

Required Supporting Documentation

Applicants should attach supporting materials where applicable, including but not limited to:

- Maps, photographs, or site diagrams
- Cost estimates and project schedules
- Documentation supporting disadvantaged community status
- Median Household Income (MHI) data sources
- CEQA documentation or exemption justification
- Evidence of contamination or environmental impacts
- Any correspondence with regulatory agencies

Submission Instructions

Complete the application below and submit, along with requested attachments, via email to WB-DFA-CAA@waterboards.ca.gov.

If you need assistance completing this application, please send an email to WB-DFA-CAA@waterboards.ca.gov

A. APPLICANT INFORMATION

1. Name: _____
2. Title: _____
3. Email Address: _____
4. Phone Number: _____
5. Agency/Organization Legal Name: _____
6. Mailing Address: _____
7. Federal Tax Identification Number: _____
8. Applicant type:
   ☐ Public agency
   ☐ Tribal government serving a Disadvantaged Community (DAC)
   ☐ Non-profit organization serving a DAC
   ☐ Community water system serving a DAC

B. COMMUNITY IN NEED OF CLEANUP/REMEDIATION

1. Name of Community or Site: _____
2. Number of Households, Connections or Acres Affected:
   _____
3. Approximate Number of People Affected: _____
4. Site Address or Description: _____
5. GPS Coordinates (Latitude, Longitude): _____
6. Is this an economically disadvantaged community? ☐ Yes ☐ No
7. Annual MHI of community: _____
8. Describe how MHI was determined and attach supporting documentation:
   _____

C. TIER 1 – EMERGENCY CLEANUP PROJECTS

1. Describe the emergency cleanup or abatement need: _____
2. Immediate risks if no action is taken: _____
3. Describe the source of the contamination and indicate if a Responsible Party for the contamination has been identified _____
4. Project Type (check all that apply):
   ☐ Emergency cleanup of oil, diesel, or petroleum spills
   ☐ Immediate response to illegal waste discharges
   ☐ Emergency removal of contaminated sediments or debris
   ☐ Emergency removal of illegally dumped materials
   ☐ Immediate abatement of pollution threatening water quality
   ☐ Emergency containment or stabilization of hazardous waste releases

☐ Short-term emergency remediation actions to protect public health or the environment
☐ Other

5. Describe proposed Tier 1 project to address the emergency:
   _____
6. Project commencement date or date project began: _____
7. Estimated project duration (days/months) including milestones:
   _____
8. Alternatives evaluated and why not selected: _____
9. Is this the least costly option to address the emergency? ☐ Yes ☐ No
   a. Explain: _____
10. Estimated number of people or area served/protected:
    _____

Tier 1 CEQA Considerations:

11. Indicate if the project qualifies for a CEQA exemption due to emergency conditions.
    ☐ Exemption: _____
    ☐ Unknown
12. Attach any documentation supporting the exemption claim or provide a summary of CEQA compliance actions.

Tier 2 CEQA Considerations:

2. Identify the CEQA document type required (Initial Study/Negative Declaration, Mitigated Negative Declaration, Environmental Impact Report, or Categorical Exemption): _____
   ☐ Unknown
3. Attach any CEQA documentation completed or in progress, including consultation with regulatory agencies.

E. ESTIMATED TOTAL PROJECT COSTS

1. Estimated total project costs: _____
2. Amount of funding requested: _____

F. OTHER FUNDING SOURCES

1. Has the applicant applied for other funding for this project? ☐ Yes ☐ No
   a. List sources and amounts: _____

2. Applicant's available reserves: _____ ☐ N/A
   a. Location on financial statements: _____
   b. If no reserves, explain: _____
3. Operating budget (monthly or annual) for relevant agency or project: ☐ N/A
   _____

F. LONG-TERM SOLUTION

1. Permanent solution planned? ☐ Yes ☐ No ☐ N/A
   a. Describe solution, timeline, and estimated cost or reason for N/A:
   _____

K. APPLICATION CERTIFICATION

I hereby certify that I am authorized to apply for funding from the State Water Resources Control Board for the project described. I attest that the information is accurate to the best of my knowledge.

Name: _____

Title: _____

Date: _____

[BELOW FOR STATE WATER BOARD STAFF ONLY]

L. TECHNICAL REVIEW AND RECOMMENDATION

Eligibility review completed by:
Name: _____
Title: _____
Date: _____

Recommendation: _____

CEQA Determination: _____

M. DFA DEPUTY DIRECTOR REVIEW

As Deputy Director of the State Water Board's Division of Financial Assistance:

☐ I approve the funding recommended in Section L and concur with the CEQA determination.
☐ I do not approve the request.

_____ _____

Dan Newton, Deputy Director of DFA Date