

# STATE OF NEBRASKA



DEPARTMENT OF NATURAL RESOURCES  
Roger K. Patterson  
Director

February 6, 2004

IN REPLY REFER TO:

Mike Johanns  
Governor

Lisa Beethe  
Nebraska Environmental Trust  
2200 North 33<sup>rd</sup> Street  
PO Box 30370  
Lincoln, NE 68503-0370

RE: Project # 04-168 – Republican Basin Water Meter Proposal

Dear Lisa,

Enclosed is a copy of our 2004 awards documentation and our 2004 contract budget summary for project #04-168 – Republican Basin Water Meter Proposal. I have also enclosed a form indicating our preference that payments be made by IBT. We also reviewed the draft grant agreement and believe it is acceptable and needs no changes. Thank you very much for the assistance of the Trust on this important project.

Sincerely,

Steve Gaul  
Designated Project Representative

sg  
Enclosures

**GRANT AWARD DOCUMENTATION**

**Project Sponsor:** Nebraska Department of Natural Resources

**Project Name:** Republican Basin Water Meter Proposal

**Application Number:** 04-168

We hereby designate the person named below as our authorized representative, who will be responsible for accounting and filing reports as required by our grant agreement with the Nebraska Environmental Trust Fund.

**PLEASE TYPE OR PRINT**

**NAME:** Steve Gaul **TITLE:** Head, Planning & Assistance Division

**ADDRESS:** Nebraska Department of Natural Resources, 301 Centennial Mall South,  
P.O. Box 94676, Lincoln, NE 68509-4676

**DAYTIME PHONE:** (402 ) 471-3955 **ALTERNATE PHONE:** (402 ) 471-2363

**FAX:** (402 ) 471-2900 **E-MAIL:** sgaul@dnr.state.ne.us


**ORGANIZATION WEB PAGE ADDRESS:** http://www.dnr.state.ne.us

**Please mark beside one of the following statements as applicable:**

We have reviewed the draft contract agreement and believe we will be able to comply with the provisions it contains.

OR

We have reviewed the draft contract agreement and must propose modifications as indicated.

**AUTHORIZED SIGNATURE OF SPONSOR:** 

**PRINTED NAME:** Roger K. Patterson

**TITLE:** Director **DATE:** 2/5/04

**RETURN THIS FORM TO THE NEBRASKA ENVIRONMENTAL TRUST OFFICE NO LATER THAN MARCH 1, 2004.**



## NEBRASKA ENVIRONMENTAL TRUST FUND 2004 CONTRACT BUDGET SUMMARY

**Project Sponsor:** Nebraska Department of Natural Resources

**Project Name:** Republican Basin Water Meter Proposal

**Application Number:** 04-168

### Project Budget for April 2004 through June 2005

A	B	C	D	E	F
<b>1. Source of Funds ▶</b>	<b>NETF GRANT</b>	State Appropriation	Bureau of Reclamation*		
<b>2. Budget Category ▼</b>					
<b>3. Funding for Meter Purchase</b>	\$400,000	\$ 525,000	\$ 125,000		\$1,050,000
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
<b>18. TOTALS</b>	\$400,000	\$525,000	\$125,000		\$1,050,000

**Authorized  
Signature :**

*Steve [Signature]*

**Date:** 2/6/04

contractbudgetsummary.doc \*It is now planned to use Bureau of Reclamation monies on parts of the project that occur by January 29, 2004 or earlier. This will directly increase the amount of state appropriation money available for use in later months. Expenditures from both of these sources will be noted in upcoming progress reports.

**NEBRASKA ENVIRONMENTAL TRUST FUND  
INSTRUCTIONS FOR CONTRACT BUDGET SUMMARY**

It is important that we are able to determine from this summary the specific activities you expect to fund with your grant. Please contact the office if you have questions or would like assistance. This summary will be considered a binding attachment to your grant contract.

**You must complete this form even if there are no changes from the original budget submitted in your application.**

This budget form is for the period of April 2004 through June 30, 2005 only. If your project is recommended for more than one year of funding, we will ask for additional budget information at the time the additional year(s) are funded. We only need the current year's budget information at this time.

If this is your second or third year of funding please include the balance of your current grant into the total budget you submit for this year. We will combine the grants into the new grant number and transfer the balance. (new award amount + balance of current grant = Total in NETF Column - Line 18)

If you need more rows or columns, please copy this form as needed and number the pages.

**BUDGET CATEGORIES - COLUMN A (LINES 3-17)**

Please list each category of expenditures you anticipate in this project. These may correspond with your usual accounting categories. (examples: sediment removal, engineering/design, equipment, personnel)

**SOURCE OF FUNDS - LINE 1**

Column B has been completed with "NETF GRANT" for you to represent our contributions to the project. You will need to show the actual amount of Environmental Trust Funds you are expending for each budget category in Column B.

Columns C-E should reflect your other contributing partner information. Identify each partner on Line 1 in Columns C-E. Identify each partner and then indicate their financial contribution or in-kind contribution for each applicable budget category. Please indicate in-kind contributions by writing "in-kind" in the cell, along with the estimated \$ value of the contribution.

**TOTALS**

Please add across each line 3-17 and place the totals in Column F of the form. ( $3B+3C+3D+3E = 3F$  - then repeat for each budget category line)

Then add up the totals in Columns B-F and place the totals on line 18 of the form. ( $3B+4B+5B...17B = 18B$  - then repeat for each column)

Cell 18F should be your total project budget amount with all contributions included.

If you need more than one page to show all of your partner contributions, please write "continued" in Column F on page one and show all the totals on the last page only.

**Please be sure to keep a copy of this form, so that you may reference it when requesting reimbursement.**

## Direct Deposit Enrollment

Attached is the State of Nebraska enrollment form if you wish to have your grant funds deposited directly into your bank account. The State requires that any one disbursement of \$75,000 or more must be wired directly to your account - checks cannot be used in these cases.

If your organization is a state agency you will not need to complete the ACH Enrollment Form. Just mark the box below to receive all payments by IBT.

We encourage the use of the direct wire to your account when there will be multiple disbursements throughout the grant period. If your grant is for a single piece of equipment or will most likely be disbursed in one or two payments (under \$75,000) then we would suggest not setting up the direct deposit and we will send you a check.

Please print or type the information on the form. Your organization should complete the Vendor information section and sign the form at the bottom. You will need to have your bank complete the financial institution section and sign the form at the bottom as well.

**Please indicate your choice below: (PLEASE RETURN THIS FORM BY APRIL 5, 2004)**

- I have previously set up a direct deposit account and would like to continue using the same account with no changes.
- I have previously set up a direct deposit account but would like to change account information. Please complete the form and return it by April 5, 2004.
- I would like to set up a new direct deposit account. Please complete the form and return it by April 5, 2004.
- I do not wish to set up a direct deposit account at this time. Disbursements may be made by check.
- Not applicable – We are a state agency and all payments may be made by IBT.

Robert Stephen [Signature]

Sponsors Authorized Signature

Nebraska Department of Natural Resources - 04-168

2/3/04

Date

# STATE TREASURER ACH ENROLLMENT FORM

Mail To: Nebraska Environmental Trust  
2200 North 33rd Street  
Lincoln, NE 68503

New                       Change

**If you have an questions when completing this form, please contact the State Treasurer's Office:**

State Treasurer                       CCD+  
Attn: Treasury Management  
Rm. 2003, State Capitol  
Lincoln, NE 68509                       CTX  
Phone: 402-471-2455  
Fax: 402-471-0816

The information below should be completed by the vendor. If there are any questions, please contact the State Treasurer's Office at 402-471-2455

It is the Financial Institution's responsibility to assure the accuracy of the following banking information. If there are any questions, please contact the State Treasurer's Office at 402-471-2455

**Vendor Information**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Federal Tax ID #: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Fax #: \_\_\_\_\_

\_\_\_\_\_ All payments by the State of NE  
\_\_\_\_\_ Only NE Environmental Trust payments

**Financial Institution Information**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
ACH Coordinator: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Fax #: \_\_\_\_\_  
Nine Digit Routing Transit #: \_\_\_\_\_  
Depositor Account #: \_\_\_\_\_  
Depositor Account Title: \_\_\_\_\_  
Type of Account:     Checking     Savings

The services below represent an agreement between the Bank and the Customer relation to the bank passing the addendum information to the customer.

1. Both parties agree that the addendum information will be provided to the customer in the following medium:

Online Query     EDI Advice     No Notification Needed

2. Both parties agree that the addendum information will be provided to the customer within the following time frame:

Same day as payment date     Business day following payment date.

(Please Print or Type – Original Signature Required)

Vendor Signature: \_\_\_\_\_  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Date: \_\_\_\_\_

(Please Print or Type – Original Signature Required)

Bank Signature: \_\_\_\_\_  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Date: \_\_\_\_\_