

2022-2023

Defense Community Compatibility Account (DCCA)

Application Form

*This form must be submitted along with all other required application documentation to be considered complete. Please see the DCCA Program Application Instructions for more information on required elements.*

Program contact information:

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For more information, visit the Defense Community Compatibility Account [webpage](https://www.commerce.wa.gov/serving-communities/growth-management/growth-management-topics/defense-community-compatibility-account/).

Application Guidelines

1. Review the Defense Community Compatibility Account (DCCA) program application instructions document for complete submittal instructions, example forms, more detailed information about the program, evaluation categories and process, and the scoring matrix.
2. Please complete all fields provided in the form and supply requested supplemental documents.
3. Use the DCCA Program Application Checklist (found in the application instructions) to ensure all required supplemental documents are provided. Additional documents should be scanned and attached in the same order as presented in the Checklist.
4. Save the document with this file name structure: Name of Submitting Entity\_DCCA\_ APP
5. Upon completion of the form, attach it with all supplemental required documents as one pdf and submit via email to: [gmsgrants@commerce.wa.gov](mailto:gmsgrants@commerce.wa.gov). Please make the subject line: <Name of Submitting Entity>\_DCCA APP PKG

*The Application must be received by 5:00 PM (PST) on Thursday, September 15, 2022.*

Application Form

|  |  |  |
| --- | --- | --- |
| 1. Applicant Information | | |
| Applicant/Organization Name: | |  |
| Applicant Mailing Address: | |  |
| Applicant Website: | |  |
| Applicant Phone: | |  |
| Organization Official’s Name and Title: | |  |
| Email: | |  |
| Phone: | |  |
| Statewide Vendor Number: | |  |
| Unified Business Identifier (UBI)# (if applicable) | |  |
| 2. Applicant Eligibility | | |
| The applicant is which of the following:  Local Government, Federally recognized Indian tribe; or  Other entity entered into an agreement with a Washington military installation under the US Department of Defense Readiness and Environmental Protection Integration Program | | |
| Non-governmental organizations must provide documentation of their 501 C3 status by submitting a 501cs determination letter and proof of registration with the state of Washington as a nonprofit organization. | | |
| Determination letter or proof of registration attached? Yes  No | | |
| 3. General Project Information | | |
| Project Title: |  | |
| Estimated project start date (MM/DD/YYYY): |  | |
| Estimated project completion date (MM/DD/YYYY): |  | |
| Project Physical Address: |  | |
| Project Contact Name: |  | |
| Email: |  | |
| Phone: |  | |
| Brief project description: |  | |
| Will this project include the following (select all that apply)  Acquisition of real property or real property interests to eliminate an existing incompatible use.  Projects to jointly assist in the recovery or protection of endangered species dependent on military installation property for habitat.  Projects or programs to increase the availability of housing affordable to enlisted military personnel and nonmilitary residents in the local community.  Projects to retrofit existing uses to increase their compatibility with existing or future military operations.  Projects to enable local communities heavily dependent on a nearby military installation to diversify the local economy so as to reduce the economic dependence on the military base.  Projects that aid communities to replace jobs lost in the event of a reduction of the military presence.  Projects that improve or enhance aspects of the local economy, environment, or quality of life impacted by the presence of military activities. | | |

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| --- |
| Project Scope Description: Please include a thorough project description, including all essential project components. If the project is meant to be conducted in phases, describe the phase elements and approach: |
|  |
| Project Work Schedule/Work Plan and Project Milestone Worksheet: Provide a work plan and project milestone worksheet describing proposed activities, timeline, and project milestones, necessary to accomplish the scope of the project. See example provided. |
| Work Schedule/plan and project milestone worksheet attached? Yes  No |
| Map of Project Area: Provide a map of the project area and define the service area, project site, or proposed project location. |
| Maps attached? Yes  No |

Evaluation Category 1: Project Scope: Up to 10 pts

The project application will be evaluated for the quality of the project scope, considering feasibility of the work plan and project milestone worksheet, description of activities, and the associated timeline. *\*Use as much space as needed.*

Example Work Schedule/Plan & Project Milestone Worksheet

*Instructions: Please use this form as a template to list project activities and associated dates and responsible parties. Example activities are provided in the DCCA guideline packet. Please use this form as a reference guide for completing a work plan associated with your project.*

|  |  |  |  |
| --- | --- | --- | --- |
| Activities | Responsible Party | Start Date  (MM/YYYY) | End Date  (MM/YYYY) |
| Example activity… |  |  |  |
| Example activity…. |  |  |  |
| Other: |  |  |  |
| Other: |  |  |  |

*Describe project milestones, indicating when major elements of the project will be conducted and completed.*

|  |  |
| --- | --- |
| Milestones | Anticipated Completion Date (MM/YYYY) |
| Example milestone … |  |
| Other: |  |

|  |  |
| --- | --- |
| Evaluation Category 2: Leveraged Funds: Up to 10 pts  The project application will be evaluated based on the following funding-based categories. There is not a limit or required percentage of local or federal funds; however, projects are scored on total amount of leveraged funds available. | |
| Total Estimated Project Cost: |  |
| Dollar Amount of DCCA Funding Requested: |  |
| Are Federal Funds Available? Yes  No | |
| Dollar Amount of Federal Funds Available for the Project: |  |
| Are Applicant/Local Funds Available? Yes  No | |
| Dollar Amount of other Local Funds Available for the Project: |  |
| Total Non-state Funds Committed to the Project: |  |
| Project Budget: Include a project budget, detailing all funding sources available for the project, reflecting the total funds available to support the project. Supportive documents, such as a third party cost estimate may be included to support budget assumptions. See sample project budget. | |
| Project budget, budget assumption narrative and supportive documents attached?  Yes  No | |

Example Project Budget

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Funding Status | Source 1 | Source 2 | Source 3 | Source 4 | Totals |
| Are the sources committed?  If not, give a date when commitment expected. | Estimated DCCA funding | Yes  No | Yes  No | Yes  No |
| [Name of funding source] |  |  |
| Activity Costs | | | | |  |
| Example activity… |  |  |  |  |  |
| Example activity… |  |  |  |  |  |
| Other: |  |  |  |  |  |
| Other: |  |  |  |  |  |
| Totals |  |  |  |  |  |

*Instructions: Please use this form as a reference guide for completing a budget for your project. Where available, include supporting documentation to support budget activities, such as a detailed cost estimate. Complete the budget narrative below to describe activity costs listed in the budget. See the DCCA application instructions for example activity costs. Applicants are not limited to the number of lines represented on the form.*Project Budget Assumptions

Explain how you built the budget for the project and derived costs for each activity. Your assumptions should include:

* How this budget is reasonable and appropriate considering the scope, substance, and duration of the proposed project.
* The basis and calculations behind the activity costs. Be detailed and specific.
* Source and include documentation of the costs, such as an engineer’s preliminary cost detail, a third party cost estimate, etc. These documents can be referenced and included as an attachment in the application.

Instructions: Submit budget assumptions in the budget narrative, including notes on the costs and sources associated with the activities to complete the project. Budget assumptions should clearly correspond with and support the amounts listed in the budget.

This is your opportunity to demonstrate you have clearly thought through all financial aspects of the project and have solid rationale for the administration, project and operation costs, and the need for DCCA investment to make the project successful. DCCA staff use this information as a key component in assessing the financial project need. Add pages as needed to complete your assumptions.

Budget Assumption Narrative:

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| --- |
|  |

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| --- |
| Leveraged Funding: Describe how the project leverages other funding sources and opportunities. Provide evidence of funding secured with offer letters, award letters, funding agreements, etc. List other resources your efforts bring to the project, including other grants, loans, in-kind services, planning and design, equipment, and property resources: |
|  |
| Project Match: Describe other funding sources applied for to support this project. If the applicant is in the process of applying for other grants, include descriptions of funding sources, timeline for potential awards, and total funds requested: |
|  |
| Secured funding documents attached? Yes  No |
| Evaluation Category 3: Need and Priority: Up to 10 pts  The project application will be evaluated for demonstrated need and priority based on the following evaluation categories. |
| Urgency: Describe the urgency of the project: |
|  |
| Local Conditions: Describe relevant local conditions resulting in the need: |
|  |
| Need addressed: Describe how/if the project will take care of all or part of the need? As a result of the project, how long will the need be addressed: |
|  |
| Community Need: Describe the community and service area affected: |
|  |
| Need and Priority Documentation: Provide evidence of the project meeting local priorities. Describe how relevant plans, studies or reports are in alignment with project goals and indicate where in these documents the project is consistent with local goals or recommendations. (Examples include: Comprehensive plan goals, surveys, public outreach efforts, regional and local planning efforts, capital facilities plans, data or other relevant reports). |
|  |
| Supporting documents attached? Yes  No |
| Local Priority: Describe how the public and key stakeholders were involved in identifying and prioritizing the need: |
|  |
| Evaluation Category 4: Project Readiness: Up to 10 pts  The project will be evaluated for its demonstration of readiness to proceed for a timely and successful completion. Due to the wide-range of eligible projects, evidence of project readiness will vary. Provide descriptions and documentation that best supports the type of project submitted. Applicant to include all applicable and supportive documentation. |
| Risk Assessment and Expediency: Include a statement describing the due diligence applied to identify issues, consider options, and ensure project success. Statement must also demonstrate an ability to complete the project expediently. For example, is the project ready to proceed? If not, what else must be done? What obstacles/risks might affect the timely and successful completion of this project? Describe your plan for addressing or overcoming these obstacles. |
|  |
| If applicable, feasibility studies, topographical surveys, design schematics, or other relevant documents attached? Yes  N/A |
| Project Site Control: If applicable, provide documents demonstrating that the project site is under control, or evidence that it will be before contract closing, should the project receive funding. If the project includes water rights or easements, include documents to demonstrate their completion or process. If you do not already have site control, describe how and when it will be secured. Describe where in the acquisition process the project resides. If applicable, provide evidence of property owner’s interest to sell, or a property deed. If none of the above are applicable, please indicate below and include any other relevant documents or details to support the projects readiness and site control. |
|  |
| Supporting site control documents attached? Yes  N/A |
| Environmental and Cultural Resources Review: If applicable, provide documentation showing the status of any required environmental or cultural consultations and permits. List any permits needed and your status in applying for and obtaining them. Is the project in accordance with Executive Order 21-02?  Describe how your work plan addresses the timing of permit acquisition and any environmental or cultural review issues. |
|  |
| Supporting documents attached? Yes  N/A |
| Permits and Zoning: If applicable, zoning must be appropriate for the proposed project, or the applicant must provide evidence that it will before contract closing should the project receive funding. Include excerpt from zoning code showing zoning code supports project use. If project permits have been identified or obtained, please describe or provide. |
| Permit and Zoning information attached? Yes  N/A |
| Project Phases: If applicable, include a description of prior work conducted and/or project phases completed: |
|  |
| Evaluation Category 5: Organizational Capacity: Up to 10 pts  The project application is evaluated on the applicant’s capacity to complete and maintain all project components. The applicant must demonstrate capacity to perform and manage the proposed activities – both during the completion of development and ongoing operations of the project. |
| Project Sustainability: Explain strategy for long-term success of the project: |
|  |
| Program Management Capacity: 1. List who will be responsible for managing the project and keeping the project on schedule. 2. Further describe how strategic partnerships crucial to project implementation will be managed and the strategy for maintaining resources necessary to carryout the project activities. 3. If this project is in partnership with any other organizations, identify the partner(s) and describe roles of each partner. |
|  |
| Process Management: Describe the operational, technological, staffing, and other resource assets or needs associated with the project: |
|  |
| Evaluation Bonus Category: Up to 15 pts  In addition to meeting the five evaluation categories above, applicants may be awarded an additional five bonus points for meeting priorities stated in SSB 5748, The Defense Community Compatibility Account. |
| BRAC, CUP/JLUS, REPI Recommendation: Include documents demonstrating recommendations of the recent US Department of Defense (DoD) base Realignment and Closure (BRAC) processes, Compatible Use Study (CUP)/Joint Land Use Study (JLUS) or other federally initiated land use processes, including the US DoD Readiness and Environmental Protection Integration Program (REPI). |
| Supporting documents attached? Yes  N/A |
| Mission Viability: Include documentation indicating whether a branch of the US Armed Forces has identified the project as increasing the viability of military installations for current or future missions. |
| Supporting documents attached? Yes  N/A |
| Community Support: Include letters of support from the nonprofit community or neighborhood-based organizations, public development authorities, federally recognized Indian tribes on the State, or other community partners. |
| Letter of support attached? Yes  N/A |