

STATE OF CONNECTICUT – DEPARTMENT OF PUBLIC HEALTH
DRINKING WATER STATE REVOLVING FUND (DWSRF)
AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009 (ARRA)
TRACKING AND REPORTING INFORMATION FORM SUPPLEMENT

INSTRUCTIONS

FFY 2009 ARRA TRACKING AND REPORTING INFORMATION FORM

(1) Recipient Name- legal name of the recipient as registered on the Central Contractor Registration web site
Central Contractor Registry (CCR) information

Registering with the CCR

- National database for everyone doing business with the federal government
- Required for all Assistance Recipients receiving ARRA funds
- If you are not registered, you may do so online at www.ccr.gov

When registering, you will be required to provide the following information:

- DUNS Number
- Tax ID/Social Security Number
- Point of Contact (POC)– person responsible for timely and accurate information provided to the CCR
- Electronic Business Point of Contact (EB POC) – person with the sole authority to designate the staff member(s) who may represent the organization to federal business systems. The same individual may serve as both the CCR POC and as the EB POC
- Marketing Partner ID (MPIN) – Create a special password to access the CCR system
- Approximately 48 hours for CCR registration to be complete.

(2) Recipient Address- the physical location of the recipient (street address, city, state, 9-digit zip)

(3) Data Universal Numbering System (DUNS) number:

Obtaining a DUNS Number

- Nine-digit number required for all ARRA Assistance Recipients
- Combines specific industry sectors with numeric sequencing providing a multitude of sector-based information that is compared and contrasted with like industries in a local, state and regional format.
- Free and easy to obtain at http://www.dnb.com/US/duns_update/

(4) Place of performance- street address, city, state, 9-digit zip, & congressional district of the primary location of work

(5) Area of benefit- may be state, county, city, school district benefiting from the project

(6) Population served by project – not necessarily the entire public water system

(7) Service connections served by project – not necessarily the entire public water system

(8) Actual Construction Start Date- actual date the shovel is in ground

(9) For contractors receiving at least \$25,000, the recipient must provide: (Attach separate sheet if necessary)

- Contractor DUNS number OR
- Name and 9-digit zip code of company headquarters, if DUNS number is not available

(10) Recipient highly compensated individuals (Top 5) - The names and total compensation of the Assistance Recipient's top five officers or executives

Three conditions must be met to require reporting of highly compensated individuals.

Based on the preceding fiscal year, the conditions are as follows: (check all that apply)

- (1) The recipient received 80 percent or more of its annual gross revenues in Federal awards; and
- (2) The recipient received \$25,000,000 or more in annual gross revenues from Federal awards; and
- (3) The public does not have access to information about the compensation of the senior executives of the entity through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 780(d)) or section 6104 of the Internal Revenue Code of 1986 [26 USCS § 6104]. If all of these conditions are met, enter the full name and compensation of the five highest paid individuals.

When all 3 items are checked, "Recipient highly compensated individuals" must be reported.