

1. APPLICANT PROFILE

Contact Information:

Applicant Entity: _____

Contact Name: _____

Title: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Phone: _____

E-mail: _____

Fax: _____

Type of Entity:

Municipality

County

Authority

FEIN: _____

Pre-Application Conference Attendance Date: _____

If you receive a funding offer from the BCIB, municipal borrowers or guarantors will need to go through the Local Government Unit Debt Act (LGUDA). Please provide your Elected Officials' 2023 meeting schedule below (e.g. 1st and 3rd Thursdays).

Are you willing to schedule a special meeting in order to complete the necessary steps and requirements associated with LGUDA? Yes No

2. PROJECT SITE LOCATION

Street Address: _____

Municipality: _____

City: _____

Zip Code: _____

Project Site Description:

Specific Location of Improvements *(Please provide a brief description of the proposed project location):*

3. PROJECT TYPE

Infrastructure Ownership

Local State

Project Design Option (reference Guidelines, Section 3)

Turnkey Finance Only

Scope of Work

Proposed Scope of Work *(Please provide a brief description of the proposed scope of work):*

4. PROJECT BUDGET

Project Budget		
Use	Amount	Year(s) of Expenditure
Environmental Review		
Preliminary Engineering		
Final Design		
Utilities		
Right-of-Way		
Construction		
Construction Engineering/Inspection		
Other*		
Contingency (not to exceed 15%)		
TOTAL USES		

Source	Amount	Date(s) Secured
Local Contributions		
Private Contributions		
Other Financing		
Grants (Already Secured)		
Other		
BCIB Request		
TOTAL SOURCES		

*"Other" will include administrative costs associated with the BCIB financing, to be confirmed in coordination with the County and included in the budget financed with BCIB loan proceeds.

5. CERTIFICATION

I, the undersigned representative of the Applicant, certify on behalf of the Applicant that the information contained in and provided with this BCIB Program Application is true and correct, and the Applicant submits said information knowing that Butler County will rely upon the same in processing and approving this Application.

Applicant Entity Name: _____

Authorized Applicant Representative Name (please print): _____

Title: _____

Signature: _____

Date: _____

Please email electronic copy of the BCIB Program Application along with the required exhibits to BCIBank@co.butler.pa.us.

Note that e-mail submissions cannot exceed 10MB and attachments need to be in word, excel or pdf format. Zip files will not be accepted. You may submit multiple e-mails. If more than one e-mail is necessary to complete the submission, please use the Subject Line of the e-mail to label the number of submissions (e.g. "Municipality - BCIB Application 1 of 3").

All electronic submissions for FY 2023 must be received by 4:00 p.m. EST on March 15, 2023. Please request a delivery receipt with all e-mail submissions.

All Applicants are required to submit the following exhibits at the time of application, as outlined in the BCIB Program Guidelines:

Exhibit 1 – Project Description

Exhibit 2 – Municipal Resolution

Exhibit 3 – Financial Documents

Exhibit 4 – Act 13 Confirmation of Eligible Projects and Expenditures Checklist

Exhibit 5 – Reimbursement Resolution (if applicable)

Exhibit 6 – Leveraged Funding Commitment (if applicable)

Exhibit 7 – Local Support Documentation (if applicable)

Exhibit 8 – Alternate Engineer Qualifications (if applicable)

Exhibit 9 – Articles of Incorporation and By-Laws (for Municipal Authorities only)

Exhibit 10 – Cost estimates for the Project and a schedule of the anticipated draws and expenditure of funds for the Project (for "Finance Only" Projects)