



Environmental Services
 88 South Park Ave
 Le Center, MN 56057
 (507) 357-8538



LE SUEUR COUNTY SEPTIC LOW INCOME GRANT PROGRAM APPLICATION FOR RESIDENTIAL PROPERTIES

APPLICANT INFORMATION – (Full Fee Owner)

Name:		Phone:	
Mailing Address:	City:	State:	Zip:

APPLICANT INFORMATION – only if Contract for Deed (CFD), fee owner shall sign documents.

Name:		Phone:	
Mailing Address:	City:	State:	Zip:

PROPERTY INFORMATION

Property Address:			
Parcel Number:	City:	State: MN	Zip:

LEGAL DESCRIPTION

A copy of your **Recorded Deed** shall be submitted with the application.

LOW INCOME ELIGIBILITY

You must be considered low-income in order to be eligible for the grant. Low income eligibility is determined by Le Sueur County Human Services Department.

ESTIMATE

A copy of the estimate shall accompany the application. The estimate is required to have all labor and materials itemized. Costs not covered under the estimate such as electrical, zoning permit fee, seeding, etc., shall be stated in the estimate.

FOR OFFICE USE ONLY

<input type="checkbox"/>	Application Complete	<input type="checkbox"/>	Copy of Deed	<input type="checkbox"/>	Copy of CFD
	Septic Estimate Total:	\$	_____		
<input type="checkbox"/>	Low Income Certification Statement	Date:	_____	Initial:	_____
<input type="checkbox"/>	Approved or <input type="checkbox"/> Denied	Date:	_____	Signature:	_____
<input type="checkbox"/>	Letter Sent to Fee Owner/Applicant:	Date:	_____	Initial:	_____
<input type="checkbox"/>	Cost-share Contract Completed:	Date:	_____	Initial:	_____
<input type="checkbox"/>	Design Received:	Date:	_____	Initial:	_____
<input type="checkbox"/>	Design Approved:	Date:	_____	Initial:	_____
<input type="checkbox"/>	Design Permitted:	Date:	_____	Receipt #:	_____
<input type="checkbox"/>	System Installed:	Date:	_____	Initial:	_____
<input type="checkbox"/>	Invoice Received:	Date:	_____	Initial:	_____
<input type="checkbox"/>	Claim Sent to Aud. Office:	Date:	_____	Initial:	_____
<input type="checkbox"/>	COC Sent:	Date:	_____	Initial:	_____

LE SUEUR COUNTY SEPTIC LOW INCOME GRANT PROGRAM TERMS FOR RESIDENTIAL PROPERTIES

- _____ 1. I was informed by Le Sueur County Environmental Services Department regarding additional programs available for subsurface sewage treatment system (SSTS) upgrades.
- _____ 2. The SSTS must serve residential, non-commercial property, that is either a single-family home or duplex located in Le Sueur County. Applicant must be the property owner. If Contract for Deed, the Fee Owner shall also sign all documents.
- _____ 3. Property must be residential and must be the primary or homesteaded residence located in Le Sueur County with
 - An existing SSTS deemed to be an Imminent Threat to Public Health; or
 - An existing SSTS failing to protect groundwater.
- _____ 4. Ineligible activities:
 - Landowner(s) that do not meet the low-income requirements (as determined by Human Services Department)
 - Property that does not serve as the primary or homesteaded residence
 - To assist with new building construction and/or expansion of residential dwelling
 - Commercial use
 - Projects where construction starts before approval of application and completion of a cost-share contract with Le Sueur County
- _____ 5. There will be a required screening by the Le Sueur County Human Services Department to determine if the landowner qualifies as low-income. A certification statement from the Human Services Department is required to be submitted with your application.
- _____ 6. Amount eligible for cost-share: Limited to 75% of the total cost, not to exceed a \$10,000 maximum, for the design and installation of a conforming SSTS. The cost of the SSTS may not exceed the reasonable cost of a similarly designed SSTS.
- _____ 7. The landowner may utilize other funding sources such as Agriculture Best Management Practice (Ag BMP) Loan, Home Improvement Loan, and Septic Upgrade Loan Program (SULP), in order to cover the costs of the subsurface sewage treatment system that is not funded by the low-income grant. It will be the responsibility of the landowner to take care of any expenses that remain after the cost-share payment is processed.
- _____ 8. The SSTS contractor(s) used must be licensed and certified by the State of Minnesota for the work being performed on the SSTS. The SSTS design must be approved by the county and permitted prior to installation. The SSTS design must meet or exceed the minimum standards set forth in Minnesota Administrative Rule, Chapters 7080 and/or 7081 and the Le Sueur County Zoning Ordinance.
- _____ 9. **Construction shall not begin prior to obtaining a zoning permit from the Le Sueur County Environmental Services Department.**
- _____ 10. Payment to the contractor(s) for valid invoices will be made by the county upon submission by the landowner:
 - Submit invoice for work done in accordance with the estimates and permitted SSTS design with a Record Drawing and Certificate of Compliance.
 - Sign final documents (includes cost-share and payment voucher).

YOUR SIGNATURE INDICATES YOUR INTENT TO ACCEPT THE LOW INCOME GRANT COST-SHARE FUNDS UNDER THE TERMS DESCRIBED ON THIS APPLICATION. I HAVE READ AND UNDERSTAND THE TERMS OF THE SEPTIC LOW INCOME GRANT PROGRAM AS STATED ABOVE. FAILURE TO ABIDE BY THE ABOVE TERMS MAY RESULT IN THE NULLIFICATION OF THE SEPTIC LOW INCOME GRANT CONTRACT.

Applicant (Full Fee Owner) Signature

Date

Applicant (Full Fee Owner) Signature

Date

Applicant (if Contract for Deed) Signature

Date

Applicant (if Contract for Deed) Signature

Date