# East Texas Council of Governments REGIONAL SOLID WASTE GRANTS PROGRAM

**FORM 1. APPLICATION INFORMATION AND SIGNATURE PAGE** 

Fiscal Year Funding Is Being Requested	FY 26 X FY 27			
Applicant: City of Athens	Funding Amount Proposed: \$ 3450			
Address: 508 E. Tyler St. Athens, TX 75751	Phone/Fax/Email: Ph: 903-675-5131 Email eborstad@athenstx.gov			
Contact Person : Elizabeth Borstad/Carol Morton	Date Submitted: 9/26/2025			
Select Project (	Category/s.			
Local Enforcement Litter and Illegal Dumping Cleanup and Community Collection Events  X Source Reduction and Recycling Local Solid Waste Management Plans Citizens' Collection Stations and "Small" Registered Transfer Stations Household Hazardous Waste (HHW) Management Technical Studies Educational and Training Projects				
Signatur	e			
By the following signature, the Applicant certifies that it has reviewed the certifications, assurances, and deliverables included on pages 19-22 in this application, that all certifications are true and correct, that assurances have been reviewed and understood, and that all required deliverables are included with this application. By submitting this application, you agree to adhere to the provisions of the Texas Grants Management Standard (TxGMS) issued by the Texas Comptrollers of Accounts in regard to the use of these funds. Use the following link to access the Texas Grants Management Standards.				
Signature////////////////////////////////////	Title: City Manager, City of Athens			
Typed/printed Name: Elizabeth Borstad  Date Signed:  09/26/2025				
FOR USE BY ETCOG				
Date application was received:				
Does the application meet all of the required screening criteria:YesNo?				
Is the application administratively complete:No				

## FORM 2. AUTHORIZED REPRESENTATIVES AND RECORDS LOCATION

The Applicant hereby designates the individual(s) named below as the person or persons authorized to receive direction from the ETCOG, to manage the work being performed, and to act on behalf of the Applicant for the purposes shown:

1. Authorized Project Representative. The following person is authorized to receive direction, manage work performed, sign required reports, and otherwise act on behalf of the Applicant.

	1	NIA	1					
Signat	ure:	Ihr	w	Ca	wCTh	octen		
Typed	/Printed Na	ame: Caro	l Morton/Eliz	zabeth Borstad	i			
Title:	Executive	Director, Ke	ep Athens Be	eautiful, City M	lanager, Cit	ty of Athen	S	
Date:		1/26/20	500					

2. Authorized Financial Representative. In addition to the authorized project representative, the following person is authorized to act on behalf of the Applicant in all financial and fiscal matters, including signing financial reports and requests for reimbursement.

Signature:
Typed/Printed Name: Sarah Smith
Title; Financial Director, City of Athens
Date: 09/26/25

**3. Records Location.** Please designate the location where grant records will be located for record access and review.

Location Name: Keep Athens Beautiful
Street Address: 201 W. Coriscana, Suite 4
City, State, Zip Code: Athens, TX 75751

# FORM 3a: PROJECT SUMMARY/DESCRIPTION

Note that the project summary is based on the scoring criteria stated in the Request for Application. Please refer to the specific questions listed in the scoring criteria when completing the project summary.

# Project Summary/Description (add additional pages as necessary:

The City of Athens in partnership with Keep Athens Beautiful will host a Tire Disposal event in the Spring or Fall of 2027. Keep Athens Beautiful will be the manager of this event. Passenger & Truck tires only will be accepted (no farm tractor tires & no rims). There will be a limit of ten (10) tires per household.

The 2026 event would provide the Athens community to dispose there tires in a drive through location. It would take place in a large parking lot of the Henderson County Judicial Building, 109 W. Corsican, Athens, TX 75751.

# **Project Goals:**

This event will give the Athens community a safe, correct and easy way to dispose of their tires and keep them out of the landfill.

# **Project Objectives:**

Reduce the amounts of waste generated & requiring disposal through source reduction, reuse & recycling

Reduce the amounts of illegal dumping in the ETCO Region

# Describe how the project assists in implementing the ETCOG Regional Solid Waste Management Plan:

360 Tire Recycling Group will be collecting the tires and hauling them off to be properly disposed of. The light truck and passenger tires will go to their processing plant to be shreds into a land reclamation project and 360 shreds into fuel used at a cement kiln.

## Check the box that best describes this project.

X	New Project
	Enhancement/expansion of an existing project
	Continuation of an existing project

# **FORM 3b. PROJECT COST EVALUATION** (add additional pages as necessary)

Provide an evaluation of the costs associated with the proposed project. Present the costs in unit terms, such as cost per ton, cost per customer, or cost per capita, as applicable.

The cost of the project would include the following

- 1. Trailer/truck/drive/fuel totaling \$3000 (bid attached)
- 2. Advertising and flier \$200
- 3. The cost per person would be \$1.50

This event will give the Athens community a safe, correct and easy way to dispose of their tires and keep them out of the landfill.

## FORM 3c. LEVEL OF COMMITMENT OF APPLICANT

(Add additional pages as necessary)

Provide information related to the Applicant's level of commitment to preferred solid waste management practices. If the proposed project is an ongoing service, demonstrate the ability to sustain the program beyond the term of the grant. Explain the extent to which the appropriate governing bodies support the proposed project.

List any previously demonstrated commitment to preferred solid waste management practice, such as: implementing other solid waste management projects; involvement in a local or subregional solid waste management plan or study; membership in an environmental activity.

The City of Athens has partner with Keep Athens Beautiful 2019, 2021, 2023 events collect over 1200 tires, which meant that they were not out on road ways, ditches or in someone's yard catching water, etc.

The partnership has helped reduce the number of tires collected with the city limit along with being brought to the City of Athens Collection site each week.

#### **FORM 3d. SCOPE OF WORK**

(See application instructions for format. Add additional pages as necessary)

Provide a work program with a schedule of deliverables for the proposed project or program. The work program with the schedule of deliverables will be considered the Scope of Work to be performed under the contract agreement, if funded.

As concisely as possible, for each task of the proposed project, describe the major steps or activities involved, identify the responsible entities, and establish a specific timeframe to accomplish each task. The scope of work for the project or program must include:

- ❖ Detailed purpose and goal of the project (should be consistent with implementing the goals, objectives, and recommendations from the regional solid waste management plan, as stated in the project description on Form 6a).
- **Specific task statements with responsible entity identified.**
- List of deliverables/products/activities under each task.
- **Schedule of deliverables.**

Please use this format example:

- 1. Task:
- a. Major task
- b. Estimated completion date
- c. Who is responsible for completing this task

Keep Athens Beautiful with be the lead in setting up these tasks and coordinating with the City of Athens.

- 1. A date will be set for event, the City of Athens Public works department will work with Keep Athens Beautiful to set Date.
- 2. Contracts with the Tire disposal companies will be set six week prior
- 3. Advertising and promotion will be scheduled six weeks
- 4. Volunteers will be Scheduled
- 5. City will provide man power and equipment as needed the day of event.

# Please provide the following breakdown of the total amount of grant funding being requested:

	Budg	et Category		Funding Amount
1.	Personnel/Salaries			\$
2.	Fringe Benefits			\$
3.	Travel			\$
4.	Supplies			\$
5.	Equipment			\$
6.	Construction			\$
7.	Contractual			\$ 3150
8.	Other			\$ 300
9.	<b>Total Direct Charge</b>	s (sum of 1-8)		\$
10.	Indirect Charges*			\$
11.	<b>Total</b> (sum of 9 - 10)	)		\$ 3450
12.	Fringe Benefit	%	,	
Rate:		%		
13.	Indirect Cost Rate:	%		
		%		

Identify, in detail, each budget category to which your indirect cost rate applies and explain any special conditions under which the rate will be applied:

In accordance with the TxGMS, <u>Grant Management (texas.gov)</u> indirect charges may be authorized if the Applicant has an indirect cost rate properly filed within the past 24 months by a federal cognizant agency or state single audit coordinating agency. Alternatively, the Applicant may be authorized to recover up to 10% of direct salary and wage costs (excluding overtime, shift premiums, and fringe benefits) as indirect costs, subject to adequate documentation. If you have an approved cost allocation plan, please enclose documentation of your approved indirect rate.

## FORM 4a: DETAILED MATCHING FUNDS, IN-KIND SERVICES, AND TOTAL PROJECT COST

This budget form should be completed if the Applicant is providing any level of matching funds or in-kind services directly related to the proposed project.

## Matching Funds: \$144.44

In the space below, please explain in detail the application of any matching funds to be provided by the Applicant, as directly related to the proposed project:

# **In-Kind Services:** \$2000 (monetary equivalent)

In the space below, please explain in detail the application of any in-kind services to be provided by the Applicant, as directly related to the proposed project:

Volunteers, City employees

What is the TOTAL COST of the proposed project, considering the total grant funding requested, any matching funds being provided by the Applicant, and the monetary equivalent of any in-kind services being provided by the Applicant?

\$ 5594.44

\*\*\*\*\*\*Please complete any of the following detailed budget forms that are applicable to your project.

# **FORM 4b: Detailed Personnel/Salaries Expenses**

For each employee to be funded wholly or in part by this grant, complete one of the lines in the table below. Please refer to the definitions provided in the instructions in completing this sheet. If funds are awarded, changes to grant-funded positions must be approved in advance by the COG.

Position Title	Function	FTE	Status	Monthly Salary
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
TOTAL (Must equal Line 1 of the O	verall Budget Summary)	\$ N/A		

# **FORM 4c: Detailed Travel Expenses**

This budget form provides a more detailed breakdown of the total expenses for travel indicated on Line 3 of the Overall Budget Summary.

Please describe the types of routine in-region travel expenses expected and purpose for the travel.

Routine In-Region Travel	Purpose of Travel	Estimated Cost
		\$
		\$
		\$
		\$
		\$ N/A

All out-of-state travel expenses and other non-routine travel, such as out-of-region travel to special training or events must be pre-approved by the COG. Complete the following information for all requested non-routine travel, including any out-of-state travel. If those details are not presently known, the COG will need to approve those travel costs before the travel occurs.

**Non-Routine Travel Expenses** 

Date(s)	Purpose & Destination	Person(s)	Estimated Cost
			\$
			\$
			<u></u>
			>

TOTAL TRAVEL EXPENSES	
(Must equal Line 3 of the Overall Budget Summary)	\$ N/A

# **FORM 4d: Detailed Supply Expenses**

This budget form provides a more detailed breakdown of the total expenses for supplies indicated on Line 4 of the Overall Budget Summary.

Please list the general types of supplies you expect to purchase with grant funding. Include number of each item, cost per item and total cost.

General Types of Supplies	Estimated Cost
General office/desk supplies	\$
Other supplies (explain below):	\$
TOTAL (Must equal Line 4 of the Overall Budget Summary)	\$ N/A

# **FORM 4e: Detailed Equipment Expenses**

All equipment purchases must be pre-approved by the COG. If the specific details of an equipment purchase are known, show that equipment on the list below. If the specific details of the equipment costs are not known at this time, list the general details on this form. The specific details of the equipment will then need to be provided to and approved by the COG before the costs are incurred.

Equipment (\$5,000 or more per unit) (Show description, type, model, etc.)	Unit Cost	No. of Units	Total Cost
	\$		\$
	\$		\$
	\$		\$
	\$		\$
		9	
TOTAL (Must equal Line 5 of the Overall Budget Sum	mary)	\$ N/A	

# **FORM 4f: Detailed Construction Expenses**

All construction projects must be pre-approved by the COG. If the specific details of the construction costs are not known at this time, list the general details on this form. The specific details of the construction will then need to be provided to and approved by the COG before the costs are incurred. For any subcontracted activities, the request for approval will need to include evidence that the contract price is reasonable and necessary (see instructions).

Types of Construction	Subcontracted Yes/No	Estimated Cost
		\$
		\$
		\$
		\$
		\$
TOTAL (Must equal Line 6 of the Overall Budget Summary)		\$ N/A

# **FORM 4g: Detailed Contractual Expenses**

All contractual expenses must be pre-approved by ETCOG. If the specific details of the contractual costs are not known at this time, list the general details on this form. The more specific details of the contractual costs will then need to be provided to and approved by ETCOG before the costs are incurred. The request for approval will need to include evidence that the contract price is reasonable and necessary (see instructions). In addition, the subcontract scope of work must be approved by ETCOG before work begins.

Purpose	Contractor(s)	Contract Amount
Tire Disposal	360 Tire Recycling Group	\$3150.00
		\$
TOTAL (Must equal Line 7 of the Overall Budget Summary)		\$ 3150.00

# **FORM 4h: Detailed Other Expenses**

This budget form provides a more detailed breakdown of the total other expenses indicated on Line 8 of the Overall Budget Summary. Please note that the final totals are at the bottom of the next page.

# **Basic Other Expenses**

Please identify the basic "Other" category expenses you expect to incur appropriate to the project.

Basic Other Expenses	Estimated Cost
Books and reference materials	\$
Postage, telephone, FAX, utilities	\$
Printing/reproduction	\$
Advertising/public notices Flyers, ads and newspaper articles	\$ 300
Registration fees for training (if approved)	\$
Repair and maintenance	\$
Basic office furnishings	\$
Space and equipment rentals	\$
Signage	\$

# Form 4h: Additional Other Expenses

The specific details of additional "Other" category expenses, not included on the list of basic other expenses, must be pre-approved by the COG. If the specific details of the additional other expenses are not known at this time, list the general details on this form. The more specific details will then need to be provided to and approved by the COG before the costs are incurred.

Additional Other Expenses	Unit Cost	No. of Units	Total Cost
Computer hardware not listed under the Equipment category (itemize each expense below including description, type, model, etc.):	\$		\$
Computer software (itemize each expense below including description, type, model, etc.):	\$		\$
Additional Other expenses (itemize each expense below including description, type, model, etc.):	\$		\$

TOTAL OTHER EXPENSES	\$ 300	
(Must equal Line 8 of the Overall Budget Summary)		

# **FORM 5: Explanation Regarding Private Industry Notification**

Applicants under the following grant categories must complete this form and form 5a:

- a. Source Reduction and Recycling
- b. Citizens' Collection Stations and "Small" Registered Transfer Stations
- c. A demonstration project under the Educational and Training Projects category
- d. Other

# Form 5a: List of Private Service Providers Notified

Private Service Providers Contacted	Name and Position	Telephone Number	Date Notified
360 Tire Recycling Group	Aaron Nailon	972-762- 7273	9/15/2025
Liberty Tire Recycling	Jim Fender	682-205- 9212	9/1912025
Tire Recycling of East TX	Paul Mitchell	318-349- 8156	9/24/2025
ArkLaTex	Stephen McLemore	903 918- 0002	9/24/2025

## Form 5b: Summaries of Discussions with Private Industry

Provide summaries of any input and concerns raised by the private service providers; summaries of any meetings or discussions held between the Applicant and the private service providers; an explanation of any changes made to the proposed project to address private service provider concerns; and an explanation of any remaining concerns that were not addressed any why the Applicant determined that the concerns are not valid under the statutory requirements. (Refer to Instructions)

Attach to the application any written comments, concerns, or input provided by a private service provider concerning the project. Attach additional pages as needed.

-360 Tire Recycling Group – happy to work with us on this event, noting that they have increase the price from previous years due to the volume of passenger tire they have processed. Does not have an issue with this project and want to be in the biding process.

Liberty Tires – Does not have an issue with this project and want to be in the biding process. They are very willing to work with us on the event.

Tires Recycling of East TX – explained he has done several of this and willing to work with us. Does not have an issue with project.

ArkLatex – Have declined to not bid on the event as they work with Tires Recycling of East TX and would have used them for our collection.

#### Form 6: Certifications and Assurances

## **Certifications**

In order to receive grant funds under this program, the proposed project must conform to the provisions set forth in the Request for Applications (RFA). The following certifications are intended to help the COG to ensure that these provisions are met. By signing this Application, the person acting on behalf of the Applicant makes the certifications listed below.

# 1. Authority to Sign Application

The person signing this Application hereby certifies that he/she is the official contact regarding this Application and has authority from the Applicant to sign the Application and that such authority will bind the Applicant in subsequent agreements.

## 2. Application Contains No False Statements

Applicant certifies that this Application has no false statements, and that the Applicant understands that signing this Application with a false statement is a material breach of contract and shall void the submitted Application and any resulting contracts. The Applicant understands that the COG will not accept any amendment, revision, addition, or alteration to this Application after the final date and time for submission.

#### 3. Governmental Status

Applicant certifies that it is located in the State of Texas and fits within one of the governmental classifications listed below, as determined under state law:

City

County

- Public school or school district (not including Universities or post-secondary educational institutions)
- ② Other general and special law district with the authority and responsibility for water quality protection or municipal solid waste management, including river authorities.
- Council of Governments

## 4. Solid Waste Fee Payments

Applicant certifies that it is not delinquent in payment of solid waste disposal fees owed the State of Texas.

#### 5. Debarment from State Contracts

Applicant certifies that it is not barred from participating in state contracts by the State of Texas Comptroller of Public Accounts under the provisions of §2155.077, Government Code.

#### 6. Conformance to Standards

The Applicant certifies to the best of their knowledge and ability that the proposed project, including all activities in the proposed Scope of Work and the proposed expenditures, conforms to the eligible category standards and allowable expense and funding standards as set forth in the Request for Applications.

## 7. Consideration of Private Industry

The following certification only applies if the project is under one of the following grant categories:

- A. Source Reduction and Recycling
- B. Citizens' Collection Stations and "Small" Registered Transfer Stations
- C. A demonstration project under the Educational and Training Projects category

Applicant certifies that it has notified private service providers in accordance with the requirements set forth in the Request for Applications and the instructions provided with this application form.

Applicant further certifies to the best of their knowledge and ability (after completing Form 5) that the proposed project will promote cooperation between public and private entities, is not otherwise readily available, and will not create a competitive advantage over a private industry that provides recycling or solid waste services.

## 8. Consistency with Regional Solid Waste Management Plan

Applicant certifies to the best of their knowledge and ability that the proposed project is consistent with applicable goals, objectives, and recommendations of the RSWMP of the COG.

# 9. Technical Feasibility

Applicant certifies that is has carefully reviewed its Scope of Work and that to the best of their knowledge and ability all activities are technically feasible and can be satisfactorily completed within the grant period as set forth in the Request for Applications.

## 10. Costs Reasonable and Necessary

Applicant certifies to the best of their knowledge and ability that the proposed project activities in the Scope of Work and the expenses outline in the Budget are reasonable and necessary to accomplish the project objectives, and that the proposed expenses are consistent with the costs of comparable goods and services.

#### 11. Certification by Law Enforcement Programs

If the Applicant is a law enforcement entity regulated by Chapter 1701 of the Texas Occupations Code, the Applicant certifies that it is in compliance with all rules developed by the Commission on Law Enforcement Officer Standards and Education (TCLEOSE) pursuant to Chapter 1701, Texas Occupations Code; or that it is in the process of achieving compliance with such rules. If compliance is pending, a certification from TCLEOSE must be attached to indicate that the Applicant is in the process of achieving compliance with the rules.

## **Assurances**

If the application is approved for funding, the grant funds will be awarded through a contract between the Applicant and the COG. The grant contract will contain a number of standards, requirements, and processes that must be complied with as a condition of receiving the grant funds. In order to ensure an understanding by the Applicant of some of the main conditions that will be included in the contract, the Applicant is asked to review the following assurances. By signing this Application, the person acting on behalf of the Applicant indicates their understanding of these conditions and provides assurances that these and other conditions set forth in the grant contract will be adhered to if funding is awarded.

# 1. Compliance with Standard Pertaining to Real Property and Equipment

Applicant provides assurances that, if funded, the Applicant will comply with the TxGMS and the contract provisions pertaining to title to and management of real property and equipment. The contract will contain obligations and conditions regarding the use of the equipment and/or facilities (the "property") acquired under the agreement. Included in the provisions are obligations to provide adequate maintenance and conduct physical property inventories; restrictions and conditions on the use, replacement, sale, or transfer of the property; and obligations to continue to adhere to the provisions that grant funds not be used to create a competitive advantage over private industry, in the use or transfer of the property.

## 2. Participation in TCEQ Recycling Surveys and Reporting

Applicant provides assurances that, if funded, the Applicant will respond to annual recycling program surveys and/or other requests from the COG or the TCEQ for information on municipal solid waste management activities.

# 3. Compliance with Progress and Results Reporting Requirements

Applicant provides assurances that, if funded, the Applicant will comply with requirements for: reporting on the progress of the project tasks and deliverables; documenting the results of the project and providing those results to the COG on a schedule established by the COG, and additionally, to continue to document the results of the project activities for the life of the project; and to provide the COG with a follow-up results report approximately one year after the end of the grant term.

## 4. Financial Management

Applicant provides assurances that, if funded, the Applicant will comply with contract provisions and requirements necessary to ensure that expenses are reasonable and necessary, and to adhere to financial administration and reimbursement procedures and provide financial reports on a schedule established by the COG.

# 5. Compliance with Americans with Disabilities Act

Applicant provides assurances that, if funded, the Applicant will comply with all the applicable requirements of the Americans with Disabilities Act of 2013.

# 6. Compliance with the Single Audit Act

Applicant provides assurances that, if funded, the Applicant will comply with the Single Audit Provisions of the Texas Grants Management Standards (TxGMS) prepared by the Texas Comptrollers of Public Accounts.

Provisions of the Single Audit Circular under the Standard Financial Management Conditions Section; Audit starting on page 40 of the TxGMS that applies to all recipients of funding under this grant.

## 7. Compliance with Program and Fiscal Monitoring

Applicant provides assurances that, if funded, the Applicant will comply with program and fiscal monitoring provisions of the contract, including: providing additional reports or information as may be requested to adequately track the progress of the project; and allowing site visits to evaluate the progress of the project and to view any grant-funded equipment or facility.

#### **RESOLUTION NO. 2025-R-120**

A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF ATHENS, TEXAS, AUTHORIZING THE FILING OF A GRANT APPLICATION WITH THE EAST TEXAS COUNCIL OF GOVERNMENTS REGIONAL SOLID WASTE GRANT PROGRAM.

WHEREAS, the East Texas Council of Governments is directed by the Texas Commission on Environmental Quality to administer solid waste grant funds for the implementation of the COG's adopted regional solid waste management plan; and

WHEREAS, the City of Athens in the State of Texas is qualified to apply for grant funds under the Request for Applications.

NOW, THEREFORE, BE IT RESOLVED that the City Council of the City of Athens, Texas;

- 1. Elizabeth Borstad, City Manager, is authorized to request grant funding under the East Texas Council of Governments Request for Applications of the Regional Solid Waste Grants Program and act on behalf of the City of Athens in all matters related to the grant application and any subsequent grant contract and grant project that may result.
- 2. If the project is funded, the City of Athens will comply with the grant requirements of the East Texas Council of Governments, Texas Commission on Environmental Quality, and the State of Texas.
- 3. The grant funds and any grant-funded equipment or facilities will be used only for the purposes for which they are intended under the grant.
- 4. Those activities will comply with and support the adopted regional and local solid waste management plans adopted for the geographical area in which the activities are performed.
- 5. This Resolution authorizes the Solid Waste Grant Application for Fiscal Year 2026 and the Solid Waste Grant Application for Fiscal Year 2027.

PASSED AND APPROVED this the 22nd day of SEPTEMBER 2025.

Aaron Smith, Mayor

Attest:

Bonnie Hambrick, City Secretary

# State of Texas

# County of Wenderson

Before me, Mayor and City Secretary, on this day personally appeared Aaron Smith and Bonnie Hambrick (respectively) known to me personally to be the persons whose names are subscribed to the foregoing instrument and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this 33 day of September

SCHEE ADAMS My Notary ID # 134393850 Expires June 6, 2027