

## **Appendix H. Small Community Form**

EPA allows small communities (with populations of 10,000 or fewer) to submit survey-generated documentation for needs. EPA has found that although these small communities have needs related to their wastewater, stormwater, decentralized systems, and NPS controls, they are less likely to have planning and costing documents available. The following pages show the inputs to the SCF that will be available in the form of an online form or hardcopy document.

## State View: SCF Management Page

EPA CWNS Data Entry Portal (DEP) Viewing records for : Alabama [Contact Us](#)

Home
Enter Survey Data
Documents
Manage Small Community Forms
Administration ▾

### All Small Community Forms for State

Use this table to create, monitor and process small community forms for loading the survey.

▾
**Small Community Info**

The Small Community Form (SCF) is meant for small communities that may have a difficult time fulfilling documentation requirements. You should not use the SCF if a community has documentation or is not considered "small." A CWNS facility is considered small if it meets the following criteria:

- The facility is **not** one of several facilities serving a community of 10,000 persons or more.
- The facility's wastewater system and its location is **not** within an urbanized area, so it is not a component of, and virtually indistinguishable from, surrounding adjacent entities (which are not small).
- The facility's wastewater system is **not** physically connected to a regional treatment authority serving 10,000 persons or more.

If a returned SCF indicates that one of the above does not apply to a community (e.g., the facility now serves more than 10,000 persons), then you should instruct the community to submit other documentation, as the SCF will no longer be accepted as documentation for that community.

▶
**Small Community State Info**

**Small Community Form List**
+ Add Small Community Form

Search
Actions ▾

✉ Send All Selected
🗑 Delete Selected

Selected	CWNS Number	Name	Contact Name	Contact Email	Status	Last Status Update	Total Amount (Not modeled)	Add Recipient Email	View
<input type="checkbox"/>	01000783001	HOLLIS CROSSROADS SEPTIC	Test		Sent to Local PE	12/14/2021 08:19	\$0		
<input type="checkbox"/>	01000785001	STEWARTVILLE SEPTIC TANKS	Test		In progress	10/07/2021 12:26	\$0		

Public View: SCF, Wastewater Example

## Clean Watersheds Needs Survey Small Community Form

1. Does your facility have water-quality-related capital improvement needs? **Yes**

2. Do you have planning documents that report any of your needs (such as in a capital improvements plan or engineering report)? **Yes**

**Please e-mail those documents to your state coordinator. The state environmental agency will enter your documented needs separately.**

3. Do you have any undocumented needs? **Yes**

**Please use this form to communicate those needs.**

4. Do you have access to a Professional Engineer (consulting with or on staff) who will certify the costs of the undocumented needs? **Yes**

**Please enter the contact information for the local professional engineer (PE).**

**Once you finish filling out the form, it will be sent to this person for their digital signature.**

Local PE Name **PE Name**

Local PE Email **PE@email.com**

5. Do you want to use EPA cost estimation tools to estimate any of the costs? **Yes**

- Select Cost Estimation Tool(s):
- Wastewater: Treatment Plant Cost Estimation Tool  
(Estimates the costs for constructing a new treatment plant or replacing, rehabilitating, upgrading treatment, expanding, or adding disinfection at an existing one.)
  - Combined Sewer Overflow Cost Estimation Tool**  
**(Estimates the cost for constructing a new CSO storage basin.)**
  - Wastewater: Collection Cost Estimation Tool  
(Estimates the costs for constructing a new wastewater conveyance facility or replacing/rehabilitating an existing one.)

**Facility Information**

Please complete the required fields and contact information.

\* Indicates required field

CWNS ID **7888888892**Infrastructure Type **Wastewater**\* Facility Name: **Test - SCF WWTP and Collection**\* Authority Name: **Authority Name**\* Facility Address: **Facility Address****P.O. Box is not allowed. If a facility doesn't have an address, please indicate physical location with description instead (e.g., '5 miles south down Rt. 9 from City Hall'). Thank you!**\* City: **City**\* State: **VI**\* Zipcode: **00000**\* County: **County**\* Owner Type:  **Public**  Private  FederalContact Name: **Contact Name**Role/Title: **Role/Title**Phone: **#####** Extension: **###**

Fax:

Email: **email@email.com****Facility Types** <sup>?</sup>

Please select the facility type(s) for the infrastructure in your community. To add a facility, click the "Add a Facility" button and select facility type from the dropdown menu. To see more information about the facility types, click the "?" icon.

Facility Type	Planned Changes
Treatment Plant	Process Improvement Increase Level Of Treatment
Collection: Combined Sewers	Rehabilitation

**Facility Discharges** <sup>?</sup>

To add a facility discharge, click on the "Add Discharge" button and select from the dropdown menu. If your facility discharges to another facility, indicate the name and location so the state coordinator can clearly identify the facility.

Discharge	% of Discharge	Discharges To
Outfall To Surface Waters	100	
<b>Total</b>	<b>100</b>	

**Effluent Information** ?

Please complete the following fields for effluent information. Effluent information is required for wastewater treatment plant facilities and optional for honey bucket lagoons and storage facilities.

\* Current Effluent Treatment Level: **Secondary**

\* Is there Disinfection (e.g.,chlorine, UV) currently in place?  No  Yes

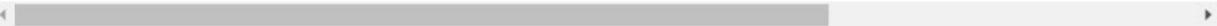
\* Future Effluent Treatment Level: **Secondary**

\* Will there be Disinfection (e.g., chlorine, UV) in the future?  No  Yes

**Population Information (Wastewater)** ?

Please complete the following fields for population information. Population information is required for separate and combined sewer collection facilities (for wastewater infrastructure types). Population is also required for decentralized facilities.

	Residential Population	
	2022	Projected Design Population 2042
Receiving Collection	7,100	7,800

**Flow Information** ?

Please complete the following fields for flow information.

	Current Design Flow (MGD)
Total Flow	1.00

**Needs** ⓘ

Report your community's needs by category.

If you have documents describing these costs, please send them to your state CWNS coordinator: .

**\* Please select reason(s) for needed changes:**

- The project(s) is required to maintain compliance with a NPDES permit.
- The project(s) is necessary to obtain compliance with a new permit requirement.
- The project(s) is to increase capacity or improve treatment in advance of anticipated new permit requirements.
- The project(s) is to achieve or maintain compliance with a TMDL.
- The project(s) will prevent unregulated water quality or human health impacts.
- The project(s) improves water efficiency, improves energy efficiency, improves water conservation, addresses climate change, or improves resiliency.

**Needs Category : Needs Category: I - Secondary Wastewater Treatment**

Cost Method	Adjusted Amount	Project Description
Your estimate	1,200,000	Adding disinfection to the plant, along with improving the processes related to...

**Needs Category : Needs Category: V - Combined Sewer Overflow (CSO) Correction**

Cost Method	Adjusted Amount	Project Description
EPA's Cost Estimation Tool: CSO	100,000	Equalization basin

**Local Official Certification**

- I am the local official  Please send to a local official for review

Name **Name**

Email **local.official@email.com**