

**CA DEPARTMENT OF HEALTH SERVICES  
PROPOSITION 50 FUNDING PROGRAM, MS 7408**

P.O. Box 997413  
SACRAMENTO, CA 95899-7413  
(916) 449-5600  
Fax: (916) 449-5656

**CDHS PROPOSITION 50 FUNDING PROGRAM**
**APPLICATION FOR FUNDING**


California  
Department of  
Health Services

**Water Security, Clean Drinking Water, Coastal and Beach Protection Act of 2002**

Complete this funding application and mail it along with the required additional information to:

CA Department of Health Services, Proposition 50 Funding Program, MS 7408, P.O. Box 997413, Sacramento, CA 95899-7413.

For additional information (e.g. application guidelines and CEQA compliance information) visit: <http://www.dhs.ca.gov/prop50>.

**NOTE: This application will not be processed until all required information has been received by CDHS.**

**PUBLIC WATER SYSTEM AND/OR APPLICANT (Please print or type)**

Legal Name of Applicant (Name of entity applying for funding)

**City of Redlands**

Public Water System Name (If applicable-See instructions)

**MUD-Water Division**

System ID Number (if applicable)

CDHS Assigned ID Project #

**3610037-6b-12/1/2004-14:51**

Project Title **City of Redlands Groundwater Contaminant Treatment and Removal with Tailored GAC**

County

**San Bernardino County**

Authorized representative

**Chris Diggs**

Title

**Water Resources Manager**

Address (number, street)

**PO Box 3005 35 Cajon Street, Suite 15A**

City

**Redlands, CA**

ZIP code

**92373**

Office Telephone

**( 909 ) 798-7698**

e-mail

**cdiggs@cityofredlands.org**

Mobile Telephone

( )

Fax

**(909) 798-7670**

**GRANT PROGRAM FUNDING APPLICATION (Check One)**

☐ Chapter 4a.2 – Demonstration Projects and Studies for Contaminant Treatment and Removal

☒ Chapter 6b – Demonstration Projects and Studies for Contaminant Removal

**APPLICATION REQUIREMENTS (The following information is required to be submitted as part of this application package.)**
**CDHS Use Only**

Contacts, Labor Compliance – Page 2

☐ Received

☐ Accepted

☐ Complete

☐ Incomplete

Project Technical Report – Page 3

☐ Received

☐ Accepted

☐ Complete

☐ Incomplete

Environmental Documentation – Page 4

☐ Received

☐ Accepted

☐ Complete

☐ Incomplete

Ownership, CPUC, Authority, Resolution – Page 5

☐ Received

☐ Accepted

☐ Complete

☐ Incomplete

Financial Information – Page 6

☐ Received

☐ Accepted

☐ Complete

☐ Incomplete

Financial and Additional Information – Page 7

☐ Received

☐ Accepted

☐ Complete

☐ Incomplete

CALFED Information – Page 8

☐ Received

☐ Accepted

☐ Complete

☐ Incomplete

**APPLICATION CERTIFICATION**

**I declare under penalty of law that the preceding is true, and that I am authorized to sign as a responsible party for this facility/business.**

Signature:

*Pat Gilbreath*

Title:

Pat Gilbreath, Mayor Pro Tem

*Lorrie Poyzer*

Lorrie Poyzer, City Clerk

Date:

6-07-2007

Applicant Name <b>City of Redlands</b>	System ID Number (if applicable)	CDHS Assigned ID Project # <b>3610037-6b-12/1/2004-14:51</b>
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**PROJECT CONTACT INFORMATION** *(Use additional sheets as necessary)*

List additional people if necessary to be contacted for this project. These may include engineering consultants, project managers, administrative staff, etc. Use additional sheets as necessary.

Primary Project Contact <b>Dr. Fred S. Cannon, P.E.</b>		Title/Project Role <b>Professor/ Principal Investigator for Analyses, Validation</b>	
Address (number, street) <b>212 Sackett Engineering Building</b>	City <b>University Park, PA</b>	ZIP code <b>16802</b>	Office Telephone <b>( 814) 238-5175</b>
e-mail <b>fcannon@engr.psu.edu</b>	Mobile Telephone <b>(814)238-2559 or (814)863-8754</b>		Fax <b>(814) 863-7304</b>

Additional Project Contact <b>Jim Graham</b>		Title/Project Role <b>Technical Director, Environmental Services / Coordinator of Media Preparation</b>	
Address (number, street) <b>14250 Gannet Street</b>	City <b>La Mirada, CA</b>	ZIP code <b>90638</b>	Office Telephone <b>(714) 228-8842</b>
e-mail	Mobile Telephone ( )		Fax ( )

Additional Project Contact <b>Dr. Robert Parette</b>		Title/Project Role <b>Research Associate/ Co-PI For Analysis, Validation</b>	
Address (number, street) <b>212 Sackett Engineering Building</b>	City <b>University Park, PA</b>	ZIP code <b>16802</b>	Office Telephone <b>( 814) 865-4851</b>
e-mail <b>rbp122@psu.edu</b>	Mobile Telephone ( )		Fax <b>( 814) 863-7304</b>

Attach information for contacts if necessary

**LABOR COMPLIANCE PLAN** *(Check one)*

The applicant must utilize Labor Compliance Plan (LCP) approved by the Department of Industrial Relations (DIR) for this project. For more information on labor compliance plans visit: <http://www.dir.ca.gov/lcp.asp>. Indicate how the LCP requirement will be met for this project by selecting one of the options below.

1. ☐ The applicant will utilize an existing Labor Compliance Plan approved by DIR.

A copy of the Labor Compliance Plan approval letter from DIR is attached: ☐ Attached

2. ☐ The applicant will contract for Labor Compliance Plan services. A copy of the DIR Labor Compliance Plan approval letter will be submitted to CDHS.

The Labor Compliance Plan requirement will be met by this date:

3. ☒ The applicant will develop a Labor Compliance Plan for approval by DIR. A copy of the DIR Labor Compliance Plan approval letter will be submitted to CDHS.

The Labor Compliance Plan requirement will be met by this date:

Additional Information on LCP Status:

Applicant Name <b>City of Redlands</b>	System ID Number (if applicable)	CDHS Assigned ID Project # <b>3610037-6b-12/1/2004-14:51</b>
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**PROJECT TECHNICAL REPORT INFORMATION** *(Please submit 4 paper copies or an electronic copy)*

The applicant must submit a *Project Technical Report* that addresses the following areas of the project and the water system/applicant. **For additional information refer to the Project Technical Report Guidelines for Chapters 4a.2 and 6b Projects available at <http://www.dhs.ca.gov/prop50>.**

Indicate by checking the appropriate boxes that the required sections of the Project Technical Report have been addressed in the technical report, a separate document (attach a copy of the relevant document), or is not applicable.

	Included in Tech Report	Attached Separately	Not Applicable
1. Project Location, Description and Map	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Problem Description	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Description of Proposed Project	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Project Design Elements			
a. Qualifications of Applicant/Project Investigator(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Proposed Treatment Technology	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Data Collection and Study Protocol	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
d. Ongoing Operation and Maintenance Issues	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
e. Public Purpose that is of Statewide Interest and Concern	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
f. Peer Review Component	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
g. Plan for Public Dissemination of Results and Report Submittal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
h. Affordability and Operational Expertise Required to Operate the Treatment Facility	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
i. Handling and Disposal of Residuals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
j. Operation and Maintenance Manual <i>(Demonstration Projects Only)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
k. List of Previous Studies Related to the Project	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Evaluation of Alternatives / Cost Effectiveness	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6. Anticipated Benefits of Proposed Project	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7. Ineligible Project Components	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. Detailed Cost Breakdown	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Useful Life of Key Project Components	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
10. Proposed Project Schedule	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11. Environmental Information <i>(refer to Env. Doc. section on pg 4 of this app.)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
12. Other: <b>Letters of in-kind Support</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Comments:

Applicant Name **City of Redlands**

System ID Number (if applicable)

CDHS assigned ID Project #

**3610037-6b-12/1/2004-14:51****PROJECT ENVIRONMENTAL DOCUMENTATION**

California Environmental Quality Act (CEQA) compliance is required for all projects. **For additional information refer to the Application Guidelines.** For CEQA schedules and forms visit the Prop 50 web site at: <http://www.dhs.ca.gov/prop50>.

Applicant's CEQA Representative

**Chris Diggs**Title **Water Resources Manager**

Address (number, street)

**PO Box 3005 35 Cajon Street, Suite 15A**

City

**Redlands, CA**

ZIP code

**92373**

Office Telephone

**( 909 ) 798-7698**

e-mail

**cdiggs@cityofredlands.org**

Mobile Telephone

( )

Fax

**(909) 798-7670**

1. Is the applicant or any other public agency acting as the lead agency for the preparation of environmental documents pursuant to CEQA for this project?

☒ Yes ☐ No

2. Have any other CEQA compliance or environmental review documents for this project been drafted, adopted, or circulated?

☐ Yes. Proceed to question 3 below and indicate existing CEQA documents.

☒ No, but applicant is or will be handling CEQA compliance. Proceed to question 4 below.

☐ No, applicant is a private entity and CDHS will be the lead agency, or the applicant is unsure who should handle CEQA compliance. Proceed to question 5 below.

3. If Yes, indicate existing CEQA document(s) and attach a copy.

Attached

Not Applicable

a. Negative Declaration

☐☐

b. Mitigated Negative Declaration

☐☐

c. EIR with State Clearinghouse Numbers on the document

☐☐

d. Notice of Determination filed w/ County Clerk

☐☐

e. Notice of Exemption filed w/ County Clerk\*

☐☐

f. Resolution making CEQA findings

☐☐

g. Notice of Determination filed w/ State Clearinghouse

☐☐

h. Notice of Exemption filed w/ State Clearinghouse

☐☐

i. Other environmental document

☐☐

\*If the project has been determined to be exempt, complete and attach a copy of the Prop 50 Environmental Worksheet for CEQA Exemptions.

Prop 50 Environmental Worksheet for CEQA Exemptions

☒ Attached

4. Complete and attach a copy of the Prop 50 Schedule for CEQA Compliance.

Prop 50 Schedule for CEQA Compliance

☒ Attached

5. Complete and attach a copy of the Prop 50 Environmental Information Form. No other environmental documentation is required at this time.

Prop 50 Environmental Information Form

☒ Attached

Provide any additional status information of the project's Environmental Documentation. *Use additional sheets as necessary.*

Applicant Name **City of Redlands**

System ID Number (if applicable)

CDHS Assigned ID Project #

**3610037-6b-12/1/2004-14:51****OWNERSHIP AND AUTHORITY OF APPLICANT** (Use additional sheets as necessary)**Indicate the Ownership of the Applicant:****Public Ownership**

- ☒ Municipality  
☐ County Agency  
☐ Special District  
☐ State Agency  
☐ Federal Agency  
☐ Irrigation District  
☐ Other:

**Private Ownership**

(Attach a copy of the fictitious name statement, if operating under a fictitious name)

☐ Attached

- ☐ General Corporation  
☐ Limited Corporation  
☐ Partnership  
☐ Incorporated Mutual  
☐ Unincorporated Association  
☐ Non-Profit Organization - Federal Tax ID #: \_\_\_\_\_  
☐ Limited Liability Company (LLC)  
☐ Other:

**California Public Utilities Commission (CPUC) Information**

1. Does the CPUC regulate the applicant's water system?

☐ Yes☒ No

If Yes, attach a copy of the documentation that verifies the applicant has notified the CPUC of its intent to submit a Prop 50 funding application.

☐ Attached

2. Describe all matters relating to the applicant that are currently pending before the CPUC that affect or concern the financial condition of the applicant and/or the project.

**None****Funding Authority Information:**

The applicant must have the legal authority to enter into a Proposition 50 funding agreement with the State of California.

1. Is the applicant required to hold an election before entering into a funding agreement?

☐ Yes☒ No

2. Provide a description of the actions that the applicant must take to obtain the necessary approvals to enter into a funding agreement (i.e., resolution, modification of by-laws, city council approval, vote of governing body, etc.)

**Vote of governing body**

The necessary action will be completed by date(s):

**APPLICANT RESOLUTION**The applicant must submit a resolution from the applicant's governing body designating the authorized representative and authorizing that individual to apply for a CA Department of Health Services, Proposition 50 Funding Program grant. For an example of a resolution visit: <http://www.dhs.ca.gov/prop50>

1. Resolution Status:

☐

Pending, copy to be submitted when approved by governing body

☒

Approved, copy attached

2. Provide any additional information on the resolution status (i.e., date scheduled for approval):

**See Attached Resolution, dated November 21, 2006**

Applicant Name **City of Redlands**

System ID Number (if applicable)

CDHS assigned ID Project #

**3610037-6b-12/1/2004-14:51****PROJECT FINANCIAL INFORMATION – ESTIMATED PROJECT COSTS** *(Use additional sheets as necessary)*

Cost Classification	Total Costs	Prop 50 Funds	Matching Funds	
			Applicant Funds	Other Funds
A. Preliminary Costs	\$	\$ 20,000	\$	\$
B. Design & Engineering Costs	\$	\$ 30,000	\$	\$
C. Direct Labor/Personnel Costs	\$	\$ 240,450	\$	\$
D. Study, Equipment, O&M, Analytical, and Validation Costs	\$	\$ 872,101	\$	\$
E. Project Management and	\$	\$ 10,000	\$	\$
F. Other Costs (see below)	\$ 1,200,000+	\$	\$	\$ 1,200,000+
Total Funding \$	\$ 1,200,000+	\$ 1,172,551	\$	\$ 1,200,000+

**PROJECT FINANCIAL INFORMATION – SOURCES OF MATCHING FUNDS IF REQUIRED**

Source of Funds	Type of Funds (grants, loans, in-kind services, user fees, etc.)	Amount	Funding Status (i.e., application in progress, funding committed, cash on hand, etc. Describe below.)
Redlands, Lockheed Martin	Grants to Penn State	\$ 235,000	Expended 11/2003-11/2006
Siemens Water Technologies	In-Kind	\$ 100,000	Expended 11/2003-11/2006
American WWA Research F	Grant to Penn State	\$ 50,000	Empended 11/2003-4/2004
National Science Foundation	Grant to Penn State	\$ 150,000	Expended 11/2003-8/2005
Redlands, Lockheed Martin	In-kind Prop 50	\$ 155,000	Funding Committed, for 2/2007-8/2009
Siemens Water Technologies	In-kind Prop 50	\$ 50,000	Funding Committed, for 2/2007-8/2009
NORIT Americas	Grant to Penn State	\$ 100,000	Expended 11/2003-12/2005
American WWA Research F, etc	Grant to Southern Nevada WA	\$ 200,000	Expended 11/2003-12/2006
DOD,EPA,DOE,ESTCP	Grant to Penn State, Siemens WT, etc.	\$ 1,500,000	Cash on hand 10/2005-10/2007
Total Funding \$		\$ 2,540,000 (apply \$1,200,000)	

The applicant will be required to provide documentation that all required matching funds have been secured before a funding agreement will be executed. Describe in detail the status of matching funds. In particular, describe the source of funds, application status (if applicable), funding commitments secured, date funding will be available, conditions on funding that impact this funding agreement, etc.

**See Attached Letters and Resolutions**

**PROJECT FINANCIAL INFORMATION – OPERATIONS AND MAINTENANCE COSTS**

Types of O&M Costs for Project Facilities (i.e., labor, power, waste disposal, etc.)	Estimated Annual O&M Costs for Project Facilities	Sources of Funding
Labor, Power, Waste Disposal, Operations, Analysis, and Validation	\$930,000 (for the full period of time)	Prop 50 and In-kind

Applicant Name **City of Redlands**

System ID Number (if applicable)

CDHS assigned ID Project #

**3610037-6b-12/1/2004-****APPLICANT FINANCIAL INFORMATION** *(Use additional sheets as necessary)*

1. Attach copies of financial statements or tax returns for your entity for the past three years.

☒ Attached

2. List all cash reserves:

3. Provide a description of the planned uses of the cash reserves:

**ADDITIONAL INFORMATION** *(Use additional sheets as necessary)*

1. Is there any litigation pending relative to the operation of the water system (if applicable) or the proposed project?

☐ Yes☒ No

If Yes, describe the pending litigation:

2. Has or will the applicant contract with a private firm or another agency for the operation of the facility to be funded during the study?

☐ Yes☒ No

If Yes, provide the name of the firm or agency that will operate the facility and describe the terms of the agreement or contract that includes the length of this agreement.

3. Does or will the applicant lease land or major water system facilities associated with the project?

☐ Yes☒ No

If Yes, describe the terms of each lease:

4. Is the applicant required to prepare an Urban Water Management Plan pursuant to California Water Code Section 10610 et seq.?

☒ Yes☐ No

If Yes, submit a copy of the plan to the DHS District office.

☒ Attached

Does the applicant have a 20-year planning document for water demand?

☒ Yes☐ No

If Yes, describe the type of document (i.e., Urban Water Management Plan or other comparable public water system planning document), the date of preparation, the current status, etc.:

5. Is the proposed project in conformance with the planning document described in question 4?

☒ Yes☐ No

If Yes, describe how the project is in conformance:

**The project offers an opportunity for the City of Redlands to use wells that have already been developed, which have perchlorate in them**

Applicant Name **City of Redlands**

System ID Number (if applicable)

CDHS assigned ID Project #

**3610037-6b-12/1/2004-14:51****CALFED DRINKING WATER QUALITY PROGRAM INFORMATION****NOTE: CONTACT CDHS ([Prop50@dhs.ca.gov](mailto:Prop50@dhs.ca.gov)) TO DETERMINE IF THIS SECTION IS APPLICABLE TO THIS PROJECT.**

CDHS is working with the CALFED Drinking Water Quality Program to identify projects that are part of or support a multi-barrier approach to improving drinking water quality from the Sacramento - San Joaquin Delta. The CALFED Program recognizes that water quality improvement can come through many forms (from source water quality improvements to infrastructure changes to treatment plant upgrades). The CALFED Drinking Water Quality Program also recognizes that water quality and water supply are frequently closely connected. **For more information, please refer to the Application Guidelines.**

To determine whether the proposed project supports the CALFED objectives, provide brief responses to the following questions:

## 1. Does the water supply for this project originate in:

a. Sacramento-San Joaquin Delta?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b. Delta Watershed (including watersheds of upstream reservoirs)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
c. California Aqueduct or similar conveyances?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
d. Other areas of the state that supply water to systems connected to the Delta?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

If "Yes" was answered to any water supply listed above, attach a brief description (1-2 paragraphs each, or more as needed), and proceed to the following questions.

If "No" was answered to all water supply listed above, skip questions 2 through 5. No further CALFED Drinking Water Quality Program information is required.

## 2. Does the project improve drinking water quality regarding:

Yes (attach description, see Item 3 below)

No

a. Organic Carbon	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Bromide	<input type="checkbox"/>	<input type="checkbox"/>
c. Microbial Pathogens	<input type="checkbox"/>	<input type="checkbox"/>
d. Salinity	<input type="checkbox"/>	<input type="checkbox"/>
e. Nutrients	<input type="checkbox"/>	<input type="checkbox"/>
f. Turbidity	<input type="checkbox"/>	<input type="checkbox"/>
g. Taste	<input type="checkbox"/>	<input type="checkbox"/>
h. Disinfection Byproducts (THMs, bromate, HAA5)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Odor	<input type="checkbox"/>	<input type="checkbox"/>

## 3. Attach a brief description (1 to 2 paragraphs) of the estimated relative magnitude, frequency, and location (i.e., portion of service area) of the expected change of these constituents as a result of this project.

☒ Attached

## 4. Does this project assist in meeting existing or anticipated regulations, and if so which ones? If not, does it address an internal water quality goal and if so, briefly describe.

**Assists in meeting perchlorate standards in California, and addresses water quality goals and standards pertaining to radioactivity, endocrine disruptors, chlorinated organics, BTX, chromium, pesticides, and nitrate**

Attach a brief response to these questions. (If this information is provided elsewhere in the application or the technical report, please state where the information can be found) **Not applicable**

☐ Attached

## 5. If you believe that this project would result in improved water quality for users of the Sacramento-San Joaquin Delta water supply and have not been able to describe it through the above questions, attach a brief description.

**The thermally tailored activated carbons that we will be testing in this groundwater demonstration will also remove odorants such as MIB and geosmin better than do conventional activated carbons.**



AGENDA ITEM NO. D-11

COUNCIL MEETING OF 11/21/06

**REQUEST FOR COUNCIL ACTION**

**SUBJECT:   ADOPTION OF RESOLUTION 6556 AUTHORIZING SUBMISSION OF AN APPLICATION FOR A PROPOSITION 50 RESEARCH GRANT**

**MOTION:**

I move that the City Council adopt Resolution 6556 to authorize submission of an application for a Proposition 50 Research Grant.

**STAFF RECOMMENDATION:**

Staff recommends that the City Council adopt Resolution No. 6556 to authorize submission of an application for a Proposition 50 Research Grant.

**DISCUSSION:**

In November, 2002 California voters passed Proposition 50, the Water Security, Clean Drinking Water, Coastal and Beach Protection Act of 2002. Proposition 50 provides up to \$3.44 billion in funding in eight different categorical program areas in California, including funds for technical research associated with development of new contaminant removal technologies. In September, 2004 the California Department of Health Services (DHS) issued a notice inviting water agencies to submit pre-applications for funding through the various programs the agency administers under Proposition 50.

Since 2003, the City has been working collaboratively with Pennsylvania State University and Siemens Water Technologies to develop treatment technology for cost-effective removal of ammonium perchlorate and other contaminants from groundwater. These efforts are focused on treatment facilities at the City's Texas St. Wellfield, due to the availability of infrastructure, including treatment vessels for various resin compounds. Since beginning the research project, the City and Penn State have increased the scope of testing from small bench scale efforts to a full demonstration scale program. The research performed to date has provided significant data regarding treatment methods for perchlorate removal, and appears to have long-term potential for use in groundwater treatment. If the treatment is approved for water production use, the City would directly benefit by reclaiming its Texas St. wells for potable water production. These wells were taken out of service in 1997 due to perchlorate contamination, except for a brief period in 2002 when operations were conducted under an emergency permit from the State. Funding for the project has been provided at various times by an American Water Works Association Grant, Lockheed Martin Corp., Siemens Water Technologies, and the City of Redlands.


Based on the success of the research efforts to date, the Municipal Utilities Department met with staff from the Department of Health Services and Penn State to determine whether the project

ADOPTION OF RESOLUTION 6556 AUTHORIZING SUBMISSION OF AN APPLICATION  
FOR PROPOSITION 50 RESEARCH GRANT  
City Council Meeting of November 21, 2006  
Page 3

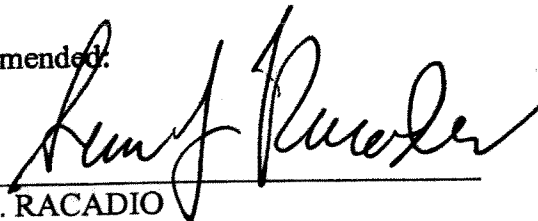
Prepared by:

  
\_\_\_\_\_  
GREG GAGE  
Capital Projects Manager

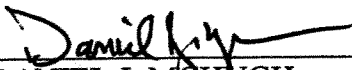
Concurrence:

  
\_\_\_\_\_  
GARY G. PHELPS  
Municipal Utilities Director

Recommended:

  
\_\_\_\_\_  
SAM J. RACADIO  
Interim City Manager

Reviewed By:

  
\_\_\_\_\_  
DANIEL J. MCHUGH  
City Attorney

for the Mentone Boulevard Sewer Pipeline Installation Project, Project No. 2-0725, to Nikola Construction Company based on the total bid amount of \$582,146.00, authorized the Mayor to execute, and the City Clerk to attest to, the document on behalf of the City, and authorized staff to approve contingent costs up to ten percent (10%) over the initial bid amount.

Agreements - Mentone Boulevard Sewer Pipeline Project - On motion of Councilmember Gilbreath, seconded by Councilmember Gallagher, the City Council unanimously approved an agreement to furnish professional surveying services with O'Bryant Surveying in the amount of \$2,780.00 and authorized the Mayor to execute, and the City Clerk to attest to, the document on behalf of the City. On motion of Councilmember Gilbreath, seconded by Councilmember Gallagher, the City Council unanimously approved an agreement to furnish construction inspection and testing services with Hilltop Geotechnical, Inc. for the Mentone Boulevard Sewer Pipeline Project in the amount of \$13,472.00 and authorized the Mayor to execute, and the City Clerk to attest to, the document on behalf of the City.

Resolution No. 6556 - Proposition 50 Research Grant - On motion of Councilmember Gilbreath, seconded by Councilmember Gallagher, the City Council unanimously adopted Resolution No. 6556, a resolution of the City Council of the City of Redlands authorizing the submission of an application for grant funding pursuant to Chapter 4a2 and/or Chapter 6b of the Water Security, Clean Drinking Water, Coastal and Beach Protection Act of 2002, Water Code Section 79560 *et seq.*, (Proposition 50), to continue working collaboratively with Pennsylvania State University and Siemens Water Technologies to develop treatment technology for cost-effective removal of ammonium perchlorate and other contaminants from the groundwater.

Agreement - Hinckley Water Treatment Plant - On motion of Councilmember Gilbreath, seconded by Councilmember Gallagher, the City Council unanimously approved an agreement to perform professional engineering services for an initial system evaluation and preliminary design report with Carollo Engineers for the Hinckley Water Treatment Plant and authorized the Mayor to execute, and the City Clerk to attest to, the document on behalf of the City.

Funds - Senior Transportation - On motion of Councilmember Gilbreath, seconded by Councilmember Gallagher, the City Council unanimously approved an agreement with the County of San Bernardino, Department of Aging and Adult Services, to assist in funding of the senior transportation program in the amount of \$5,200.00 and authorized the Mayor to execute, and the City Clerk to attest to, the document on behalf of the City.

**RESOLUTION 6556**

RESOLUTION OF THE CITY COUNCIL OF THE CITY OF REDLANDS AUTHORIZING THE SUBMISSION OF AN APPLICATION FOR GRANT FUNDING PURSUANT TO CHAPTER 4a2 AND/OR CHAPTER 6b OF THE WATER SECURITY, CLEAN DRINKING WATER, COASTAL AND BEACH PROTECTION ACT OF 2002, WATER CODE SECTION 79560 *et seq.*, (PROPOSITION 50).

WHEREAS, the City of Redlands has the authority to construct, operate, and maintain the City of Redlands Water System; and

WHEREAS, the City of Redlands desires to enhance the provision and protection of the drinking water supplied to the consumers of the City of Redlands Water System;

NOW, THEREFORE, BE IT RESOLVED by the City Council of the City of Redlands that, pursuant and subject to all of the terms and provisions of the Water Security, Clean Drinking Water, Coastal and Beach Protection Act of 2002 (Proposition 50) and all amendments thereto, application be made to the State of California for funding; and

BE IT FURTHER RESOLVED that Mr. Jon Harrison, Mayor of said City of Redlands is hereby authorized and directed to cause the necessary data to be prepared, investigations to be performed and application to be signed and filed with the State of California.

ADOPTED, SIGNED AND APPROVED at a regular meeting of the City Council of the City of Redlands on this 21st day of November, 2006.

  
\_\_\_\_\_  
Jon Harrison, Mayor

ATTEST:

  
\_\_\_\_\_  
Lorrie Poyzer, City Clerk  
(SEAL)

I, Lorrie Poyzer, City Clerk of the City of Redlands, hereby certify that the foregoing resolution was duly adopted by the City Council at a regular meeting thereof held on the 21st day of November, 2006, by the following vote:

AYES: Councilmembers Gilbreath, Gil, Gallagher, Aguilar; Mayor Harrison  
NOES: None  
ABSENT: None  
ABSTAIN: None

  
\_\_\_\_\_  
Lorrie Poyzer, City Clerk

**CA DEPARTMENT OF HEALTH SERVICES  
PROPOSITION 50 FUNDING PROGRAM, MS 7408**

P.O. Box 997413  
SACRAMENTO, CA 95899-7413  
(916) 449-5600  
Fax: (916) 449-5656

**CDHS PROPOSITION 50 FUNDING PROGRAM**

**APPLICATION FOR FUNDING**



**Water Security, Clean Drinking Water, Coastal and Beach Protection Act of 2002**

Complete this funding application and mail it along with the required additional information to:

CA Department of Health Services, Proposition 50 Funding Program, MS 7408, P.O. Box 997413, Sacramento, CA 95899-7413.

For additional information (e.g. application guidelines and CEQA compliance information) visit: <http://www.dhs.ca.gov/prop50>.

**NOTE: This application will not be processed until all required information has been received by CDHS.**

**PUBLIC WATER SYSTEM AND/OR APPLICANT (Please print or type)**

Legal Name of Applicant (Name of entity applying for funding)

**City of Redlands**

Public Water System Name (If applicable-See instructions)		System ID Number (if applicable)	CDHS Assigned ID Project #
MUD-Water Division			3610037-6b-12/1/2004-14:51
Project Title <b>City of Redlands Groundwater Contaminant Treatment and Removal with Tailored GAC</b>		County <b>San Bernardino County</b>	
Authorized representative <b>Greg Gage</b>		Title <b>Capital Projects Manager</b>	
Address (number, street)	City	ZIP code	Office Telephone
<b>PO Box 3005 35 Cajon Street, Suite 15A</b>	<b>Redlands, CA</b>	<b>92373</b>	<b>(909) 798-7698</b>
e-mail	Mobile Telephone		Fax
<b>ggage@cityofredlands.org</b>	( )		<b>(909) 798-7670</b>

**GRANT PROGRAM FUNDING APPLICATION (Check One)**

☐ Chapter 4a.2 – Demonstration Projects and Studies for Contaminant Treatment and Removal

☒ Chapter 6b – Demonstration Projects and Studies for Contaminant Removal

**APPLICATION REQUIREMENTS (The following information is required to be submitted as part of this application package.)**

	CDHS Use Only			
Contacts, Labor Compliance – Page 2	<input type="checkbox"/> Received	<input type="checkbox"/> Accepted	<input type="checkbox"/> Complete	<input type="checkbox"/> Incomplete
Project Technical Report – Page 3	<input type="checkbox"/> Received	<input type="checkbox"/> Accepted	<input type="checkbox"/> Complete	<input type="checkbox"/> Incomplete
Environmental Documentation – Page 4	<input type="checkbox"/> Received	<input type="checkbox"/> Accepted	<input type="checkbox"/> Complete	<input type="checkbox"/> Incomplete
Ownership, CPUC, Authority, Resolution – Page 5	<input type="checkbox"/> Received	<input type="checkbox"/> Accepted	<input type="checkbox"/> Complete	<input type="checkbox"/> Incomplete
Financial Information – Page 6	<input type="checkbox"/> Received	<input type="checkbox"/> Accepted	<input type="checkbox"/> Complete	<input type="checkbox"/> Incomplete
Financial and Additional Information – Page 7	<input type="checkbox"/> Received	<input type="checkbox"/> Accepted	<input type="checkbox"/> Complete	<input type="checkbox"/> Incomplete
CALFED Information – Page 8	<input type="checkbox"/> Received	<input type="checkbox"/> Accepted	<input type="checkbox"/> Complete	<input type="checkbox"/> Incomplete

**APPLICATION CERTIFICATION**

<b>I declare under penalty of law that the preceding is true, and that I am authorized to sign as a responsible party for this facility/business.</b>		
Signature: Title:	Attest:	Date:
 Jon Harrison, Mayor	 Lorrie Poyzer, City Clerk	12/22/06