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| Minnesota Pollution Control Agency (MPCA), 520 Lafayette Road North, St. Paul, MN 55155-4194 | SWAG Interim Progress Report  Surface Water Assessment Grant (SWAG)  *Doc Type: Contracts Interim Report* |

**Instructions are at the end of the form.**

**Due December 31, annually**

## Project information

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Project title: | |  | | | | | | | | | | | | | | | | | | | |
| TEMPO Agency Interest ID: | | | | | | |  | | | | | TEMPO Activity ID: | | | | |  | | | | |
| SWIFT number: | | |  | | | | | | | | | Purchase order number: | | | | |  | | | | |
| **Local partner information:** | | | | | | | | | | | | | | | | | | | | | |
| Organization name: | | | |  | | | | | | | | | | | | | | | | | |
| Primary contact name: | | | | | |  | | | | | Phone: | |  | | Email address: | | | |  | | |
| **Reporting period:** | | | | | | | | | | | | | | | | | | | | | |
| Start date: |  | | | | | | | | End date: |  | | | |  | | | |
|  | *(mm/dd/yyyy)* | | | | | | | |  | *(mm/dd/yyyy)* | | | | | | | | | | | |
| **Project location:** | | | | | | | | | | | | | | | | | | | | | |
| Basin (check all that apply): | | | | | | | | | | | | | | | | | | | | | |
| Red River  Rainy River  Lake Superior  Minnesota  Lower Mississippi  St. Croix  Upper Mississippi | | | | | | | | | | | | | | | | | | | | | |
| Major watershed(s): | | | | |  | | | | | | | | | | | Hydrologic unit code(s): | | | | |  |
| Name of eligible laboratory: | | | | | | | |  | | | | | | | | | | | | | |
| How many full-time equivalents (FTEs) worked on this project in the report period (hours/2,088 hours): | | | | | | | | | | | | | | | | | | | |  | |

## Section I – Workplan

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1.** | **Were field and laboratory data submitted to EQuIS by November 1?** | | | |
| Yes  No | | Submittal date (mm/dd/yyyy): |  |  |
| **2.** | **If applicable, were stream photos submitted by November 1?** | | | |
| Yes  No | | Submittal date (mm/dd/yyyy): |  |  |
| **3.** | **Is the field meter calibration log being submitted with this report?** | | | |
| Yes  No | | Submittal date (mm/dd/yyyy): |  |  |

|  |  |
| --- | --- |
| **4.** | **Describe the details of stream and/or lake monitoring for the first contract year within Table 1.** Indicate yes or no for the completion of all tasks for each of your monitoring locations. Explain the details of missing or incomplete tasks within the comments field for each site designated as “no.” This includes, but is not limited to...   * No flow * Access not possible * Adverse site conditions * Missing water samples or field meter observations (indicate specific parameters) and reasons why. * Missed QA/QC monitoring. * Samples not shipped on time or the occurrence of a temperature exceedance.   Additionally, within the comments field provide details regarding noteworthy or adverse site conditions to provide assessment staff with additional site information. This includes, but is not limited to…   * Drought or low flow. * Construction * High waterfowl activity or beaver impoundments * Notable presence of wetlands * Feedlot/livestock activity * Impervious surfaces   **Add rows as necessary by placing cursor in the last row of last column and hit tab.** |

**Table 1. Monitoring summary**

|  |  |  |
| --- | --- | --- |
| **EQuIS ID** | **All tasks completed** | **Comments** |
|  |  |  |
|  |  |  |
|  |  |  |
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| --- | --- |
| **5.** | **Were you comfortable with your level of training and current ability to complete the obligations of your workplan?** |
|  |  |
| **6.** | **Were there any change orders and/or amendments to the contract and work plan?**  Yes  No **If yes, describe the related change order(s).** |
|  |  |

## Section II – Budget

**Copy and paste the information from the invoice tab of the SWAG Reimbursement Request spreadsheet. If budget information does not encompass all expenditures through December 31, please provide the date. Note: Documented amounts must be within 30 days of December 31.**

<insert here>

**Instructions (Delete instructions prior to submitting.)**

The Minnesota Pollution Control Agency (MPCA) evaluates projects based on their contribution to the MPCA’s mission. To ensure a routine, fair and consistent evaluation, the MPCA requires local partners to submit periodic narrative and financial reports. In preparing your interim report(s), please refer back to Exhibit A (the workplan and budget) in your agreement.

The progress report shall include detailed results in the form of data and information that best demonstrates progress toward achieving the tasks identified in your workplan. The MPCA will use the information from this agreement and others to document progresstoward meeting these objectives to external parties, such as taxpayers and/or the legislature. Local partners are required to complete and submit Interim reports as outlined in the contract and workplan during the project period. **Failure to submit a detailed Interim report may result in the loss of current funds, the withholding of additional disbursements or removal from consideration for future funding.**

The report shall be sent to the attention of your MPCA Project Manager electronically.

***Examples:***

***Table 1. Monitoring summary***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***Waterbody1*** | ***Site ID#*** | ***Planned annual sampling*** | | ***Actual for past season*** | | ***Comments*** |
| ***Parameter*** | ***No.*** | ***Parameter*** | ***No.*** |
| *Lake A* | *71-\*\*\** | *Chl-A*  *TP*  *Secchi* | *4*  *4*  *4* | *Chl-A*  *TP*  *Secchi* | *3*  *3*  *3* | *Missed one sampling event – will pick it up next June.* |
| *Stream A* | *S\*\*\*\*)* | *TP, TSS, DO, pH,conductivity* | *22* | *TP, TSS, DO, pH,conductivity* | *15* | *Stream ran dry for several months and prevented us from obtaining planned samples* |

*1 Identify target watershed site by using asterisk (\*).*

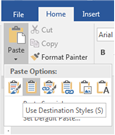
Budget reporting instructions

It is recommended that local partners submit an invoice at the end of the reporting period which includes all expenditures through December 31. This will ensure that the budget information presented in the Interim Progress Report is accurate for the reporting period. The information on the Invoice tab from the Microsoft Excel reimbursement request can be copied and pasted into this Interim Progress Report template.

To complete this copy and paste exercise:

1. In the Invoice tab of the Microsoft Excel reimbursement request, select the cells pictured below by clicking on them and dragging your mouse over and down to select the pertinent information. Choose Copy.



2. In the Interim Progress Report template, select <Insert here> and choose Paste (Use Destination Styles). Using this Paste function should autofit the budget onto the page. You can also Paste and select Autofit under Table Tools-Layout.

**Please do not paste the table as a photo.**