



Water Sector Trust Fund

**Up-scaling Basic Sanitation for the Urban Poor (UBSUP)**

**SafiSan Project Phase [ ] Application Form**

|  |  |
| --- | --- |
| **Water Service Provider: [[1]](#footnote-1)** |  |
| **Call for Proposals no.:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***For use by the WSTF*** | | | | |
| Name of Fund: | |  | Project Code: |  |
| Application Form received (date): | |  | Date evaluated: |  |
| Appraised by (name & position): | |  |  | |
|  |  | |
| Field Appraisal carried out by  (name & position): | |  |  | |
|  |  | |
| Remarks: |  | | | |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Project Proposal Identification** | |  | **Date of proposal:** | |  | |  | |  |
| **Project Title:** |  | | | | | | | | |
| **Project number:** |  | **Proposed Phase:** | |  | | | | | |
| **Proposed area(s):** |  | **City/town:** | |  | | | | | |
| **County:** |  | **Proposed implementation period:** | |  | |  | |  | |
| **WSP:** |  |  | |  | |  | |
| **Building:** |  | **Box no.:** | |  | | | | | |
| **Tel:** |  | **Fax:** | |  | | | | | |
| **E-mail:** |  |  | | | | | | | |

**This Application Form was filled in and approved by: (1)**

|  |  |  |  |
| --- | --- | --- | --- |
| Activity: > | Filled in by: (2) | Filled in by: | Approved by: (3) |
| Name(s): |  |  |  |
| Designation: |  |  |  |
| Tel.: |  |  |  |
| Fax: |  |  |  |
| E-mail: |  |  |  |
| Date: |  |  |  |

1): WSP and County staff

2): Please indicate if an external consultant was contracted to prepare this proposal or to assist with filling in this Application Form

3): Approval by WSP management

# County Government

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **County Government** | | | | | | |
| Has this Application Form been approved by the County Government? Please tick (**√**) | Yes: |  | No: |  | Remark: |  |
| Who approved this Application Form? (title): |  | | | | |  |
| Did you (the WSP (1)) receive an approval letter? | Yes: |  | No: |  | Remark: |  |

# Previous Phase Completion Report

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Project completion data (previous phase):** | |  | |  | |  |  |
| **Status of the Project Completion Report of the Previous Phase** | | | | | | | |
| **No.** | **Question** | **Yes** | **No** | **Pending** | **Remark** | | |
| 1 | The WSP has submitted the Project Phase Completion Report for the previous phase? |  |  |  |  | | |
| 2 | The Project Phase Completion was approved by the WSTF? |  |  |  |  | | |
| 3 | Date of approval |  |  |  |  | | |

# Data Report on the Proposed Project Area(s)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Data on the proposed project area(s)** | | | | | |
| **No.** | **Question** | **Yes** | **No** | **Pending** | **Remark** |
| 1 | Has the SafiSan Area Data Collection Tool (SADCT) been used to collect data on the proposed project area(s)? |  |  |  |  |
| 2 | Are the filled in SADCT sheets attached to this proposal? |  |  |  |  |
| 3 | Challenges during data collection & processing. |  | | | |

# Scope and Impact of the proposed SafiSan Project Phase

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Project Scope and Impact** | | | | | | | | | | | | |
| A | Project title: |  | | | | | | | | | | |
| Phase title: |  | | | | | | | | | | |
| B | Project Manager: | Name: | |  | | | | | | | | |
| Tel.: | |  | E-mail: | | |  | | | | |
| C | Location of the proposed project phase: | Location: | |  | Sub-location: | | |  | | | | |
| Area: | |  | Sub-area: (4) | | |  | | | | |
| Area: | |  | Sub-area: | | |  | | | | |
| Area: | |  | Sub-area: | | |  | | | | |
| D | Type of interventions (√): | Improved toilets | | |  | | Community mobilisation: | | | | |  |
| Hygiene promotion | | |  | | Social marketing: | | | | |  |
| Operator training: | | |  | | Solid waste management: | | | | |  |
| Emptiers training: | | |  | | Emptiers certification: | | | | |  |
| Sludge treatment / disposal: | | |  | | Construction of DTFs: (1) | | | | |  |
| E | Number of DTFs to be constructed: | | | |  | | | | | | | |
| DTFs designed for (no. of people): | | | |  | | | | | | | |
| Does the proposed project phase target the urban poor? | | | |  | | | | | | | |
| Will you cooperate with the Public Health Department? | | | |  | | | | | | | |
| Will you seek NEMA approvals? | | | |  | | | | | | | |
| F | Area(s) population: | | No.: |  | Beneficiary population: | | | | | No.: |  | |
| G | Anticipated cost: | | KSh: |  | | | | | | | | |
| H | Cost per beneficiary: (2) | | KSh: |  | | | | | | | | |
| I | Period of execution: | |  | | | No. of months: | | | |  | | |
| J | Objectives of this phase of the project: | |  | | | | | | | | | |
| K | Planned activities: | |  | | | | | | | | | |
| L | Are there any known challenges that may jeopardise the success of this phase of the project? | |  | | | | | | | | | |
| M | Description of project phase management: | | Works supervision: | | | | | |  | | | |
|  | | | | | | | | | |
| Implementation arrangement: | | | | | |  | | | |
|  | | | | | | | | | |
| Support (by NGOs, CBOs, Consultants, etc.) (2): | | | | | |  | | | |

1): DTF = Decentralised treatment facility; S-DTF = Semi-decentralised treatment facility

2): Per capita cost = total cost / beneficiary population (KSh/beneficiary).

3): NGO = non-governmental organisation; CBO = community-based organisation

4): Urban village (e.g. “Kosovo” in Mathare, Nairobi)

√) = Please tick

# The Proposed SafiSan Project Phase Area(s)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Type and Legal Status of Project Area(s) | | | |  | |
| Name of area(s): | |  | | | |
| Name of sub-area(s): | |  | | | |
| Short description of the project phase area(s) (please focus on technical, social and legal issues): | | | | |  |
| * Technical constraints: |  | | | | |
| * Social issues: |  | | | | |
| * Legal issues: |  | | | | |
| * Dwelling ownership (\*) |  | | | | |
| * Population density: |  | | | | |
| * Sanitation situation: |  | | | | |
| * Topography: |  | | | | |
| * Soil type   (geological formation): |  | | | | |
| * Water table: |  | | | | |
| What is the legal status of the area? (see Toolkit, Module 1, Section 5): | | |  | | |
| Please indicate: Is the area a planned or an unplanned settlement? (see SafiSan Toolkit, Module 1): | | | | | |
|  | | | | | |
| Please indicate below who owns the land in the project phase area(s)?  (Is the land owned by the County, is land privately owned, a combination of both, etc.?): | | | | | |
|  | | | | | |
| Please indicate below which building materials have been used for the construction of most dwellings? | | | | | |
|  | | | | | |
| Do you consider the proposed phase area(s) to be low-income? Please explain: (see SafiSan Toolkit, Module 1): | | | | | |
|  | | | | | |

\*): Are residents renting or owning their accommodation?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Type and Legal Status of the Project Phase Area(s) (continued) | | | | | | | |
| Describe the (expected) impact the County development- or master plans have (will have) on the area. | | | | | | | |
|  | | | | | | | |
| **Note**: If the settlement in the proposed project phase area (s) is (are) illegal, please attach a supporting letter from the County. This letter should state the approval by the County of the proposed works. | | | | | | | |
| GPS (UTM) readings (of sub-area boundaries): | | | | | | | |
| North/South: |  | East: |  | Elevation: |  | Remark: |  |
| North/South: |  | East: |  | Elevation: |  | Remark: |  |
| North/South: |  | East: |  | Elevation: |  | Remark: |  |
| North/South: |  | East: |  | Elevation: |  | Remark: |  |
| North/South: |  | East: |  | Elevation: |  | Remark: |  |
| North/South: |  | East: |  | Elevation: |  | Remark: |  |

| Present Situation in the Proposed Project Phase Area(s) |
| --- |
| Please describe the present situation in the proposed project phase area (see below): |
| Location of the project phase area(s) (vis-à-vis the town centre): |
|  |
| Demographic trend (population growth patterns; e.g., area is extending, population density is increasing, etc.): |
|  |
| Main religions in the area(s): |
|  |
| Existing water supply installations (operated by the WSP in the project phase area(s)): |
|  |
| Existing household sanitation installations & practices(Describe the existing variety (\*)): |
|  |
| Existing public sanitation facilities in the area(s): |
|  |
| Current ways of wastewater disposal and treatment in the area(s): |
|  |

\*): Traditional pit latrines; flush toilets linked to the sewer; flush toilets linked to a septic tank; ventilated improved pit latrines (VIPs); urine diverting dry toilet (UDDT), open defecation; flying toilets, public toilets, commercially operated private toilets

|  |
| --- |
| **Present Situation in the Proposed Project Phase Area(s) (continued)** |
| Please describe the present situation in the proposed project phase area(s) (see below): |
| Do you have a functioning sewage network in the area(s)? |
|  |
| Solid waste disposal: |
|  |
| Storm water drainage: |
|  |
| Current hygiene behaviour (including anal cleansing methods used): |
|  |
| Current public health situation: |
|  |
| Current environmental situation (e.g. flooding, high water table, overflowing latrines, etc.): |
|  |
| Please describe below why the project phase area was selected: |
|  |

| Project Phase Area(s) Population and 10-Year Population Projection | | | |
| --- | --- | --- | --- |
| **Data on population** | **Current** | **In 5 years (\*)** | **In 10 years** |
| No. of persons in the project phase area(s): |  |  |  |
| No. of potential users in the project phase area(s): |  |  |  |
| The method used for collecting the population data, or the source of population data: | | | |
|  | | | |
| The assumed annual population growth rate ***and***the source of the annual population growth figure: | | | |
|  | | | |
| \*): Please use KNBS (Kenya National Bureau of Statistics) data for population forecasts | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Public Health Indicators for the Project Phase Area(s) | | | | | | | |
| **Indicator** (1) | | **Current Year** | **Previous Year** | | **Year Before Previous Year** | | |
| Cases of diarrhoea: | |  |  | |  | | |
| Cases of intestinal worms: | |  |  | |  | | |
| Infections (no. of cases): (2) | |  |  | |  | | |
| Cases of cholera: | |  |  | |  | | |
| Cases of typhoid fever: | |  |  | |  | | |
| Cases of dysentery: | |  |  | |  | | |
| Cases of (3): |  |  |  | |  | | |
| Cases of (3): |  |  |  | |  | | |
| Please indicate the source for the data above (e.g. Council, Ministry of Health, dispensary, hospital, etc.) | | | | | | | |
|  | | | | | | | |
| Additional observation Please tick (√) | | | | **Common** | | **Rarely** | **Never** |
| Presence of foul smells: | | | |  | |  |  |
| Insect nuisance: | | | |  | |  |  |
| Overflowing sewers: | | | |  | |  |  |
| Overflowing latrines: | | | |  | |  |  |
| Uncontrolled solid waste dumping: | | | |  | |  |  |
| “Flying toilets”: | | | |  | |  |  |
| Open defecation: | | | |  | |  |  |
| Stagnant wastewater ditches: | | | |  | |  |  |
| Open channels carrying wastewater: | | | |  | |  |  |
| Additional remarks regarding the public health situation in the project phase area(s): | | | | | | | |
|  | | | | | | | |
| Assumptions regarding the use of public health data (4) to describe public health situation in project phase area(s): | | | | | | | |
|  | | | | | | | |

1): Write NA (= Non-Applicable) if no data were available, or if collected data are considered irrelevant

2): Infections of eyes, ears, urinary tract and respiratory infections

3): Please provide names of water-related disease

4): Please mention the source of your data and the year it was collected or updated

# Proposed Sanitation Infrastructure

| 6.1 Description of the Proposed Works |
| --- |
| Please give below an overview of the in stallations to be built or refurbished: |
|  |
| Please describe the objectives of the project phase: |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 6.2 Household Sanitation | | | | |
| **Toilet types to be promoted by proposed project phase**: | | Yes | No | Explain: |
| * Flush toilet connected to the sewer: | |  |  |  |
| * Flush toilet connected to a (e.g. communal) septic tank: | |  |  |  |
| * Flush toilet connected to a DTF: (1) | |  |  |  |
| * Composting toilet/ UDDT: (2) | |  |  |  |
| * Other type of toilet (e.g. Fahari Loo): | |  |  |  |
| * Other type of toilet: | |  |  |  |
| Total number of beneficiaries: | No. |  | |  |
| **Note:** The total number of persons a single toilet unit (door) can adequately serve is 10. | | | | |

1): DTF = Decentralised treatment facility

2): UDDT = Urine Diverting Dry Toilet

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 6.3 Sewer Network Design | The “network” referred to here, consists of the sewage conduits and wastewater treatment | | | | | |
| Is there an existing sewer network in the project phase area(s)? | | | Yes: |  | No: |  |
| Technical Details (please fill in the columns to the right): | | | | | | |
| * Size of the existing sewer mains: | |  | | | mm | |
| * Length of the existing sewer mains: | |  | | | metres | |
| * Proximity to existing sewer mains: | |  | | | metres | |
| * Current physical state of existing sewer mains: | |  | | | | |
| * Type of material of existing mains: | |  | | | | |
| Metering in project phase area(s) (please fill out the columns to the right): | | | | | | |
| Current number of sewer connections in the project phase area(s): | |  | | | | |
| Number of customers billed for sewer connection: | |  | | | | |
| Does the ground elevation allow for gravitational flow of wastewater? (If necessary, attach the relevant map): | |  | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 6.4 Decentralised Sludge Treatment | | | | | | | | | | | | |
| Has the site been acquired for constructing a sludge treatment facility? Provide evidence. | | | | | | | | | | | | |
| Has the DTF site been acquired? Please tick (√): | | Yes: |  | No: |  |  | | | | | | |
| Type of evidence: |  | | | | | | | | | | | |
| The distance (by road) between the proposed DTF(s) and the project phase area(s)? | | | | | | |  | km |  | km |  | km |
| Site(s) suitability: | | | | | | | | | | | | |
| If the site(s) is (are) available and already acquired, is it (are they) sufficient for the appropriate sludge treatment technology? Please explain in some detail: | | | | | | | | | | | | |
|  | | | | | | | | | | | | |

# Community Characteristics, Mobilisation and Sensitisation

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 7.1 Socio-Economic Situation in the Project Phase Area(s) | | | | | | | |
| Please provide a short description of the beneficiaries of the proposed phase (socio-economic situation, income generating activities in, average number of persons per plot, etc. Also mention your source of data or information (*e.g. household survey, KNBS data, etc.*) | | | | | | | |
| Main income generating activities: | | | | | | | |
|  | | | | | | | |
| Are most residents renting the accommodation or do they own their homes? | | | | | | | |
|  | | | | | | | |
| Average number of persons per **plot**: | |  | | Average number of persons per **dwelling**: | |  | |
| Comments: |  | | | | | | |
|  | | | | | | | |
| Are female-headed households common? | | | | | | | |
|  | | | | | | | |
|  | | | Percentage of female-headed households: | |  | | % |
| Describe and explain the pattern of migration: | | | | | | | |
|  | | | | | | | |
| Other relevant characteristics: | | | | | | | |
|  | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 7.2 Community Organisations | | | | | | | | | |
| Contact details of the Chief: | | | Location: |  | | Name : | |  | |
|  | | | Telephone: |  | | E-mail: | |  | |
| Are there local Elders (1) in the area (Yes / No)? Please tick (√): | | | | | Yes: | |  | No: |  |
| Are there any Government organisations/officials working in the area (e.g. Public Health Officer, CHW): (1) | | | | | | | | | |
| Please specify: | |  | | | | | | | |
| List the active and **relevant** (i.e. involved in sanitation or health & hygiene education) community-based organisations (CBOs) and NGOs in the area and describe their main activities: | | | | | | | | | |
| CBOs (1): |  | | | | | | | | |
| NGOs: |  | | | | | | | | |
| Which of the above listed organisations are going to be involved in the proposed project phase? | | | | | | | | | |
|  | | | | | | | | | |
| What will be the role and responsibility of these organisations? | | | | | | | | | |
|  | | | | | | | | | |

1): In Swahili: *Mzee wa Mtaa*; CBO = Community-based organisation; NGO = Non-governmental organisation; CHW = Community Health Worker; CHV = Community Health Volunteer

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 7.3 Mobilisation and Sensitisation Activities | | | | |  |
| List the community mobilisation, sensitisation and social marketing activities you intend to carry out: | | | | | |
| Activity ([[2]](#footnote-2)): | | | | | |
| Description of activity: |  | | | | |
| Objective: |  | | | | |
| Target group(s) / participants: | |  | | | |
| Specific activities: |  | | | | |
| Message(s) / topic(s): |  | | | | |
| Media used: |  | | | | |
| Number: |  | | Comments: |  | |
| List of costs: |  | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Activity: | | | | |
| Description of activity: |  | | | |
| Objective: |  | | | |
| Target group(s) / participants: | |  | | |
| Specific activities: |  | | | |
| Message(s) / topic(s): |  | | | |
| Media used: |  | | | |
| Number: |  | | Comments: |  |
| List of costs: |  | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Activity: | | | | |
| Description of activity: |  | | | |
| Objective: |  | | | |
| Target group(s) / participants: | |  | | |
| Specific activities: |  | | | |
| Message(s) / topic(s): |  | | | |
| Media used: |  | | | |
| Number: |  | | Comments: |  |
| List of costs: |  | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| 7.4 Organisational Set-up for the Implementation of the Proposed Project | |  |  |
| Please describe below the organisational set-up the WSP will adopt for project phase execution: | | | |
| Who will be in charge of **supervision** of works: |  | | |
|  | | | |
| Who will be in charge of the **execution** of works: |  | | |
|  | | | |
| Who will manage the **Project Task Team**: |  | | |
|  | | | |
| Composition of the **Project Task Team**: |  | | |
|  | | | |
| Main responsibilities of the **Project Task Team**: |  | | |
|  | | | |
| Please describe below the work force input the WSP intends to make.  Also mention the casual labour input: | | | |
|  | | | |
| Are consultants (*other than WSTF-Consultants*) and/or contractors going to be used in any of the proposed activities of the project phase(other than the employment of casual labour)? | | | |
|  | | | |

# Sludge Management

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 8.1 Existing Sludge Management Practices & Strategies of the WSP | | | | | | | |
| Does your company have an operational sludge treatment plant? | | Yes: |  | | No: |  | |
| Can this facility accommodate the additional sludge generated by the sanitation facilities of the proposed project phase? | | Yes: |  | | No: |  | |
| Please explain: |  | | | | | | |
| How far is the operational sludge treatment plant from the proposed project phase area(s)? | | | |  | | | km |

|  |
| --- |
| 8.2 Proposed Sludge Disposal & Management Solutions |
| Can you describe in some detail how and where (type of facility) your company intends to dispose the sludge generated by the toilets in the proposed project phase area(s)? |
|  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 8.3 DTF Operators (Selection and Management) | | | | | | | | | | | | | | | |  | |
| Will your company operate the DTF(s), or will this activity be outsourced? | | | | | | | | | | | | | | | | | |
| WSP | |  | County | | |  | | Community (group) | |  | | Private Operator | |  | Other arrangement | |  |
| Please explain your answer: | | | |  | | | | | | | | | | | | | |
| *(In case of outsourcin*g) Describe how you intend to identify, select and train the Operators: | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| *(In case of outsourcin*g) Explain how do you intend to train the Operators? | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| *(In case of outsourcin*g) Which selection criteria will be used? | | | | | | | | | | | | | | | | | |
| 1 |  | | | | | | | | | | 4 | |  | | | | |
| 2 |  | | | | | | | | | | 5 | |  | | | | |
| 3 |  | | | | | | | | | | 6 | |  | | | | |
| *(In case of outsourcin*g) How will the private DTF Operator be remunerated? Please explain: | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| *(In case of outsourcin*g) Will private DTF Operators be charged for operating the DTF? | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| How will (private or other) Operators be supervised? | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| How will the DTF & other project infrastructure be inspected? | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| Will you include the operation & maintenance costs of the DTF(s) in your tariff (proposal)? | | | | | | | | | | | | | | | | | |
| Yes: | |  | No: | |  | | Please explain: | |  | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 8.4 Involvement of Manual Emptiers/Sanitation Teams in Sludge Management | | | | | | | | | | | | | | | | |
| Are individuals or groups performing emptying services within the project phase area(s)? | | | | | | | | | | Yes: (\*) | | |  | No: | |  |
| Please describe the emptying methods used by such groups: | | | | | | |  | | | | | | | | | |
| Where do these groups deposit the sludge they collect? | | | | | | |  | | | | | | | | | |
| (*If yes*) Does your company intend to use the services of these groups? | | | | | | | | | Yes: | |  | No: | | |  | |
| Is (are) this (these) groups licensed? | | | | | | | | | Yes: | |  | No: | | |  | |
| Who licenses such groups? Please explain: | | | | |  | | | | | | | | | | | |
| What will be the terms of engagement with such groups? Please explain: | | | | | | | |  | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| Should emptiers and emptying groups pay for depositing sludge or bio-solids at the DTF? | | | | | | | | | | | | | | | | |
| Yes: |  | No: |  | Please explain your answer: | |  | | | | | | | | | | |
| Should emptiers and emptying groups be paid for depositing sludge or bio-solids at the DTF? | | | | | | | | | | | | | | | | |
| Yes: |  | No: |  | Please explain your answer: | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |

# Expected Project Phase Sustainability and Impact

|  |  |
| --- | --- |
| 9.1 Opportunities for Realising a Complete Sanitation Value Chain |  |
| Describe the agricultural activities in the area and near the project phase area(s): | |
|  | |
| Is there a potential for processed fertilizer (from human sludge) in the area(s)? | |
|  | |
| Are there existing biogas systems in the area(s) or in the neighbourhood? | |
|  | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 9.2 Willingness & Ability to Pay for Better Sanitation & Services | | | | | | |  |
| 9.2.1 According to you are the residents (landlords, tenants, householders) of the proposed project phase area(s) able and willing to pay for: | | | | | | | |
| Improved toilets | Yes: |  | No: |  | Explain: |  | |
| Sewer connection charges (\*) | Yes: |  | No: |  | Explain: |  | |
| 9.2.2 According to you are the residents (landlords, tenants, householders) of the proposed project phase area(s) able and willing to pay for: | | | | | | | |
| Emptying charges | Yes: |  | No: |  | Explain: |  | |
| (monthly) Sewer charges | Yes: |  | No: |  | Explain: |  | |

\*): In case of pour flush toilets linked to the sewer or a communal septic tank

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 9.3 Anticipated Revenues for the WSP [Project Phase Area(s) Only] | | | | | | |
| Expected sales and revenue from the project area at proposed tariffs: | | | | | | |
| Expected total number of DTF users: | | | Expected daily deposition: | | Tariff (paid by customer): | Expected daily revenue: |
| No. | | | m3/day | | KSh per deposition | KSh/day |
|  | | |  | |  |  |
| (*If the project phase areas are connected to the sewer*) What is the current number of sewer connections in project area? | | | | | | |
| No. |  | Comments? | |  | | |

|  |
| --- |
| 9.4 Impact on the Environment in the Project Phase Area |
| Give details of the possible impact on the environment of this project on the project phase area and indicate the steps being taken to minimise any adverse effects. (*Reference should be made to the geological conditions, proximity of natural watercourses, water table levels, land gradients and drainage conditions*) |
|  |
|  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Additional Information | | | | | |
|  | | | | | |
| Section: |  | No.: |  | Title: (\*) |  |
|  | | | | | |
|  | | | | | |
|  | | | | | |

\*): For example: Section 1; No. 1.4; Title: Public Health Indicators for the Project Phase Area(s)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Section: |  | No.: |  | Title: (\*) |  |
|  | | | | | |
|  | | | | | |
|  | | | | | |

******

1. *Please fill in this* ***SafiSan Phase 2*** *(and all subsequent phases) Application Form as carefully and as completely as possible.*

   Please ensure that:

   * All data are coherent (no contradictive data).
   * Descriptive statements are concise, to the point and presented in an easily readable format.
   * Statements are substantiated (e.g. with figures).
   * If external data are used, the source of data has to be mentioned.

   The WSP is responsible for providing accurate data. Any deviation from the data presented in the MajiData database shall be explained in detail.

   **For Phase 1 the standard “UBSUP - Phase 1 Application Form for Funding if Sanitation Projects in Low Income Areas” has to be filled in.**  [↑](#footnote-ref-1)
2. **Example**: Description of activity: Public meeting (*baraza*); Objective: sensitise residents on health and hygiene and the importance of improved sanitation; Target group(s)/participants: population of the project area; Specific activities: performance of a drama group, drumming, speeches; Message(s)/topic(s): advantages of improved toilets; Media used: public gathering; Number: 2 *barazas* per public toilet catchment area; List of costs: hiring of drama group, flipchart stand, A1 size paper, batteries for megaphone [↑](#footnote-ref-2)