

**CHARLES COUNTY DEPARTMENT OF HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
PO BOX 1050
WHITE PLAINS, MARYLAND 20695
Phone 301-609-6751 Fax 301-609-6684**

**BAY RESTORATION FUND GRANT APPLICATION CHECKLIST
Connection to Sewer in non-Priority Funded Areas- FY25**

Applicant Name: _____ Property ID# _____

Phone Number: _____ Date Package submitted: _____

Address: _____

Please submit the items below together as soon as possible as **one complete package**.

- BRF Application
- Last Federal tax return to verify income (**First two pages only**)
- Site Plan. (**Showing connection from cleanout to house**) (**Contact Town/County about this, depending on where you live**)
- Application for Utilities Service with sewer connection fee amount filled in
- 3 Bids from different contractors to connect sewer line from cleanout to house. **The bids need to include the Company name, address, and contact information. The bids will also need to include the property owners name and complete address, and what is included with the sewer connection (i.e. any permitting fees, septic tank pumping and abandonment, etc.)**

*****Public sewer Connection/tap fees are eligible for reimbursement. Permit fees are not eligible for reimbursement.

- Bid #1 _____
- Bid #2 _____
- Bid #3 _____

Charles County Department of Health will need to submit the following to Maryland Department of the Environment for approval: (This process can and has taken a long time)

- A Consideration of BRF Funding letter will be sent to MDE for approval to use BRF funds to connection to public sewer

If approval is granted the homeowner will need to contact the contractor with the lowest bid and the work can begin. Once the sewer connection has been inspected by the Town/County, and the septic tank has been abandoned, crushed, and filled the following will need to be submitted to the Health Department.

Please contact the Health Department about inspecting the abandoned and crushed septic tank.

- Letter from homeowner stating satisfactory install of sewer connection
- Letter/Inspection sheet from the Town/County about sewer connection
- Contractor Invoice

<p><u>SEWER CONNECTION</u> (existing home) MAX \$25,000</p> <p>As long as household is income below 300K</p>

<p><u>SEWER CONNECTION-Business (or Existing Home with household income over 300k)</u> (existing business w/ failing system)</p> <p>Max \$12,500- Lowest Bid x 50%= Grant Amount</p>
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<p><u>SEWER CONNECTION</u> (existing business w/ failing system Small Business Vendor-eMMA)</p> <p>Max \$18,750 Lowest Bid x 75%= Grant Amount</p> <p>_____ x .75= _____</p>
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PLEASE KEEP THIS OR MAKE A COPY FOR YOUR RECORDS

**CHARLES COUNTY DEPARTMENT OF HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
4545 CRAIN HIGHWAY, PO BOX 1050
WHITE PLAINS, MARYLAND 20695**

**BAY RESTORATION GRANT APPLICATION
NITROGEN-REDUCING PRETREATMENT UNIT
BRF FY25-non PFA**

This application is designed to aid in determining your eligibility. Submit completed applications to the address above.

<u>BUILDING</u>	<u>TYPE</u>	<u>BRF Funding Eligibility for Type of Property</u>	<u>WATER SUPPLY</u>
A: <input type="checkbox"/> Existing Home: B: <input type="checkbox"/> Existing Business C: <input type="checkbox"/> Existing Non-profit	<input type="checkbox"/> Repair <input type="checkbox"/> Upgrade <input checked="" type="checkbox"/> <u>Sewer connection</u>	<input type="checkbox"/> A: 100% cost up to \$25,000, if Income < \$300K (Check Total Income on 1040/Keep copy in file) OR 50% costs up to 12,500 for incomes over \$300K <input type="checkbox"/> B: 50% of sewer connection costs up to \$18,750. <input type="checkbox"/> C: 100% of cost up to \$25,000 (keep copy of non-profit status in file)	<input type="checkbox"/> Existing Water Tag # __CH-_____ <input type="checkbox"/> Public Water
For residential homes if income is more than \$300,000 only 50% of the sewer connection up to \$12,500 is eligible for BRF Funding			

1. OWNER _____ ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____
PHONE NUMBER (HOME) _____ WORK _____
SOCIAL SECURITY NUMBER # (Required For Payment Purposes) _____

2. BUILDING ADDRESS _____
(House Number, Street, City)

3. PROPERTY TAX ACCOUNT NUMBER _____

4. SUBDIVISION _____ LOT NUMBER _____ TAX MAP _____ PARCEL _____

**** DESCRIBE ANY PROBLEMS WITH YOUR EXISTING SYSTEM ****

5. LOT LOCATED WITHIN CHESAPEAKE BAY CRITICAL AREA: YES _____ NO _____ UNKNOWN _____

6. NUMBER OF BEDROOMS: _____

NAME, MAILING ADDRESS AND PHONE NUMBER OF APPLICANT: _____ _____
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ATTACH A SITE PLAN SHOWING THE SIZE AND SHAPE OF THE PROPERTY, HOUSE LOCATION, WELL AND SEPTIC SYSTEM ON THE PROPERTY.

The applicant hereby certifies and agrees that:

(1) the applicant is authorized to make the application; (2) the information is correct; (3) the applicant will comply with all regulations of Charles County which are applicable hereto; (4) the applicant will perform no work on the above property not specifically described in this application; (5) the applicant grants County officials and approved contractors the right to enter onto the property for the purpose of inspecting the work permitted, posting notices, and performing 5-year maintenance and sampling.

SIGNED _____ DATE _____

Instructions for Completing the Bay Restoration Grant Application for Sewer Connection in a non PFA Area.

The following are instructions for completing an application to upgrade existing septic systems with nitrogen reducing pretreatment units. The information listed below corresponds to the items listed on the Bay Restoration Grant Application.

Building: Indicate the type of building on the property.
Type: Indicate the type of septic system project for the property.
Water Supply: Indicate the type of water supply on the property.

Item 1: List the property owner's name and mailing address including the street address, city, state, and zip code. Also include the home and work telephone numbers for the property owner.

Item 2: List the building address of the property, including the house number, street name, and city.

Item 3: Transfer the 12-digit tax account number from the corresponding County property tax bill.

1) Applicant Information:

Applicant must sign the application and agree to the terms of the application. Provide name, mailing address and phone number of the applicant in the box provided.

2) Site Plan:

Submit a site plan showing the size and shape of the property, house location, well and septic system on the property, property lines, rights of way, easements, and existing improvements such as decks, garages, sheds and swimming pools.

3) Federal Tax return:

A copy of the previous year's federal tax return. Submit first two (2) pages of federal tax return, total income determines eligibility.

For businesses funding will be 50% of the lowest bid amount up to \$12,500 max.

For small businesses on the eMMA Small Business Vendor list, funding is 75% of the lowest bid amount up to \$18,750 max.

4) Connection Fee Amount

Charles County Government, Town of La Plata, and the Town of Indian Head have connection fees. Public sewer Connection/tap fees are eligible for reimbursement, while permit fees are not.

5.) Bids:

3 bids from contractors for sewer connection from house to cleanout. The lowest bid amount will be used.

<u>For More Information Contact:</u> Latoya Reeder 301-609-6751 Well & Septic Program Latoya.reeder1@maryland.gov	<u>Mail Application To:</u> Charles County Department of Health Environmental Health Services 4545 Crain Highway P.O. Box 1050 White Plains, MD 20695
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