United States Department of Agriculture
Rural Development

Higher Blends Infrastructure Incentive Program (HBIIP)

Online Grant Application Instruction Guide

Office of the Chief Information Officer
United States Department of Agriculture
Rural Development Business Center
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1.0

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1. Introduction

The Higher Blends Infrastructure Incentive Program (HBIIP) is a new program that will expand the availability of domestic ethanol and biodiesel by incentivizing the expansion of sales of renewable fuels. To accompany the program, a new online grant application system has been developed to be used in applying for participation in the HBIIP grant program.

The HBIIP grant program includes infrastructure projects for fueling station companies and fuel distribution facility companies.

2. Overview

2.1. Purpose

The purpose of this document is to provide company employees and third-party grant writers instructions for completing the online HBIIP grant application.

2.2. Assumptions

The content of this document has been developed based on its general purpose and the following assumptions:

- This document is not intended to be a comprehensive set of instructions. It, along with the features provided in the online application system should collectively provide applicants the information they need to complete and submit a grant application.
- Completion of the online grant application will not be started prior to the user reading this document.
- The company has reviewed all resources provided in the HBIIP Notice of Funding Availability published on May 5, 2020 and December 18, 2020 in the Federal Register. This includes an explanation of the Grant Period.

2.3. Additional Support

In the event that questions or clarification is needed to complete the online grant application, you can contact the HBIIP Program Office by emailing energyprograms@usda.gov.

3. Preparing to Apply

3.1. What will you need

Completing the online grant application will require the following information. When selecting an Applicant Type, the appropriate should be reflective of your company at this time. For example, if your company currently consists of 10 or fewer fueling stations, but your project will increase that number

of stations beyond 10, "Owner of 10 or fewer fueling stations" should be selected for the Applicant Type.

- Identification of an Applicant Type to describe the company. Below are the possible options:
    - Owner of 10 or fewer fueling stations.
    - Owner of more than 10 fueling stations.
    - Fleet fueling station facility/facilities.
    - Fuel distribution facility (terminal operation, midstream partner, heating oil distributor).
- Information to describe your company and employees/third-party grant writers
- A taxpayer Identification number, DUNS Number, and SAM/CAGE Code
- Company address.
- Congressional district (where the company is located).
- An indication if your company has been delinquent on a federal debt and supporting documents to explain the debt and delinquency.
- Contact information for an individual, should the agency require additional information.
- Information describing the individual "authorized representative" responsible for validating the information included in your online grant application.
- Information regarding your state's intent to review the application under Executive Order 12372.
- A proposed start and end date and brief description for your applicable infrastructure project.
- Fueling station information (address, contact, congressional district, priority scoring criteria, historical/projected data, and proposed activities) for each station included in your project (Only for fueling station projects).
- Fuel distribution facility information (address, contact, congressional district and fuel data) for the facility included in your project (Only for fuel distribution facility infrastructure projects).
- Project financial information (budget costs and estimated funding).
- Attachments.
    - Signed 424 D certification.
    - Signed matching funds certification.
    - Loan delinquency support documents.
    - Technical report for the project.
    - Fuel distribution facility feasibility/business plan (Only for fuel distribution facility projects).
    - Environmental review documents.
    - Other supporting documents.
    - Signed grant application.

3.2. Internet Browser

The online HBIIP grant application system operates best in the Google Chrome internet browser. Please use this internet browser when accessing and completing the online grant application. Please contact

your organization's information technology support group if you need assistance obtaining and installing the Google Chrome internet browser.

3.3. Confidentiality

This grant program is a competitive process. As a result, we consider your data as proprietary to your organization and the HBIIP Grant Application System will secure your application from the view of other applicants.

If it is your preference, you are permitted to use a third-party grant writer to complete your grant application. If you elect to use a third-party grant writer to complete your application, although your data will be secured within the HBIIP Grant Application System from employees of competing companies, all responsibility to ensure your third-party grant writer keeps your application data confidential is your responsibility.

4. Indicating Intent to Participate & Requesting Access

The first step to participating in the HBIIP grant program is to indicate intent to participate and request access for your company employees and third-party grant writers that will be responsible for completing the grant application using the online system. This will require some advanced preparation.

4.1. Gather the information needed

To indicate intent to participate, you will need the following information about your company:

- Your company's legal name.
- The company's Taxpayer Identification Number.
- The company's DUNS Number ().
- The company's SAM/CAGE Code ().
- The company's Applicant Type (See Section 3.1).

Each individual needing access to the online grant application system will require a USDA eAuthentication account. USDA eAuthentication accounts can be requested at:

https://www.eauth.usda.gov/home/

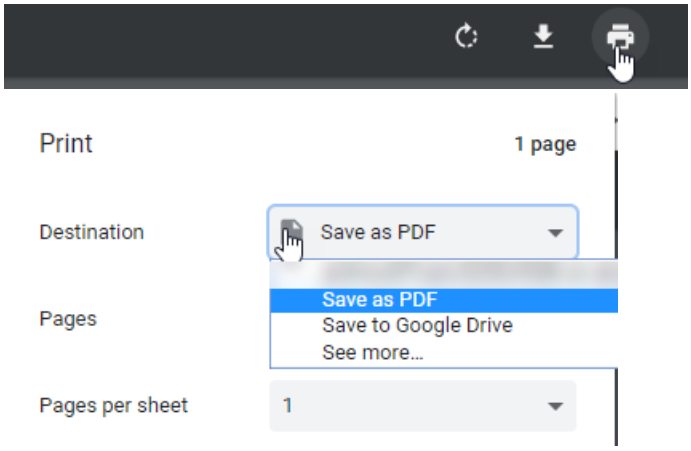
To request access to the online HBIIP grant application system for the individuals that will be completing your grant application:

For each individual:

- Last name.
- First name.
- eAuthentication ID.
- Email address.

4.2. Request to Participate

1. Complete HBIIP company/account and User Creation Request shown below and available on the Higher Blends Infrastructure Incentive Program website, To Apply tab. https://www.rd.usda.gov/programs-services/higher-blends-infrastructure-incentive-program.
2. **Print** the request as a PDF.



3. Email the request as an attachment to HigherBlendsGrants-access@usda.gov.

HBIIP Company/Account and User Creation Request

Request Type

1. Create Company Account only
2. Create User Account only
3. Create both Company Account and User Account

Company Information

Company Legal Name

Company TIN

DUNS/EUI Number

SAM/CAGE Code

Applicant Type (Select One) Make a Selection

Authorized User Information

	Last Name	First Name	Email	eAuth ID	Company TIN	Company DUNS Code	Company SAM/ CAGE Code
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							

The HBIIP company account and user accounts will be created and your requested users will be associated with your HBIIP company account. Each user will receive a user notification email indicating that their account has been created and a link to the online HBIIP grant application system.

Upon receiving the user notification email, the user should copy the URL link and paste it into the URL address bar in the Google Chrome browser and click enter.

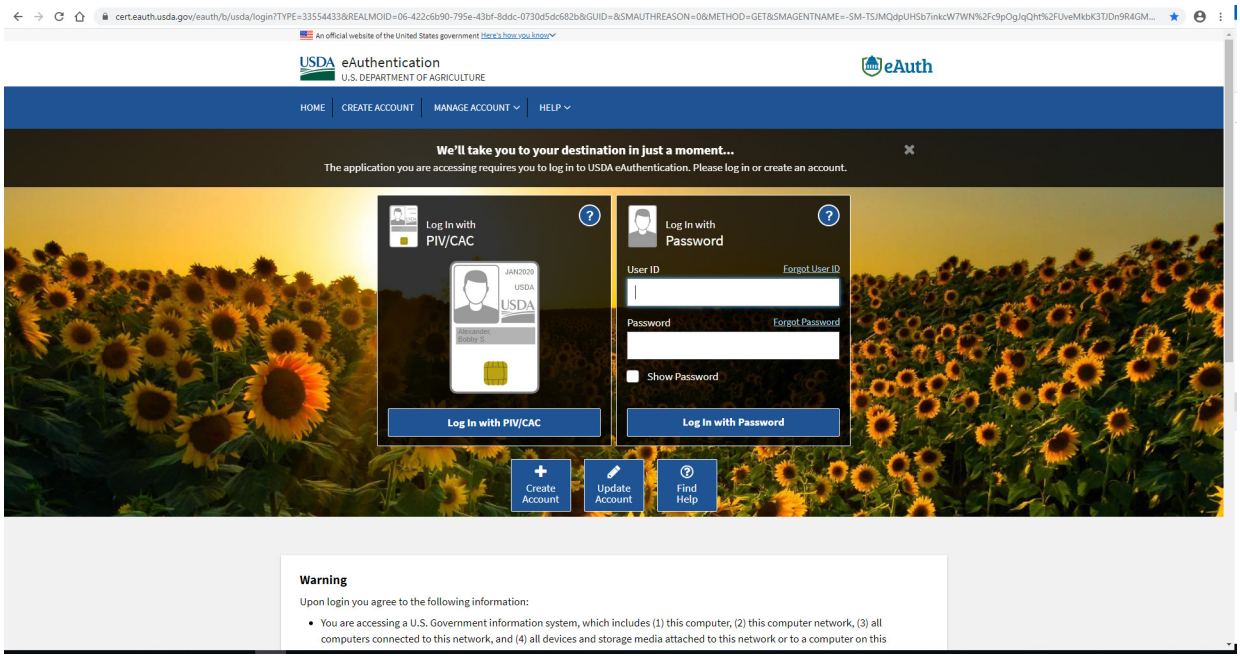
4.3. User Access Next Steps

Upon approval and setup of each user's access, each user will receive an email from the RD.AdminAppsSupport@usda.gov. NOTE: depending on a user's specific email client settings, the email may be placed into a spam folder.

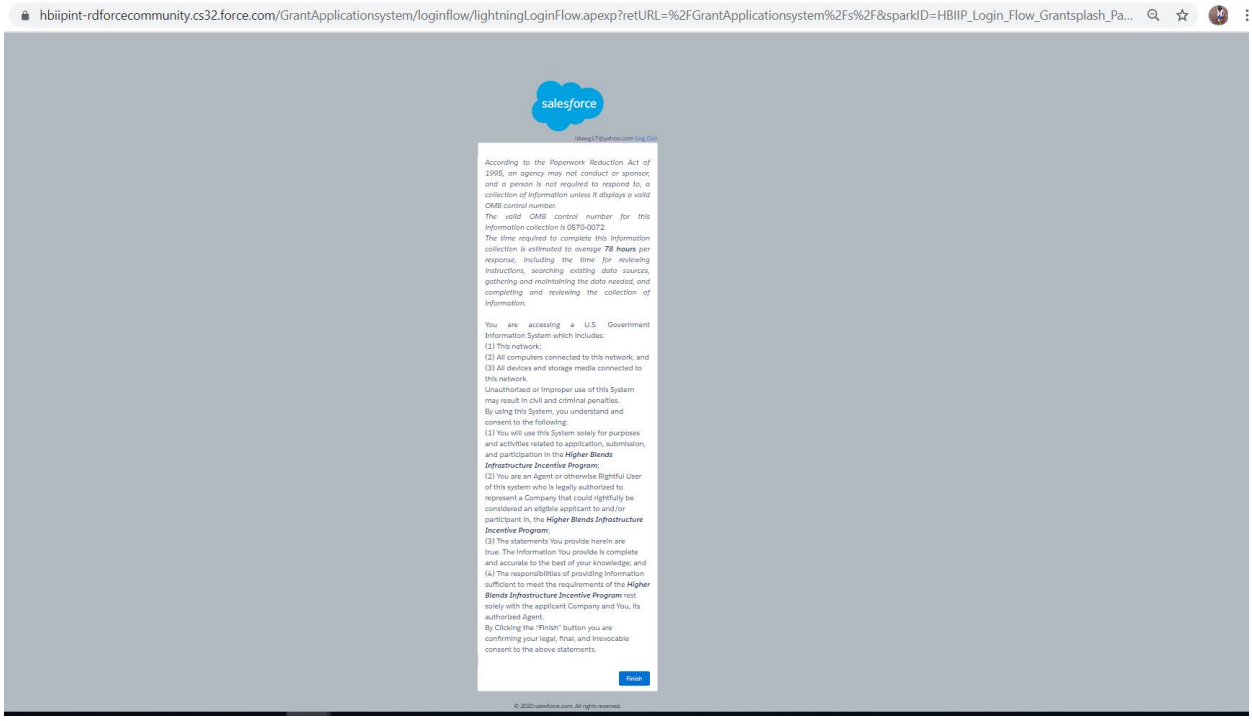
The email will provide a URL to access the system and instructions for doing so. Each user should copy the URL and paste it into the address bar of their Google Chrome internet browser and hit enter. We recommend bookmarking the URL for use should you need to access the online application system more than once.

5. Accessing the HBIIP Grant Application System

When presented with the following page, the user should enter their eAuthentication user ID and password and click Log In with Password.



After successfully authenticating, the online grant application system will display the HBIIP Disclaimer page below. Issues experienced with authenticating should be submitted to the USDA's Rural Development Help Desk by calling 1-800-457-3642 and following the prompts.



The user must click the Finish button to access the online grant application system. Upon clicking Finish, the system will display the Application List page. A single company can only have one grant application. The page will include only the application for the user's company. Third-party grant writers may see multiple applications for different companies if they have been engaged by more than one company to create their grant application.

To begin completing or continuing a grant application, click on the Edit button for the applicable application. The online application system will display the grant application with the Company Applicant Information tab selected.

6. Navigating the HBIIP Grant Application System

6.1. Menu Options

The online grant application system includes menu options in the form of links, forms and clickable tabs. Clicking either will display the selected page.

6.2. Required Data

Throughout the online application system, some data is required while others are optional. Required data is reflected with an asterisk on the left of the data label name. For example, Company Congressional District is required and labeled as *Company Congressional District.

6.3. Saving Your Data

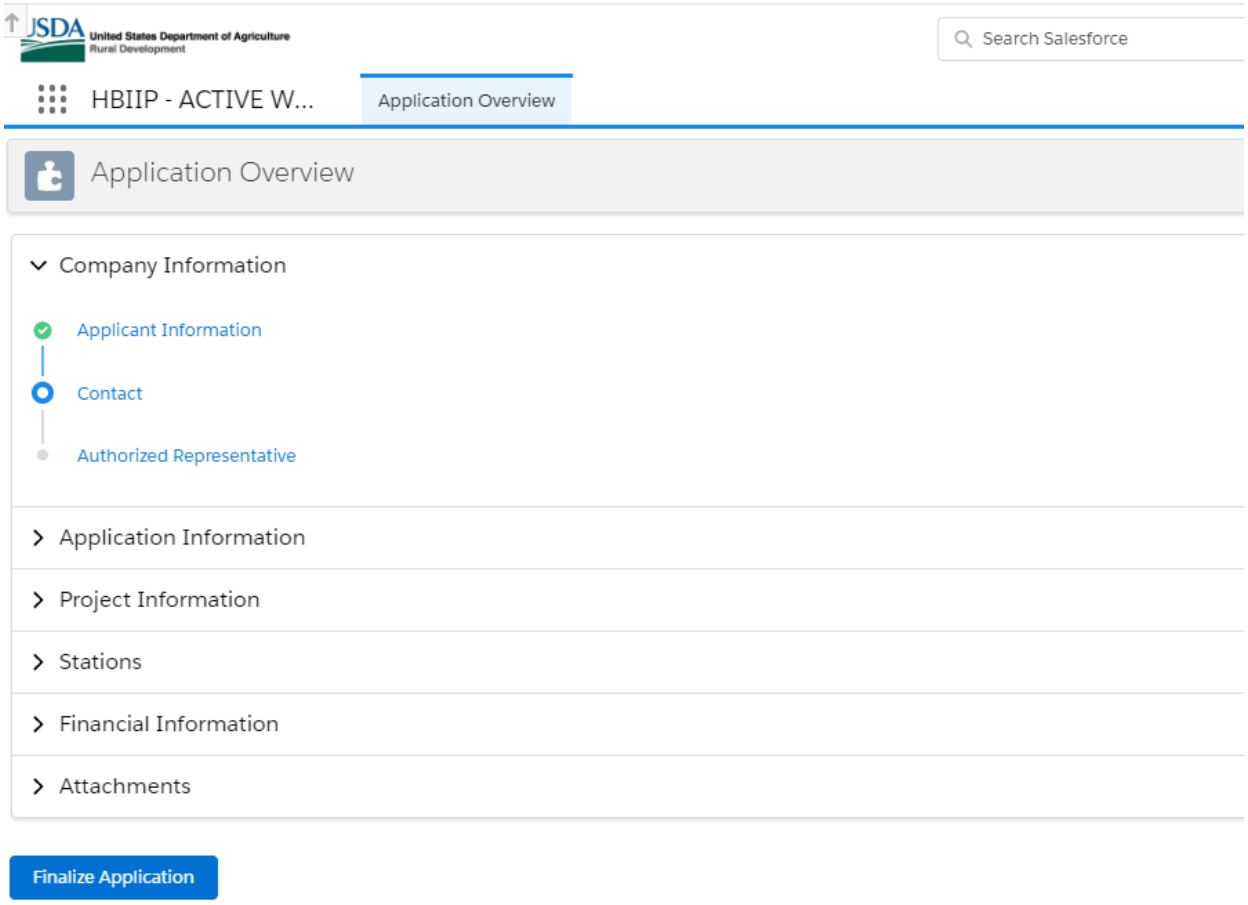
Each tab of grant application information includes the data fields for describing the specific details of your grant application. In addition, each tab of information and form includes a Save button to save your data. The Save button should be used before leaving a tab or form to ensure your data is retained.

The online grant application system is designed to ensure that the user may not complete all of the grant application at the same time or by the same individual. Different individuals can work on different parts of the application concurrently, but two users working on the same data at the same time will result in the data representing what the last user to save the document entered.

6.4. Traversing the Application and Tracking Your Progress

For the most part, the online grant application can be completed in any order you wish except with regard to Project and Station/Facility information. Project information must be completed before creating and defining Station/Facility information.

An Application Overview page (see below) is included to provide you a quick method of tracking the progress of your application. The page includes all of the sections and attachments required for your application to be complete. A check mark will appear for each section that you have completed (saved the required data). When all of the sections have check marks, the Finalize Application button will be enabled.



7. Completing the Application

7.1. Applicant Types

The specific Applicant Type for your company is used to define the data elements and the attachments that are required for your application. The table below is an explanation of the data requirements for each of the Applicant Types.

Applicant Type(s)	Required Data/Attachments
Owner of 10 or fewer fueling stations. Owner of more than 10 fueling stations. Fleet fueling station facility/facilities.	All company (applicant, contact and authorized representative), application tab, project, fueling station, financial (budget costs and estimated funding) information and the following attachments: • Signed 424 D Certification. • Signed Matching Funds Certification. • Loan Delinquency (if response to loan

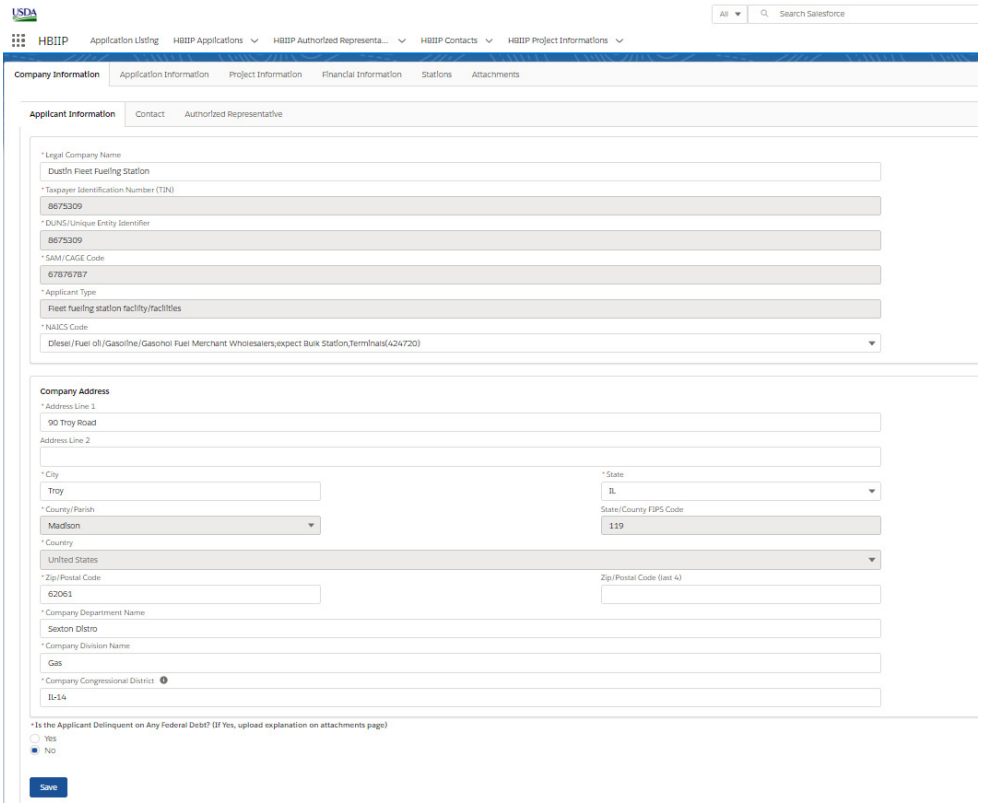
	delinquency question on Applicant Information tab is "Yes"). • Technical Report. • Environmental review documents. • Signed grant application.
Fuel distribution facility (terminal operation, midstream partner, heating oil distributor).	All company (applicant, contact and authorized representative), application tab, project, fueling station, financial (budget costs and estimated funding) information and the following attachments: • Signed 424 D certification. • Signed matching-funds certification. • Loan delinquency (if response to loan delinquency question on Applicant Information tab is "Yes"). • Technical report. • Fuel distribution facility feasibility/business plan. • Environmental review documents. • Signed grant application.

Table 7.1 - Applicant Type/Required Data

7.2. Company Information

7.2.1. Applicant Information

Clicking on the Company Information tab and then the Applicant Information tab will display the Applicant Information.



7.2.1.1. Legal Company Name (Required)

The legal company name is set to the value provided in the HBIIP account request and is not editable.

7.2.1.2. Taxpayer Identification Number (Required)

The taxpayer identification number is set to the value provided in the HBIIP account request and is not editable.

7.2.1.3. DUNS/Unique Entity Identifier (Required)

The DUNS/Unique Entity Identifier is set to the value provided in the HBIIP account request and is not editable.

7.2.1.4. SAM/CAGE Code (Required)

The SAM/CAGE Code is set to the value provided in the HBIIP account request and is not editable.

7.2.1.5. Applicant Type (Required)

The Applicant Type is set to the value provided in the HBIIP account request and is not editable.

7.2.1.6. NAICS (North American Industry Classification System) Code (Required)

Select the appropriate NAICS code from the list of values. If you select Other (specify below), provide the NAICS code in the text box provided.

7.2.1.7. Company Address

7.2.1.7.1. Address Line 1 (Required)

Enter the street address of your company.

7.2.1.7.2. Address Line 2 (Optional)

Self-explanatory.

7.2.1.7.3. City (Required)

Enter the city where the company is located.

7.2.1.7.4. State/Territory (Required)

Select the state/territory where the company is located.

7.2.1.7.5. County/Parish (Required)

Select the county/parish where the company is located.

7.2.1.7.6. County FIPS Code (Required)

The county FIPS code is determined by the system using the selected county/parish.

7.2.1.7.7. Country (Required)

The country is set by the system and is not editable.

7.2.1.7.8. ZIP/Postal Code (Required)

Enter the ZIP/postal code for the place where the company is located.

7.2.1.7.9. ZIP/Postal Code (plus 4) (Optional)

Self-explanatory.

7.2.1.7.10. Company Department Name (Required)

Enter the name of the primary organizational department that will undertake the assistance activity.

7.2.1.7.11. Company Division Name (Required)

Enter the name of the primary organizational division that will undertake the assistance activity.

7.2.1.7.12. Company Congressional District (Required)

Enter the congressional district number for where the company is located. The congressional district number can be found on house.gov and by selecting “Find Your Representative” and entering the

applicable ZIP code. You may be presented with multiple representatives. If so, you may need to provide the street address of the company to determine the exact congressional district.

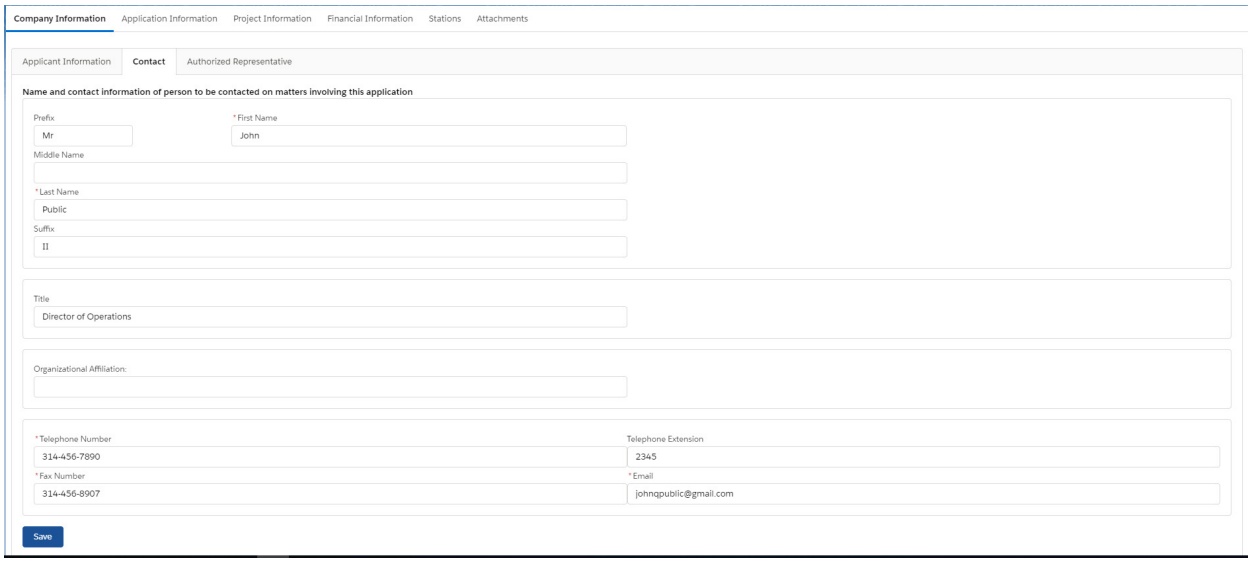
Your entry in the grant application should be formatted as "State-District Number." For example, the congressional district number for ZIP code 62265 should be entered as "IL-15."

7.2.1.7.1. Is the Applicant Delinquent on Any Federal Debt? (If Yes, upload explanation on attachments page) (Required)

Respond by clicking "Yes" or "No." If the response is "Yes," upload a Loan Delinquency attachment on the Attachments tab, providing an explanation of the delinquency.

7.2.2. Company Contact Information

Clicking on the company Information tab will display the Company tabs. Click on the Contact tab to provide the name and contact information of the person to be contacted on matters involving the application. Upon providing the information, click the Save button to save the information to your application.



7.2.2.1. **Prefix** (Optional)

Self-explanatory.

7.2.2.2. **First Name** (Required)

Enter the first name of the company contact.

7.2.2.3. **Middle Name** (Required)

Enter the middle name of the company contact.

7.2.2.4. **Last Name** (Required)

Enter the last name of the company contact.

7.2.2.5. **Suffix** (Optional)

Self-explanatory.

7.2.2.6. **Title** (Optional)

Enter the job title of the company contact.

7.2.2.7. **Organizational Affiliation** (Optional)

Enter the organizational affiliation of the company contact.

7.2.2.8. **Telephone Number** (Required)

Enter the telephone number of the company contact. The telephone number must be formatted as "123-456-7890."

7.2.2.9. **Telephone Extension** (Optional)

Enter the telephone extension number of the company contact.

7.2.2.10. **Fax Number** (Optional)

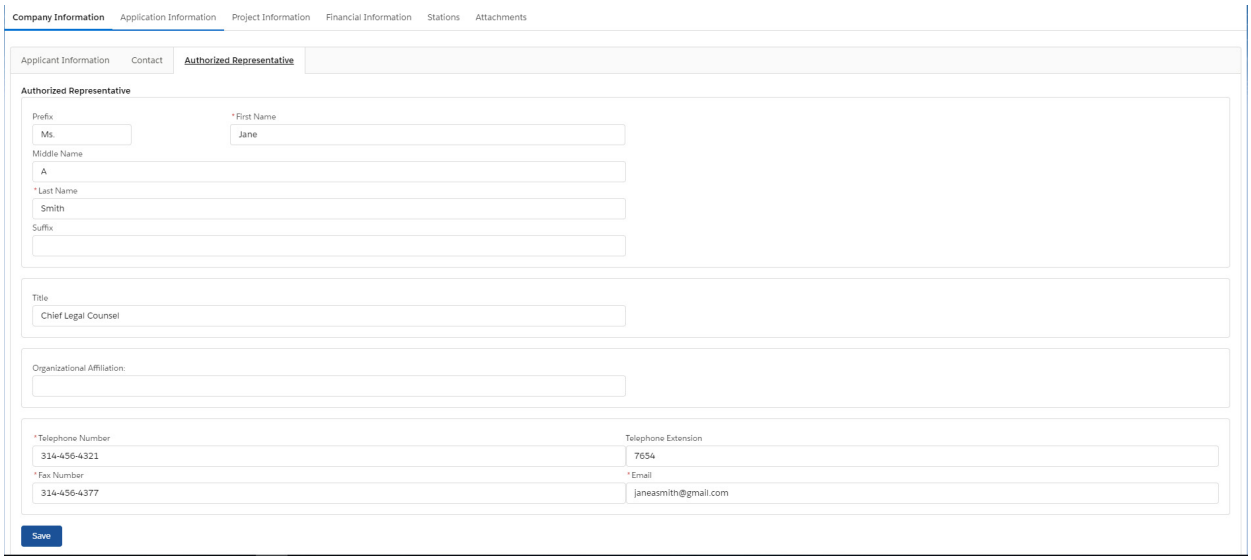
Enter the fax number of the company contact. The fax number must be formatted as "123-456-7890."

7.2.2.11. **Email** (Required)

Enter the email address of the company contact.

7.2.3. Company Authorized Representative Information

Clicking on the Company Information tab will display the company tabs. Click on the Authorized Representative tab to provide the name and contact information of the person authorized to verify all of the information on the application is valid. Upon providing the information, click the Save button to save the information to your application.



7.2.3.1. Prefix (Optional)

Self-explanatory.

7.2.3.2. First Name (Required)

Enter the first name of the company authorized representative.

7.2.3.3. Middle Name (Required)

Enter the middle name of the company authorized representative.

7.2.3.4. Last Name (Required)

Enter the last name of the company authorized representative.

7.2.3.5. Suffix (Optional)

Self-explanatory.

7.2.3.6. Title (Optional)

Enter the job title of the company authorized representative.

7.2.3.7. Organizational Affiliation (Optional)

Enter the organizational affiliation of the company authorized representative.

7.2.3.8. Telephone Number (Required)

Enter the telephone number of the company authorized representative. The telephone number must be formatted as “123-456-7890.”

7.2.3.9. Telephone Extension (Optional)

Enter the telephone extension number of the company authorized representative.

7.2.3.10. Fax Number (Optional)

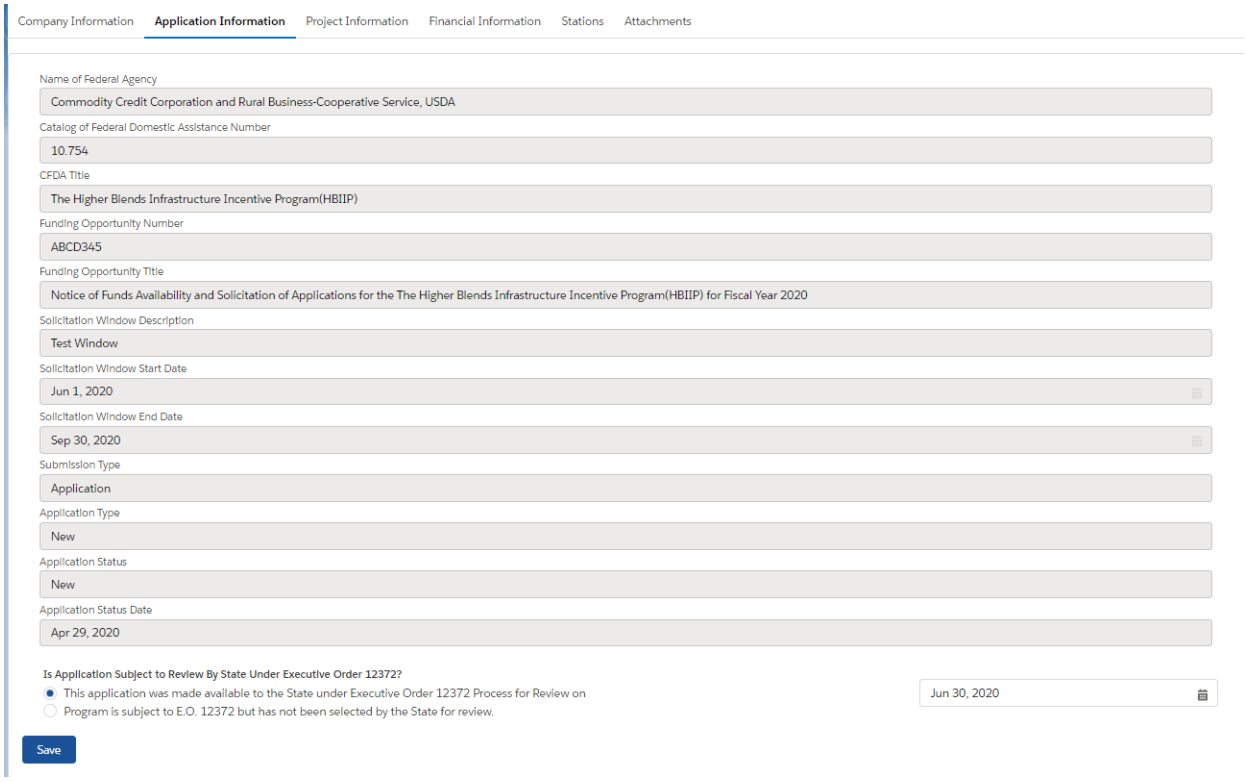
Enter the fax number of the company authorized representative. The fax number must be formatted as "123-456-7890."

7.2.3.11. Email (Required)

Enter the email address of the company authorized representative.

7.3. Application Information

Clicking on the Application Information tab will display the application information needed for your application. The majority of the data fields on the Application Information tab are set by the online application system to describe the grant program and are not editable. Upon providing the information, click the Save button to save the information to your application.



7.3.1. Is Application Subject to Review by State Under Executive Order 12372? (Required)

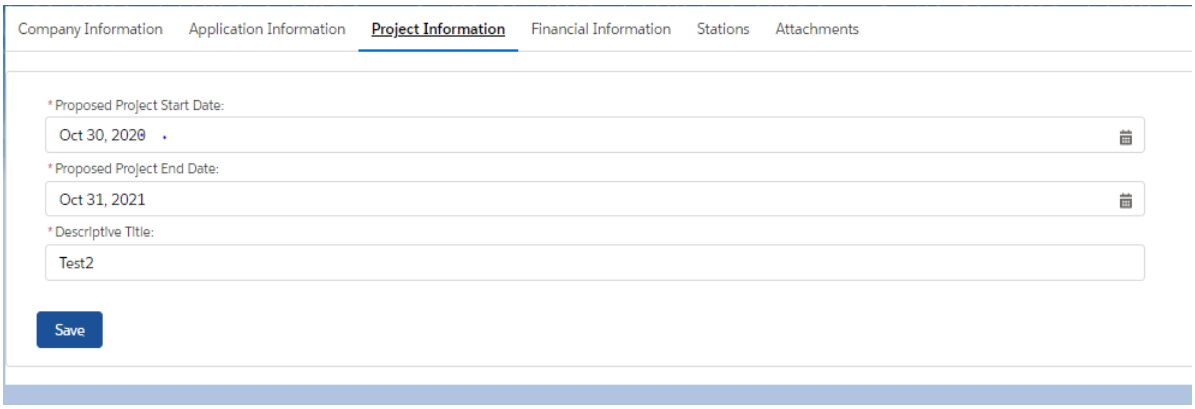
Select a response from the two options. If "This application was made available to the state under Executive Order 12372 Process for Review on," you must provide an extract of the grant application (State Submittal) to the state and enter a date when you believe that the State Submittal PDF will be

provided to the state. A function to produce the State Submittal will be available after the application is finalized in the online application system.

NOTE: You may need to contact your state government to determine if the state desires to review the application under Executive Order 12372. A list of state government single points of contact is available on the HBIIP website.

7.4. Project Information

Clicking on the Project Information tab will display the project description information needed for your application. Upon providing the information, click the Save button to save the information to your application.



7.4.1. Proposed Project Start Date (Required)

Enter the proposed start date for your project. The date must be after the solicitation window end date that can be found on the Application Information tab.

7.4.2. Proposed Project End Date (Required)

Enter the proposed end date for your project. The date must be after the proposed project start date.

7.4.3. Descriptive Title (Required)

Enter a brief description of your proposed project. Below is suggested text:

Fueling station project requesting $____ in federal funds; providing $____ in matching funds, to install ___ dispensers of E/15 and/or E/85 and/or B20 for ____ fueling stations across _____ states.

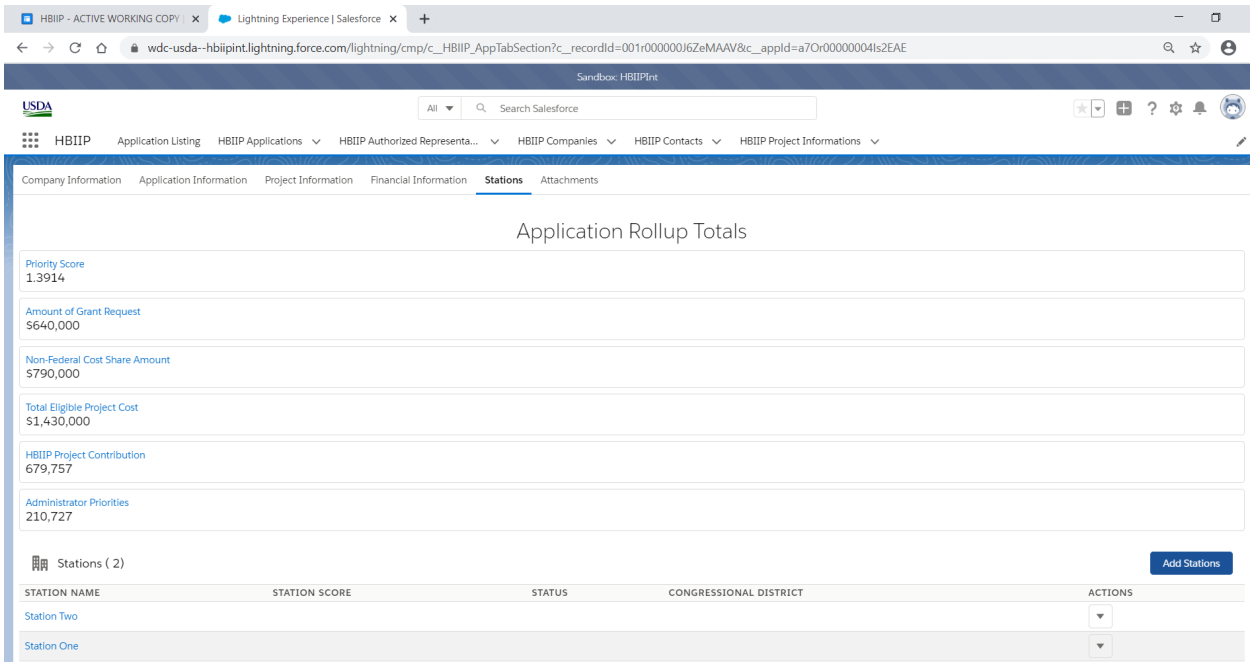
7.5. Fueling Station Information

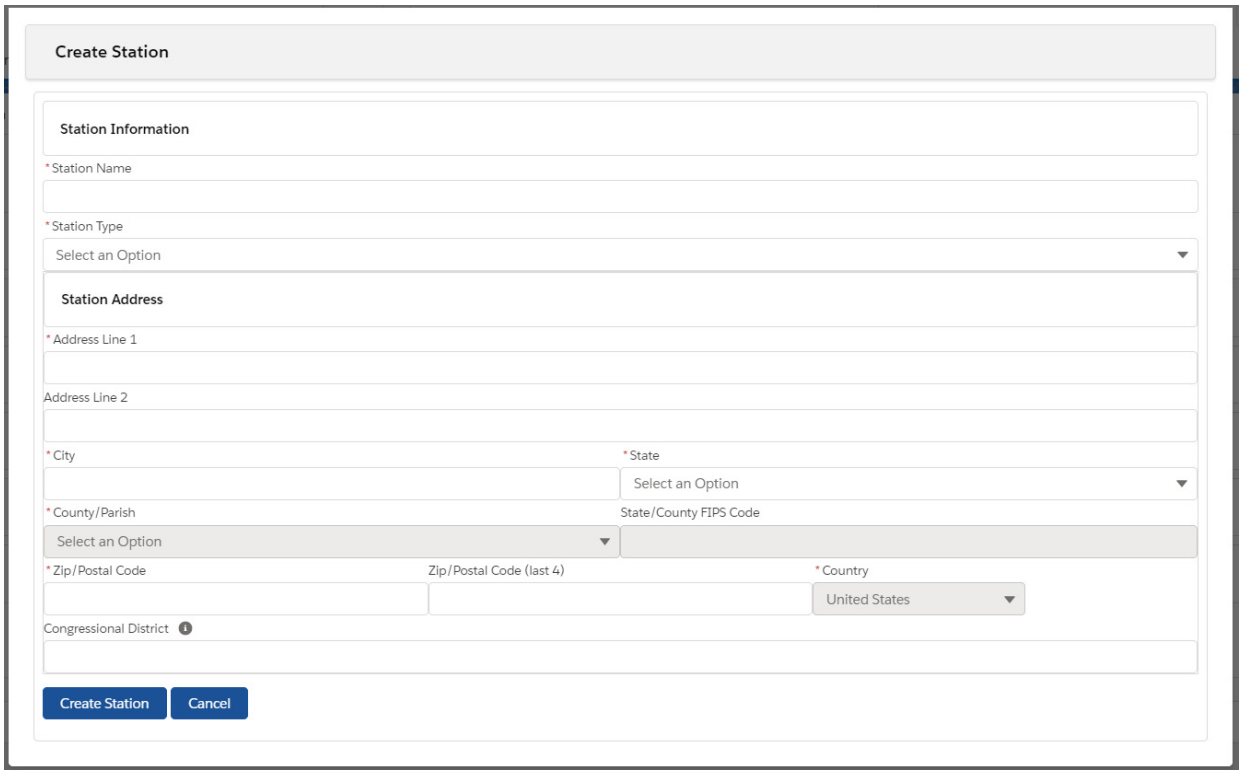
Enter the following information for each fueling station included in the project. If the applicant type is "Owner of 10 or fewer fueling stations," do not provide data for more than 10 fueling stations.

7.5.1. Creating a Fueling Station

Clicking on the Stations tab will display the Stations List page. Any stations that have been created will listed at the bottom of the page and station rollups on the top. Click the Add Station button to create a station.

NOTE: Accessing the Stations pages is not permitted until the project information has been completed and saved.





Complete the following fields and click the Create Station button to create and save the station.

7.5.1.1. Station Name (Required)

Enter a name for the station. After creating the station, the station name will no longer be editable.

7.5.1.2. Station Type (Required)

Select a station type. Select "Existing" for a station being modified to store and dispense higher blends of ethanol fuel. Select "New" to describe a station being added (newly constructed during the grant period) to store and dispense higher blends of ethanol fuel.

7.5.1.3. Station Address

7.5.1.3.1. Address Line 1 (Required)

Enter the street address of the station.

7.5.1.3.2. Address Line 2 (Optional)

Self-explanatory.

7.5.1.3.3. City (Required)

Enter the city where the station is located.

7.5.1.3.4. State/Territory (Required)

Select the state/territory where the station is located.

7.5.1.3.5. County/Parish (Required)

Select the county/parish where the station is located.

7.5.1.3.6. County FIPS Code (Required)

The county FIPS code is determined by the system using the selected county/parish.

7.5.1.3.7. ZIP/Postal Code (Required)

Enter the ZIP/Postal Code for the place where the station is located.

7.5.1.3.8. ZIP/Postal Code (plus 4) (Optional)

Self-explanatory.

7.5.1.3.9. Country (Required)

The country is set by the system and is not editable.

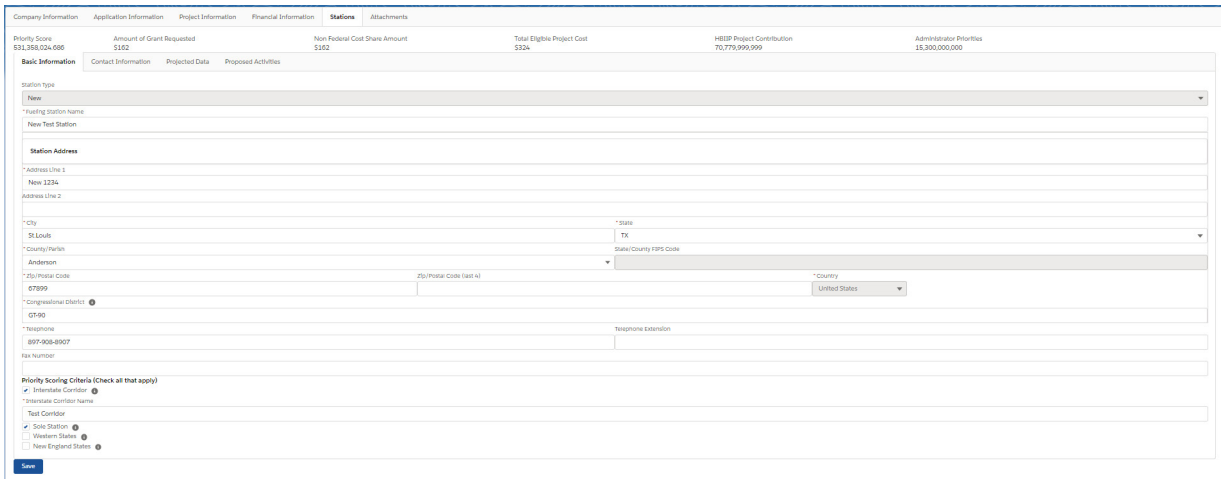
7.5.1.4. Congressional District

Enter the congressional district number for where the station is located. The congressional district number can be found on house.gov and by selecting "Find Your Representative" and entering the applicable ZIP code. You may be presented with multiple representatives. If so, you may need to provide the street address of the company to determine the exact congressional district.

Your entry in the grant application should be formatted as "State-District Number." For example, the congressional district number for ZIP code 62265 should be entered as "IL-15."

7.5.2. Fueling Station Basic Information

Clicking on the actions arrow on the Stations List page and selecting Edit will display the fueling station. Clicking on the Fueling Station Basic Information will display the Basic Information page for the station. Enter the applicable data and click the Save button to record this information.



7.5.2.1. Station Name (Required)

The station name is not editable after the station has been created.

7.5.2.2. Station Type (Required)

Select a station type. Select “Existing” for a station being modified to store and dispense higher blends of ethanol fuel. Select “New” to describe a station being added (newly constructed during the grant period) to store and dispense higher blends of ethanol fuel.

7.5.2.3. Station Address

7.5.2.3.1. Address Line 1 (Required)

Enter the street address of the station.

7.5.2.3.2. Address Line 2 (Optional)

Self-explanatory.

7.5.2.3.3. City (Required)

Enter the city where the station is located.

7.5.2.3.4. State/Territory (Required)

Select the state/territory where the station is located.

7.5.2.3.5. County/Parish (Required)

Select the county/parish where the station is located.

7.5.2.3.6. County FIPS Code (Required)

The county FIPS code is determined by the system using the selected county/parish.

7.5.2.3.7. ZIP/Postal Code (Required)

Enter the ZIP/Postal Code for the place where the station is located.

7.5.2.3.8. ZIP/Postal Code (plus 4) (Optional)

Self-explanatory.

7.5.2.3.9. Country (Required)

The country is set by the system and is not editable.

7.5.2.4. Congressional District (Required)

Enter the congressional district number for where the station is located. The congressional district number can be found on house.gov and by selecting "Find Your Representative" and entering the applicable ZIP code. You may be presented with multiple representatives. If so, you my need to provide the street address of the company to determine the exact congressional district.

Your entry in the grant application should be formatted as "State-District Number." For example, the congressional district number for ZIP code 62265 should be entered as "IL-15."

7.5.2.5. Telephone Number (Required)

Enter the telephone number for the station. The telephone number must be formatted as "123-456-7890."

7.5.2.6. Telephone Extension (Optional)

Enter the telephone extension number for the station.

7.5.2.7. Fax Number (Optional)

Enter the fax number for the station. The fax number must be formatted as "123-456-7890."

7.5.2.8. Priority Scoring Criteria

The following options are available. Check all that apply to the station.

- **Interstate Corridor** (Select if the fueling station is within one mile of an Interstate highway, is readily accessible and is easily visible from the interstate. NOTE: If this applies and is checked, a text box will appear titled "Interstate Corridor Name." You will be required to enter the interstate name.)

- **Sole Station** (Select this option if there is no other station within a one mile radius of this location.)

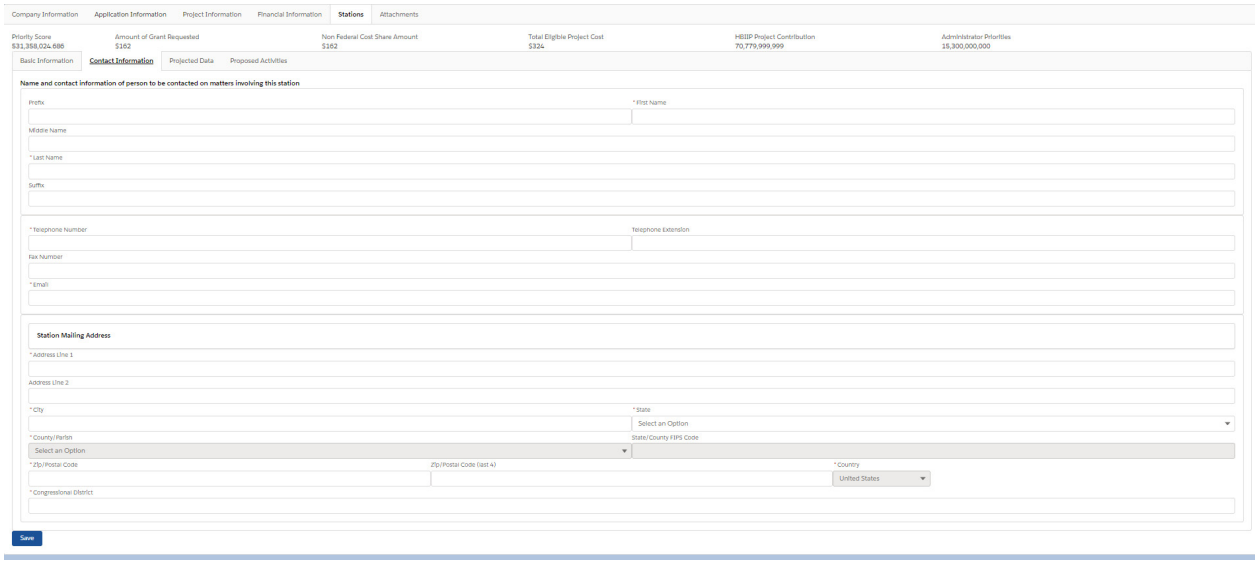
- **Western States** (Select this option if the fueling station is located in one of the following 24 states: Alaska, Arkansas, Arizona, California, Colorado, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota,

Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, or Wyoming; or one of the U.S. Territories of Puerto Rico, the U.S. Virgin Islands, Guam, the Northern Mariana Islands, or American Samoa).

- **New England States** (Select this option if the fueling station is located in one of the following six states: Maine, Vermont, New Hampshire, Massachusetts, Connecticut or Rhode Island).

7.5.3. Fueling Station Contact Information

Click on the Fueling Station Contact Information tab will display the station's contact information. Complete the applicable data and click the Save button to record the information.



7.5.3.1. **Prefix** (Optional)

Self-explanatory.

7.5.3.2. **First Name** (Required)

Enter the first name of the station contact.

7.5.3.3. **Middle Name** (Required)

Enter the middle name of the station contact.

7.5.3.4. **Last Name** (Required)

Enter the last name of the station contact.

7.5.3.5. **Suffix** (Optional)

Self-explanatory.

7.5.3.6. **Telephone Number** (Required)

Enter the telephone number of the station contact. The telephone number must be formatted as "123-456-7890."

7.5.3.7. **Telephone Extension** (Optional)

Enter the telephone extension number of the station contact.

7.5.3.8. **Fax Number** (Optional)

Enter the fax number of the company authorized representative. The fax number must be formatted as "123-456-7890."

7.5.3.9. **Email** (Required)

Enter the email address of the station contact.

7.5.3.10. **Station Mailing Address**

*7.5.3.10.1. **Address Line 1** (Required)*

Enter the street address for the station's mailing address.

*7.5.3.10.2. **Address Line 2** (Optional)*

Self-explanatory.

*7.5.3.10.3. **City** (Required)*

Enter the city for the station's mailing address.

*7.5.3.10.4. **State/Territory** (Required)*

Select the state/territory for the station's mailing address.

*7.5.3.10.5. **County/Parish** (Required)*

Select the county/parish for the station's mailing address.

*7.5.3.10.6. **County FIPS Code** (Required)*

The county FIPS code is determined by the system using the selected county/parish.

*7.5.3.10.7. **ZIP/Postal Code** (Required)*

Enter the ZIP/Postal Code for station's mailing address.

*7.5.3.10.8. **ZIP/Postal Code (plus 4)** (Optional)*

Self-explanatory.

*7.5.3.10.9. **Country** (Required)*

The country is set by the system and is not editable.

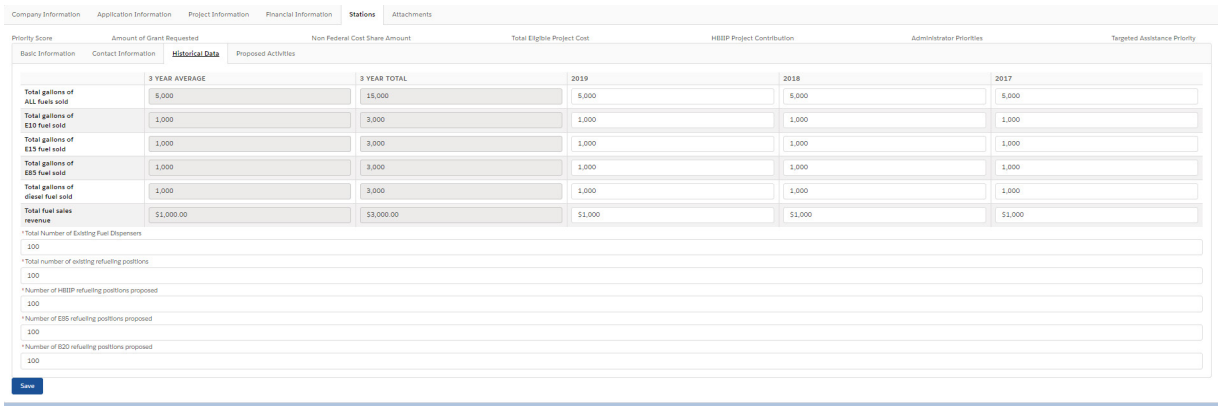
7.5.3.11. Congressional District (Required)

Enter the congressional district number for the station's mailing address. The congressional district number can be found on house.gov and by selecting "Find Your Representative" and entering the applicable ZIP code. You may be presented with multiple representatives. If so, you my need to provide the street address of the company to determine the exact congressional district.

Your entry in the grant application should be formatted as "State-District Number." For example, the congressional district number for ZIP code 62265 should be entered as "IL-15."

7.5.4. Existing Fueling Station Historical Data

Historical data is required for each existing fueling station. Clicking on the Historical Data tab for an existing fueling station will display the Historical Data information form. Complete the historical data and click the Save button to record the information.



7.5.4.1. Total gallons of All fuels sold (Required)

Enter the total gallons of all fuels sold by the station in 2019, 2018 and 2017. Zero is an acceptable value.

7.5.4.2. Total gallons of E10 fuel sold (Required)

Enter the total gallons of E10 fuels sold by the station in 2019, 2018 and 2017. Zero is an acceptable value.

7.5.4.3. Total gallons of E15 fuel sold (Required)

Enter the total gallons of E15 fuels sold by the station in 2019, 2018 and 2017. Zero is an acceptable value.

7.5.4.4. Total gallons of E85 fuel sold (Required)

Enter the total gallons of E85 fuels sold by the station in 2019, 2018 and 2017. Zero is an acceptable value.

7.5.4.5. Total gallons of diesel fuel sold (Required)

Enter the total gallons of diesel fuel sold by the station in 2019, 2018 and 2017. Zero is an acceptable value.

7.5.4.6. Total fuel sales revenue (Required)

Enter the total fuel sales revenue for the station in 2019, 2018 and 2017. Zero is an acceptable value.

7.5.4.7. Total Number of Existing Fuel Dispensers (Required)

Enter the total number of existing fuel dispensers for the station. Zero is an acceptable value.

7.5.4.8. Total Number of existing refueling positions (Required)

Enter the total number of existing refueling positions for the station. Zero is an acceptable value.

7.5.4.9. Number of HBIIP refueling positions proposed (Required)

Enter the number of HBIIP refueling positions proposed for the station. Zero is an acceptable value.

7.5.4.10. Number of E85 refueling positions proposed (Required)

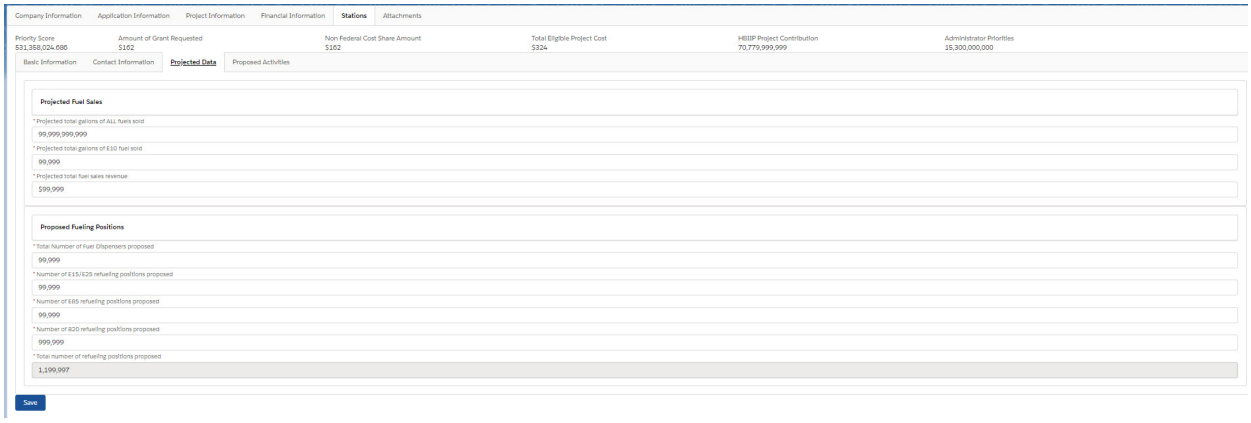
Enter the number of E85 refueling positions proposed for the station. Zero is an acceptable value.

7.5.4.11. Number of B20 refueling positions proposed (Required)

Enter the number of B20 refueling positions proposed for the station. Zero is an acceptable value.

7.5.5. New Fueling Station Projected Data

Projected data is required for each new fueling station. Clicking on the fueling station's Project Data tab will display the Projected Data information form. Complete the applicable information and client the Save button to record your information.



7.5.5.1. Projected Fuel Sales - Projected gallons of All fuels sold (Required)

Enter the projected gallons of all fuels sold by the station annually.

7.5.5.2. Projected Fuel Sales - Projected total gallons of E10 fuel sold (Required)

Enter the projected total gallons of E10 fuels sold by the station annually.

7.5.5.3. Projected Fuel Sales - Projected total fuel sales revenue (Required)

Enter the projected total fuel sales revenue for the station annually.

7.5.5.4. Proposed Fueling Positions - Total Number of Fuel Dispensers proposed (Required)

Enter the projected total number of fuel dispensers proposed for the station.

7.5.5.5. Proposed Fueling Positions - Total Number of E15/E25 refueling positions proposed (Required)

Enter the total number of E15/E25 refueling positions proposed for the station.

7.5.5.6. Proposed Fueling Positions - Number of E85 refueling positions proposed (Required)

Enter the number of E85 refueling positions proposed for the station.

7.5.5.7. Proposed Fueling Positions - Number of B20 refueling positions proposed (Required)

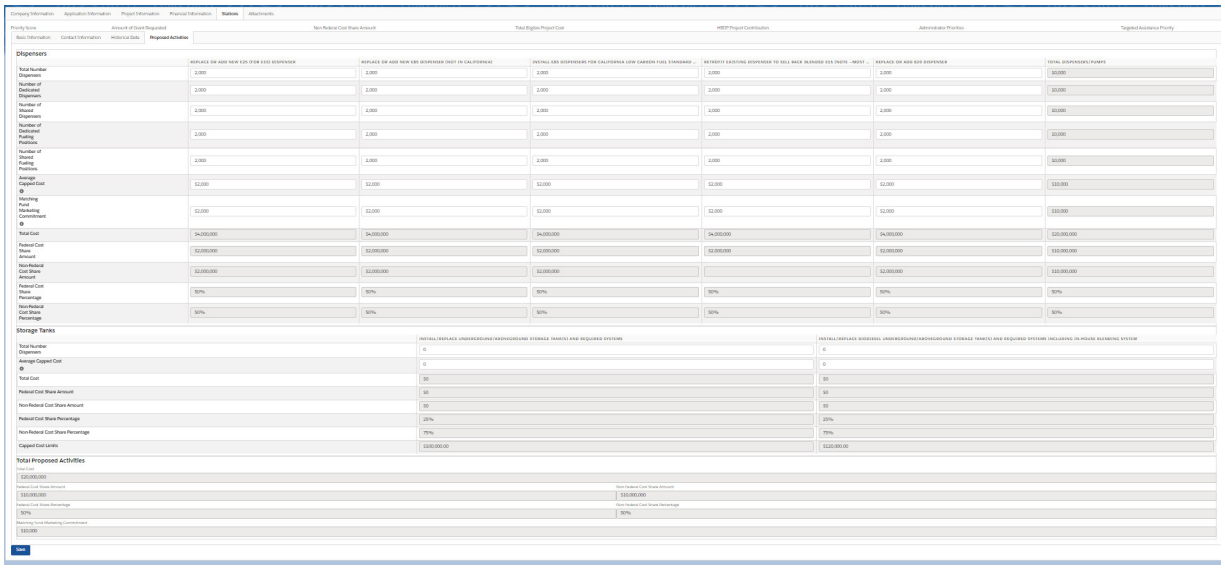
Enter the number of B20 refueling positions proposed for the station.

7.5.5.8. Proposed Fueling Positions – Total number of refueling positions proposed (Required)

Enter the total number of refueling positions proposed for the station.

7.5.6. Existing Fueling Station Proposed Activities

Clicking on the proposed activities for an existing fueling station will display the Proposed Activities Information form. Complete the information and click Save to record the information.



7.5.6.1. Existing Fueling Station Proposed Activities - Dispensers

Enter the appropriate value for 7.6.5.1.1 through 7.6.5.1.6 for each of the following categories:

- Replace or Add New E25 (for E15) dispenser.
- Replace or Add New E85 dispenser (Not in California).
- Install E85 Dispensers for California Low Carbon Fuel Standard requirements.
- Retrofit existing dispenser to sell rack blended E15 (Note: most stations are not suited for this activity).

- Replace or add B20 dispenser.

7.5.6.2. Dispensers - Total Number of Dispensers (Required)

Enter the total number of dispensers for each of the categories above for the station. Zero is an acceptable value.

7.5.6.3. Dispensers - Number of Dedicated Dispensers (Required)

Enter the number of dedicated dispensers for each of the categories above for the station. Zero is an acceptable value.

7.5.6.4. Dispensers - Number of Shared Dispensers (Required)

Enter the number of shared dispensers for each of the categories above for the station. Zero is an acceptable value.

7.5.6.5. Dispensers - Number of Dedicated Fueling Positions (Required)

Enter the number of dedicated fueling positions for each of the categories above for the station. Zero is an acceptable value.

7.5.6.6. Dispensers - Number of Shared Fueling Positions (Required)

Enter the number of shared fueling positions for each of the categories above for the station. Zero is an acceptable value.

7.5.6.7. Dispensers - Average Capped Cost (Required)

Enter the average capped cost for each of the categories above for the station. Zero is an acceptable value. Capped cost limits are as follows (per dispenser):

1) Replace or add new E25 (for E15) dispenser: $30,000.
2) Replace or add new E85 dispenser (not in California): $38,000.
3) Replace or add E85 dispensers for California Low Carbon Fuel Standard Requirements: $38,000.
4) Retrofit existing dispenser to sell rack-blended E15: $25,000.
5) Replace or add B20 dispenser: $38,000.

7.5.6.8. Existing Fueling Station Proposed Activities – Matching Fund Marketing Commitment

Enter the appropriate value for each of the following categories:

- Replace or Add New E25 (for E15) dispenser.
- Replace or Add New E85 dispenser (Not in California).
- Install E85 Dispensers for California Low Carbon Fuel Standard requirements.
- Retrofit existing dispenser to sell rack-blended E15 (Note: most stations are not suited for this activity).

- Replace or add B20 dispenser.

The limit to matching fund marketing commitment is 10% of the non-federal cost share amount.

7.5.6.9. Existing Fueling Station Proposed Activities – Storage Tanks

Enter the appropriate value for 7.6.5.2.1 and 7.6.5.2.2 for each of the following categories:

- Install/Replace Underground/Aboveground Storage Tank(s) and Required Systems.
- Install/Replace Biodiesel Underground/Aboveground Storage Tank(s) and Required Systems including In-House Blending System.

7.5.6.10. Storage Tanks - Total Number of Dispensers **(Required)**

Enter the total number of dispensers for each of the categories above for the station. Zero is an acceptable value.

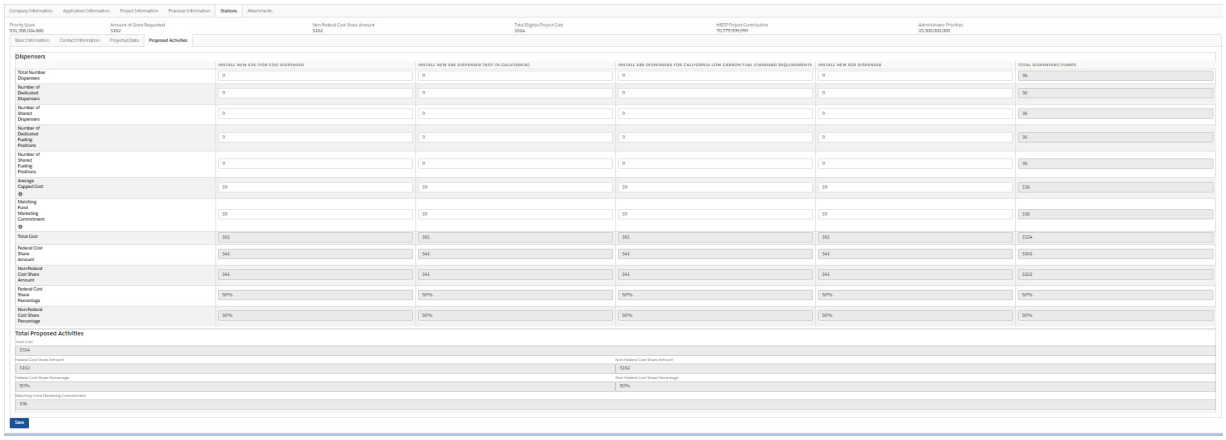
7.5.6.11. Storage Tanks - Average Capped Cost **(Required)**

Enter the average capped cost for each of the categories above for the station. Zero is an acceptable value. Capped cost limits are as follows (limits are per tank):

1) To install/replace underground/aboveground storage tank(s) and required systems: $100,000.
2) To install/replace biodiesel underground/aboveground storage tank(s) and required systems, including in-house blending system: $120,000.

7.5.7. New Fueling Station Proposed Activities

Clicking on the proposed activities for a new fueling station will display the Proposed Activities information form. Complete the information and click Save to record the information.



7.5.7.1. New Fueling Station Proposed Activities - Dispensers

Enter the appropriate value for 7.6.5.1.1 through 7.6.5.1.6 for each of the following categories:

- Replace or Add New E25 (for E15) dispenser.
- Replace or Add New E85 dispenser (Not in California).
- Install E85 Dispensers for California Low Carbon Fuel Standard requirements.
- Install new B20 dispenser.

7.5.7.2. Dispensers - Total Number of Dispensers **(Required)**

Enter the total number of dispensers for each of the categories above for the station. Zero is an acceptable value.

7.5.7.3. Dispensers - Number of Dedicated Dispensers **(Required)**

Enter the number of dedicated dispensers for each of the categories above for the station. Zero is an acceptable value.

7.5.7.4. Dispensers - Number of Shared Dispensers **(Required)**

Enter the number of shared dispensers for each of the categories above for the station. Zero is an acceptable value.

7.5.7.5. Dispensers - Number of Dedicated Fueling Positions **(Required)**

Enter the number of dedicated fueling positions for each of the categories above for the station. Zero is an acceptable value.

7.5.7.6. Dispensers - Number of Shared Fueling Positions **(Required)**

Enter the number of shared fueling positions for each of the categories above for the station. Zero is an acceptable value.

7.5.7.7. Dispensers - Average Capped Cost **(Required)**

Enter the average capped cost for each of the categories above for the station. Zero is an acceptable value. Capped cost limits are as follows (per dispenser):

3) To add a new E15/E25 dispenser: $30,000.
4) To add a new E85 dispenser: $38,000.
5) To add a new E85 dispenser for California Fuel Standard Requirements: $38,000.
6) To add a new B20 dispenser: $38,000.

7.5.7.8. New Fueling Station Proposed Activities – Matching Fund Marketing Commitment

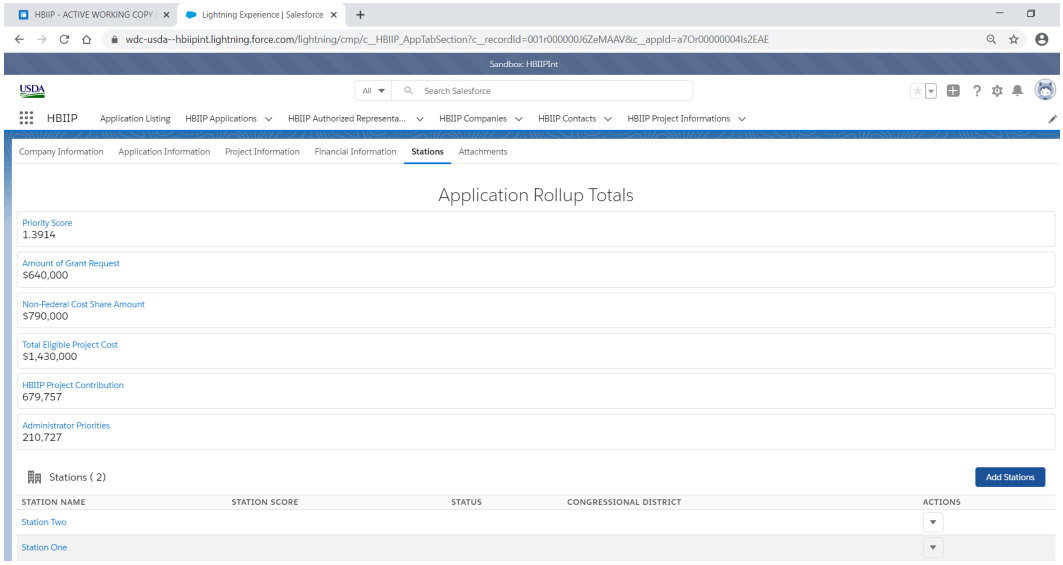
Enter the appropriate value for each of the following categories:

- Replace or Add New E25 (for E15) dispenser.
- Replace or Add New E85 dispenser (Not in California).
- Install E85 Dispensers for California Low Carbon Fuel Standard requirements.
- Install new B20 dispenser.

The limit to matching fund marketing commitment is 10% of the non-federal cost share amount.

7.5.8. Deleting a Fueling Station

Clicking on the actions arrow on the Stations List page and selecting Delete for a fueling station will display a confirmation dialogue to ensure you intend to delete the selected fueling station. Click “Yes” to confirm and the fueling station will be deleted.

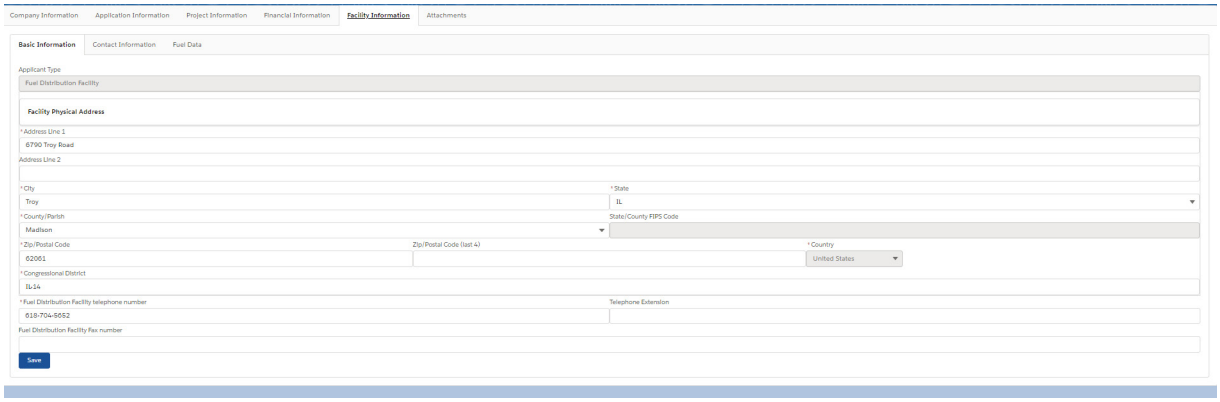


7.6. Fuel Distribution Facility Information

Enter the following information for each fueling station included in the project. If the applicant type is "Owner of 10 or fewer fueling stations," do not provide data for more than ten fueling stations.

7.6.1. Fuel Distribution Facility Basic Information

Clicking on the Facility tab will display the Facility Basic Information tab. Complete the facility basic information and click the Save button to record the information.



7.6.1.1. Facility Physical Address

7.6.1.1.1. Address Line 1 (Required)

Enter the street address of the facility.

7.6.1.1.2. Address Line 2 (Optional)

Self-explanatory.

7.6.1.1.3. City (Required)

Enter the city where the facility is located.

7.6.1.1.4. State/Territory (Required)

Select the state/territory where the facility is located.

7.6.1.1.5. County/Parish (Required)

Select the county/parish where the facility is located.

7.6.1.1.6. County FIPS Code (Required)

The county FIPS code is determined by the system using the selected county/parish.

7.6.1.1.7. ZIP/Postal Code (Required)

Enter the ZIP/Postal Code for the place where the facility is located.

7.6.1.1.8. ZIP/Postal Code (plus 4) (Optional)

Self-explanatory.

7.6.1.1.9. Country (Required)

The country is set by the system and is not editable.

7.6.1.2. Congressional District (Required)

Enter the congressional district number for where the facility is located. The congressional district number can be found on house.gov and by selecting "Find Your Representative" and entering the applicable ZIP code. You may be presented with multiple representatives. If so, you my need to provide the street address of the company to determine the exact congressional district.

Your entry in the grant application should be formatted as "State-District Number." For example, the congressional district number for ZIP code 62265 should be entered as "IL-15."

7.6.1.3. Telephone Number (Required)

Enter the telephone number for the facility. The telephone number must be formatted as "123-456-7890."

7.6.1.4. Telephone Extension (Optional)

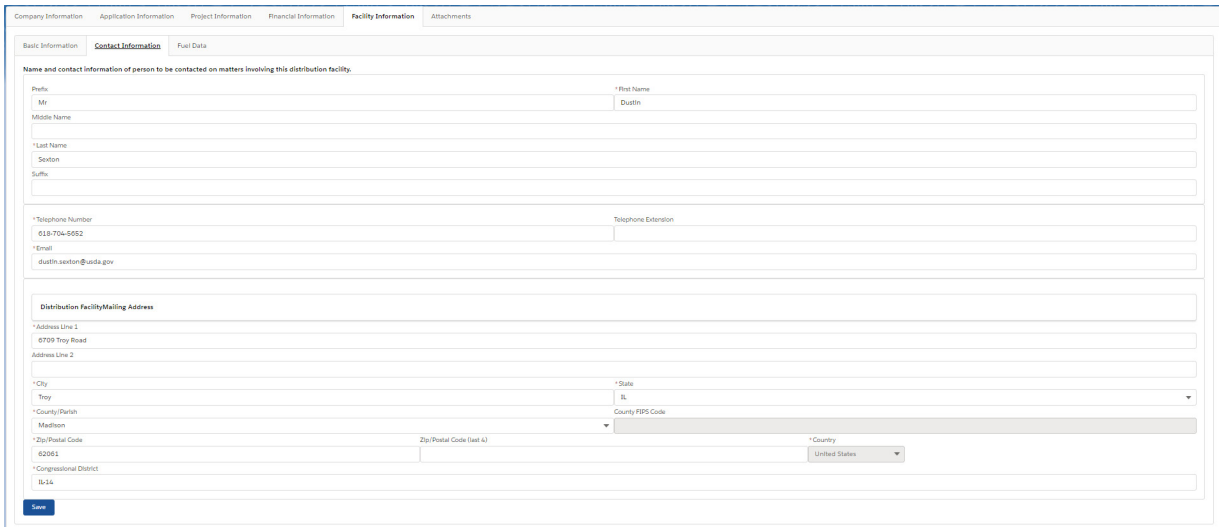
Enter the telephone extension number for the facility.

7.6.1.5. Fax Number (Optional)

Enter the fax number for the facility. The fax number must be formatted as "123-456-7890."

7.6.2. Fuel Distribution Facility Contact Information

Clicking on the Facility Contact tab will display the Facility Contact Information form. Complete the contact Information and click Save to record the information.



7.6.2.1. **Prefix** (Optional)

Self-explanatory.

7.6.2.2. **First Name** (Required)

Enter the first name of the facility contact.

7.6.2.3. **Middle Name** (Required)

Enter the middle name of the facility contact.

7.6.2.4. **Last Name** (Required)

Enter the last name of the facility contact.

7.6.2.5. **Suffix** (Optional)

Self-explanatory.

7.6.2.6. **Telephone Number** (Required)

Enter the telephone number of the facility contact. The telephone number must be formatted as “123-456-7890.”

7.6.2.7. **Telephone Extension** (Optional)

Enter the telephone extension number of the facility contact.

7.6.2.8. **Fax Number** (Optional)

Enter the fax number of the facility contact. The fax number must be formatted as “123-456-7890.”

7.6.2.9. **Email** (Required)

Enter the email address of the facility contact.

7.6.2.10. Distribution Facility Mailing Address

7.6.2.10.1. Address Line 1 (Required)

Enter the street address for the facility's mailing address.

7.6.2.10.2. Address Line 2 (Optional)

Self-explanatory.

7.6.2.10.3. City (Required)

Enter the city for the facility's mailing address.

7.6.2.10.4. State/Territory (Required)

Select the state/territory for the facility's mailing address.

7.6.2.10.5. County/Parish (Required)

Select the county/parish for the facility's mailing address.

7.6.2.10.6. County FIPS Code (Required)

The county FIPS code is determined by the system using the selected county/parish.

7.6.2.10.7. ZIP/Postal Code (Required)

Enter the ZIP/Postal Code for facility's mailing address.

7.6.2.10.8. ZIP/Postal Code (plus 4) (Optional)

Self-explanatory.

7.6.2.10.9. Country (Required)

The country is set by the system and is not editable.

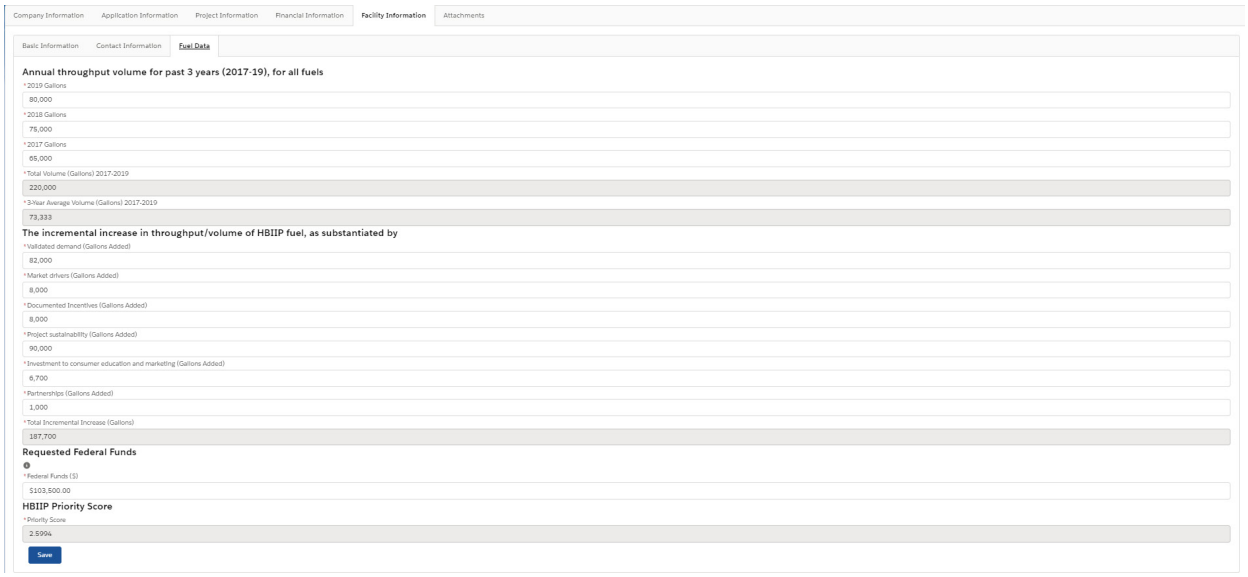
7.6.2.11. Congressional District (Required)

Enter the congressional district number for the facility's mailing address. The congressional district number can be found on house.gov and by selecting "Find Your Representative" and entering the applicable ZIP code. You may be presented with multiple representatives. If so, you my need to provide the street address of the company to determine the exact congressional district.

Your entry in the grant application should be formatted as "State-District Number." For example, the congressional district number for ZIP code 62265 should be entered as "IL-15."

7.6.3. Fuel Distribution Fuel Data

Fuel data is required for the fuel distribution facility. Clicking on the Fuel Data tab will display the Fuel Data form. Complete the fuel data and click Save to record the information.



7.6.3.1. Annual throughput volume for past three years (2017-2019), for all fuels

7.6.3.1.1. 2019 Gallons

Enter the total annual throughput volume in gallons for all fuels in 2019.

7.6.3.1.2. 2018 Gallons

Enter the total annual throughput volume in gallons for all fuels in 2018.

7.6.3.1.3. 2017 Gallons

Enter the total annual throughput volume in gallons for all fuels in 2017.

7.6.3.2. The incremental increase in throughput/volume of HBIIP fuel, as substantiated by:

7.6.3.2.1. Validated demand (Gallons Added)

Enter the additional incremental increase in throughput/volume of HBIIP fuel, as substantiated by in gallons.

7.6.3.2.2. Market drivers (Gallons Added)

Enter the market drivers in gallons added.

7.6.3.2.3. Documented Incentives (Gallons Added)

Enter the documented incentives in gallons.

7.6.3.2.4. Project sustainability (Gallons Added)

Enter the project sustainability in gallons.

7.6.3.2.5. Investment to consumer education and marketing (Gallons Added)

Enter the additional gallons investment to consumer education and marketing.

7.6.3.2.6. Partnerships (Gallons Added)

Enter the gallons added for partnerships.

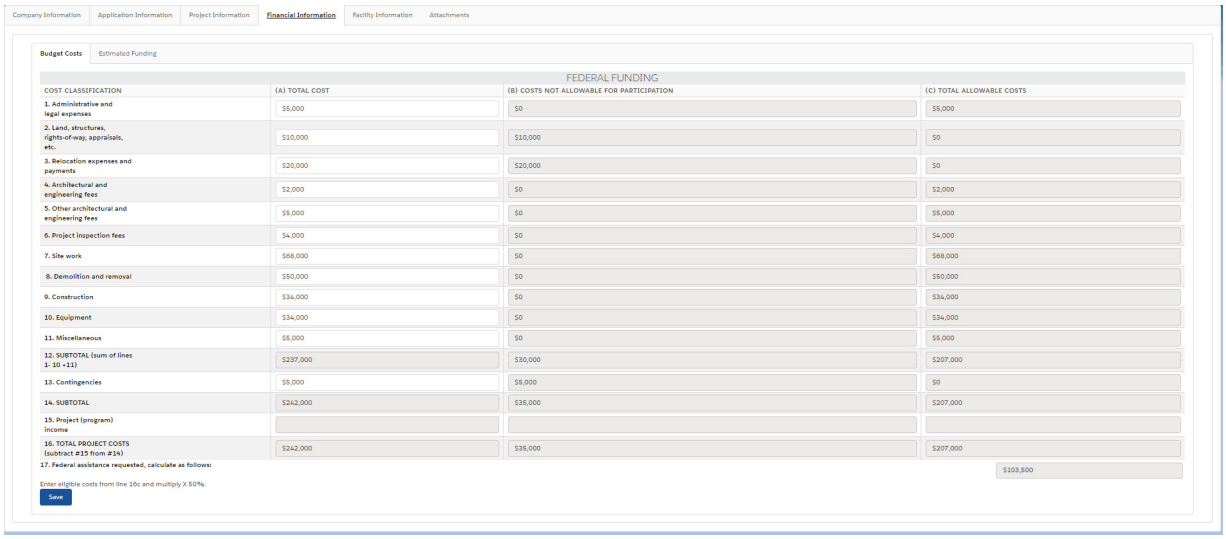
7.6.3.3. Requested Federal Funds

Enter the total requested federal funds. This number cannot exceed $5,000,000 and should match the Estimated Funding Source Federal (Section 7.8.2.1 below) on the Estimated Funding tab.

7.7. Financial Information

7.7.1. Budget Costs

Clicking on the Financial Information tab will display the Budget Costs form. Complete the budget costs information and click Save to record the information.



Company Information | Application Information | Project Information | Financial Information | Facility Information | Attachments

Budget Costs | Estimated Funding

	FEDERAL FUNDING		
COST CLASSIFICATION	(A) TOTAL COST	(B) COSTS NOT ALLOWABLE FOR PARTICIPATION	(C) TOTAL ALLOWABLE COSTS
1. Administrative and legal expenses	$5,000	$0	$5,000
2. Land, structures, rights-of-way, appraisals, etc.	$10,000	$10,000	$0
3. Relocation expenses and payments	$20,000	$20,000	$0
4. Architectural and engineering fees	$2,000	$0	$2,000
5. Other architectural and engineering fees	$5,000	$0	$5,000
6. Project inspection fees	$4,000	$0	$4,000
7. Site work	$68,000	$0	$68,000
8. Demolition and removal	$50,000	$0	$50,000
9. Construction	$34,000	$0	$34,000
10. Equipment	$34,000	$0	$34,000
11. Miscellaneous	$5,000	$0	$5,000
12. SUBTOTAL (sum of lines 1- 10 +11)	$237,000	$30,000	$207,000
13. Contingencies	$5,000	$5,000	$0
14. SUBTOTAL	$242,000	$35,000	$207,000
15. Project (program) income			
16. TOTAL PROJECT COSTS (subtract #15 from #14)	$242,000	$35,000	$207,000
17. Federal assistance requested, calculate as follows:			$103,500

Enter eligible costs from line 16c and multiply X 50%.

Save

7.7.1.1. Administrative and legal expenses (Required)

Enter the total costs for administrative and legal expenses associated with the project. Zero is an acceptable value.

7.7.1.2. Land, structures, rights-of-way, appraisals, etc. (Required)

Enter the total costs for land, structures, rights-of-way, appraisals, etc. associated with the project. Zero is an acceptable value.

7.7.1.3. Relocation expenses and payments (Required)

Enter the total costs for relocation expenses and payments associated with the project. Zero is an acceptable value.

7.7.1.4. Architectural and engineering fees (Required)

Enter the total costs for basic engineering fees related to construction. This includes startup services and preparation of project performance workplan associated with the project. Zero is an acceptable value.

7.7.1.5. Other architectural and engineering fees (Required)

Enter the total costs for other architectural and engineering fees such as surveys, tests and soil borings, etc. associated with the project. Zero is an acceptable value.

7.7.1.6. Project inspection fees (Required)

Enter the total costs for estimated engineering inspection costs associated with the project. Zero is an acceptable value.

7.7.1.7. Site work (Required)

Enter the total costs of site work associated with the project. Zero is an acceptable value.

7.7.1.8. Demolition and removal (Required)

Enter the total costs for demolition and removal associated with the project. Zero is an acceptable value.

7.7.1.9. Construction (Required)

Enter the total costs for construction associated with the project. Zero is an acceptable value.

7.7.1.10. Equipment (Required)

This field is calculated based on 7.8.1.11 and 7.8.1.12.

7.7.1.11. Equipment (all except UST/Systems) All Fueling Stations (Required)

Enter the total costs of USTS and other infrastructure for the project.

NOTE: This can be found in the Total Cost: Equipment (All except USTS/Systems) All Fueling Systems field on the Application Stations Rollup page.

7.7.1.12. Underground Storage Tanks/Systems, Existing Fueling Stations (Required)

Enter the total costs of underground storage tanks/systems, existing fueling stations for the project.

NOTE: This can be found in the Total Cost: Underground Storage Tanks/Systems, Existing Fueling Stations field on the Application Stations Rollup page.

7.7.1.13. **Miscellaneous** (Required)

Enter the miscellaneous total costs associated with the project. Zero is an acceptable value.

7.7.1.14. **Contingencies** (Required)

Enter the total costs for contingencies associated with the project. Zero is an acceptable value.

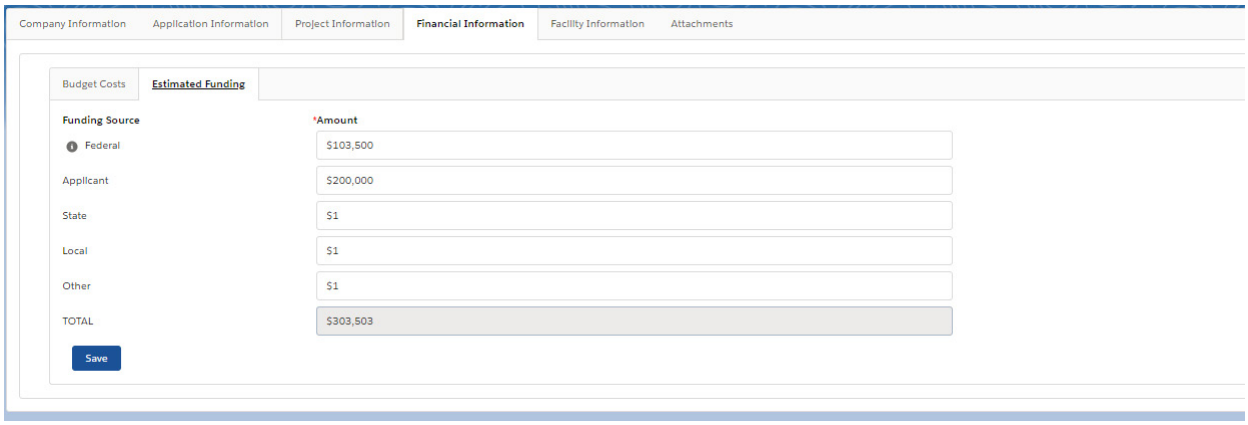
7.7.1.15. **Federal assistance requested, calculate as follows**

This value is calculated based on the budget costs you have entered and will default to the Estimated Funding Source Federal on the Estimated Funding tab.

7.7.2. Estimated Funding Sources

Applicant, state, local and other estimated funding are matching funds. The **sum** of the applicant, state, local and other estimated funding must be equal to, or greater than, the estimated federal funding requested.

Clicking on the Estimated Funding tab will display the Estimated Funding information form. Complete the estimated funding information and click Save to record the information.



7.7.2.1. **Estimated Funding Source Federal** (Required)

Defaulted to the value from federal assistance requested, calculate as follow (7.7.1.15). This value represents the estimated federal funding being requested. This must not exceed $5,000,000.

7.7.2.2. **Estimated Funding Source Applicant** (Required)

Enter the estimated funding to be provided by the applicant. The matching funds must be equal to or greater than federal funds.

7.7.2.3. **Estimated Funding Source State** (Required)

Enter the estimated funding to be provided by the state. An entry must be made. If zero, enter 0.

7.7.2.4. **Estimated Funding Source Local** (Required)

Enter the estimated funding to be provided by the local government. An entry must be made. If zero, enter 0.

7.7.2.5. Estimated Funding Source Other (Required)

Enter the estimated funding to be provided by other sources. An entry must be made. If zero, enter 0.

7.8. Attachments

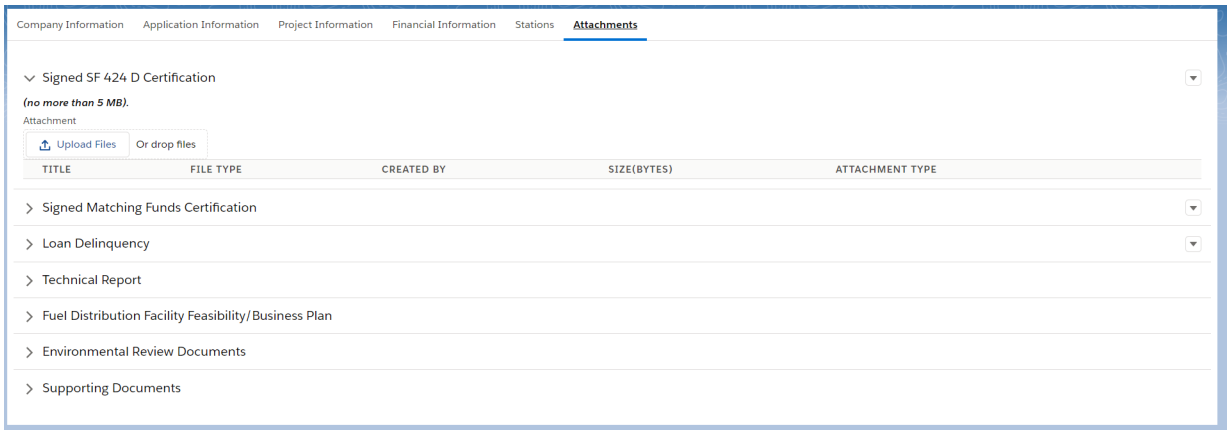
Completing your online application will require you to upload various required documents. The specific types of attachments will be dependent on the applicant type of your organization and the details of your specific grant application. Below is a brief explanation of each attachment type.

- Signed Matching Funds Certification.
- Loan Delinquency Support.
- Technical Report.
- Fuel Distribution Feasibility/Business Plan.
- Environmental Review Documents.
- Supporting Documents.
- Signed HBIIP Grant Application.

7.8.1. Uploading an Attachment

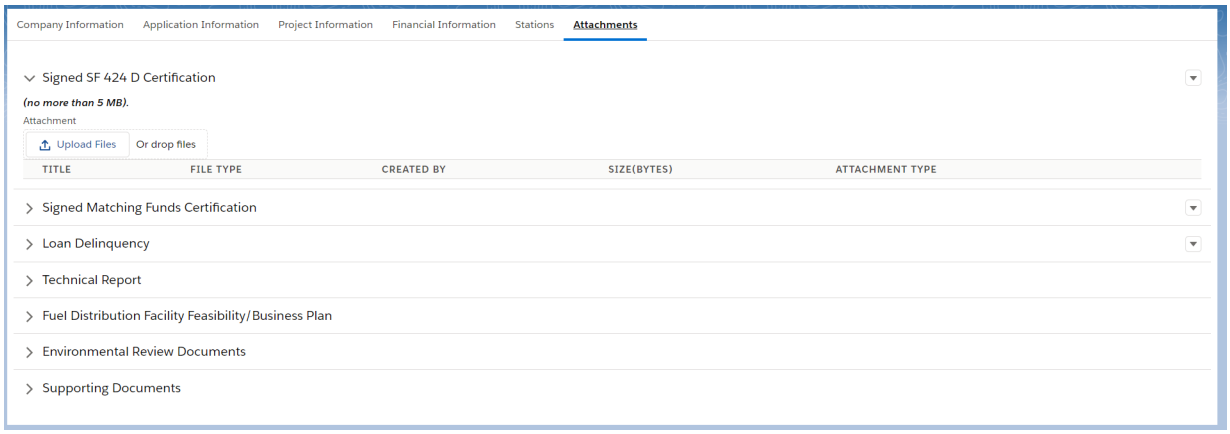
The online application system provides you two methods for uploading an attachment; 1) Clicking the Upload Files button and 2) Dragging and dropping a file into the online application.

All of the uploads must be in PDF format and each cannot exceed 5 megabytes in file size. Upon clicking on the Attachments tab, the Attachments form will be displayed. The possible attachments are listed by attachment type.



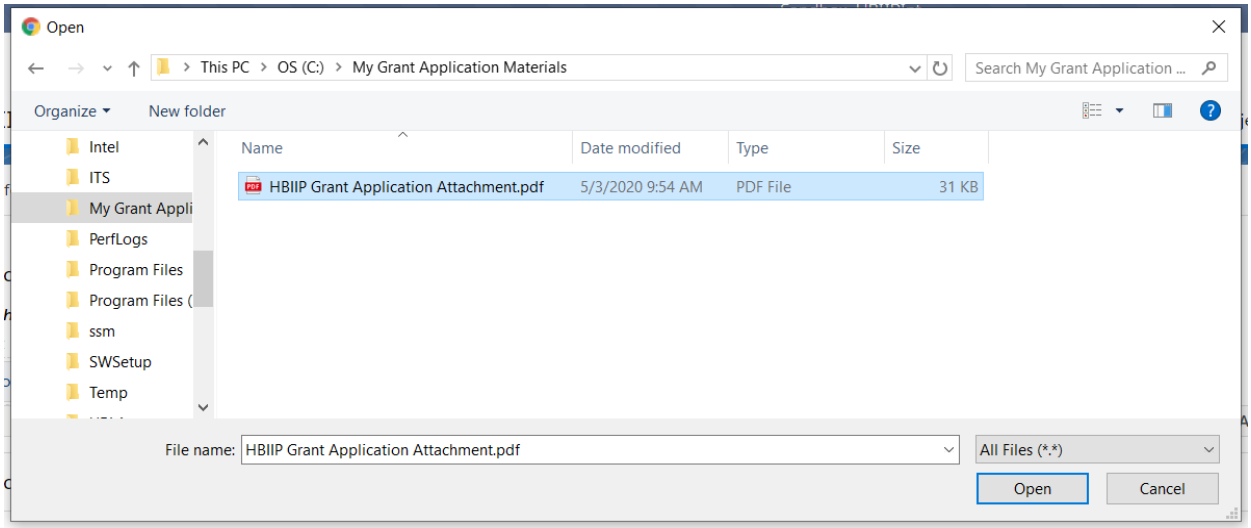
Clicking on the arrow to the left of the attachment type will expose the ability to upload or drop an attachment to the online application.

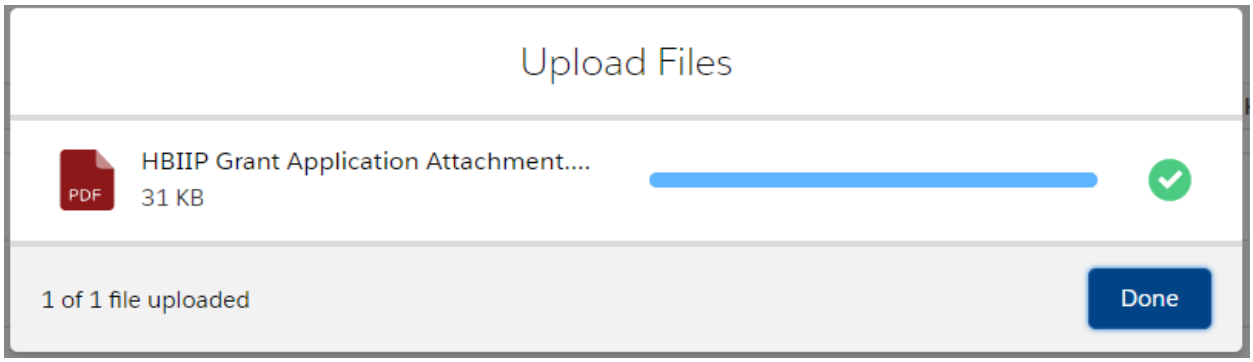
NOTE: It is important that you upload the attachment in the appropriate attachment type area. For example, upload a Signed SF 424 D Certification document only in the Signed SF 424 D Certification area. Failure to do so could result in the online application system not recognizing that you uploaded a required attachment when it comes time to finalize your application. Applications that have not been finalized cannot be submitted.



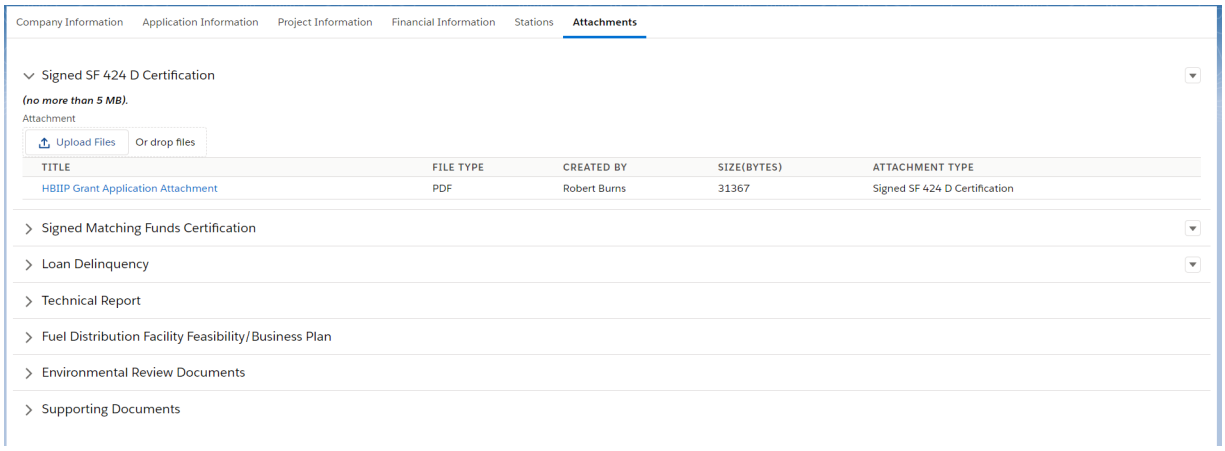
7.8.2. Uploading using the Upload Files Button

To upload a file using the Upload button, click on the Upload Files button. The system will display the Windows Common File Dialogue. Browse to the appropriate file and click the Open button. The online application system will display the Upload Files dialogue.



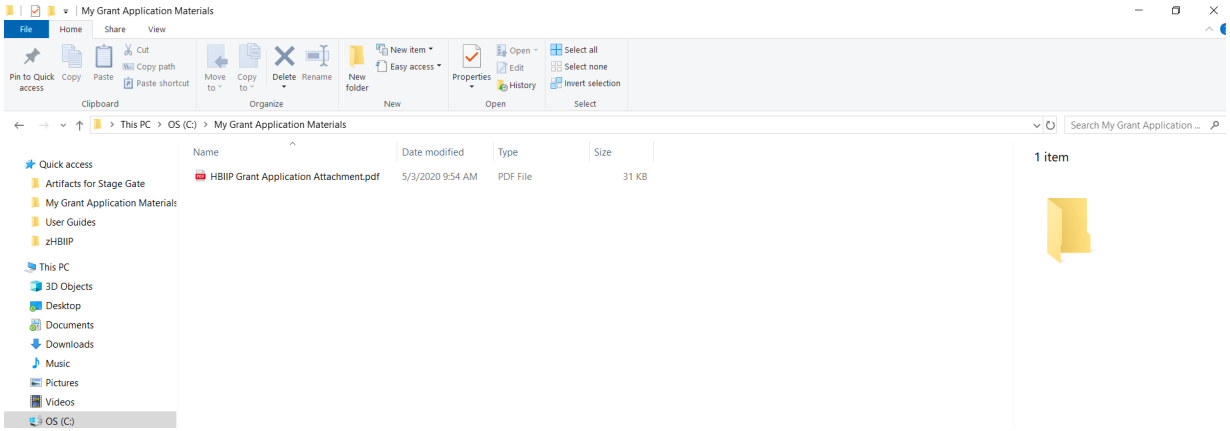


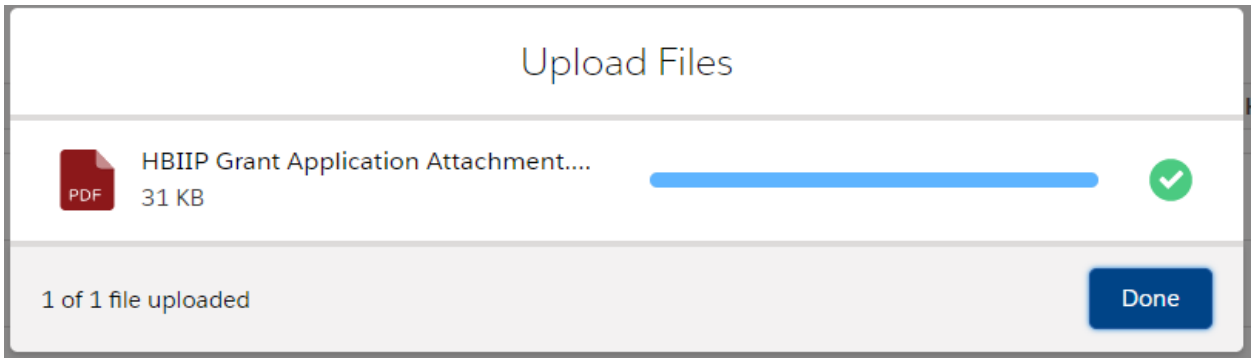
Click the Done button and the online application system will display the file under the attachment type that you selected and assign the file the appropriate Attachment Type. This attachment type is what will used later to determine if you uploaded a particular type of document.



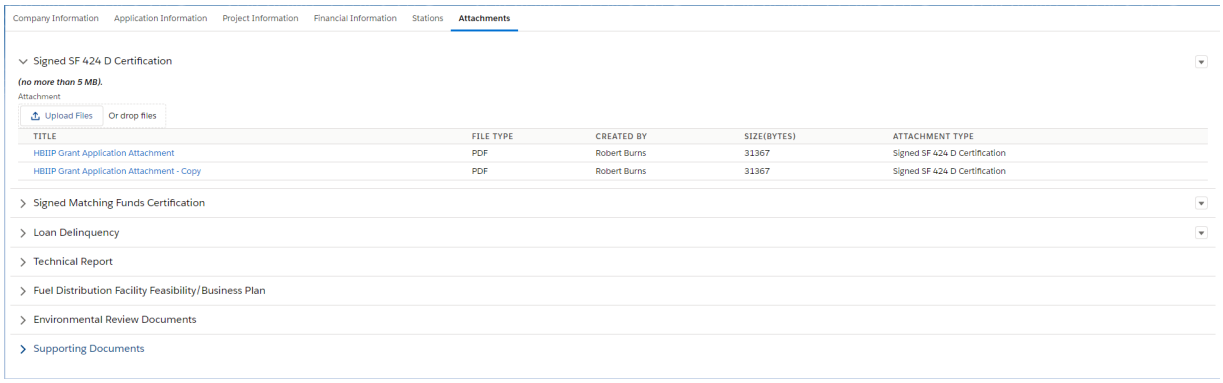
7.8.3. Dragging and Dropping Into the Online Application

To upload a file using the Drag and Drop option, browse to the file using the Windows Explorer Common File Dialog. Select the file and drag and drop it over the Or drop files button. The online application system will display the Upload Files dialogue.



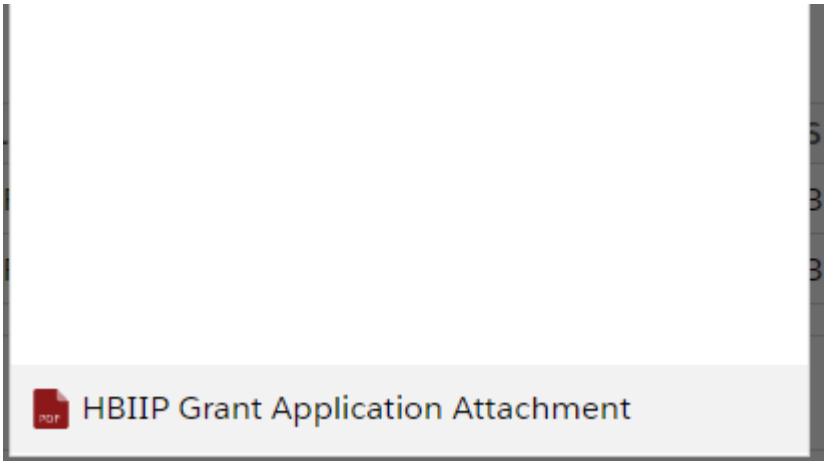


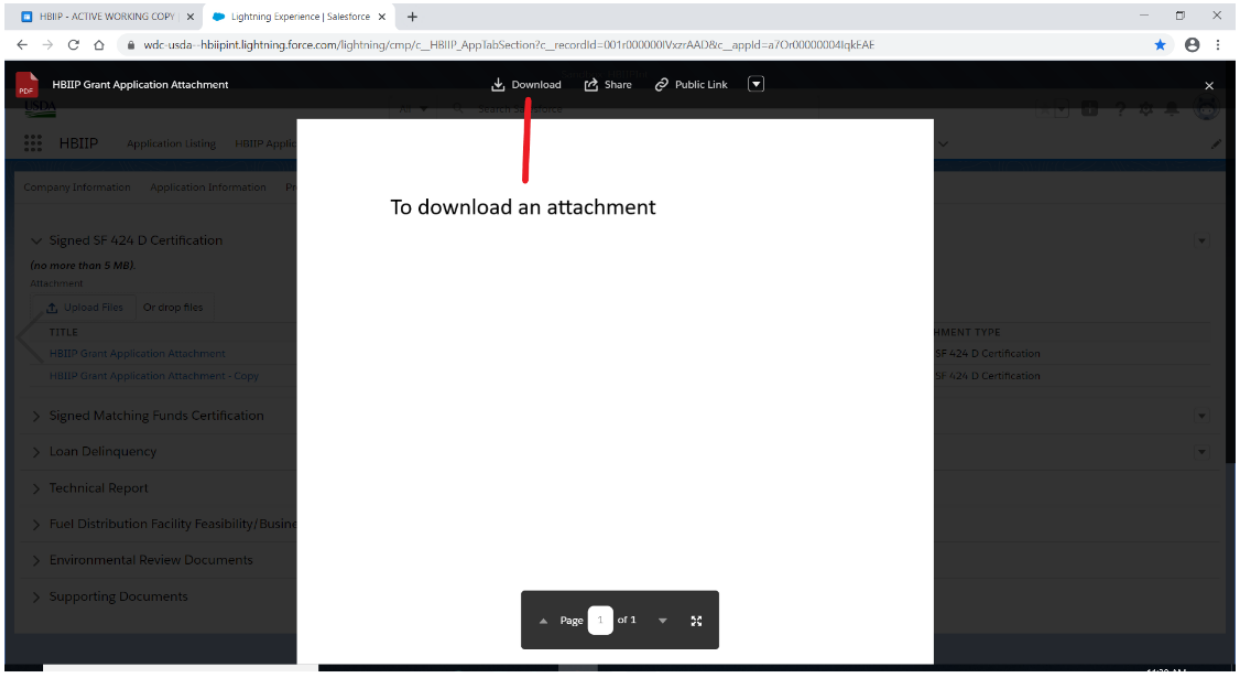
Click the Done button and the online application system will display the file under the attachment type that you selected and assign the file the appropriate attachment type. This attachment type is what will used later to determine if you uploaded a particular type of document.



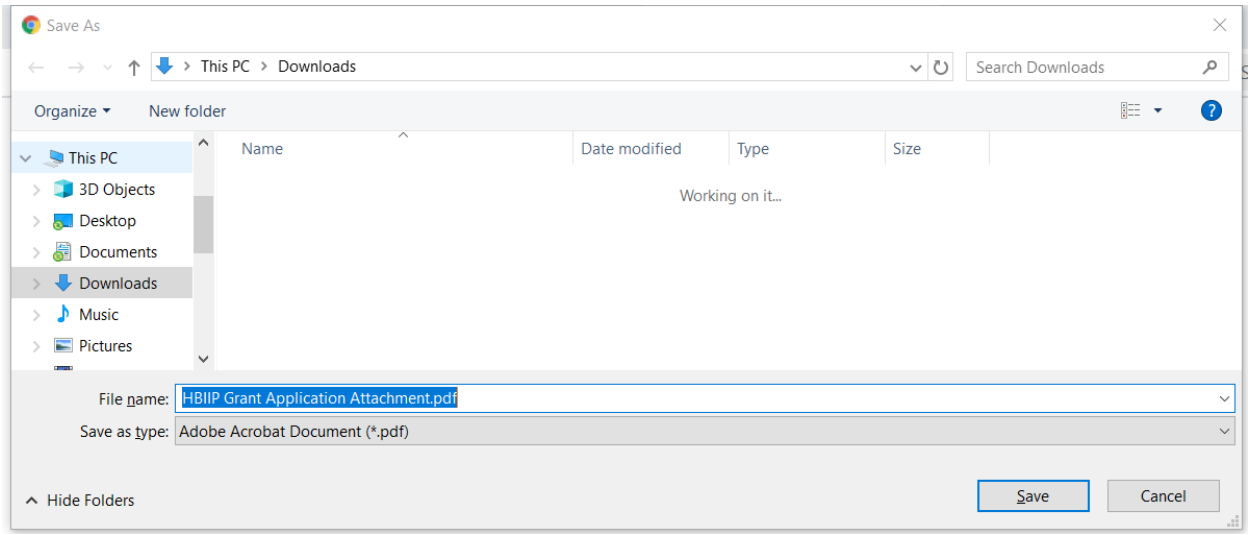
7.8.4. Downloading an Attachment

To download an uploaded attachment, click on the title of the attachment in the attachment list. the online application system will display the view dialogue below with an eye in the center when hovering over it. Click on the eye to preview the document and the online application will display the Download link at the top of the page.



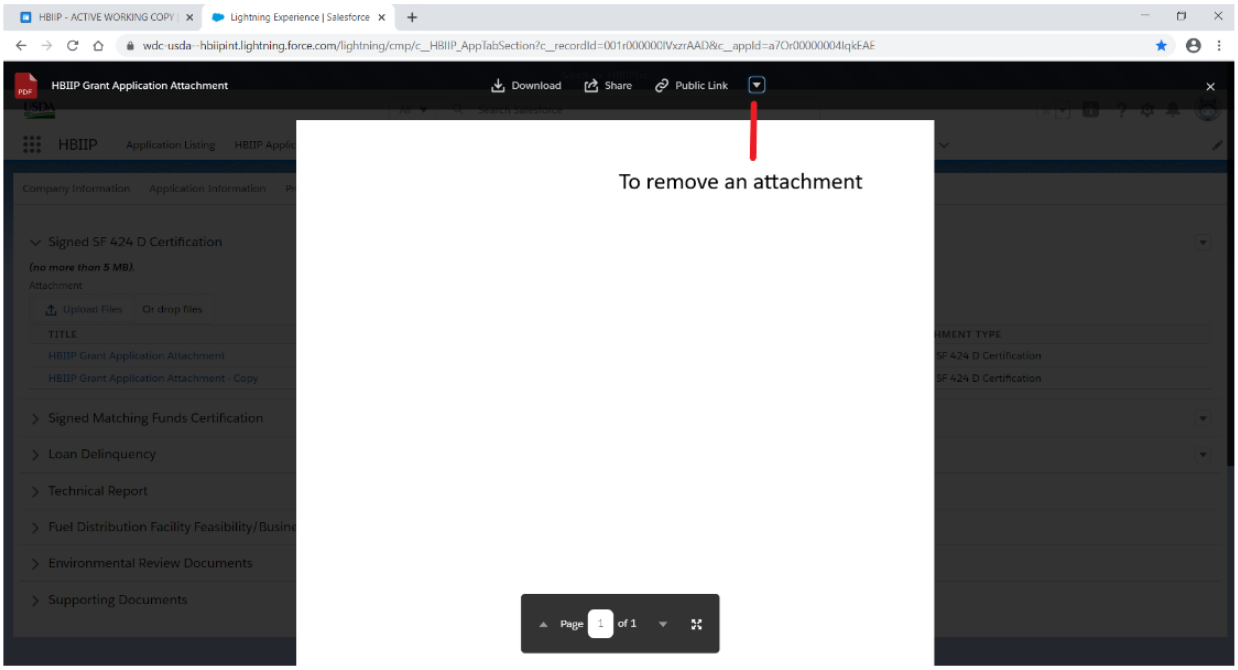


Clicking the Download link will display the Windows Common File Dialogue. Browse to the desired file folder and click Save.

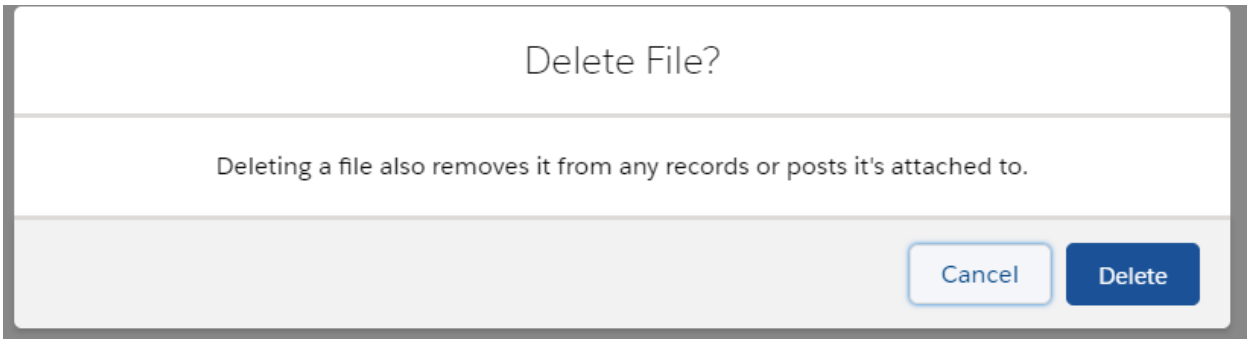


7.8.5. Removing an Attachment

To remove an uploaded attachment, click on the title in the attachment list. The online application system will display the view dialogue below with an eye in the center when hovering over it. Click on the eye to preview the document and the online application will display a downward arrow at the top of the page and right of the Public Link option. Click the downward arrow and a dropdown of options will be displayed. Click on the Delete option at bottom of the list.

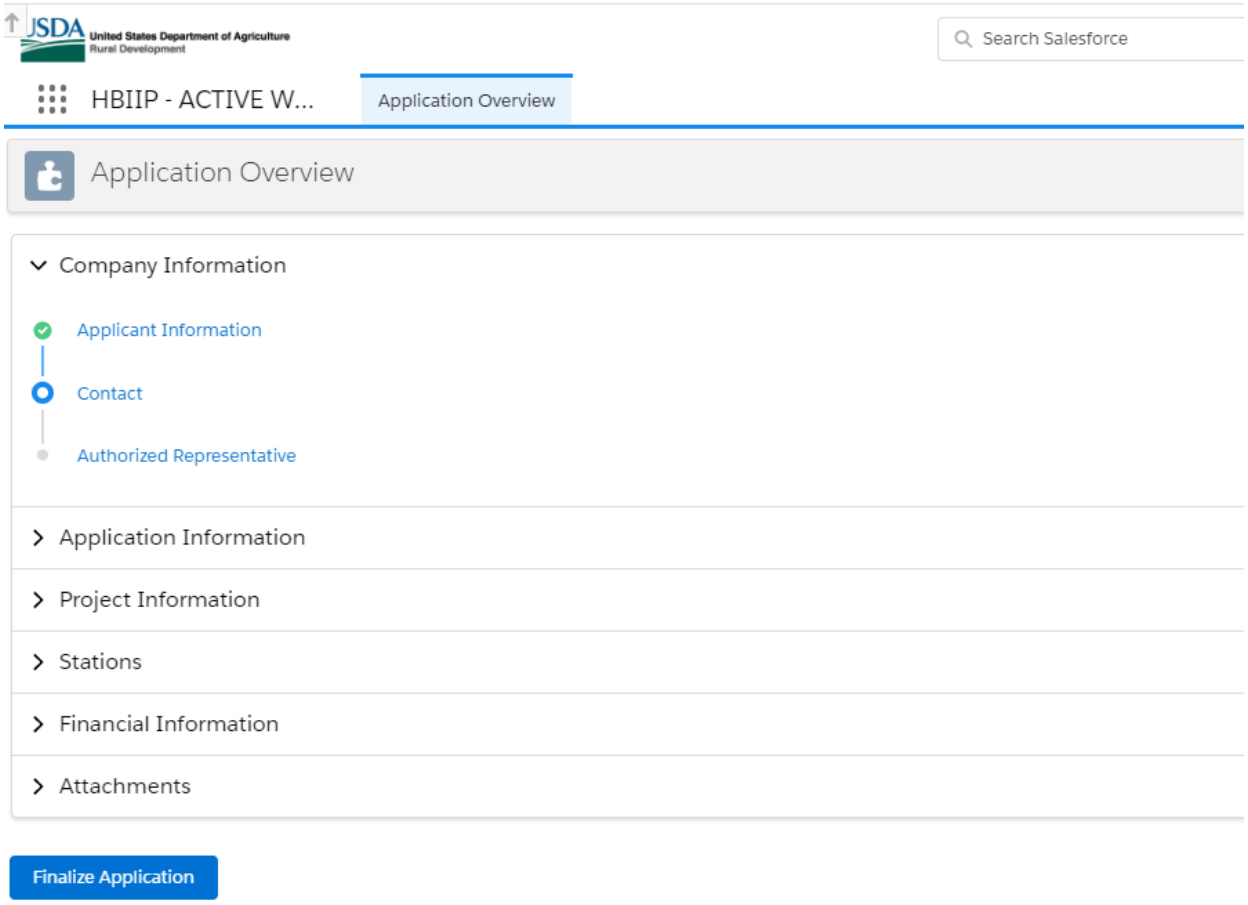


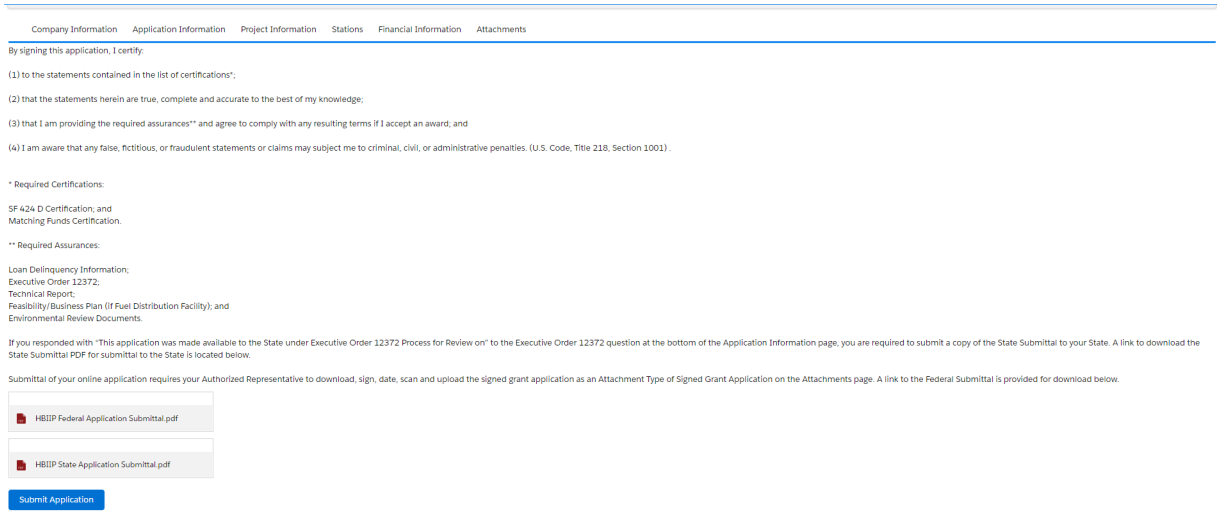
The online application system will display the Delete File dialogue below. Click the Delete button and the selected attachment will be removed from the online application.



8. Finalizing the Application

To view the progress of your application view the Application Overview page. When all of the sections of the application have check marks, the Finalize Application button will be enabled. Clicking the Finalize Application will display the Submit Application page.


United States Department of Agriculture
Rural Development
Search Salesforce
HBIIP - ACTIVE W...
Application Overview
Application Overview
Company Information
Applicant Information
Contact
Authorized Representative
Application Information
Project Information
Stations
Financial Information
Attachments
Finalize Application


Company Information
Application Information
Project Information
Stations
Financial Information
Attachments
By signing this application, I certify:
(1) to the statements contained in the list of certifications*;
(2) that the statements herein are true, complete and accurate to the best of my knowledge;
(3) that I am providing the required assurances** and agree to comply with any resulting terms if I accept an award; and
(4) I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001) .
* Required Certifications:
SF 424 D Certification; and
Matching Funds Certification.
** Required Assurances:
Loan Delinquency Information;
Executive Order 12372;
Technical Report;
Feasibility/Business Plan (if Fuel Distribution Facility); and
Environmental Review Documents.
If you responded with "This application was made available to the State under Executive Order 12372 Process for Review on" to the Executive Order 12372 question at the bottom of the Application Information page, you are required to submit a copy of the State Submittal to your State. A link to download the State Submittal PDF for submittal to the State is located below.
Submittal of your online application requires your Authorized Representative to download, sign, date, scan and upload the signed grant application as an Attachment Type of Signed Grant Application on the Attachments page. A link to the Federal Submittal is provided for download below.
HBIIP Federal Application Submittal.pdf
HBIIP State Application Submittal.pdf
Submit Application

9. Producing the State Submittal For Submission to the State

If you selected the first option for 7.3.1, you are required to submit a copy of the State Submittal to your state. The Submit Application page will include a link to download the State Submittal PDF for submittal to the state. (See Section 7.3.1).

10. Signing the Application

Submittal of your online application requires your authorized representative to download, sign, date, scan and upload the signed online application as an Attachment Type of Signed Grant Application. A link to the Federal Submittal is provided for download on the Submit Application page.

11. Submitting the Application

Once you have uploaded the signed grant application, click the Submit Application button to submit your application for consideration.

12. The Competition Process

Congratulations! You have applied for an Higher Blends Infrastructure Incentive Program Grant. The USDA's HBIIP Program Office will take things from here. Your application will be evaluated for completeness and competed against other applicants. Your organization will be contacted to inform you of the results of the competition.