



(Revised March 2022)

Notice of Cost Accounting Center (CAC) Designation

National Environmental Policy Act (NEPA) Requirements Checklist

Request for Categorical Exclusion

**Prison Industry Enhancement Certification Program (PIECP)
Notice of Cost Accounting Center (CAC) Designation**

A. Provide a One Paragraph Description of the Proposed CAC

CAC Name _____

Private Partner Name _____

INSTITUTION Name and Address _____

Product Line _____

List All Inmate Job Titles (**with OES/SOC codes**) _____

Proposed Number of Inmate Workers _____

How will the inmate worker be paid? Hourly Piece Work Rate Other? (Explain)

If Piece work, does the base rate equate with or exceed the minimum allowable wage identified by your State's wage setting agency? Yes No (Reason(s):

Is there a training Wage? Yes No. **If Yes, DES approval, including training wage rate and duration, must be attached.**

Is there an established wage plan for this CAC? Yes No

Will this be Customer Model Employer Model Manpower Model Other? (Explain)

Will this industry be in a private prison? No Yes If Yes, will out-of-state inmates be involved in production activities? Yes No

B. Mandatory Program Documentation and Attachments:

1. Inmate Wages

YES, a copy of the prevailing wage verification letter/documentation obtained from the state wage setting agency verifying locality determination and wage rate finding **is attached** [See **Sample DES Wage and Displacement Information Request**]. *NOTE: If more than 6 months has elapsed between the date you received wage data from your DES and the date of project start-up, you should recontact your DES to ensure that your wage data is accurate.*

2. Non-Displacement

YES, a copy of the non-displacement verification letter or alternative documentation obtained from the State wage setting agency **is attached**.

YES, (if Employer Model CAC) a copy of the private sector partner letter, contract, or agreement verifying the non-displacement of free-world workers employed by the company **is attached**.

3. Consultation with Organized Labor

YES, a copy of the letter to the local union central body or the State union body, board meeting minutes, or public notices informing them about the proposed CAC **is attached** [See **Sample Business & Labor PIECP Notification Letter**].

4. Consultation with Local Business

YES, consultation with local businesses that may be impacted by proposed CAC including board meeting minutes, or public notices informing them about the proposed CAC **is attached** [See **Sample Business & Labor PIECP Notification Letter**].

C. Affirmation of Compliance with PIECP Guidelines and Requirements:

1. Consultation with appropriate local or state labor unions central bodies or similar labor organization representatives prior to the designation of this cost accounting center.
2. Consultation with local business representatives prior to the designation of this cost accounting center.
3. Authority to operate prison industry programs involved in the production of goods, wares, or merchandise transported through interstate commerce.

4. Written assurance from the state's wage setting agency or Department of Economic Security (**DES**) or equivalent that:

a. The payment of wages to inmates working in the proposed CAC is comparable to wages paid for work of a similar nature in the same locality in which the work takes place.

b. The labor of inmate workers within the CAC will not result in the displacement of employed free world workers; will not be applied in skills, crafts, or trades in which there is a surplus of available, gainful labor in the same locality; or impair existing contracts for services.

5. Inmates working in the proposed CAC are entitled to certain benefits, including workers' compensation and FICA (if Employer Model CAC).

6. Inmates have signed, in advance, a written agreement that specifies their voluntary participation in the proposed CAC and their approval of the specific deductions to be taken from gross wages and any other financial arrangements.

I certify that the above-named cost accounting center complies with the aforementioned Prison Industry Enhancement statutory and guideline criteria:

Name of Approving Authority:

Title _____

Signature _____ Date Signed _____

REQUEST FOR CATEGORICAL EXCLUSION FROM NEPA

GUIDELINES

Whenever a Certificate Holder elects to exercise its authority designate a CAC, it must determine whether to submit a ***Request for Categorical Exclusion*** from NEPA. The following is provided as guidance in this process:

- Operations that involve no new construction or major renovation, and no adverse effects on the environment, such as through the use or creation of toxic or hazardous substances, emissions, or conditions, may be eligible for a Categorical Exclusion to NEPA requirements. BJA will make a determination, based upon the submitted ***Notice of Cost Accounting Center (CAC) Designation and Request for Categorical Exclusion***, regarding this exclusion.
- Operations that normally require an Environmental Assessment include renovations and expansions that change the original use of a facility, that substantially change its size, or that change the existing facility so that it increases the production of liquid, gaseous, or solid wastes; new construction; research and technology whose anticipated and future application could be expected to have an effect on the environment; and new operation involving the use of hazardous, toxic, radioactive, or odorous materials.
- Assessments of such activities which result in BJA “findings of significant impact” will necessitate the preparation of environmental impact statements in compliance with NEPA and its implementing regulations. For guidance related to Environmental Assessments and Impacts, please see ***NEPA Environmental Impact Assessment and Contacts Information*** which can be downloaded from www.nationalcia.org.

PIECP National Environmental Policy Act (NEPA) Requirements and Request for Categorical Exclusion

CAC Name _____

INSTITUTION Name and Address _____

1. Will this be:

A continuation of an existing industry at the same site

An expansion of an existing industry

A new operation

2. Will new construction or renovation of existing facilities be required?

Yes No

3. Provide a detailed description of the processes, operations, methods, products, and outcomes of the proposed cost accounting center: **(attach additional narrative, if necessary)**

4. Briefly describe the size, terrain, and present land use of the industry site: **(attach additional narrative, if necessary)**

National Environmental Policy Act (NEPA) Requirements

Environmental Information: For those land uses and environmental resources listed below, please check “Yes” for each one that is located within the site of the proposed CAC, adjacent to the site, or directly impacted by the site’s proposed actions. If an item is checked Unknown, further information may be required prior to CAC approval - BJA will advise you.

	YES	NO	UNKNOWN
Industrial.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Commercial.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Residential.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Agriculture.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grazing.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mining, Quarrying.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forest.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recreational.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parks.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospital.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Schools.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Steep Slopes.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy Supplies.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dunes.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wildlife Refuge.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shoreline.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Beaches.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Estuary.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Solid Waste Mgmt.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Protected Resources: For those land uses and environmental resources listed below, please check “Yes” for each one that is located within the site of the proposed CAC, adjacent to the site, or directly impacted by the site’s proposed actions.

If an item is checked YES, please provide a brief narrative explanation, describing the anticipated impact. An environmental assessment or impact statement may also be necessary - BJA will advise you.

	YES	NO
Wetlands	<input type="checkbox"/>	<input type="checkbox"/>
Air Quality	<input type="checkbox"/>	<input type="checkbox"/>
Flood plains (Include current flood plain map)	<input type="checkbox"/>	<input type="checkbox"/>
Wilderness (Designated or proposed under the Wilderness Act)	<input type="checkbox"/>	<input type="checkbox"/>
Wild or Scenic River (Designated or proposed under The Wild and Scenic River Act)	<input type="checkbox"/>	<input type="checkbox"/>
Historical, Archaeological Sites (Listed on National Register of Historic Places or eligible for listing)	<input type="checkbox"/>	<input type="checkbox"/>
Critical Habitat or Endangered/Threatened Species (Listed or proposed)	<input type="checkbox"/>	<input type="checkbox"/>
Natural Landmark (Listed on National Landmark Registry)	<input type="checkbox"/>	<input type="checkbox"/>
Important Farmlands	<input type="checkbox"/>	<input type="checkbox"/>
Approved Costal Zone Management Area	<input type="checkbox"/>	<input type="checkbox"/>
Sole Source Aquifer Recharge Area (Designated by EPA)	<input type="checkbox"/>	<input type="checkbox"/>

Additional Site and Industry Information

1. Are any facilities under your ownership, lease, or supervision to be utilized in the accomplishment of this industry either listed or under consideration for listing in the Environmental Protection Agency's List of Violating Facilities? Yes No
2. Has a Federal, State, or Local Environmental Impact Statement or Analysis been prepared for this industry site? Yes No If Yes, attach a copy.

3. Flood Plains

- Attach a Federal Emergency Management Administration flood plain map covering the proposed/current industry site. Clearly mark the location of the site.

4. Historical Preservation

- Attach a copy of the letter sent to the State Historical Preservation Officer requesting comments; attach any resulting comments or written discussion.

5. Toxic Substances

- Will the industry create or produce any toxic, hazardous, or radioactive substances?
 Yes No If yes, attach a narrative describing the substances and the manner in which these substances will be stored, used and disposed.

6. Mitigation

- Describe any measures that will or are being taken to avoid or mitigate any adverse environmental impacts associated with the industry. Not Applicable

7. Permits

- Are any federal, state, or local government permits issued or required for this industry or anything related to its outcomes, location, facility, or equipment? Yes No If yes, attach a copy of each permit.

8. Public Reactions and Responses

- Describe any public objections to this industry and any related evidence regarding the public's concern (newspaper articles, editorials, etc). Attached copies of any printed materials and/or any transcripts from public meetings. Not Applicable

9. Related Federal Actions

- Identify any federal programs, projects, or actions related to this industry that you are planning, are filing an application, or have recently received approval. Not Applicable

Request for NEPA Categorical Exclusion

CAC Name _____

INSTITUTION Name and Address _____

The above described Cost Accounting Center meets the criteria for a categorical exclusion as defined in paragraph III. a. 9. of the Prison Industry Enhancement Certification Program Guidelines. The industry will not affect any sensitive land uses or environmental resources that would subject it to disqualification as a categorical exclusion. This industry proposal is not a phase or segment of a larger proposal which, when viewed in its entirety, would not meet requirements of the PIECP categorical exclusion.

Name of Recommending Authority

Title

Signature of Recommending Authority

Date Signed

Bureau of Justice Assistance Approval - NEPA Categorical Exclusion

Julius C. Dupree, Jr., Policy Officer, Program Manager, PIECP

Date Approved _____

SAMPLE DES WAGE & DISPLACEMENT INFORMATION REQUEST

March 1, 2022

Joe Smith
State Department of Economic Security
1234 Market Street
State Capitol, State 12345

Dear Mr. Smith:

The _____ Department of Corrections is developing a Prison Industry Enhancement Certification Program (PIECP) Cost Accounting Center (CAC) named PIE Wood Shop at the _____ Correctional Facility located in City, State. Inmate workers at this PIECP CAC will manufacture wood doors. This CAC will operate as a part of PIECP authorized by 18 USC 1761(c). I am requesting the wage data for the following SOC Codes that will not result in the displacement of employed workers performing similar work in the relevant locality.

Please provide this wage data for:

The 10th Percentile Wage for the (county, region, MSA, state) locality for:

- 51-7011 Cabinetmakers and Bench Carpenters
- 51-7041 Sawing Machine Setters, Operators

I've attached job descriptions (listing notable tasks, job duties and responsibilities) for each SOC Code listed above.

Additionally, please note that you may provide a higher wage than the 10th percentile for any SOC Code if you determine that a higher wage is necessary to prevent the displacement of employed workers performing similar work in the relevant locality.

I am also requesting that you provide a written determination that this CAC paying the approved wages provided by you **will not**:

- Result in displacement of employed workers
- Be applied in skills, crafts, or trades in which there is a surplus of available gainful labor in the locality
- Significantly impair existing contracts

I look forward to your early reply.

Sincerely,

Samuel Jones
Correctional Industries Director

SAMPLE BUSINESS & LABOR PIECP NOTIFICATION LETTER

On Department Letterhead, One letter each to:

- Local Business Organization or Statewide Business Organization if no local exists
- Local Labor Council or State Labor Council if no local exists

Dear [Labor or Industry organization rep]:

Under the authority of (local/state statute or rule), private sector companies may employ inmates incarcerated in correctional facilities to manufacture goods and provide services for sale to the public through [name of local program]. Under the guidelines of [name of jurisdiction] these businesses are managed by their owners and staff, offering inmates training, work experience, and income. The tax burden of corrections is reduced through deductions from employees' wages for room and board. In addition, deductions for victims' compensation and court ordered financial obligations provide inmates with the means to repay their debts to their victims, the criminal justice system, and support their families.

Federal legislation created the Private Sector/Prison Industries Enhancement Certification Program (PIECP), allowing operations such as those in [name of jurisdiction] to sell prison-made goods in interstate commerce provided the companies meet certain criteria including:

- Paying their employees wages comparative to those paid for similar jobs in the area;
- Providing workers compensation coverage; and
- Notifying local business and labor organizations of their plans to enter into interstate commerce.

[Name of jurisdiction] is in the process of certifying a private sector industry under PIECP. [Company] producing [Product line] will operate at [Name of Facility] in [City]. We expect [Number] inmates will be employed as [Job Titles].

If you have questions regarding this new operation or PIECP, please call [local PIECP contact person]. We look forward to your comments.

Sincerely,

[Title of local Correctional Industries Manager]

cc: [Department Head]