

APPENDIX A Part 1
Office of Energy Development
Solicitation # OEDFY24003
Application Cover Sheet & Program Information

Organization Legal Name: _____

Federal Tax ID #: _____ **UEI #:** _____

This organization is doing business as:

- Individual/Sole Proprietor For-Profit Corporation
 Non-Profit Organization (attach 501(c)(3) letter) Government Agency

Total Grant Funds Requested in this application: \$ _____

EXECUTIVE DIRECTOR OR EQUIVALENT (person authorized to sign grant application and/or an awarded contract)

Name: _____ **Position:** _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone: _____ **Email:** _____

Signature will be provided below on the Application Acknowledgement & Certification page.

GRANT ADMINISTRATOR (if different from above)

Name: _____ **Position:** _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone: _____ **Email:** _____

FINANCIAL ADMINISTRATOR

Name: _____ **Position:** _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone: _____ **Email:** _____

PROGRAM INFORMATION

ORGANIZATION:

SECTION A: PROGRAM INFORMATION

The program is (please check one):

- A new program
- An existing program

SECTION B: GEOGRAPHIC LOCATION (Check all boxes where actions will be performed, if applicable)

*Priority Points given to services provided in rural counties (highlighted in **Bold/Underlined**)

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> <u>Beaver County</u> | <input type="checkbox"/> <u>Emery County</u> | <input type="checkbox"/> Morgan County | <input type="checkbox"/> Summit County |
| <input type="checkbox"/> <u>Box Elder County</u> | <input type="checkbox"/> <u>Garfield County</u> | <input type="checkbox"/> <u>Piute County</u> | <input type="checkbox"/> Tooele County |
| <input type="checkbox"/> Cache County | <input type="checkbox"/> <u>Grand County</u> | <input type="checkbox"/> <u>Rich County</u> | <input type="checkbox"/> <u>Uintah County</u> |
| <input type="checkbox"/> <u>Carbon County</u> | <input type="checkbox"/> <u>Iron County</u> | <input type="checkbox"/> <u>San Juan County</u> | <input type="checkbox"/> Utah County |
| <input type="checkbox"/> Davis County | <input type="checkbox"/> Juab County | <input type="checkbox"/> Salt Lake County | <input type="checkbox"/> <u>Wasatch County</u> |
| <input type="checkbox"/> <u>Daggett County</u> | <input type="checkbox"/> <u>Kane County</u> | <input type="checkbox"/> <u>Sanpete County</u> | <input type="checkbox"/> Washington County |
| <input type="checkbox"/> <u>Duchesne County</u> | <input type="checkbox"/> <u>Millard County</u> | <input type="checkbox"/> <u>Sevier County</u> | <input type="checkbox"/> <u>Wayne County</u> |
| | | | <input type="checkbox"/> Weber County |

SECTION C: OUTCOMES (Enter your anticipated outcomes for the entire grant period)

EXPECTED OUTCOMES (SHORT, MID, AND LONG TERM)

Application Acknowledgement & Certification

In signing below, the Applicant (executive director or equivalent listed above) certifies under penalty of perjury the foregoing is true and correct.

- The information in this application and accompanying documents is true and correct to the best of the Applicant's knowledge.
- The Applicant is an official representative of the organization that would be receiving the grant funds.
- The Applicant acknowledges that they are authorized by the organization to sign this application on behalf of the organization.
- The Applicant organization performing the project is based in the State of Utah.
- The Applicant organization is a legally recognized entity.
- The Applicant organization has secured matching funding for the proposed energy-related project and this matching funding is at least 100% of the amount requested from the Utah Office of Energy Development.
- The Applicant acknowledges that its proposed project objectives align with the specified Utah Office of Energy Development grant program goals and objectives.
- The Applicant acknowledges that it has only submitted one application (in the current calendar year) for this specific grant.
- The Applicant acknowledges that the funding award is a reimbursement for money spent by the Applicant on the eligible project activities. The Utah Office of Energy Development will not disburse funds to the Applicant until the Applicant has completed and submitted the deliverables required by the contract.
- The Applicant acknowledges that any and all costs incurred to complete this application are the responsibility of the named organization.
- The Applicant acknowledges that any false statement may disqualify the organization for the grant.
- The Applicant acknowledges adherence to any and all criteria listed in the grant application documents that are not listed here.

Applicant name (print)

Signature

Date



APPENDIX A Part 2 Application Narrative

Uinta Basin Aerial Leak and Repair Detection Program (UB ALaRD)

Please fill out this form as completely and concisely as possible. Incomplete forms will delay processing and could impact consideration for grant approval.

Review the UB ALaRD Program Request of Proposal prior to completing and submitting this application.

How to Apply

Step 1: Complete the application form and supplemental document checklist. Applicants must complete all fields in the application form provided in order for their project to be considered for funding. This application and supplemental material provided at the time of application will serve as the primary means by which projects will be evaluated. The Utah Office of Energy Development (OED) may contact you for further information. Please provide primary and secondary contact information.

Step 2: Submit your completed application form, supplemental document checklist and supplemental documents to jellsworth@utah.gov.

Questions about the application and the funding process should be submitted to jellsworth@utah.gov.

Questions about the overall program should be submitted to kprasurtwong@utah.gov.

APPLICATION DUE: June 5th, 5:00 p.m. MST

Supporting Document Checklist

Applicants must include the following required supporting application documents for their project to be considered for funding. Documents must be attached to this application. Please submit this completed checklist along with your application. If any required documents are not included, please identify the reason why (below).

Required Supporting Application Documents:

- Complete Application - This application is 12 pages.**
- Survey quotes/bids and timeline.
- Include Business License or Articles of Incorporation with the application.
- Include 501(c)(3) with the application—if applicable.

Competitive Consideration Criteria

Program Overview	
Area of Consideration	Applicant Plan
<p>Provide an overview and area of the proposed survey route, including number, size, type of asset, number of wells by aches and location of consecutive areas to be surveyed.</p>	

Project Alignment with OED Objectives

Area of Consideration	Applicant Plan
<p>What are the organization's survey project objectives? How does the project align with community/state needs?</p>	

Technology and Approach	
Area of Consideration	Applicant Plan
<p>How familiar are you with the aerial leak detection technology and your experience? What sensitivity levels are you interested in and the reasons behind your preferred sensitivity level?</p>	

Budget and Timeline	
Area of Consideration	Applicant Plan
<p>This program minimum required 1-1-dollar funding match. What does your funding structure look like? Do you have funding budgeted for this survey program? What is the justification for the proposed survey project budget and schedule? Attach survey quote and timeline if applicable</p>	

Reporting	
Area of Consideration	Applicant Plan
<p>Upon completion of the survey, OED requires you to provide a report of completion. Anonymized data is acceptable as long as the following data is visible: volume of cubic feet surveyed, number of wells per area, number of leaks found (include size if possible), total volume of fugitive leaks, the number of successfully repaired leaks and its volume (6 data sets in total) by December 20, 2024. How do you plan to accomplish this reporting requirement?</p>	

Community Impact and Engagement

Area of Consideration	Applicant Plan
<p>Who are the stakeholders for this project and what is their involvement? What are the expected immediate (within 1 year) benefits and positive changes for the local community?</p>	

Sustainability and Evaluation	
Area of Consideration	Applicant Plan
<p>What is the potential for the long-term viability of the project and its impact on the community/state? What is your plan to use this aerial leak detection technology in the future and how often?</p>	

Outcomes	
Area of Consideration	Applicant Plan
<p>What three (3) SMART (specific, measurable, attainable, realistic, and time-bound) outcomes are you expecting from this survey?</p>	

**Appendix A Part 3
Office of Energy Development
Budget Narrative and Itemization Form**

**All planned expenses must be itemized, detailed and described for each line item.
Cells may be expanded as necessary in order to provide all required information.**

Organization:

Contract Dates:

Category I - Indirect Expenses:

a) NICRA - If the organization has a federally approved Negotiated Indirect Cost Rate Agreement (NICRA), the NICRA **must** be used in Category I, unless the organization voluntarily chooses to waive indirect costs or charge less than the full indirect cost rate.

Any administrative costs that are not part of the base of the NICRA and are direct charged can be listed in Category II.

b) De Minimis - SEP funding does not allow for a de minimis rate.

Organizations that have elected de minimis rate for other federally approved grants must use Category II for direct administrative costs.

Category I Indirect Costs	NICRA Rate and Base(s)	Grant Funds Requested
Indirect Costs		\$ -
<i>Cannot exceed the entity's federally approved indirect cost rate (NICRA)</i>		

Category II - Direct Administrative Expenses:

If the organization **DOES NOT** have a NICRA and **CANNOT** use the de minimis rate, the organization **must** use Category II if charging Direct Administrative Expenses.

Category II Direct Administrative Expenses	Itemized Details of Grant Funds Requested	Grant Funds Requested
Salaries		\$ -
Fringe Benefits		\$ -
Communications (e.g. Consistent monthly charges including and not limited to: printing, copying, phone, internet, postage)		\$ -
Equipment (e.g. computers, laptops, printers, furniture)		\$ -
Insurance		\$ -
Material and Supplies (e.g. consumable goods)		\$ -
Professional Fees & Contract Services (e.g. consultants, security)		\$ -
Space Costs (e.g. rent, lease)		\$ -
Staff Travel & Transportation		\$ -
Staff Development & Training		\$ -
Utilities (consistent monthly utility charges - gas, water)		\$ -
Total Category I Indirect Expenses and Category II Direct Administrative Expenses		\$ -

Category III - Direct Program Expenses:		
Category III Program Expenses	Itemized Details of Grant Funds Requested	Grant Funds Requested
Salaries		\$ -
Fringe Benefits		\$ -
Communications (e.g. Consistent monthly charges including and not limited to: printing, copying, phone, internet, postage)		\$ -
Equipment (e.g. computers, laptops, printers, furniture)		\$ -
Insurance		\$ -
Material and Supplies (e.g. consumable goods)		\$ -
Professional Fees & Contract Services (e.g. consultants, security)		\$ -
Space Costs (e.g. rent, lease)		\$ -
Staff Travel & Transportation		\$ -
Staff Development & Training		\$ -
Utilites (consistent monthly utility charges - gas, water)		\$ -
Total Category III Program Expenses		\$ -
Total Category I, Category II, and Category III Expense		\$ -

Notes: