Submit Form | Print Form

EECBG Monthly Reporting Form

Instructions: Reporting is a requirement of all programs funded under the American Recovery and Reinvestment Act (ARRA). Please complete the EECBG Monthly Reporting Form for each grant award. The Monthly Report is ***due on the 5th day of the month*** following the prior month's reporting period.

Email the completed form to robert.prosser@state.de.us & cara.lampton@state.de.us by clicking the "Submit" button at the top of the page. Please save a copy for your records.

Invoices can be submitted with the monthly report or separately, as needed. Further directions are given in the Sub-grantee Invoicing Instructions document available on our website www.energy.dnrec.delaware.gov.

Example : Submit the monthly report to DEO by August 5th for the July 2010 reporting period.

Grant Number:		**Month:**	December	**Year:**	2012	**Final Monthly Report:**	No

1. Local Government Name & Address:	**2. Name/Title/Phone Number of the individual submitting monthly report:**
3. Local Government Invoice Number (if applicable):	**4. Federal Tax Identification Number:**

5. Contractors/Vendors

Please provide information on each contractor and/or vendor who works on your ARRA funded project. If multiple contractors /vendors are used, please list each of them below. 9-digit zip codes can be found at http://zip4.usps.com/zip4/welcome.jsp

*You must submit either the contractor's or vendor's DUNS # or the name & 9-digit zip code to enable DEO project reporting to the U.S. Department of Energy (DOE).

Contractor/Vendor*	Contractor/Vendor's 9-digit zip code (zip code+4)*	DUNS number*	Invoice Number	Total payments made to contractor/ vendor during reporting month ($)
1				
2				
3				
4				
5				

EECBG Monthly Reporting Form

6. Project Information

Please list all projects in your scope of work (Attachment A) individually. If you need additional space to list all projects, a supplemental Project Information Section is on page 8.

Project 1	**Completion Level**	100%
a. Provide project name & address *Example: HVAC Replacement, 123 South St. Smyrna, DE*	b. Provide a description of project activities completed this month. List any milestones achieved as well as any obstacles encountered during the reporting period.	

Project 1 Expenditures

Please indicate the amount of EECBG grant funds spent during the reporting month & any leveraged/non-federal funds for the project.

	ARRA Grant Funds	Leveraged/Non-Federal Funds
Expended (reporting month only)		
Obligated (under contract)		
Funds Previously Expended		

Project 2	**Completion Level**	100%
a. Provide project name & address *Example: HVAC Replacement, 123 South St. Smyrna, DE*	b. Provide a description of project activities completed this month. List any milestones achieved as well as any obstacles encountered during the reporting period.	

Project 2 Expenditures

Please indicate the amount of EECBG grant funds spent during the reporting month & any leveraged/non-federal funds for the project.

	ARRA Grant Funds	Leveraged/Non-Federal Funds
Expended (reporting month only)		
Obligated (under contract)		
Funds Previously Expended		

EECBG Monthly Reporting Form

Project 3		**Completion Level**	100%
a. Provide project name & address *Example: HVAC Replacement, 123 South St. Smyrna, DE*	b. Provide a description of project activities completed this month. List any milestones achieved as well as any obstacles encountered during the reporting period.		

Project 3 Expenditures
Please indicate the amount of EECBG grant funds spent during the reporting month & any leveraged/non-federal funds for the project.

	ARRA Grant Funds	Leveraged/Non-Federal Funds
Expended (reporting month only)		
Obligated (under contract)		
Funds Previously Expended		

Project 4		**Completion Level**	100%
a. Provide project name & address *Example: HVAC Replacement, 123 South St. Smyrna, DE*	b. Provide a description of project activities completed this month. List any milestones achieved as well as any obstacles encountered during the reporting period.		

Project 4 Expenditures
Please indicate the amount of EECBG grant funds spent during the reporting month & any leveraged/non-federal funds for the project.

	ARRA Grant Funds	Leveraged/Non-Federal Funds
Expended (reporting month only)		
Obligated (under contract)		
Funds Previously Expended		

EECBG Monthly Reporting Form

7. Total Grant Expenditures		
Please indicate the **total** amount of EECBG grant funds & leveraged/non-federal funds spent during the reporting month.		
	ARRA Grant Funds	Leveraged/Non-Federal Funds
Total Expended (reporting month only)		
Total Obligated (under contract)		
Total Funds Previously Expended		
Total Awarded		
Total Remaining		

8. Davis-Bacon Act Requirements			
a. Do projects require DBA compliance?	No	b. If No, Reason for exemption	

9. State Historical Preservation Requirements			
a. All projects reviewed by SHPO?	No	b. If No, Reason for exemption	

10. Buy American Compliance		
Federal funds used on public buildings & public works must comply with Buy American Act.		
Material Purchased	Cost	Vendor Name & Address

EECBG Monthly Reporting Form

11. Jobs

If an entire project is funded using EECBG funds, please write N/A in the *Non-federal hours worked* category below. If multiple individuals are employed as a result of stimulus funding, please add up the total hours worked by all individuals & provide this information in the appropriate category below. Available hours per week denotes standard full time employment, *i.e. 40 hours* .

i. Federal hours worked	**hours**	**Available hrs/week**
Total hours worked on an EECBG project funded by federal funds.		
ii. Non-federal hours worked	**hours**	**Available hrs/week**
Total hours worked on an EECBG project funded by non-federal		

iii. Description of jobs created or retained

	Created	**Retained**
Officials and Administrators		
Professionals		
Technicians		
Protective Services		
Paraprofessionals		
Office/Clerical		
Skilled Craft		
Service Maintenance		
Total		

12. ARRA Energy Reporting Metrics:

Energy savings should be reported to DEO only in the month that the project is completed. If your scope of work consists of multiple projects, energy savings should be reported in the month that the individual project is completed. Please enter N/A for any reporting metric that does not apply to your specific project.

Example: Using their EECBG sub-grant, a town is completing an energy efficiency lighting upgrade & installing a geothermal heat pump. If the lighting upgrade is completed in July but the geothermal portion of the project is not completed until August, the town should report the energy savings associated with the lighting project in the July monthly report & the geothermal heat pump savings in the August report.

a. Annual cost savings associated with the energy project(s)

Annual cost savings estimates should be available to sub-grantee in their energy audit or determined using the outcome estimator (SEP Metrics Calculator) provided by USDOE. If major changes to project scope occurred during construction, please contact DEO to receive assistance in revising energy cost savings estimates.	

EECBG Monthly Reporting Form

b. Renewable Energy Capacity & Generation	
Renewable energy capacity and annual generation estimates should be available to sub-grantee in their energy audit or determined using the benefit estimator calculator provided by USDOE. If major changes to project scope occurred during construction, please contact DEO to receive assistance in revising energy capacity & generation estimates.	
i. Annual amount of electricity generated by photovoltaic systems (solar panels) (kWh)	
ii. Annual amount of electricity generated by wind systems (kWh)	
iii. Annual amount of electricity generated by other renewable systems (kWh)	
iv. Installed photovoltaic (solar) system capacity (KW)	
v. Installed wind capacity (KW)	
vi. Installed capacity of all other renewable energy systems (KW)	
c. Energy Savings	
Annual energy savings estimates should be available to sub-grantee in their energy audit or determined using the benefit estimator calculator provided by USDOE. If major changes to project scope occurred during construction, please contact DEO to receive assistance in revising energy savings estimates.	
i. Electricity demand reduction (KW)	
ii. Annual reduction in fuel oil consumption (gal)	
iii. Annual reduction in natural gas consumption (MMcf)	
iv. Annual reduction in gasoline & diesel fuel consumption (gal)	
v. Annual reduction in propane consumption (gal)	
vi. Annual reduction in electricity consumption (kWh)	

EECBG Monthly Reporting Form

d. Emission Reductions:	
Annual emission reductions estimates should be available to sub-grantee in their energy audit or determined using the benefit estimator calculator provided by USDOE. If major changes to project scope occurred during construction, please contact DEO to receive assistance in revising energy savings estimates.	
i. Annual criteria air pollutants reduced (tons)	
ii. Annual greenhouse gas reduction (CO2 equivalents)	
e. Buildings Retrofits:	
Total number of buildings retrofitted during reporting month.	
f. Building Square Footage retrofitted:	
Total building square footage retrofitted from an EECBG funded energy upgrade during the reporting month.	
g. Streetlights Retrofitted:	
Total number of streetlights retrofitted during reporting month.	
h. Traffic Lights Retrofitted:	
Total number of traffic lights retrofitted during reporting month.	

Certification		
By my signature, I certify that all of the above information is true and correct to the best of my knowledge.		
Date	Signature	Title

EECBG Monthly Reporting Form

Project Information Supplemental Please list all projects in your scope of work (Attachment A) individually.			
Project 5		**Completion Level**	100%
a. Provide project name & address *Example: HVAC Replacement, 123 South St. Smyrna, DE*	b. Provide a description of project activities completed this month. List any milestones achieved as well as any obstacles encountered during the reporting period.		

Project 5 Expenditures Please indicate the amount of EECBG grant funds spent during the reporting month & any leveraged/non-federal funds for the project.		
	ARRA Grant Funds	Leveraged/Non-Federal Funds
Expended (reporting month only)		
Obligated (under contract)		
Funds Previously Expended		

Project 6		**Completion Level**	100%
a. Provide project name & address *Example: HVAC Replacement, 123 South St. Smyrna, DE*	b. Provide a description of project activities completed this month. List any milestones achieved as well as any obstacles encountered during the reporting period.		

Project 6 Expenditures Please indicate the amount of EECBG grant funds spent during the reporting month & any leveraged/non-federal funds for the project.		
	ARRA Grant Funds	Leveraged/Non-Federal Funds
Expended (reporting month only)		
Obligated (under contract)		
Funds Previously Expended		