

**P2 IJA Products EJ Grant Reporting Template****Welcome**

Using this workbook will allow you to track all required reporting and outcome elements, automatically tabulate many of your required outputs, and submit your data for sequential annual reporting. Using this workbook will also allow EPA to easily import this information into its P2 Grants Database, which aggregates P2 grant performance information across the country. EPA is planning to make the P2 Grants database widely available through a searchable public website, which will allow other P2 providers and facilities to find demonstrated P2 practices and implemented P2 actions. By using this standardized workbook to report your results, you are helping to ensure that the database contains accurate, complete, and consistent data about P2 practices, which may allow others to replicate your successes. So, thanks!

[Learn more at https://www.epa.gov/p2/grant-reporting](https://www.epa.gov/p2/grant-reporting)

**Getting Started**

Use the tabs below from left to right. Full instructions appear on each tab:

1. The **Grant Project Data** tab combines data entry and an automatic list. On top is the data entry area for grant/grantee information. Below that is an auto-generated tracking list that will pull in business establishment names you've entered in the numbered business establishment tabs.
2. The **Results Summary** tab automatically aggregates results from data entered in the Partners tab, Outreach Activities tab, and the numbered business establishment tabs.
3. The **Partners** tab is optional and provides a place to enter information about partners who helped strengthen your ability to provide P2 technical assistance to businesses in disadvantaged communities.
4. The **Outreach Activities** tab is for capturing information about outreach activities, including training, webinars, videos, etc.
5. The **Sample Business Establishment** tab serves as an example of how to sufficiently enter project data on the numbered business establishment tabs.
6. The **numbered** tabs are for data entry of business establishment-level data, one business establishment per numbered tab. While providing the business establishment name is optional, it is beneficial to do so because the Grant Project Data tab displays the name provided and associates it with its numbered tab, which will help you later when you need to find the correct tab for updating the status of follow-up, implementation and results achieved at a specific business establishment. This template has 75 numbered tabs for business establishments; please use a new file if you need more tabs.

*Last Updated: 9/18/2023*

EPA Form 9600-055

**Paperwork Reduction Act Burden Statement**

This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2070-NEW). Responses to this collection of information are mandatory for certain persons, as specified at 42 U.S.C 13101 and 15 U.S.C.3701. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The public reporting and recordkeeping burden for this collection of information is estimated to be approximately 20 hours per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates and any suggested methods for minimizing respondent burden to the Regulatory Support Division Director, U.S. Environmental Protection Agency (2821T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

## P2 IJA Products EJ Grant Reporting Template

<b>How to Use This Tab:</b>	<p>1. Enter Grant/Grantee information in the top section. The Recipient and Project Number information will automatically appear on the other tabs in this workbook.</p> <p>2. The Business Establishments in the bottom section will be populated automatically as you fill out the numbered business establishment tabs. This list will help you later to find business establishments when updating the status of follow-up, implementation, and results achieved.</p>
<b>Grant Recipient:</b>	
<b>Grant Project Number:</b>	
<b>Grant Award Date:</b>	
<b>Grantee Contact Name:</b>	
<b>Grantee Contact Phone Number:</b>	
<b>Grantee Contact E-mail:</b>	
<b>Grantee State/Tribe:</b>	

Business Establishment Names on Numbered Tabs <i>(populated automatically)</i>	
Business Establishment 1:	
Business Establishment 2:	
Business Establishment 3:	
Business Establishment 4:	
Business Establishment 5:	
Business Establishment 6:	
Business Establishment 7:	
Business Establishment 8:	
Business Establishment 9:	
Business Establishment 10:	
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Business Establishment 74:	
Business Establishment 75:	

P2 IJIA Products EJ Grant Reporting Template

Aggregate Output Measures from Business Establishments											
How to Use this Tab:		This read-only tab summarizes the aggregate outcomes being achieved in this grant project using information entered on the other tabs in this workbook.									
Grant Recipient:											
Grant Project Number:											
Federal Fiscal Year (Oct 1. - Sep 30)	Production				Sales / Marketing					Purchased/Used	
	Total Number of Products Reformulated / Redesigned	Total Number of Products Newly Certified (or in Process)	Total Increase in Number of Products Offered for Sale	Actions Including New Advertising or Outreach	Total Increase in Number of Products Sold	Total Increase in Shelf Space (linear feet)	Actions Including New Advertising, Outreach, or Signage	Increase in Sales Volume (units)	Increase in Sales Volume (dollars)	Total Number of Products Adopted for Use in Operations and Maintenance	Actions Including Adoption of Green Purchasing Programs
2023	0	0	0	0	0	0	0	0	\$0	0	0
2024	0	0	0	0	0	0	0	0	\$0	0	0
2025	0	0	0	0	0	0	0	0	\$0	0	0
2026	0	0	0	0	0	0	0	0	\$0	0	0
2027	0	0	0	0	0	0	0	0	\$0	0	0
2028	0	0	0	0	0	0	0	0	\$0	0	0

Additional Aggregate Output Measures	
Number of partner organizations.	0
Number of outreach activities and informational materials that widely share P2 practices.	0
Number of business establishments reached through outreach activities and informational materials.	0
Number of business establishments provided technical assistance.	0
Percentage of business establishments provided technical assistance that the grantee followed up with (should be 100%) by phone call, visit, letter or email) to determine which P2 practices were implemented.	0%
Percentage of business establishments that implemented at least one new P2 practice as a result of the technical assistance provided by the grantee.	0%
Number of case studies describing specific P2 best practices implemented through the grant.	0

P2 IJA Products EJ Grant Reporting Template

How to Use this Tab:

This tab is optional. Enter information about the partners who helped strengthen your ability to provide P2 technical assistance to businesses in disadvantaged communities. The number of partners you entered will be captured automatically on the "Results Summary" tab.

Grant Recipient:

Grant Project Number:

	Name of Partner Organization/Entity <i>(Optional)</i>	Organization Type <i>(Optional. Use dropdown)</i>	Partnership Description <i>(Optional)</i>	Point of Contact Name <i>(Optional)</i>	Point of Contact Email <i>(Optional)</i>	Point of Contact Phone <i>(Optional)</i>
	(Ex: Household & Commercial Products Association)	Trade Association	HCPA provided details about the companies they represent & distributed materials created under this grant.	John Doe	john.doe@hcpa.org	(212) 555-1212
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## P2 IJA Products EJ Grant Reporting Template

## How to Use this Tab:

Use this tab to report on outreach activities, including training, webinars, videos, or other outreach.

1. List the title of each activity and identify the type of activity using the dropdown provided.
2. Enter the date of the event, if applicable. Include just the first day for multi-day events.
3. Provide information on the topics covered and number of business established in attendance/reached.
4. If applicable, include a link to online content or attach the content created to the report submission.

The five sample records may be used as a guide.

Grant Recipient:

Grant Project Number:

Outreach Activity Name	Activity Type (use dropdown provided)	Activity Date (if applicable)	Informative Description of Activity and Topics Covered	# of Business Establishments in Attendance / Reached	Materials Developed If online content was developed, provide a link for EPA to view, download and share. Otherwise, include attachments with your report submission and supply the file name(s) here or a description of file(s).
(Ex: How to Find Safer Cleaners)	Training	9/1/2023	Training for janitorial staff on how to find Ecolabel cleaners using online tools	12	Training slide deck attached
(Ex: Green Cleaning Webinar)	Webinar	9/7/2023	How to apply green cleaning methods and use Ecolabel products at businesses for similar costs and with reduced risks to customers	40	<a href="http://stateagency/webinars">http://stateagency/webinars</a>
(Ex: Cleaners Go Green with P2 factsheet)	Outreach Document	n/a	Brief factsheet on how janitorial staff can go green using Safer Choice products, showcasing real-world examples	1,000	<a href="http://stateagency/factsheets">http://stateagency/factsheets</a>
(Ex: Demonstration of Safer Choice Products)	Outreach Demonstration	11/17/2022	Demonstrate effectiveness of a suite of Safer Choice certified products to janitorial contractors for the Des Moines school system	15	None
(Ex: Instagram post about Demonstration of Safer Choice Products)	Social Media Content	11/19/2022	Posted photo of demonstration on Instagram with a link to recorded video from the event	4,000	<a href="https://www.instagram.com/p/CthEkNeg">instagram.com/p/CthEkNeg</a>
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1. Enter Business Establishment Name and provide information about the business establishment's impact on disadvantaged communities. For the Business Establishment Name, if you do not wish to disclose the actual name, enter a meaningful phrase so that you will be able to find it when you search for the business establishment. For the Business Establishment Address, enter the address of the business establishment. For the Business Establishment Date(s), enter the date(s) you followed up with the business establishment. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results of Actions" page until you click on the "Save" button.

2. On P2 Actions and Outcomes, enter each P2 action implemented. Select the role. Manufacturer (and which type of associated product - production, certification, or marketing), Distributor/Retailer, or Purchaser/Hu. Based on the selection made, certain columns will show. Fill out all non-grayed-out cells. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results of Actions" page.

3. Cells will be highlighted yellow if your outcome is different than the expected input type (e.g., lost instead of numbers). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

The information in the two cells below is populated automatically from Grant Project Data tab

Sample Recipient	
12345678	

The information in the two cells below is populated automatically from Grant Project Data tab

Sample Recipient	
12345678	

Note: If copy-pasting into merged cells below, click this header for help text.

Note: If copy-pasting into merged cells below, click this header for help text.

Business Establishment Name <b>Business Establishment Contact Information</b> <b>Business Establishment City (optional)</b> <b>Business Establishment State (optional)</b> <b>MARS Code (Use 1 to 6 in the MARS report summary)</b>	Business Establishment Address <b>Business Establishment City (optional)</b> <b>Business Establishment State (optional)</b> <b>Business Establishment Zip (optional)</b>	Business Establishment Phone Number <b>Business Establishment Email (optional)</b>	Business Establishment Website (optional)	Business Establishment Type (optional)	Business Establishment NAICS Code (optional)	Business Establishment SIC Code (optional)	Business Establishment FIPS Code (optional)	Business Establishment County (optional)	Business Establishment ZIP Code (optional)	Business Establishment Latitude (optional)	Business Establishment Longitude (optional)	Business Establishment Status (optional)	Business Establishment Notes (optional)	Business Establishment Comments (optional)	Business Establishment Other Information (optional)	Business Establishment Other Comments (optional)	Business Establishment Other Notes (optional)	Business Establishment Other Data (optional)	Business Establishment Other Fields (optional)	Business Establishment Other Values (optional)	Business Establishment Other Attributes (optional)	Business Establishment Other Properties (optional)	Business Establishment Other Methods (optional)	Business Establishment Other Functions (optional)	Business Establishment Other Operations (optional)	Business Establishment Other Processes (optional)	Business Establishment Other Tasks (optional)	Business Establishment Other Actions (optional)	Business Establishment Other Events (optional)	Business Establishment Other Triggers (optional)	Business Establishment Other Rules (optional)	Business Establishment Other Policies (optional)	Business Establishment Other Standards (optional)	Business Establishment Other Guidelines (optional)	Business Establishment Other Procedures (optional)	Business Establishment Other Protocols (optional)	Business Establishment Other Practices (optional)	Business Establishment Other Techniques (optional)	Business Establishment Other Tools (optional)	Business Establishment Other Equipment (optional)	Business Establishment Other Materials (optional)	Business Establishment Other Supplies (optional)	Business Establishment Other Resources (optional)	Business Establishment Other Assets (optional)	Business Establishment Other Liabilities (optional)	Business Establishment Other Risks (optional)	Business Establishment Other Opportunities (optional)	Business Establishment Other Challenges (optional)	Business Establishment Other Obstacles (optional)	Business Establishment Other Barriers (optional)	Business Establishment Other Constraints (optional)	Business Establishment Other Limitations (optional)	Business Establishment Other Restrictions (optional)	Business Establishment Other Prohibitions (optional)	Business Establishment Other Bans (optional)	Business Establishment Other Embargos (optional)	Business Establishment Other Sanctions (optional)	Business Establishment Other Trade Restrictions (optional)	Business Establishment Other Tariffs (optional)	Business Establishment Other Duties (optional)	Business Establishment Other Taxes (optional)	Business Establishment Other Fees (optional)	Business Establishment Other Charges (optional)	Business Establishment Other Costs (optional)	Business Establishment Other Expenses (optional)	Business Establishment Other Income (optional)	Business Establishment Other Revenue (optional)	Business Establishment Other Profits (optional)	Business Establishment Other Losses (optional)	Business Establishment Other Gains (optional)	Business Establishment Other Returns (optional)	Business Establishment Other Yields (optional)	Business Establishment Other Outputs (optional)	Business Establishment Other Products (optional)	Business Establishment Other Services (optional)	Business Establishment Other Goods (optional)	Business Establishment Other Commodities (optional)	Business Establishment Other Securities (optional)	Business Establishment Other Financial Instruments (optional)	Business Establishment Other Derivatives (optional)	Business Establishment Other Options (optional)	Business Establishment Other Futures (optional)	Business Establishment Other Swaps (optional)	Business Establishment Other Forwards (optional)	Business Establishment Other Letters of Credit (optional)	Business Establishment Other Bills of Lading (optional)	Business Establishment Other Warehouse Receipts (optional)	Business Establishment Other Certificates of Origin (optional)	Business Establishment Other Inspection Certificates (optional)	Business Establishment Other Quality Certificates (optional)	Business Establishment Other Safety Certificates (optional)	Business Establishment Other Health Certificates (optional)	Business Establishment Other Environmental Certificates (optional)	Business Establishment Other Performance Certificates (optional)	Business Establishment Other Compliance Certificates (optional)	Business Establishment Other Accreditation Certificates (optional)	Business Establishment Other Certification Certificates (optional)	Business Establishment Other Registration Certificates (optional)	Business Establishment Other Licensing Certificates (optional)	Business Establishment Other Authorization Certificates (optional)	Business Establishment Other Approval Certificates (optional)	Business Establishment Other Consent Certificates (optional)	Business Establishment Other Agreement Certificates (optional)	Business Establishment Other Understanding Certificates (optional)	Business Establishment Other Acknowledgment Certificates (optional)	Business Establishment Other Receipt Certificates (optional)	Business Establishment Other Release Certificates (optional)	Business Establishment Other Discharge Certificates (optional)	Business Establishment Other Satisfaction Certificates (optional)	Business Establishment Other Completion Certificates (optional)	Business Establishment Other Finalization Certificates (optional)	Business Establishment Other Closure Certificates (optional)	Business Establishment Other Termination Certificates (optional)	Business Establishment Other Cancellation Certificates (optional)	Business Establishment Other Revocation Certificates (optional)	Business Establishment Other Annulment Certificates (optional)	Business Establishment Other Voidance Certificates (optional)	Business Establishment Other Invalidation Certificates (optional)	Business Establishment Other Nullification Certificates (optional)	Business Establishment Other Rescission Certificates (optional)	Business Establishment Other Reversal Certificates (optional)	Business Establishment Other Undo Certificates (optional)	Business Establishment Other Redo Certificates (optional)	Business Establishment Other Repeat Certificates (optional)	Business Establishment Other Retry Certificates (optional)	Business Establishment Other Retake Certificates (optional)	Business Establishment Other Retest Certificates (optional)	Business Establishment Other Retrain Certificates (optional)	Business Establishment Other Retire Certificates (optional)	Business Establishment Other Retiree Certificates (optional)	Business Establishment Other Retirement Certificates (optional)	Business Establishment Other Retirement Plan Certificates (optional)	Business Establishment Other Retirement Savings Certificates (optional)	Business Establishment Other Retirement Income Certificates (optional)	Business Establishment Other Retirement Benefits Certificates (optional)	Business Establishment Other Retirement Pensions Certificates (optional)	Business Establishment Other Retirement Annuities Certificates (optional)	Business Establishment Other Retirement IRAs Certificates (optional)	Business Establishment Other Retirement 401(k)s Certificates (optional)	Business Establishment Other Retirement 403(b)s Certificates (optional)	Business Establishment Other Retirement 529s Certificates (optional)	Business Establishment Other Retirement 527s Certificates (optional)	Business Establishment Other Retirement 501(c)(3)s Certificates (optional)	Business Establishment Other Retirement 501(c)(29)s Certificates (optional)	Business Establishment Other Retirement 501(c)(28)s Certificates (optional)	Business Establishment Other Retirement 501(c)(27)s Certificates (optional)	Business Establishment Other Retirement 501(c)(26)s Certificates (optional)	Business Establishment Other Retirement 501(c)(25)s Certificates (optional)	Business Establishment Other Retirement 501(c)(24)s Certificates (optional)	Business Establishment Other Retirement 501(c)(23)s Certificates (optional)	Business Establishment Other Retirement 501(c)(22)s Certificates (optional)	Business Establishment Other Retirement 501(c)(21)s Certificates (optional)	Business Establishment Other Retirement 501(c)(20)s Certificates (optional)	Business Establishment Other Retirement 501(c)(19)s Certificates (optional)	Business Establishment Other Retirement 501(c)(18)s Certificates (optional)	Business Establishment Other Retirement 501(c)(17)s Certificates (optional)	Business Establishment Other Retirement 501(c)(16)s Certificates (optional)	Business Establishment Other Retirement 501(c)(15)s Certificates (optional)	Business Establishment Other Retirement 501(c)(14)s Certificates (optional)	Business Establishment Other Retirement 501(c)(13)s Certificates (optional)	Business Establishment Other Retirement 501(c)(12)s Certificates (optional)	Business Establishment Other Retirement 501(c)(11)s Certificates (optional)	Business Establishment Other Retirement 501(c)(10)s Certificates (optional)	Business Establishment Other Retirement 501(c)(9)s Certificates (optional)	Business Establishment Other Retirement 501(c)(8)s Certificates (optional)	Business Establishment Other Retirement 501(c)(7)s Certificates (optional)	Business Establishment Other Retirement 501(c)(6)s Certificates (optional)
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(NOTE: This example has been constructed to demonstrate how each of the types of projects might be entered; it is unlikely that one business establishment will be conducting each of these types of P2 actions.)

[illegible]

**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

1. Enter Business Establishment Name. If you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when needed. You may also enter "Other" if you are unable to identify a suitable proxy or you prefer to keep your identity confidential. If you select "Other," please explain the reason in the Remarks section.
2. Enter the NAICS code for the primary activity of the business establishment. Select from the dropdown menu. If you are unsure of the NAICS code, click on the link ([NAICS Codes](#)) on which you followed up with the business establishment. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results by Activity" page unless you have entered a valid NAICS code.
3. Under P2 Actions and Outcomes, enter each P2 action implemented by the business establishment. Select the role (Manufacturer [and] type of associated product - production, certification, or marketing), Distributor/Retailer, or Purchaser/User. Based on the selection made, certain columns will show. Fill out all non-grayed-out cells. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results by Date" page.
4. Cells will be highlighted yellow if your outcome is different than the expected input type (e.g., text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

The information in the two cells below is populated automatically from Grant Project Data tab.

The information in the two cells below is populated automatically from Grant Project Data tab.

Grant Recipient	
Grant Project Number	

Note: If copy-pasting into merged cells below, click this header for help text.

Note: If copy-pasting into merged cells below, click this header for help text.

[illegible]





<b>Grant Information</b>	The information in the two cells below is populated automatically from Grant Project Data tab.
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**Business Establishment Information** *After 15 days, location data received calls below, click this header for help text*

Business Establishment Name	
Business Establishment Contact (optional)	

Business Establishment City (optional)	
Business Establishment State (2-letter abbreviation)	

Is the business establishment located in, adjacent to, or otherwise located in a disadvantaged community?	
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How do the recommended P2 actions identified below benefit

Date(s) of Follow-up (mm/dd/yyyy)				
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from the drop-down provided:	

[illegible]

**Description of Barriers to Implementation (optional)**  
If there were recommended actions that this business establishment did not implement, please describe any barriers to implementation (e.g.,

Description of Planned P2 Actions Within 5 Years (optional)	
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[illegible]

Name of Ecolabel	Date Implemented	Federal Fiscal Year	Number of Products Reformulated /	Number of Products Newly Certified or Is	Increase in Number of	New	Increase in Number of	Increase in Shelf	New Advertising	Increase in Annual	Number of Products Adopted for Use in Operations and	Unit of Measure	Adoption of Green	Case Study	Link to Case Study
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[illegible]



**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

1. Enter Business Establishment Name. If you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when needed. You may also enter "Other" if you are unable to identify a suitable proxy or if you have no specific location. If you select "Other," please explain the basis for your selection in the Remarks section. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results by Location" page.
2. Under P2 Actions and Outcomes, enter each P2 action implemented by the business establishment. Select the role Manufacturer (and which type of associated product - production, certification, or marketing), Distributor/Retailer, or Purchaser/User. Based on the selection made, certain columns will show up. Fill out all non-grayed-out cells **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results by Location" page.
3. Cells will be highlighted yellow if your outcome is different than the expected input type (e.g., text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

The information in the two cells below is populated automatically from Grant Project Data tab.

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Grant Recipient  
Project Number

Note: If copy-pasting into merged cells below, click this header for help text.

Note: If copy-pasting into merged cells below, click this header for help text.

Business Establishment Name  
Business Establishment Contact (optional)

Business Establishment City (optional)

NAICS Code (3 to 6 digits) NAICS Search (website)

1000

Is the business establishment located in, adjacent to, or otherwise impacting a disadvantaged community?

1992 / 1993 / Continuity

How do the recommended P2 actions identified below benefit disadvantaged communities?

Date(s) of Follow-up (mm/dd/yyyy)

**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity listed on the "Outreach Activities" tab, indicate the activity by choosing it

from the drop-down provided:

[Description of funding Mechanism \(optional\) \(KPA is exploring ways to](#)

Description of Barriers to Implementation (optional)

If there were recommended actions that this business establishment did not implement, please describe any barriers to implementation (e.g., cost, time, need for training, etc.).

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Description of Planned P2 Actions Within 5 Years (optional)

If the business establishment intends to implement additional actions within the next 5 years, please describe them here:

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Scroll right to see all columns (cols. B through AE) →

[illegible]

1. Enter Business Establishment Information and provide information about the business establishment's impact on disadvantaged communities. For Business Establishment Name, if you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when you need it. For Business Establishment Address, enter the street address of the business establishment. Enter the City, State, and Zip Code. Enter the Date(s) on which you followed up with the business establishment. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results" page until you click on the "Save" button.

2. Under P2 Actions and Outcomes, enter each P2 action implemented by the business establishment. Select the role. Manufacturer (and which type of associated product - production, certification, or marketing); Distributor/Retailer; or Purchaser/Author. Based on the selection made, certain columns will appear. Fill out all non-grayed out cells. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results" page.

3. Cells will be highlighted yellow if your response is different than the expected input type (e.g., text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

The information in the two cells below is populated automatically from Grant Project Data tab.

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Grant Recipient  
Project Number

Note: If copy-pasting into merged cells below, click this header for help text.

Note: If copy-pasting into merged cells below, click this header for help text.

Business Establishment Name
Business Establishment Contact (optional)

Business Establishment City (optional) \_\_\_\_\_

NAICS Code (3 to 6 digits) NAICS Search (optional)

1. [Return to Table of Contents](#)

Is the business establishment located in, adjacent to, or otherwise impacting a disadvantaged community?

142 / 143 / 144

How do the recommended P2 actions identified below benefit disadvantaged communities?

Date(s) of Follow-up (mm/dd/yyyy)

**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity listed on the "Outreach Activities" tab, indicate the activity by choosing it.

from the drop-down provided:

description of funding Mechanism (optional) (UFA is exploring ways to

Description of Barriers to Implementation (optional)

there were recommended actions that this business establishment did not implement, please describe any barriers to implementation (e.g., cost, time, workload, limited resources, etc.).

\_\_\_\_\_

Description of Planned P2 Actions Within 5 Years (optional)

If the business establishment intends to implement additional actions within the next 5 years, please describe them here.

Scroll right to see all columns (cols. B through AB) →

Scroll right to see all columns (cols. B through AB) →

[illegible]

**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

**For Business Establishment Informs**, if you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when you need it. For example, you can enter "ABC Company, Inc." if you do not want to disclose the actual name, but you know the name of the entity (or the state) on which you followed up with the business establishment. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results of Actions" page.

**Under P2 Actions and Outcomes**, enter each P2 action implemented by the business establishment. Select the role (Manufacturer (and which type of associated product - production, certification, or marketing), Distributor/Retailer, or Purchaser/User. Based on the selection made, certain columns will show. Fill out all non-grayed-out cells. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results of Actions" page.

**Cells will be highlighted yellow** if your outcome is different than the expected input type (e.g. text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

The information in the two cells below is populated automatically from Grant Project Data tab

The information in the two cells below is populated automatically from Grant Project Data tab

Grant Recipient  
Project Number

Note: If copy-pasting into merged cells below, click this header for help text.

Note: If copy-pasting into merged cells below, click this header for help text.

[NAICS Code \(3 to 6 digits\) NAICS Search Results](#)

Other/were impacting a disadvantaged community? (Yes / No / Unknown)

How do the recommended P2 actions identified below benefit disadvantaged communities?

Date(s) of Follow-up (mm/dd/yyyy)

noted on the "Outreach Activities" tab, indicate the activity by choosing it from the drop-down provided:

Description of funding Mechanism (optional) (EDA is exploring ways to


If there were recommended actions that the business environment did not implement, please describe any barriers to implementation (e.g., cost, time, market-related, low interest).

Description of Planned R? Actions Within 5 Years (continued)

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Scroll right to see all columns (cols. B through AB) —>

[illegible]



**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

1. Enter Business Establishment Name. If you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when needed. You may also enter "Other" if you are unable to identify a suitable proxy or you want to keep the name confidential. If you select "Other," please explain the reason in the Remarks section.
2. Enter NAICS Code. Select the appropriate code from the dropdown menu. The NAICS Code determines which questions are asked about your facility (or site) as they follow up with you after you complete the form. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results by Facility" page unless you have entered a NAICS Code.
3. Under P2 Actions and Outcomes, enter each P2 action implemented by the business establishment. Select the role Manufacturer (and which type of associated product - production, certification, or marketing), Distributor/Retailer, or Purchaser/User. Based on the selection made, certain columns will show up. Fill out all non-grayed-out cells **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results by Facility" page.
4. Cells will be highlighted yellow if your outcome is different than the expected input type (e.g., text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

The information in the two cells below is populated automatically from Grant Project Data tab.

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Grant Recipient  
Project Number

Note: If copy-pasting into merged cells below, click this header for help text.

Note: If copy-pasting into merged cells below, click this header for help text.

Business Establishment Name  
Business Establishment Contact (optional)

Business Establishment City (optional)

Business Establishment State (2-letter abbreviation)

[NACS Code \(3 to 6 digit\) NACS Search Results](#)

Is the business establishment located in, adjacent to, or otherwise benefiting a distressed community?

Otherwise impacting a disadvantaged community?  
(Yes / No / Unknown)

How do the recommended P2 actions identified below benefit disadvantaged communities?

Date(s) of Follow-up (mm/dd/yyyy)

**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity

from the drop-down provided:

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Description of funding Mechanism (optional) EPA is exploring ways to

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**Description of Barriers to Implementation (optional)**  
If there were recommended actions that this business establishment did

If any of the above barriers to implementation are present, please describe any barriers to implementation (e.g., cost, long feedback period, low priority).

---

Description of Planned P2 Actions Within 5 Years (optional)

If the business establishment intends to implement additional actions within the next 5 years, please describe them here.

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### 3 Actions and Outcomes

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Scroll right to see all columns (cols. B through AB) →

[illegible]







**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

**For Business Establishment Informs**, if you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when you need it. For example, you could enter "ABC Company, Inc." if you do not wish to disclose the actual name of the business. If you do not wish to provide the actual name, you must also provide the state(s) on which you followed up with the business establishment. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results by Business Establishment" page.

**Under P2 Actions and Outcomes**, enter each P2 action implemented by the business establishment. Select the role: Manufacturer (and which type of associated product - production, certification, or marketing); Distributor/Retailer, or Purchaser/User. Based on the selection made, certain columns will show. Fill out all non-grayed-out cells. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results by Business Establishment" page.

**Cells will be highlighted yellow** if your outcome is different than the expected input type (e.g. text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

The information in the two cells below is populated automatically from Grant Project Data tab.

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Grant Recipient  
Project Number

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**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity noted on the "Outreach Activities" tab, indicate the activity by choosing it

\_\_\_\_\_

\_\_\_\_\_

If there were recommended actions that this business establishment did not implement, please describe any barriers to implementation (e.g., cost, time, workload, need, low interest):

Description of Planned P2 Actions Within 5 Years (optional)

Scroll right to see all columns (cols. B through AE) →

Scroll right to see all columns (cols. B through AE) →

[illegible]





P2 IIA Products (I Grant) Business Establishment IS

1. Enter Business Establishment Information and provide information about the business establishment's impact on disadvantaged communities. For the Business Establishment Name, if you do not wish to disclose the actual name, enter a meaningful proxy so that you will be able to find it when reviewing follow-up information. If you made contact as an activity on the "Outreach Activities" tab, select it from the drop-down provided. Enter the date(s) on which you followed up with the business establishment. IMPORTANT: Name of your actions and outcomes will be reflected on the "Results Summary" tab and you enter at least one follow-up date.

2. Under P2 Actions and Outcomes, enter each P2 action implemented by the business establishment. Select the role, Manufacturer (and which type of associated project - production, certification, or marketing), Distributor/Retailer, or Purchaser/User. Based on the selection made, certain columns will gray out. Fill out all grayed-out cells. IMPORTANT: You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results Summary" tab.

3. Cells will be highlighted yellow if your response is different than the expected input type (e.g., text instead of numbers). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

Grant Information		The information in the box cells below is populated automatically from Grant Project Data tab.	
Grant Recipient			
Grant Project Number			
Business Establishment Information			
Notes: If copy-pasting into merged cells below, click this header for help text.			
Business Establishment Name (optional)			
Business Establishment City (optional)			
Business Establishment State (3 letter abbreviation)			
NAICS Code (2 to 6 digit NAICS Search Results)			
Is the business establishment located in, adjacent to, or otherwise impacting a disadvantaged community? (Yes / No / Unknown)			
How do the recommended P2 actions identified below benefit disadvantaged communities?			
Date(s) of Follow-up (mm/dd/yyyy)			
Outreach Activity (optional)			
If you made contact with the business establishment through an activity listed on the "Outreach Activities" tab, indicate the activity by choosing from the drop-down provided.			
Description of Existing Obstacles/Barriers/CRDs to implementing action (s)			
Description of Barriers to Implementation (optional)			
If there were recommended actions that the business establishment did not implement, please describe any barriers to implementation (e.g., cost, long product period, low profits).			
Description of Planned P2 Actions Within 5 Years (optional)			
If the business establishment intends to implement additional actions within the next 5 years, please describe them here.			

P2 Actions and Outcomes																								
Scroll right to see all columns (cols. 9 through 46) -->																								
Informative Description of P2 Action Implemented	Role	Product Description	Name of Entity or Standard (if applicable)	Date Implemented (Click header for help text)	Follow-Up Date (Year collected)	Manufacturer				Marketing		Distributor/Retailer				Sales		Purchaser/User						
						Number of Products Reproduced / Reimagined / Recycled (Click header for help text)	Increase in Annual Production Volume	Unit of Measure	Projected / Actual	Certification Status	Number of Products Newly Certified or in Process (Click header for help text)	Increase in Number of Products Offered for Sale (Click header for help text)	New Advertising or Outreach?	Increase in Number of Products Sold (Click header for help text)	Increase in Shelf Space (Square Feet)	New Advertising, Outreach, or Outreach? (Click header for help text)	Increase in Annual Sales Volume (Click header for help text)	Unit of Measure	Projected / Actual	Number of Products Adopted for Use in Operations and Maintenance (Click header for help text)	Annual Volume of Products Adopted	Unit of Measure (e.g., number, etc., gallons)	Adoption of Green Purchasing Program?	Description of the Green Purchasing Program
												</												

**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

**For Business Establishment Informs**, if you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when you need it. For example, you may enter "ABC Company, Inc." if you do not wish to disclose the actual name of the business. If you do not wish to disclose the actual name, you must enter the actual name of the business in the "Comments" section of the form. The actual name of the business will be reflected on the "Results" section of the form.

**For Business Establishment Informs**, if you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when you need it. For example, you may enter "ABC Company, Inc." if you do not wish to disclose the actual name of the business. If you do not wish to disclose the actual name, you must enter the actual name of the business in the "Comments" section of the form. The actual name of the business will be reflected on the "Results" section of the form.

**Under P2 Actions and Outcomes**, enter each P2 action implemented by the business establishment. Select the role: Manufacturer (and which type of associated product - production, certification, or marketing); Distributor/Retailer, or Purchaser/User. Based on the selection made, certain columns will show. Fill out all non-grayed-out cells. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results" section of the form.

**Cells will be highlighted yellow if your response is different than the expected input type (e.g., text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.**

The information in the two cells below is populated automatically from Grant Project Data tab.

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Grant Recipient  
Project Number

Note: If copy-pasting into merged cells below, click this header for help text.

Note: If copy-pasting into merged cells below, click this header for help text.

Business Establishment Name
Business Establishment Contact (optional)

Business Establishment City (optional)

Business Establishment State (2-letter abbreviation)

NAICS Code (3 to 6 digits) [NAICS Search \(website\)](#)

Is the business establishment located in, adjacent to, or otherwise benefiting a disadvantaged community?

Other/wide impacting a disadvantaged community?	(Yes / No / Unknown)
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[illegible]

How do the recommended P2 actions identified below benefit disadvantaged communities?

\_\_\_\_\_

[illegible]

**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity

noted on the "Outreach Activities" tab, indicate the activity by choosing it from the drop-down provided:

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Description of funding Mechanism (optional) (EPA is exploring ways to

\_\_\_\_\_


**Description of Barriers to Implementation (optional)**  
 If there were recommended without that this business establishment did

If you have not implemented, please describe any barriers to implementation (e.g., cost, time, staff, space, etc.).

---

Description of Planned P2 Actions Within 5 Years (optional)

If the business establishment intends to implement additional actions within the next 5 years, please describe them here.

\_\_\_\_\_

### 03 Actions and Outcomes

Scroll right to see all columns (cols. B through AD) →

[illegible]

1. Enter Business Establishment Name and provide information about the business establishment's impact on disadvantaged communities. For the Business Establishment Name, if you do not wish to disclose the actual name, enter a meaningful phrase so that you will be able to find it when you search for the business establishment. Enter the Business Establishment Address, City, State, and Zip Code. Enter the Date the business establishment was established. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results Dashboard" tab until you enter at least one business establishment.

2. Under 2D Actions and Outcomes, enter each 2D action implemented by the business establishment. Select the role: Manufacturer (and which type of product) or Distributor/Wholesaler or Retailer. Select the type of action: New, Existing, or Planned. Select the type of outcome: New, Existing, or Planned. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results Dashboard" tab.

3. Cells will be highlighted yellow if your response is different than the expected input type (e.g., text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

The information in the two cells below is populated automatically from Grant Project Data tab.

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Grant Recipient  
Project Number

Note: If copy-pasting into merged cells below, click this header for help text.

Note: If copy-pasting into merged cells below, click this header for help text.

Business Establishment Name  
Business Establishment Contact (optional)

Business Establishment City (optional)

Business Establishment State (2-letter abbreviation)

[NACS Code \(3 to 6 digit\) NACS Search Results](#)

Is the business establishment located in, adjacent to, or otherwise benefiting a distressed community?

Otherwise impacting a disadvantaged community?  
(Yes / No / Unknown)

How do the recommended P2 actions identified below benefit disadvantaged communities?

Date(s) of Follow-up (mm/dd/yyyy)

**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity

from the drop-down provided:

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Description of funding Mechanism (optional) EPA is exploring ways to

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**Description of Barriers to Implementation (optional)**  
If there were recommended actions that this business establishment did

If any of the above barriers to implementation are present, please describe any barriers to implementation (e.g., cost, long feedback period, low priority).

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Description of Planned P2 Actions Within 5 Years (optional)

If the business establishment intends to implement additional actions within the next 5 years, please describe them here.

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### 3 Actions and Outcomes

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**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

1. Enter Business Establishment Name. If you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when needed. You may also enter "Other" if you are unable to identify a suitable proxy or if you have no specific location. If you select "Other," please explain the basis for your selection in the Remarks section. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results by Location" page if you select "Other."
2. Under P2 Actions and Outcomes, enter each P2 action implemented by the business establishment. Select the role (Manufacturer [and which type of associated product - production, certification, or marketing], Distributor/Retailer, or Purchaser/User). Based on the selection made, certain columns will show up. Fill out all non-grayed-out cells **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results by Location" page.
3. Cells will be highlighted yellow if your outcome is different than the expected input type (e.g., text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

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Grant Recipient  
Project Number

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**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

1. Enter Business Establishment Name. If you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when needed. You may also enter "Other" if you are unable to identify a suitable proxy. **NOTE:** The actual name of the business establishment must be entered in the "Comments" section of the form. If you have more than one business establishment, please indicate which establishment you are referring to by entering its ID number in the "Establishment ID" field.
2. Enter the type of business establishment. Select from the following categories: Manufacturer; Retailer; Distributor; Other. **NOTE:** If you select "Manufacturer," you must also enter the SIC code of your business establishment in the "SIC Code" field. If you select "Retailer," you must also enter the NAICS code of your business establishment in the "NAICS Code" field. If you select "Distributor," you must also enter the NAICS code of your business establishment in the "NAICS Code" field. If you select "Other," you must also enter the NAICS code of your business establishment in the "NAICS Code" field.
3. Enter the address of the business establishment. Enter the street address, city, state, and zip code. If the business establishment has multiple locations, enter the address of the location that is closest to the community being assessed. If the business establishment is located outside the community being assessed, enter "Outside Community." If the business establishment is located inside the community being assessed, enter "Inside Community."
4. Enter the date of construction or renovation. Enter the year and month. If the business establishment was constructed or renovated before 1980, enter "Before 1980." If the business establishment was constructed or renovated after 1980, enter the year and month. If the business establishment was constructed or renovated before 1980, enter "Before 1980." If the business establishment was constructed or renovated after 1980, enter the year and month.
5. Enter the type of construction or renovation. Select from the following categories: New Construction; Renovation; Addition; Expansion; Other. If you select "New Construction," "Renovation," "Addition," or "Expansion," you must also enter the NAICS code of your business establishment in the "NAICS Code" field. If you select "Other," you must also enter the NAICS code of your business establishment in the "NAICS Code" field.
6. Enter the value of construction or renovation. Enter the dollar amount. If the value is less than \$100,000, enter "Less Than \$100,000." If the value is \$100,000 or more, enter the dollar amount. If the value is \$100,000 or more, enter the dollar amount.
7. Enter the number of jobs created or retained. Enter the number of jobs. If the number of jobs is less than 10, enter "Less Than 10." If the number of jobs is 10 or more, enter the number of jobs. If the number of jobs is 10 or more, enter the number of jobs.
8. Enter the number of jobs lost. Enter the number of jobs. If the number of jobs is less than 10, enter "Less Than 10." If the number of jobs is 10 or more, enter the number of jobs. If the number of jobs is 10 or more, enter the number of jobs.
9. Enter the number of jobs gained. Enter the number of jobs. If the number of jobs is less than 10, enter "Less Than 10." If the number of jobs is 10 or more, enter the number of jobs. If the number of jobs is 10 or more, enter the number of jobs.
10. Enter the number of jobs total. Enter the number of jobs. If the number of jobs is less than 10, enter "Less Than 10." If the number of jobs is 10 or more, enter the number of jobs. If the number of jobs is 10 or more, enter the number of jobs.
11. Enter the number of jobs per employee. Enter the number of jobs per employee. If the number of jobs per employee is less than 1, enter "Less Than 1." If the number of jobs per employee is 1 or more, enter the number of jobs per employee. If the number of jobs per employee is 1 or more, enter the number of jobs per employee.
12. Enter the number of jobs per square foot. Enter the number of jobs per square foot. If the number of jobs per square foot is less than 1, enter "Less Than 1." If the number of jobs per square foot is 1 or more, enter the number of jobs per square foot. If the number of jobs per square foot is 1 or more, enter the number of jobs per square foot.
13. Enter the number of jobs per acre. Enter the number of jobs per acre. If the number of jobs per acre is less than 1, enter "Less Than 1." If the number of jobs per acre is 1 or more, enter the number of jobs per acre. If the number of jobs per acre is 1 or more, enter the number of jobs per acre.
14. Enter the number of jobs per mile. Enter the number of jobs per mile. If the number of jobs per mile is less than 1, enter "Less Than 1." If the number of jobs per mile is 1 or more, enter the number of jobs per mile. If the number of jobs per mile is 1 or more, enter the number of jobs per mile.
15. Enter the number of jobs per population. Enter the number of jobs per population. If the number of jobs per population is less than 1, enter "Less Than 1." If the number of jobs per population is 1 or more, enter the number of jobs per population. If the number of jobs per population is 1 or more, enter the number of jobs per population.
16. Enter the number of jobs per household. Enter the number of jobs per household. If the number of jobs per household is less than 1, enter "Less Than 1." If the number of jobs per household is 1 or more, enter the number of jobs per household. If the number of jobs per household is 1 or more, enter the number of jobs per household.
17. Enter the number of jobs per family. Enter the number of jobs per family. If the number of jobs per family is less than 1, enter "Less Than 1." If the number of jobs per family is 1 or more, enter the number of jobs per family. If the number of jobs per family is 1 or more, enter the number of jobs per family.
18. Enter the number of jobs per person. Enter the number of jobs per person. If the number of jobs per person is less than 1, enter "Less Than 1." If the number of jobs per person is 1 or more, enter the number of jobs per person. If the number of jobs per person is 1 or more, enter the number of jobs per person.
19. Enter the number of jobs per worker. Enter the number of jobs per worker. If the number of jobs per worker is less than 1, enter "Less Than 1." If the number of jobs per worker is 1 or more, enter the number of jobs per worker. If the number of jobs per worker is 1 or more, enter the number of jobs per worker.
20. Enter the number of jobs per manager. Enter the number of jobs per manager. If the number of jobs per manager is less than 1, enter "Less Than 1." If the number of jobs per manager is 1 or more, enter the number of jobs per manager. If the number of jobs per manager is 1 or more, enter the number of jobs per manager.
21. Enter the number of jobs per executive. Enter the number of jobs per executive. If the number of jobs per executive is less than 1, enter "Less Than 1." If the number of jobs per executive is 1 or more, enter the number of jobs per executive. If the number of jobs per executive is 1 or more, enter the number of jobs per executive.
22. Enter the number of jobs per professional. Enter the number of jobs per professional. If the number of jobs per professional is less than 1, enter "Less Than 1." If the number of jobs per professional is 1 or more, enter the number of jobs per professional. If the number of jobs per professional is 1 or more, enter the number of jobs per professional.
23. Enter the number of jobs per technician. Enter the number of jobs per technician. If the number of jobs per technician is less than 1, enter "Less Than 1." If the number of jobs per technician is 1 or more, enter the number of jobs per technician. If the number of jobs per technician is 1 or more, enter the number of jobs per technician.
24. Enter the number of jobs per service worker. Enter the number of jobs per service worker. If the number of jobs per service worker is less than 1, enter "Less Than 1." If the number of jobs per service worker is 1 or more, enter the number of jobs per service worker. If the number of jobs per service worker is 1 or more, enter the number of jobs per service worker.
25. Enter the number of jobs per laborer. Enter the number of jobs per laborer. If the number of jobs per laborer is less than 1, enter "Less Than 1." If the number of jobs per laborer is 1 or more, enter the number of jobs per laborer. If the number of jobs per laborer is 1 or more, enter the number of jobs per laborer.
26. Enter the number of jobs per unskilled worker. Enter the number of jobs per unskilled worker. If the number of jobs per unskilled worker is less than 1, enter "Less Than 1." If the number of jobs per unskilled worker is 1 or more, enter the number of jobs per unskilled worker. If the number of jobs per unskilled worker is 1 or more, enter the number of jobs per unskilled worker.
27. Enter the number of jobs per skilled worker. Enter the number of jobs per skilled worker. If the number of jobs per skilled worker is less than 1, enter "Less Than 1." If the number of jobs per skilled worker is 1 or more, enter the number of jobs per skilled worker. If the number of jobs per skilled worker is 1 or more, enter the number of jobs per skilled worker.
28. Enter the number of jobs per semi-skilled worker. Enter the number of jobs per semi-skilled worker. If the number of jobs per semi-skilled worker is less than 1, enter "Less Than 1." If the number of jobs per semi-skilled worker is 1 or more, enter the number of jobs per semi-skilled worker. If the number of jobs per semi-skilled worker is 1 or more, enter the number of jobs per semi-skilled worker.
29. Enter the number of jobs per entry-level worker. Enter the number of jobs per entry-level worker. If the number of jobs per entry-level worker is less than 1, enter "Less Than 1." If the number of jobs per entry-level worker is 1 or more, enter the number of jobs per entry-level worker. If the number of jobs per entry-level worker is 1 or more, enter the number of jobs per entry-level worker.
30. Enter the number of jobs per mid-level worker. Enter the number of jobs per mid-level worker. If the number of jobs per mid-level worker is less than 1, enter "Less Than 1." If the number of jobs per mid-level worker is 1 or more, enter the number of jobs per mid-level worker. If the number of jobs per mid-level worker is 1 or more, enter the number of jobs per mid-level worker.
31. Enter the number of jobs per senior-level worker. Enter the number of jobs per senior-level worker. If the number of jobs per senior-level worker is less than 1, enter "Less Than 1." If the number of jobs per senior-level worker is 1 or more, enter the number of jobs per senior-level worker. If the number of jobs per senior-level worker is 1 or more, enter the number of jobs per senior-level worker.
32. Enter the number of jobs per top-level worker. Enter the number of jobs per top-level worker. If the number of jobs per top-level worker is less than 1, enter "Less Than 1." If the number of jobs per top-level worker is 1 or more, enter the number of jobs per top-level worker. If the number of jobs per top-level worker is 1 or more, enter the number of jobs per top-level worker.
33. Enter the number of jobs per owner. Enter the number of jobs per owner. If the number of jobs per owner is less than 1, enter "Less Than 1." If the number of jobs per owner is 1 or more, enter the number of jobs per owner. If the number of jobs per owner is 1 or more, enter the number of jobs per owner.
34. Enter the number of jobs per partner. Enter the number of jobs per partner. If the number of jobs per partner is less than 1, enter "Less Than 1." If the number of jobs per partner is 1 or more, enter the number of jobs per partner. If the number of jobs per partner is 1 or more, enter the number of jobs per partner.
35. Enter the number of jobs per director. Enter the number of jobs per director. If the number of jobs per director is less than 1, enter "Less Than 1." If the number of jobs per director is 1 or more, enter the number of jobs per director. If the number of jobs per director is 1 or more, enter the number of jobs per director.
36. Enter the number of jobs per vice president. Enter the number of jobs per vice president. If the number of jobs per vice president is less than 1, enter "Less Than 1." If the number of jobs per vice president is 1 or more, enter the number of jobs per vice president. If the number of jobs per vice president is 1 or more, enter the number of jobs per vice president.
37. Enter the number of jobs per president. Enter the number of jobs per president. If the number of jobs per president is less than 1, enter "Less Than 1." If the number of jobs per president is 1 or more, enter the number of jobs per president. If the number of jobs per president is 1 or more, enter the number of jobs per president.
38. Enter the number of jobs per chief executive officer. Enter the number of jobs per chief executive officer. If the number of jobs per chief executive officer is less than 1, enter "Less Than 1." If the number of jobs per chief executive officer is 1 or more, enter the number of jobs per chief executive officer. If the number of jobs per chief executive officer is 1 or more, enter the number of jobs per chief executive officer.
39. Enter the number of jobs per chief financial officer. Enter the number of jobs per chief financial officer. If the number of jobs per chief financial officer is less than 1, enter "Less Than 1." If the number of jobs per chief financial officer is 1 or more, enter the number of jobs per chief financial officer. If the number of jobs per chief financial officer is 1 or more, enter the number of jobs per chief financial officer.
40. Enter the number of jobs per chief operating officer. Enter the number of jobs per chief operating officer. If the number of jobs per chief operating officer is less than 1, enter "Less Than 1." If the number of jobs per chief operating officer is 1 or more, enter the number of jobs per chief operating officer. If the number of jobs per chief operating officer is 1 or more, enter the number of jobs per chief operating officer.
41. Enter the number of jobs per chief technology officer. Enter the number of jobs per chief technology officer. If the number of jobs per chief technology officer is less than 1, enter "Less Than 1." If the number of jobs per chief technology officer is 1 or more, enter the number of jobs per chief technology officer. If the number of jobs per chief technology officer is 1 or more, enter the number of jobs per chief technology officer.
42. Enter the number of jobs per chief marketing officer. Enter the number of jobs per chief marketing officer. If the number of jobs per chief marketing officer is less than 1, enter "Less Than 1." If the number of jobs per chief marketing officer is 1 or more, enter the number of jobs per chief marketing officer. If the number of jobs per chief marketing officer is 1 or more, enter the number of jobs per chief marketing officer.
43. Enter the number of jobs per chief sales officer. Enter the number of jobs per chief sales officer. If the number of jobs per chief sales officer is less than 1, enter "Less Than 1." If the number of jobs per chief sales officer is 1 or more, enter the number of jobs per chief sales officer. If the number of jobs per chief sales officer is 1 or more, enter the number of jobs per chief sales officer.
44. Enter the number of jobs per chief legal officer. Enter the number of jobs per chief legal officer. If the number of jobs per chief legal officer is less than 1, enter "Less Than 1." If the number of

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	(Yes / No / Unknown)

DISADVANTAGED COMMUNITIES

**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity

\_\_\_\_\_

\_\_\_\_\_

If there were recommended actions that this business establishment did not implement, please describe any barriers to implementation (e.g.,

Description of Planned P2 Actions Within 5 Years (optional)

Scroll right to see all columns (cols. B through AB) →

Scroll right to see all columns (cols. B through AB) →

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**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

1. Enter Business Establishment Name. If you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when needed. You may also enter "Other" if you are unable to identify a suitable proxy or if you have no other information. If you select "Other," please explain the basis for your selection in the Remarks section.
2. Enter Address. This includes the street address, city, state, zip code, and country. If you are unsure of the exact address, enter the best estimate of the location. The address entered here will be reflected on the Results page.
3. Enter Date of Construction. Select the date when construction began. If you are unsure of the exact date, enter the best estimate of the start date. The date entered here will be reflected on the Results page.
4. Under P2 Actions and Outcomes, enter each P2 action implemented by the business establishment. Select the role Manufacturer (and which type of associated product - production, certification, or marketing), Distributor/Retailer, or Purchaser/User. Based on the selection made, certain columns will show up. Fill out all non-grayed-out cells, as appropriate. You must enter the Date Implemented for your actions and outcomes to be reflected on the Results page.
5. Cells will be highlighted yellow if your response is different than the expected input type (e.g., text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

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to the business establishment located in, sufficient to, or

[illegible]

\_\_\_\_\_

If you made contact with the business establishment through an activity noted on the "Outreach Activities" tab, indicate the activity by choosing it

\_\_\_\_\_

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If you have not implemented, please describe any barriers to implementation (e.g., cost, time, staff, space, etc.).

Description of Planned P2 Actions Within 5 Years (optional)

Scroll right to see all columns (cols. B through AE) →

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**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

1. Enter Business Establishment Name. If you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when needed. You may also enter "Other" if you are unable to identify a suitable proxy or if you have no other information. If you select "Other," please explain the basis for your selection in the Remarks section. The remarks section is optional, but we encourage you to provide as much information as possible. Your comments in the Remarks section will be reflected on the Results page.
2. Under P2 Actions and Outcomes, enter each P2 action implemented by the business establishment. Select the role Manufacturer (and which type of associated product - production, certification, or marketing), Distributor/Retailer, or Purchaser/User. Based on the selection made, certain columns will show up. Fill out all non-grayed-out cells, if applicable. You must enter the Date Implemented for your actions and outcomes to be reflected on the Results page.
3. Cells will be highlighted yellow if your response is different than the expected input type (e.g., text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

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	100 / 100 / 100

1000

**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity noted on the "Outreach Activities" tab, indicate the activity by choosing it

\_\_\_\_\_

Description of funding Mechanism (optional) (KPA is exploring ways to

\_\_\_\_\_

Description of Barriers to Implementation (optional)

If there were recommended actions that this business establishment did not implement, please describe any barriers to implementation (e.g., cost, time, workload, need, low interest):

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Description of Planned P2 Actions Within 5 Years (optional)

Scroll right to see all columns (cols. B through AE) →

Scroll right to see all columns (cols. B through AE) →

[illegible]











**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

1. Enter Business Establishment Name. If you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when needed. You may also enter "Other" if you are unable to identify a suitable proxy or you prefer to keep your identity confidential. If you select "Other," please explain the reason in the Remarks section.
2. Enter Address. This includes the street address, city, state, zip code, and country. If you have multiple locations, enter the first location. The date(s) on which you followed up with the business establishment. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results by Date" chart unless you include the date(s).
3. Under P2 Actions and Outcomes, enter each P2 action implemented by the business establishment. Select the role Manufacturer (and which type of associated product - production, certification, or marketing), Distributor/Retailer, or Purchaser/User. Based on the selection made, certain columns will show. Fill out all non-grayed-out cells. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results by Date" chart.
4. Cells will be highlighted yellow if your outcome is different than the expected input type (e.g., text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

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	(Yes / No / Unknown)

DISADVANTAGED COMMUNITIES

**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity

\_\_\_\_\_

\_\_\_\_\_

If there were recommended actions that this business establishment did not implement, please describe any barriers to implementation (e.g.,

Description of Planned P2 Actions Within 5 Years (optional)

Scroll right to see all columns (cols. B through AB) →

Scroll right to see all columns (cols. B through AB) →

[illegible]







**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

1. Enter Business Establishment Name. If you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when needed. You may also enter "Other" if you are unable to identify a suitable proxy or if you have no other information. If you select "Other," please explain the basis for your selection in the Remarks section.
2. Enter Address. This includes the street address, city, state, zip code, and country. If you are unsure of the exact address, please enter the best estimate of the location. The address entered here will be reflected on the Results page.
3. Enter Date of Construction. Select the date when construction began. If you are unsure of the exact date, please enter the best estimate of the start date. The date entered here will be reflected on the Results page.
4. Under P2 Actions and Outcomes, enter each P2 action implemented by the business establishment. Select the role: Manufacturer (and which type of associated product - production, certification, or marketing); Distributor/Retailer; Purchaser/User. Based on the selection made, certain columns will show up. Fill out all non-grayed-out cells, as appropriate. You must enter the Date Implemented for your actions and outcomes to be reflected on the Results page.
5. Cells will be highlighted yellow if your response is different than the expected input type (e.g., text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

The information in the two cells below is populated automatically from Grant Project Data tab.

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Project Number

Note: If copy-pasting into merged cells below, click this header for help text.

Note: If copy-pasting into merged cells below, click this header for help text.

Business Establishment Name \_\_\_\_\_

Business Establishment City (ajpt000a)

Business Establishment State (2-letter abbreviation)

[NACS Code \(3 to 6 digit\) NACS Search Results](#)

Is the business establishment located in, adjacent to, or otherwise benefiting a distressed community?

Otherwise impacting a disadvantaged community?  
(Yes / No / Unknown)

How do the recommended P2 actions identified below benefit disadvantaged communities?

Date(s) of Follow-up (mm/dd/yyyy)

**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity

from the drop-down provided:

---

Description of funding Mechanism (optional) EPA is exploring ways to...

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---

**Description of Barriers to Implementation (optional)**  
 If there were recommended actions that this business establishment did

If any of the above barriers to implementation are present, please describe any barriers to implementation (e.g., cost, long feedback period, low priority).

---

Description of Planned P2 Actions Within 5 Years (optional)

If the business establishment intends to implement additional actions within the next 5 years, please describe them here.

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### 3 Actions and Outcomes

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Scroll right to see all columns (cols. B through AB) →

[illegible]

**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

**For Business Establishment Informs**, if you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when you need it. For example, you may enter "ABC Company" and then enter "ABC" as the proxy. If you do not wish to disclose the actual name, enter the state(s) on which you followed up with the business establishment. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results by Business Establishment" page.

**Under P2 Actions and Outcomes**, enter each P2 action implemented by the business establishment. Select the role: Manufacturer (and which type of associated product - production, certification, or marketing); Distributor/Retailer, or Purchaser/User. Based on the selection made, certain columns will show. Fill out all non-grayed-out cells. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results by Business Establishment" page.

**Cells will be highlighted yellow** if your outcome is different than the expected input type (e.g. text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

The information in the two cells below is populated automatically from Grant Project Data tab.

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Grant Project Number

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[NAICS Code \(3 to 6 digits\) NAICS Search Results](#)

Other/were impacting a disadvantaged community? (Yes / No / Unknown)

How do the recommended P2 actions identified below benefit disadvantaged communities?

Date(s) of Follow-up (mm/dd/yyyy)

noted on the "Outreach Activities" tab, indicate the activity by choosing it from the drop-down provided:

Description of funding Mechanism (optional) (EDA is exploring ways to


If there were recommended actions that the business environment did not implement, please describe any barriers to implementation (e.g., cost, time, market-related, law-related).

Description of Planned R? Actions Within 5 Years (continued)

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Scroll right to see all columns (cols. B through AB) →

[illegible]



1. Enter Business Establishment Name and provide information about the business establishment's impact on disadvantaged communities. For Business Establishment Name, if you do not wish to disclose the actual name, enter a meaningful phrase so that you will be able to find it when you search for the business establishment. Enter the business establishment's address, including the city, state, and zip code. Enter the date(s) on which you followed up with the business establishment. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results Summary" tab until you enter at least one follow-up date.

2. Under 2D Actions and Outcomes, enter each 2D action implemented by the business establishment. Select the role: Manufacturer (and which type of product) or Distributor/Wholesaler or Retailer. Select the type of business establishment: Manufacturer (and which type of product) or Retailer or Grayed out. Fill out all non-grayed out cells. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results Summary" tab.

3. Cells will be highlighted yellow if your response is different than the expected input type (e.g., text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

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Project Number:	

Note: If copy-pasting into merged cells below, click this header for help text.

Note: If copy-pasting into merged cells below, click this header for help text.

Business Establishment Name  
Business Establishment Contact (optional)

Business Establishment City (optional)

Business Establishment State (2-letter abbreviation)

[NACS Code \(3 to 6 digit\) NACS Search Results](#)

Is the business establishment located in, adjacent to, or otherwise benefiting a distressed community?

Otherwise impacting a disadvantaged community?  
(Yes / No / Unknown)

How do the recommended P2 actions identified below benefit disadvantaged communities?

Date(s) of Follow-up (mm/dd/yyyy)

**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity

from the drop-down provided:

---

Description of funding Mechanism (optional) EPA is exploring ways to

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**Description of Barriers to Implementation (optional)**  
If there were recommended actions that this business establishment did

If any of the above barriers to implementation are present, please describe any barriers to implementation (e.g., cost, long feedback period, low priority).

---

Description of Planned P2 Actions Within 5 Years (optional)

If the business establishment intends to implement additional actions within the next 5 years, please describe them here.

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### 3 Actions and Outcomes

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**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

1. **Business Establishment Name:** If you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when needed. If you are unable to find a suitable proxy, please leave blank. **NOTE:** The actual name of the business establishment must be entered in the "Establishment Name" field. **Do not include the street address or phone number.**
2. **Business Type:** Select the type of business from the dropdown menu. **NOTE:** This selection will determine which questions are asked. **Be as specific as possible.**
3. **Business Address:** Enter the address of the business establishment. **NOTE:** This address should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
4. **Business Phone Number:** Enter the phone number of the business establishment. **NOTE:** This phone number should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
5. **Business Email Address:** Enter the email address of the business establishment. **NOTE:** This email address should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
6. **Business Website:** Enter the website of the business establishment. **NOTE:** This website should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
7. **Business Hours:** Enter the hours of operation of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
8. **Business Description:** Enter a brief description of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
9. **Business Status:** Select the status of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
10. **Business Owner:** Enter the name of the owner of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
11. **Business Manager:** Enter the name of the manager of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
12. **Business Contact:** Enter the name of the contact person at the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
13. **Business Location:** Select the location of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
14. **Business Size:** Select the size of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
15. **Business Revenue:** Enter the annual revenue of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
16. **Business Expenses:** Enter the annual expenses of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
17. **Business Profit:** Enter the annual profit of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
18. **Business Assets:** Enter the assets of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
19. **Business Liabilities:** Enter the liabilities of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
20. **Business Net Worth:** Enter the net worth of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
21. **Business Credit Rating:** Enter the credit rating of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
22. **Business Bankruptcy:** Enter the bankruptcy status of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
23. **Business Tax Status:** Enter the tax status of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
24. **Business Insurance:** Enter the insurance coverage of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
25. **Business Licenses:** Enter the licenses held by the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
26. **Business Permits:** Enter the permits held by the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
27. **Business Certifications:** Enter the certifications held by the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
28. **Business Awards:** Enter the awards won by the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
29. **Business Honors:** Enter the honors received by the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
30. **Business Recognition:** Enter the recognition received by the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
31. **Business Reputation:** Enter the reputation of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
32. **Business Image:** Enter the image of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
33. **Business Branding:** Enter the branding of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
34. **Business Marketing:** Enter the marketing strategy of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
35. **Business Sales:** Enter the sales volume of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
36. **Business Customers:** Enter the number of customers of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
37. **Business Suppliers:** Enter the number of suppliers of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
38. **Business Partners:** Enter the number of partners of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
39. **Business Competitors:** Enter the number of competitors of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
40. **Business Industry:** Enter the industry of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
41. **Business Sector:** Enter the sector of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
42. **Business Market:** Enter the market of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
43. **Business Region:** Enter the region of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
44. **Business Country:** Enter the country of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
45. **Business Continent:** Enter the continent of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
46. **Business Hemisphere:** Enter the hemisphere of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
47. **Business Latitude:** Enter the latitude of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
48. **Business Longitude:** Enter the longitude of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
49. **Business Elevation:** Enter the elevation of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
50. **Business Area:** Enter the area of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
51. **Business Volume:** Enter the volume of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
52. **Business Weight:** Enter the weight of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
53. **Business Mass:** Enter the mass of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
54. **Business Density:** Enter the density of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
55. **Business Pressure:** Enter the pressure of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
56. **Business Temperature:** Enter the temperature of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
57. **Business Humidity:** Enter the humidity of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
58. **Business Wind Speed:** Enter the wind speed of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
59. **Business Rainfall:** Enter the rainfall of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
60. **Business Snowfall:** Enter the snowfall of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
61. **Business Icefall:** Enter the icefall of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
62. **Business Fogfall:** Enter the fogfall of the business establishment. **NOTE:** This should be the same as the one used in the "Establishment Name" field. **Do not include the street address or phone number.**
- 63.

The information in the two cells below is populated automatically from Grant Project Data tab.

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Note: If copy-pasting into merged cells below, click this header for help text.

Business Establishment Name \_\_\_\_\_

Business Establishment City (ajpt000a)

Business Establishment State (2-letter abbreviation)

[NACS Code \(3 to 6 digit\) NACS Search Results](#)

Is the business establishment located in, adjacent to, or otherwise benefiting a distressed community?

Otherwise impacting a disadvantaged community?  
(Yes / No / Unknown)

How do the recommended P2 actions identified below benefit disadvantaged communities?

Date(s) of Follow-up (mm/dd/yyyy)

**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity

from the drop-down provided:

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Description of funding Mechanism (optional) EPA is exploring ways to

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**Description of Barriers to Implementation (optional)**  
If there were recommended actions that this business establishment did

If any of the above barriers to implementation are present, please describe any barriers to implementation (e.g., cost, long feedback period, low priority).

---

Description of Planned P2 Actions Within 5 Years (optional)

If the business establishment intends to implement additional actions within the next 5 years, please describe them here.

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### 3 Actions and Outcomes

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**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

1. Enter Business Establishment Name. If you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when needed. You may also enter "Other" if you are unable to identify a suitable proxy or if you have no specific location. If you select "Other," please explain the basis for your selection in the Remarks section.
2. Enter NAICS Code. Select the code that best describes the primary activity of the business establishment. The NAICS codes are listed in the table(s) on which you followed up with the business establishment. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results by NAICS Code" report unless you enter a NAICS code.
3. Under P2 Actions and Outcomes, enter each P2 action implemented by the business establishment. Select the role Manufacturer (and which type of associated product - production, certification, or marketing), Distributor/Retailer, or Purchaser/User. Based on the selection made, certain columns will show. Fill out all non-grayed-out cells. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results by Date Implemented" report.
4. Cells will be highlighted yellow if your outcome is different than the expected input type (e.g., text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

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	(Yes / No / Unknown)

DISADVANTAGED COMMUNITIES

**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity

\_\_\_\_\_

\_\_\_\_\_

If there were recommended actions that this business establishment did not implement, please describe any barriers to implementation (e.g.,

Description of Planned P2 Actions Within 5 Years (optional)

Scroll right to see all columns (cols. B through AE) →

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[illegible]





**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

**For Business Establishment Informs**, if you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when you need it. For example, you can enter "ABC Company" and then "ABC Company, Inc." as the actual name. If you do not wish to disclose the actual name, enter the state(s) on which you followed up with the business establishment. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results of Actions" page.

**Under P2 Actions and Outcomes**, enter each P2 action implemented by the business establishment. Select the role: Manufacturer (and which type of associated product - production, certification, or marketing); Distributor/Retailer, or Purchaser/User. Based on the selection made, certain columns will show. Fill out all non-grayed-out cells. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results of Actions" page.

**Cells will be highlighted yellow** if your outcome is different than the expected input type (e.g. text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

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Grant Recipient  
Project Number

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**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity noted on the "Outreach Activities" tab, indicate the activity by choosing it

\_\_\_\_\_

\_\_\_\_\_

If there were recommended actions that this business establishment did not implement, please describe any barriers to implementation (e.g., cost, time, workload, need, low priority):

Description of Planned P2 Actions Within 5 Years (optional)

Scroll right to see all columns (cols. B through AE) →

Scroll right to see all columns (cols. B through AE) →

[illegible]

P2 IIA Products (I Grant) Business Establishment IS

1. Enter Business Establishment Information and provide information about the business establishment's impact on disadvantaged communities. For the Business Establishment Name: If you do not wish to disclose the actual name, enter a meaningful proxy so that you will be able to find it when entering follow-up information. If you made contact as an entity on the "Outreach Activities" tab, select it from the drop-down provided. Enter the date(s) on which you followed up with the business establishment. IMPORTANT: Name of your actions and outcomes will be reflected on the "Results Summary" tab and you enter at least one follow-up date.

2. Under P2 Actions and Outcomes, enter each P2 action implemented by the business establishment. Select the role, Manufacturer (and which type of associated project - production, certification, or marketing), Distributor/Retailer, or Purchaser/User. Based on the selection made, certain columns will gray out. Fill out all grayed out cells. IMPORTANT: You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results Summary" tab.

3. Cells will be highlighted yellow if your response is different than the expected input type (e.g., text instead of numbers). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

Grant Information		The information in the box cells below is populated automatically from Grant Project Data tab.	
Grant Recipient			
Grant Project Number			
Business Establishment Information			
Notes: If copy-pasting into merged cells below, click this header for help text.			
Business Establishment Name (optional)			
Business Establishment City (optional)			
Business Establishment State (3 letter abbreviation)			
NAICS Code (2 to 6 digit NAICS Search Results)			
Is the business establishment located in, adjacent to, or otherwise impacting a disadvantaged community? (Yes / No / Unknown)			
How do the recommended P2 actions identified below benefit disadvantaged communities?			
Date(s) of Follow-up (mm/dd/yyyy)			
Outreach Activity (optional) If you made contact with the business establishment through an activity listed on the "Outreach Activities" tab, indicate the activity by choosing from the drop-down provided.			
Description of Existing Obstacles/Barriers/CRDs to implementing action (s)			
Description of Barriers to Implementation (optional) If there were recommended actions that the business establishment did not implement, please describe any barriers to implementation (e.g., cost, long product period, low profits).			
Description of Planned P2 Actions Within 5 Years (optional) If the business establishment intends to implement additional actions within the next 5 years, please describe them here.			

P2 Actions and Outcomes																												
Scroll right to see all columns (cols. 9 through 46) -->																												
Informative Description of P2 Action Implemented	Role	Product Description	Name of Entity or Standard (if applicable)	Date Implemented (Click header for help text)	Follow-Up Date (Not collected)	Manufacturer				Marketing				Distributor/Retailer				Sales				Purchaser/User				Case Study Documented (Y or N)	If the case study is online, provide a link to EPA's case, download and share. Otherwise, please include attachment with report submission	Link to Case Study
						Number of Products Reproduced / Reimagined / Recycled (Click header for help text)	Increase in Annual Production Volume	Unit of Measure	Projected / Actual	Certification Status	Number of Products Newly Certified or in Process (Click header for help text)	New Advertising or Outreach?	Increase in Number of Products Offered for Sale (Click header for help text)	Increase in Sales Volume (Click header for help text)	New Advertising, Outreach, or Outreach? (Click header for help text)	Increase in Annual Sales Volume (Click header for help text)	Unit of Measure	Projected / Actual	Number of Products Adopted for Use in Operations and Maintenance (Click header for help text)	Annual Volume of Products Adopted	Unit of Measure (e.g., number, etc., gallons)	Adoption of Green Purchasing Program?	Description of the Green Purchasing Program					
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Grant Recipient  
Project Number

Note: If copy-pasting into merged cells below, click this header for help text.

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Business Establishment Name
Business Establishment Contact (optional)

Business Establishment City (optional)
--

Business Establishment State (2-letter abbreviation)

NAICS Code (3 to 6 digits) [NAICS Search \(website\)](#)

Is the business establishment located in, adjacent to, or otherwise benefiting a disadvantaged community?

Other/wide impacting a disadvantaged community?	(Yes / No / Unknown)
---	----------------------

[illegible]

How do the recommended P2 actions identified below benefit disadvantaged communities?

\_\_\_\_\_

[illegible]

**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity

noted on the "Outreach Activities" tab, indicate the activity by choosing it from the drop-down provided:

--

Description of funding Mechanism (optional) (EPA is exploring ways to

\_\_\_\_\_


**Description of Barriers to Implementation (optional)**  
 If there were recommended without that this business establishment did

If you have not implemented, please describe any barriers to implementation (e.g., cost, time, staff, space, etc.).

---

Description of Planned P2 Actions Within 5 Years (optional)

If the business establishment intends to implement additional actions within the next 5 years, please describe them here:

\_\_\_\_\_

### 03 Actions and Outcomes

Scroll right to see all columns (cols. B through AB) →

[illegible]















**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

1. **Business Establishment Name:** If you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when needed. This may include a street address or other location identifier, such as "from the intersection of Main Street and 1st Avenue." The state(s) on which you followed up with the business establishment. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results by State" page if you do not specify a state.
2. **Under P2 Actions and Outcomes**, enter each P2 action implemented by the business establishment. Select the role: Manufacturer (and which type of associated product - production, certification, or marketing); Distributor/Retailer; Purchaser/User. Based on the selection made, certain columns will show. Fill out all non-grayed-out cells. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results by State" page.
3. Cells will be highlighted yellow if your outcome is different than the expected input type (e.g., text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

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Grant Project Number:	

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**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity listed on the "Outreach Activities" tab, indicate the activity by choosing it

If there were recommended actions that this business establishment did not implement, please describe any barriers to implementation (e.g., cost, time, need for training, etc.).

Description of Planned P2 Actions Within 5 Years (optional)

Scroll right to see all columns (cols. B through AB) →

Scroll right to see all columns (cols. B through AB) →

[illegible]







**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

1. Enter Business Establishment Name. If you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when needed. You may also enter "Other" if you are unable to identify a suitable proxy. **NOTE:** The name entered here will appear on the public file. If the State(s) or County(ies) you followed up with do not have a business establishment, **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results by Location" page.
2. Under P2 Actions and Outcomes, enter each P2 action implemented by the business establishment. Select the role Manufacturer (and which type of associated product - production, certification, or marketing), Distributor/Retailer, or Purchaser/User. Based on the selection made, certain columns will show. Fill out all non-grayed-out cells. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results by Location" page.
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	(Yes / No / Unknown)

DISADVANTAGED COMMUNITIES

**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity

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If there were recommended actions that this business establishment did not implement, please describe any barriers to implementation (e.g.,

Description of Planned P2 Actions Within 5 Years (optional)

Scroll right to see all columns (cols. B through AE) →

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[illegible]

**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

1. **Business Establishment Name:** If you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when needed. This may include a street address or other location identifier, such as "from the intersection of Main Street and 1st Avenue." The state(s) on which you followed up with the business establishment. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results by State" page if you do not specify a state.
2. **Under P2 Actions and Outcomes**, enter each P2 action implemented by the business establishment. Select the role: Manufacturer (and which type of associated product - production, certification, or marketing); Distributor/Retailer; Purchaser/User. Based on the selection made, certain columns will show. Fill out all non-grayed-out cells. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results by State" page.
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Grant Recipient  
Project Number

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	(Yes / No / Unknown)

DISADVANTAGED COMMUNITIES

**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity

\_\_\_\_\_

\_\_\_\_\_

If there were recommended actions that this business establishment did not implement, please describe any barriers to implementation (e.g.,

Description of Planned P2 Actions Within 5 Years (optional)

Scroll right to see all columns (cols. B through AE) →

Scroll right to see all columns (cols. B through AE) →

[illegible]



**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

1. Enter Business Establishment Name. If you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when needed. You may also enter "Other" if you are unable to find the name or you want to keep the name confidential. If you select "Other," please enter the full state(s) on which you followed up with the business establishment. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results by County" page if you select "Other."
2. Under P2 Actions and Outcomes, enter each P2 action implemented by the business establishment. Select the role Manufacturer (and which type of associated product - production, certification, or marketing), Distributor/Retailer, or Purchaser/User. Based on the selection made, certain columns will show. Fill out all non-grayed-out cells. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results by County" page.
3. Cells will be highlighted yellow if your outcome is different than the expected input type (e.g., text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

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Is the business establishment located in, adjacent to, or

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If you made contact with the business establishment through an activity listed on the "Outreach Activities" tab, indicate the activity by choosing it

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If not implemented, please describe any barriers to implementation (e.g., cost, long payback period, low priority).

**Description of Planned P2 Actions Within 5 Years (optional)**  
If the business establishment intends to implement additional actions

Scroll right to see all columns (cols. B through AB) →

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1. Enter Business Establishment Information and provide information about the business establishment's impact on disadvantaged communities. For the Business Establishment Name, if you do not wish to disclose the actual name, enter a meaningful proxy so that you will be able to find it when you search for the business establishment later. Enter the NAICS code for the business establishment. Enter the SIC code for the business establishment. Enter the date(s) on which you followed up with the business establishment. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results" page until you click on the "Save" button.

2. On P2 Actions and Outcomes, enter each P2 action implemented by the business establishment. Select the role. Manufacturer (and only which type of associated project - production, certification, or marketing), Distributor/Retailer, or Purchaser/End User. Based on the selection made, certain columns will gray out. Fill out all non-grayed out cells. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results" page.

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**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity noted on the "Outreach Activities" tab, indicate the activity by choosing it

\_\_\_\_\_

\_\_\_\_\_

If there were recommended actions that this business establishment did not implement, please describe any barriers to implementation (e.g., cost, time, workload, need, low interest):

Description of Planned P2 Actions Within 5 Years (optional)

Scroll right to see all columns (cols. B through AE) →

Scroll right to see all columns (cols. B through AE) →

[illegible]



**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

1. **Business Establishment Name:** If you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when needed. This may include a street address or other location identifier, such as "from the intersection of Main Street and 1st Avenue." The state(s) on which you followed up with the business establishment. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results by State" page if you do not specify a state.
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Business Establishment Name  
Business Establishment Contact (optional)

Business Establishment City (optional)

Business Establishment State (2-letter abbreviation)

[NACS Code \(3 to 6 digit\) NACS Search Results](#)

Is the business establishment located in, adjacent to, or otherwise benefiting a distressed community?

Otherwise impacting a disadvantaged community?  
(Yes / No / Unknown)

How do the recommended P2 actions identified below benefit disadvantaged communities?

Date(s) of Follow-up (mm/dd/yyyy)

**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity

from the drop-down provided:

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Description of funding Mechanism (optional) EPA is exploring ways to...

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**Description of Barriers to Implementation (optional)**  
If there were recommended actions that this business establishment did

If any of the above barriers to implementation are present, please describe any barriers to implementation (e.g., cost, long feedback period, low priority).

---

Description of Planned P2 Actions Within 5 Years (optional)

If the business establishment intends to implement additional actions within the next 5 years, please describe them here.

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### 3 Actions and Outcomes

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Scroll right to see all columns (cols. B through AE) →

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**For Business Establishment Informs** and provide information about the business establishment's impact on disadvantaged communities.

**For Business Establishment Informs**, if you do not wish to disclose the actual name, enter a reasonable proxy so that you will be able to find it when you need it. For example, you could enter "ABC Company, Inc." if you do not wish to disclose the actual name of the business. If you do not wish to provide the actual name, you must also provide the state(s) on which you followed up with the business establishment. **IMPORTANT:** None of your actions and outcomes will be reflected on the "Results by Business Establishment" page.

**Under P2 Actions and Outcomes**, enter each P2 action implemented by the business establishment. Select the role: Manufacturer (and which type of associated product - production, certification, or marketing); Distributor/Retailer, or Purchaser/User. Based on the selection made, certain columns will show. Fill out all non-grayed-out cells. **IMPORTANT:** You must enter the Date Implemented for your actions and outcomes to be reflected on the "Results by Business Establishment" page.

**Cells will be highlighted yellow** if your outcome is different than the expected input type (e.g. text instead of number). For highlighted values, re-enter the value in the appropriate format to remove the highlighting.

The information in the two cells below is populated automatically from Grant Project Data tab.

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Grant Recipient  
Project Number

Note: If copy-pasting into merged cells below, click this header for help text.

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Is the business establishment located in, adjacent to, or otherwise benefiting a disadvantaged community?

	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
0	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100

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**Outreach Activity (optional)**  
If you made contact with the business establishment through an activity

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\_\_\_\_\_

**Description of Barriers to Implementation (optional)**  
 If there were recommended without that this business establishment did

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If the business establishment intends to implement additional actions within the next 5 years, please describe them here.

Scroll right to see all columns (cols. B through AE) ...

Scroll right to see all columns (cols. B through AE) ...

[illegible]