|  |  |
| --- | --- |
| Drinking Water State Revolving Fund  Department of Health, Safe Drinking Water Branch Uluakupu Building 4 2385 Waimano Home Road, Suite 110 Pearl City, Hawaii 96782 808-586-4258 | Image result for drinking water srf logologo |

If you would like your organization to be pre-qualified for a DWSRF loan, please complete the following Capacity Evaluation Checklist for your water system. **Send a softcopy of this completed form and the list below to the Safe Drinking Water Branch, at** [**doh.sdwb@doh.hawaii.gov**](mailto:doh.sdwb@doh.hawaii.gov)**.** *Note: Your answers will not disqualify you from being eligible for SRF loans so please be as honest and accurate as possible.*

Capacity Evaluation for DWSRF Loan Applicants

Requested documents/information to submit with this Capacity Evaluation:

* Organizational structure of the water system
* Borrower’s entity documents (e.g., Articles of Incorporation or Articles of Organization, By-laws or Operating Agreement, etc.)
* Three (3) years of complete financial statements, including debt schedules (audited statements preferred)
* Projected operating budget for at least the next three (3) years

|  |  |  |
| --- | --- | --- |
| Organization Name: | Contact Person: | Phone: |
| [Organization Name] | [Contact Name] | [Phone Number] |
| Address: | City: | Zip: |
| [Address] | [City] | [Zip] |
| Public Water System Number: | PWS Name: |  |
| [PWS Number] | [PWS Name] |  |

# Technical Capacity

## ADEQUATE WATER SOURCES - Are the existing sources of sufficient quantity and quality to meet current and future demand based on County Water System Standards and the Department of Health?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No, explain: |

## POTENTIAL FOR CONTAMINATION OF THE WATER - Does the PWS have uncorrected significant deficiencies or a history of significant deficiencies on sanitary surveys?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes, explain: |  | No |

## CROSS-CONNECTION CONTROL AND EMERGENCY RESPONSE PLANS – Does the water system have approved cross-connection control and emergency response plans?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No, explain: |

# Managerial Capacity

## ORGANIZATION AND MANAGEMENT CAPABILITY – Is there a clear plan of organization and control among the people responsible for the management and operation of the system?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No, explain: |

## BOARD MEMBERS – have all Board members completed board training?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No, explain: |

## WATER SYSTEM INFRASTRUCTURE INSPECTION AND MAINTENANCE –

#### Do the system operators have written Standard Operating Procedures (SOPs) for daily and regular duties?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Yes, SOPs exist and ARE logged |  | Yes, SOPs exist but are NOT logged |  | No, explain: |

#### Does the water system have an overall water system map of its system indicating source, treatment storage, pumping, transmission/distribution lines, and major valve locations?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No, explain: |

#### Does the water system have a systematic valve exercising program and/or regular unidirectional flushing?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Yes, for both |  | There is a valve exercising program, but does not perform regular unidirectional flushing |  | No, explain: |

# Financial Capacity

## ADEQUATE FINANCIAL BUDGETS – Is there an adequate annual budget?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No, explain: |

## ADEQUATE REVENUE STREAM - What is the current water rate structure and what is the annual user fee? When were the rates last changed?

[Water rates information]

## AFFORDABILITY CRITERIA – The DWSRF uses the Census information to determine a system’s “disadvantaged” status. However, since the census tract may include a large area, it may not accurately represent an individual system. As such, it is beneficial for a system to provide data specific to its service area.

|  |  |
| --- | --- |
| Median Household Income (MHI) | [MHI] |
| Persons Below Poverty Level (%) | [Poverty Level] |
| Civilian Unemployment in Project Area (%) | [Unemployment] |

# Are you regulated by the Public Utilities Commission (PUC)?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes (please provide PUC approval to enter a DWSRF loan) |  | No |

# Do you have any projects in mind for SRF funding? If so, please provide as much information as you can about the project (e.g. name, type, cost, estimated timeline, current status, etc.).

[Project information]

# Do you have any other funding sources for the project(s) listed in #5? If so, please provide as much information as you can about the source (e.g. type, terms, amount, interest rate, etc.).

[Loan/Other Funding Source information]

# Comments / Additional information you think will be useful:

[Add your comments here.]