

Urban Waters Federal Partnership Designated Locations Annual Reporting Form

Purpose: To capture the accomplishments of Urban Waters Federal Partnership designated locations based on projects/activities in the respective workplans that were completed in calendar year XXXX

Note that responses are voluntary. The word “you” refers to the Ambassador throughout.

Name of Person Filling Out This Form: _____

Urban Waters Federal Partnership Location: _____

Email Address: _____

1. Describe your location’s **top three accomplishments** in calendar year XXXX. Please include a short description of the project, the partners you worked with, the Ambassador’s role, how much funding was used along with its source, and any data on the results (add as many lines as needed):

2. Briefly describe the **major projects** that will occur in calendar year YYYY. Please include a short description of the projects, the partners you will work with, the Ambassador’s role, and how much funding will be used along with its source (add as many lines as needed):

3. **Number of volunteer hours** completed in partnership activities from projects in the workplan

4. **Number of community members reached** through email, mailing lists, or social media from projects in the workplan

5. **Number of jobs created (temporary or permanent)** from projects in the workplan

6. **Dollars secured** to support the implementation of the workplan (federal/non-federal and/or private dollars)

Section 2: Environmental Metrics from Projects in the Workplan

In this section, we are breaking down the environmental metrics by whether the Ambassador played a primary or supporting role in projects that implement the workplan. We are only asking for information on environmental metrics when the Ambassador has served in a primary role.

Primary Role: The Ambassador acted as convener or actively participated in a workgroup, wrote a grant proposal or parts of one, built organizational capacity, facilitated partner collaboration that led to the projects, identified matching funds for a grant, or convened partners with project funders, etc.

8. **Number of trees/plants planted** from completed projects in the workplan:

_____ trees/plants

9. **Square feet of habitat protected/restored** (ex. installation of rip rap or living shoreline, invasive species removed, trees planted, etc.) from completed projects in the workplan:

_____ square feet

10. **Miles of river monitored for water quality** from completed projects in the workplan:

_____ miles

11. **Square feet of green infrastructure installed** from completed projects in the workplan:

_____ square feet

12. **Weight of trash removed** from completed projects in the workplan:

_____ pounds

13. **How can EPA and the other federal partners assist your location?** Please be as specific as possible.

OMB Control Number 2040-NEW

The public reporting and recordkeeping burden for this collection of information is estimated to average 6 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, including through the use of automated collection techniques, to the Director, Regulatory Support Division, U.S. Environmental Protection Agency (2822T), 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.

EPA Form Number 6100-085

Approval Expires XX/XX/XX