

## Safe Water Project Request Form

Water Mission is a nonprofit Christian engineering ministry providing sustainable safe water solutions, through a Christian world view perspective, to people in developing countries and disasters. We approach all our work with a sense of urgency and a commitment to excellence. Our faith and our belief in the sanctity of life compel us to develop and implement the best technologies, and community development programs so that, through our work, God will be honored and glorified, and lives will be transformed for eternity.

### **Mission**

Our Mission is to be a best in class Christian Engineering Ministry that transforms lives through sustainable safe water solutions.

### **Vision**

Water Mission will be a Christian Engineering Ministry that is recognized as a global leader in transformational safe water solutions by 2017.

Please complete the below form and submit it, along with any available photos of the community, and laboratory water quality tests (if available), to our International Headquarters or one of our country program offices. The basic information detailed in the following form is needed before an on-site assessment can be conducted by one of our WM staff members. Please answer all questions as accurately as possible and contact our office with any questions or concerns.

### **Water Mission**

#### **International Headquarters**

P. O. Box 31258

Charleston, SC 29417

U.S.A.

Attn: International Programs

Email: [info@watermission.org](mailto:info@watermission.org)

Phone: (843) 769-7395

Fax: (843) 763-6082

### **Regional Offices**

#### **Belize**

Bo. San Isidro, Castado Sur del Estadio, Tocoa, Colon 32301

Email: [hchacon@watermission.org](mailto:hchacon@watermission.org)

Tel: +504-2444-4407

#### **Haiti**

Carrefour Marin 21, #3 Rue Milfort, Bon Repos

Email: [haiti@watermission.org](mailto:haiti@watermission.org)

Tel: + 509-3170-9395

#### **Honduras**

Bo. San Isidro, Castado Sur del Estadio, Tocoa, Colon 32301

Email: [hchacon@watermission.org](mailto:hchacon@watermission.org)

Tel: +504-2444-4407

#### **Indonesia**

Jl. Kelapa Sawit no: 32, Tangkerang Pekanbaru, 28286

Email: [djan@watermission.org](mailto:djan@watermission.org)

Tel: +62-761-789-2101

#### **Kenya**

Milimani Estate, Plot No. 58, Kitale

Email: [mngania@watermission.org](mailto:mngania@watermission.org)

Tel: +254-723-218-461

#### **Malawi**

Area 10, Plot No. 10/334, Off Mtendere Dr., PO Box 31871, Lilongwe 3

Email: [nsinyiza@watermission.org](mailto:nsinyiza@watermission.org)

Tel: +265-0-179-4235

#### **Mexico**

Calle priv. La Aurora No. 14, Barrio Maria Auxiliadora, San Cristóbal de las Casas, Chiapas

Email: [jbermudez@watermission.org](mailto:jbermudez@watermission.org)

Tel: +52-01-9676316320

#### **Peru**

Av. Abelardo Quinones N 840, San Juan Bautista, Maynas, Loreto

Email: [jsimon@watermission.org](mailto:jsimon@watermission.org)

Tel: +51-65-263527

#### **Tanzania**

PO Box 60036, Kawe Beach, Dar es Salaam

Email: [bmacnaughton@watermission.org](mailto:bmacnaughton@watermission.org)

Tel: +255-786-066-834

#### **Uganda**

Plot 49, Wilson Road, PO Box 15, Jinja

Email: [mbazira@watermission.org](mailto:mbazira@watermission.org)

Tel: +256-414-680106

**1. General Information***Fields highlighted in yellow are required by the PUMP*

1 Community Name: \_\_\_\_\_ 2 Date: \_\_\_\_\_  
 3 Country: \_\_\_\_\_ 4 Region/State/District/Province/Municipality: \_\_\_\_\_  
 5 Latitude: \_\_\_\_\_ ° ' " ( N / S ) 6 Longitude: \_\_\_\_\_ ° ' " ( E / W )

*If exact coordinates are not known, please use Google Earth coordinates for general location*

7 Institutions Served: <i>(check all that apply; indicate population size including beds, staff, children, livestock heads, etc., number of institutions, and percentage of total population primarily residing within households in the community; include additional information on page 8 or in attachment)</i>	<input type="checkbox"/> Community	Total Population Size	Num. of Institutions	Residing in Community
	<input type="checkbox"/> Clinic -			%
	<input type="checkbox"/> Orphanage -			%
	<input type="checkbox"/> School -			%
	<input type="checkbox"/> Religious -			%
	<input type="checkbox"/> Market -			%
	<input type="checkbox"/> Livestock -		Predominant Types:	

9 Geographic Size: \_\_\_\_\_ ( km<sup>2</sup> / mi<sup>2</sup> ) 10 Total Number of Households: **households**  
 11 Average Household Size: **people** 12 Approximate Population Size (10 x 11): **people**  
 13 Population Density (check all that apply): ☐ Urban ☐ Rural ☐ Concentrated ☐ Spread-out  
 14 Nearest Large Town/City: \_\_\_\_\_ 15 Distance from Community: \_\_\_\_\_ ( km / mi )  
 16 Terrain: ☐ Mountainous ☐ Plains ☐ Inland ☐ Coastal ☐ Other: \_\_\_\_\_

**2. Contact Information***Fields highlighted in yellow are required by the PUMP*

**1. Primary Contact** Name: \_\_\_\_\_  
*(local or foreign partner)* Last First Middle  
 Position/Affiliation: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Fax: \_\_\_\_\_ Email: \_\_\_\_\_ Skype: \_\_\_\_\_  
 Organization: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Street Address Suite #  
 City State/Province Country ZIP Code

**2. Local Government Authority** Name: \_\_\_\_\_  
 Last First Middle  
 Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Fax: \_\_\_\_\_ Email: \_\_\_\_\_ Skype: \_\_\_\_\_  
 Government Branch: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Street Address Suite #  
 City State/Province Country ZIP Code

## 2. Contact Information (cont.)

### 3. Institutional Representative (religious, healthcare, school, etc.)

Name: \_\_\_\_\_  

*Last**First**Middle*

Position/Affiliation: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_ Skype: \_\_\_\_\_

Institution: \_\_\_\_\_

Address: \_\_\_\_\_

*Street Address**Suite #*

*City**State/Province**Country**ZIP Code*

### 4. Other Community Contact (local influential individual)

Name: \_\_\_\_\_  

*Last**First**Middle*

Position/Affiliation: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_ Skype: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

*Street Address**Suite #*

*City**State/Province**Country**ZIP Code*

## 3. Water, Sanitation and Hygiene Status

1 What is the community's primary source of water?

☐ River   ☐ Lake   ☐ Rainwater   ☐ Shallow Well   ☐ Bore Hole (Deep Well)   ☐ Other: \_\_\_\_\_

2 Is this the proposed water source for the Safe Water Project?   ☐ Yes   ☐ No   ☐ Don't Know

If "No" or "Don't Know", explain: \_\_\_\_\_

3 Who owns and maintains the source? \_\_\_\_\_

4 Is a fee charged to use the source?   ☐ Yes   ☐ No   ☐ Don't Know

5 Does the water source provide enough water year-round?   ☐ Yes   ☐ No   ☐ Don't Know

6 Is it likely that the water is contaminated?   ☐ Yes   ☐ No   ☐ Don't Know

7 Describe the physical characteristics of the water (*i.e. cloudiness, color, smell, taste, etc.*):

8 Does the community consider the source safe to use?   ☐ Yes   ☐ No   ☐ Don't Know

9 Which factors are currently limiting access to the source (especially for the vulnerable and disabled)?

☐ Location   ☐ Functionality   ☐ Cost of use   ☐ Crowding   ☐ Reliability of management

☐ Cultural prejudice   ☐ Source capacity   ☐ Other: \_\_\_\_\_

10 Is *treated* water (in bottles) available in the community?   ☐ Yes   ☐ No   ☐ Don't Know

### 3. Water, Sanitation and Hygiene Status (cont.)

**11** Does any water supply infrastructure (e.g. water tanks, piping, taps, pumps, etc.) already exist in the community?

☐ Yes ☐ No ☐ Don't Know

If "Yes", please describe and include size, shape and condition of equipment: \_\_\_\_\_

**12** Does any sanitation infrastructure (e.g. public/private toilets, piped sewerage, latrines, etc.) already exist in the community?

☐ Yes ☐ No ☐ Don't Know

If "Yes", please describe and include size, shape and condition of equipment: \_\_\_\_\_

**13** Do facilities and/or supplies that enable hand-washing with soap or alternative practices already exist in the community?

☐ Yes ☐ No ☐ Don't Know

If "Yes", please describe: \_\_\_\_\_

**14** Are industries or farms near, upstream or uphill from the water source?

☐ Yes ☐ No ☐ Don't Know

Additional Comments: \_\_\_\_\_

**15** What (if any) existing social and cultural norms and motivators might influence public adoption of healthy water, sanitation and hygiene behavior (e.g. *perception of chlorine taste, knowledge of disease transmission pathways, etc.*)?

\_\_\_\_\_

### 4. Organizational Capacity

**1** Which groups are involved in making general decisions and changes in the community? (*check all that apply*)

☐ Formal National Government ☐ Formal Local Government ☐ Elders ☐ Heads of Households

☐ Institutional Representatives (healthcare, religious, school, etc.) ☐ No Process ☐ Other: \_\_\_\_\_

**2** Is the leadership strong enough to organize a committee that can ensure awareness and community support for the Safe Water Project?

☐ Yes ☐ No ☐ Don't Know

**3** Do households/family units typically remain in the community for more than one year?

☐ Yes ☐ No ☐ Don't Know

### 5. Equity and Contributions

**1** Please indicate how the Safe Water Project's operational and replacement expenses will be met (*these expenses include operator salaries, consumables such as fuel, electricity and chemicals, and replacement costs*):

☐ Collection Fees ☐ Subsidized by Ministry/Church/Organization ☐ Other: \_\_\_\_\_

**2** Is the community willing and able to open and maintain a bank account in order to save project funds?

☐ Yes ☐ No If "no", explain: \_\_\_\_\_

## 6. Electricity and Mobile Phone Service

<b>1</b> Electrical Power Grid -	Availability:	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Proximity of Access Point to Population Center:	km
	Reliability:	<input type="checkbox"/> High <input type="checkbox"/> Moderate <input type="checkbox"/> Low
	Unit Cost:	(USD / Local Currency) per kWh
<b>2</b> Gasoline -	Availability:	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Proximity of Access Point to Population Center:	km
	Reliability:	<input type="checkbox"/> High <input type="checkbox"/> Moderate <input type="checkbox"/> Low
	Unit Cost:	(USD / Local Currency) per (L / gal)
<b>3</b> Diesel Fuel -	Availability:	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Proximity of Access Point to Population Center:	km
	Reliability:	<input type="checkbox"/> High <input type="checkbox"/> Moderate <input type="checkbox"/> Low
	Unit Cost:	(USD / Local Currency) per (L / gal)

**4** Is reliable mobile phone service available in the community? ☐ Yes ☐ No ☐ Don't Know

## 7. Project Coordination and Funding

Fields highlighted in **yellow** are required by the PUMP

*Complete Safe Water Projects (including Electrical, Plumbing, Mechanical, Structures and Water Treatment Equipment and Community Development tasks), where the solution is customized to meet the needs of the community, typically cost between \$20,000 - \$40,000 USD, depending on the complexity and scope of the project.*

**1** Do you plan on raising funds for this project? ☐ Yes ☐ No ☐ Don't Know

**2** Has the funding process begun? ☐ Yes ☐ No

**3** Potential Individual Donors? Name(s): \_\_\_\_\_

**4** Potential Sponsoring Rotary Clubs? Name(s): \_\_\_\_\_ District Number(s): \_\_\_\_\_

**5** Potential Sponsoring NGOs? Name(s): \_\_\_\_\_ Contact Information: \_\_\_\_\_

Additional Comments: \_\_\_\_\_

**6** Do you need Water Mission's assistance in raising funds for this project? ☐ Yes ☐ No ☐ Don't Know

Additional Comments: \_\_\_\_\_

*Water Mission seeks to protect any information you provide us if you have concerns about your name, your organization's name or your specific community name being used in a public manner (literature, website). If you have concerns about the public use of this information, please let us know which information you would like for us to keep confidential.*

**7** Please keep the following information confidential: \_\_\_\_\_

Additional General Comments: \_\_\_\_\_

Task status:	<input type="checkbox"/>	Complete	<input type="checkbox"/>	Additional work	<input type="checkbox"/>	Skipped	<input type="checkbox"/>	Not applicable
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Check if completed  
by WM staff ☐

Completed By:  Date: