

**APPLICANT ENVIRONMENTAL CHECKLIST**

**DIRECTIONS:** The following information must be provided to, and approved by, the Department of Energy (DOE) before a contractual document can be awarded. Complete this form and submit with project proposal. Complete and correct information expedites the review process.

<b>SECTION A.</b>	
Project Title:	Click or tap here to enter text.
Applicant Organization:	Click or tap here to enter text.
Applicant Organization Contact (usually the PI):	Click or tap here to enter text.
Telephone Number and Email:	Click or tap here to enter text.

**SECTION B. SOURCES OF POTENTIAL IMPACTS – Would the proposal involve or generate any of the following?**

	YES	NO		YES	NO
1.	<input type="checkbox"/>	<input type="checkbox"/>	10.	<input type="checkbox"/>	<input type="checkbox"/>
2.	<input type="checkbox"/>	<input type="checkbox"/>	11.	<input type="checkbox"/>	<input type="checkbox"/>
3.	<input type="checkbox"/>	<input type="checkbox"/>	12.	<input type="checkbox"/>	<input type="checkbox"/>
4.	<input type="checkbox"/>	<input type="checkbox"/>	13.	<input type="checkbox"/>	<input type="checkbox"/>
5.	<input type="checkbox"/>	<input type="checkbox"/>	14.	<input type="checkbox"/>	<input type="checkbox"/>
6.	<input type="checkbox"/>	<input type="checkbox"/>	15.	<input type="checkbox"/>	<input type="checkbox"/>
7.	<input type="checkbox"/>	<input type="checkbox"/>	16.	<input type="checkbox"/>	<input type="checkbox"/>
8.	<input type="checkbox"/>	<input type="checkbox"/>	17.	<input type="checkbox"/>	<input type="checkbox"/>
9.	<input type="checkbox"/>	<input type="checkbox"/>	18.	<input type="checkbox"/>	<input type="checkbox"/>

**SECTION C. EXPLANATION OF POTENTIAL IMPACTS –** For each impact marked “YES” in Section B above, provide a brief explanation. Indicate quantities involved and the office or procedure in place to handle use or disposal.

Click or tap here to enter text.

**SECTION D. CATEGORY EVALUATION CRITERIA:**

	YES	NO
1. Is the activity covered by an existing Nuclear Regulatory Commission (NRC) license? If yes, provide license #: Click or tap here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>
2. Is the activity included in an Environmental Impact Statement or Environmental Assessment?	<input type="checkbox"/>	<input type="checkbox"/>
3. Would the activity create hazardous, radioactive, PCB, or mixed waste for which no disposal is available?	<input type="checkbox"/>	<input type="checkbox"/>
4. Would the activity require or modify federal, state, or local permits, approvals, etc.?	<input type="checkbox"/>	<input type="checkbox"/>
5. Would the activity require siting, construction, or modification of a Resource Conservation and Recovery Act (RCRA) or Toxic Substances Control Act (TSCA) regulated facility?	<input type="checkbox"/>	<input type="checkbox"/>
6. Would the activity require cultural, historical, or biological clearances?	<input type="checkbox"/>	<input type="checkbox"/>

**SECTION E. CERTIFICATION –** To the best of the Applicant’s knowledge at the time of signing, the responses given above are complete and accurate. Should new issues or concerns arise, or changes occur, anytime after award and/or during the course of performance, the Applicant will alert DOE immediately.

Applicant Name and Title: Click or tap here to enter text.	Signature: _____ Date: _____
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**FOR DOE USE ONLY**

<b>NEPA Document #:</b> Click or tap here to enter text.	<b>NEPA CX Applied:</b> Click or tap here to enter text.	<b>Solicitation #:</b> Click or tap here to enter text.
<b>Contract Specialist:</b> Click or tap here to enter text.	<b>Approved:</b>	
<b>Project Manager:</b> Click or tap here to enter text.	Signature: _____ Date: Click or tap here to enter text.	