US ERA ARCHIVE DOCUMENT



Indiana CLEAN Community Challenge Program Application State Form 51826 (R3 / 8-07)

State Form 51826 (R3 / 8-07)
The Comprehensive Local Environmental Action Network (CLEAN)
Challenge

Indiana Department of Environmental Management Office of Pollution Prevention & Technical Assistance

100 North Senate Avenue IGCS W041 Indianapolis, Indiana 46204-2251 Telephone: (800) 988-7901 Fax: (317) 233-5627

| SECTION 1 APPLICANT INFORMATION |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name of Local Government |
| Street Address (number and street) |
| City/State/ZIP code |
| Local Government Web site |
| SECTION 2 CONTACT INFORMATION |
| Name of Contact (Mr./Mrs./Ms./Dr.) |
| Title |
| Telephone number |
| FAX number |
| E-mail address |
| Mailing Address (if different from street address) |
| City/State/ZIP code |
| SECTION 3 APPLICATION INFORMATION |
| How the program works: The Indiana CLEAN Community Challenge is a voluntary environmental recognition program developed to recognize local governments that demonstrate exceptional environmental stewardship. Local governments may include cities, towns, and county levels of government. |
| Applicants choose activities that fit their community goals, develop a Quality of Life Plan, and proceed through the program at their own pace. The Indiana CLEAN Community Challenge also offers administrative and financial support from various state agencies and programs. |
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| To be eligible, applicants must have a positive environmental, health, and safety record; complete the CLEAN Community Challenge program requirements as defined in the "Program Guidelines"; submit an application; and have earned "CLEAN verification" of their Quality of Life Plan. Indiana CLEAN Community Challenge applications are reviewed by a committee of representatives from IDEM. The Indiana Department of Environmental Management (IDEM) reserves the right to eliminate an applicant from consideration due to outstanding financial requirements to the State of Indiana or if unresolved compliance or enforcement issues exist. |
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| SECTION 5 LOCAL GOVERNMENT INFORMATION |
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| Please check the appropriate response to the following questions. |
| Which operations are addressed in your Quality of Life Plan? |
| Waste water treatment plant Drinking water treatment plant Public schools Outdoor recreation facilities |
| Waste management Street and road work/Vehicle maintenance Offices Other (please list) What is your class size? |
| |
| 250,000 or more (First class city) 35,000 to 249,999 (Second class city) |
| 10,000 to 34,999 (Third class city)1 to 9,999 |
| How many full time employees currently work for local government? |
| Fewer than 50 50-99 100-499 500-999 More than 1,000 |
| Are there any ongoing citizen suits involving your local government? |
| Yes No |
| If yes, please explain. |
| SECTION 6 ENVIRONMENTAL ACHIEVEMENT |
| List the environmental achievements of your local government within the past two years, not including those activities implemented for CLEAN. Examples: removed combined sewer overflow, best management practices for storm water runoff, expanded or added recycling services. |
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| List the environmental awards received or voluntary programs your local government participated in over the past two years (include year received and |
| sponsoring program). Example: 2002 Recycling Award in the Indiana Governor's Awards for Environmental Excellence, 2003 IDEM Indiana 5-Star Environmental Recognition Program for Vehicle Maintenance Facilities. |
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| SECTION 7 COMPLIANCE HISTORY List any compliance issues that your local government has experienced during the past two years. |
| Local governments with negative past records must demonstrate improvement in recent history and provide a detailed plan of continual improvement in the future. |
| Issue Date Resolved (month, day, year) |
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| SECTION 8 QUALITY OF LIFE PLAN MISSION STATEMENT |
| Please attach a copy of the signed and dated executive order, resolution, or ordinance adopting your Quality of Life Plan Mission Statement. |
| QUALITY OF LIFE PLAN |
| Please attach your Quality of Life Plan to this application and ensure it meets the requirements as outlined in the "Program Guidelines." |
| LETTERS OF RECOMMENDATION |
| Attach letters of support from at least three local community organizations (a minimum of one environmental, one business, and one citizen organization), outlining support for the local government's efforts to become a cleaner, healthier community. |

| SECTION 9 | CONTINUAL IMPROVEMENT ACTIVITIES |
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| Provide the page no | umber where the following information can be found in your Quality of Life Plan. |
| Page Number | Quality of Life Plan Requirements Mission statement |
| | Roles and responsibilities of stakeholders and key local government personnel |
| | Governmental departments or operations included in the QLP |
| | Identified and prioritized environmental aspects of included operations |
| | Objectives and targets for five environmental aspects |
| | Legal and regulatory requirements associated with the five selected aspects |
| | Action plans to achieve the five objectives and targets |
| | Measurement parameters to evaluate the achievement of each target |
| | Procedure to control QLP documentation |
| | Employee environmental awareness and competence assurance |
| | Environmental and pollution prevention planning in the development of new processes and services, and modification of existing processes and services. |
| | Procedure for emergencies and corrective actions |
| | Procedures for internal and external communication regarding environmental issues and community concerns |
| | Procedure for reviewing progress of the QLP and ensuring continual improvement |
| | Procedure for conducting internal audits |
| | Procedure for documenting improvements and adjustments to the QLP |
| | Procedure to inform the community and businesses of important issues related to the community's environmental performance |
| | Procedure to provide the community with progress toward achieving objectives and targets |
| SECTION 10 | CERTIFICATION & PLEDGE |
| I certify that the information on this application and attachments is accurate to the best of my knowledge and that this local government is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with all applicable federal, state, and local environmental requirements, or has a corrective action program in place to attain compliance. We,, commit to maintaining the principles and goals outlined in our Quality of Life Plan for our local government's Indiana CLEAN Community status. We agree to strive for full compliance with all regulations promulgated by U.S. EPA, the state and/or local jurisdictions. We agree to promote the Indiana CLEAN Community Challenge and to share our success stories with other communities. We understand that an annual environmental progress report must be submitted to the local government and to IDEM and that the progress report is public record. We understand that we must reapply to the Challenge every three years. I understand that the information provided in this application will be public record. I am the highest-ranking facility manager or I have been fully authorized by the highest-ranking facility manager to execute this statement on behalf of the local government applying to this program. | |
| | |
| | Signature Title Date (month, day, year) |

Please send your completed application and attachments to:

IDEM - OPPTA
Attn: CLEAN Application
MC 64-00 IGCS W041
100 North Senate Avenue
Indianapolis, Indiana 46204-2251