



STEVENS COUNTY

ENVIRONMENTAL SERVICES/PLANNING & ZONING

BILL KLEINDL
Director

400 Colorado Ave, Suite 306
Morris, MN 56267

O 320.208.6558
C 320.287.2528
F 320.589.2036
billkleindl@stevens.mn.us

STEVENS COUNTY MPCA/BWSR SSTS UPGRADE GRANT PROGRAM - 2022 APPLICATION

Part 1: Applicant Information

Applicant Name: _____

Parcel #: _____

Property Address: _____

How long have you lived here? _____

Mailing Address: _____

Home Phone Number: _____

City, State, Zip: _____

Cell Phone Number: _____

Applicant's Marital Status: _____

Email Address: _____

Part 2: Household Information

How many people live permanently in your household? ____

Adjusted Annual Gross Household Income: _____

List all household members, their annual gross income (from your 1040 IRS Income Tax Return) and source(s) of income. (For self-employed persons, farm and rental property income, use the appropriate line for "adjusted gross income" from the 1040 IRS Income Tax Return.) **Include copy of 1040 Income Tax IRS Forms.**

<u>Name</u>	<u>Birth Date</u>	<u>Annual Gross Income</u>	<u>Source of Income</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

From your last property tax statement:

- What is the Estimated Market Value of your home? _____
- What are your yearly property taxes? _____
- Are your property taxes current? _____

- **Was a compliance inspection completed for your system?** Yes No
 If yes, check status and provide the Notice of Noncompliance:
 ___ Failing to protect groundwater quality
 ___ Imminent threat to public health
 If no, one may be required to demonstrate eligibility for the program.
- **Is your system failing according to Chapter 7080?** (Discharges to surface or groundwater, contains a cesspool, dry well or leach pit, or has less than 3 feet of separation to groundwater) Yes No
 If yes, explain: _____
- **Have you received bids for estimated cost of replacement?** Yes No
 If yes, return a copy with the application (2 estimates required).

Part 3. Checklist for Application Packet:

- Completed Application
- Documentation of payment of current taxes
- Documentation of two most recent mortgage payments (if applicable)
- Documentation of all household members (listed in Part 2) annual gross income and source of income
- Copy of two most recent 1040 Income Tax IRS Forms for all household occupants over age 18 to verify you meet income guidelines
- Copy of Notice of Non-Compliance Inspection
- Two bids from licensed contractors (should include work for tank pumping, electrical or plumbing needed to connect to the new septic system – interior plumbing is typically not eligible)

Part 4: Certification

I (We) certify that by signing this that the information stated above is true and correct to the best of my knowledge. I (We) realize that giving false information will result in disqualifying me from assistance from the Stevens County SSTS Upgrade Grant Program, as well as subjecting me (us) to civil and criminal consequences under the laws of the State of Minnesota.

Signature of Applicant: _____ Date: _____

For Internal Use:

Date Application Received:	Project Cost Estimate:
MPCA Funds Awarded:	
BWSR Funds Awarded:	Remaining Balance:

PRIVACY NOTICE

We are asking that you provide the information on the Stevens County SSTS Upgrade Grant application form to determine if you are eligible to participate in the program.

Your name, address and the amount of assistance you received are considered public data under the Minnesota Data Practices Act. Other information that you provide to the program about you and your household is considered private data.

We will use your private data only when it is required for administration and management of the program. Persons or agencies with whom this information may be shared include:

- Stevens County Staff and other persons involved in program administration.
- Auditors who perform required audits of this program.
- Authorized personnel from the Minnesota Pollution Control Agency or other local, state and federal agencies providing funding assistance for your grant.
- Those persons who you authorize to see it.
- Law enforcement personnel in the case of suspected fraud or other enforcement authorities as required.

We cannot release private data to anyone else or use the private data in any other way unless you give us permission by completing a consent form that we will provide. Please keep in mind, however, that data must be released if required by court order, and, in addition, your private data may be released if Congress or the Minnesota Legislatures passes a new law that authorizes or requires such release of data.

Signature of Applicant: _____ Date: _____

Minnesota law gives you important rights in regard to information maintained about you. These include:

- The right to see and obtain copies of the data maintained on you,
- Be told the contents and meaning of the data, and
- Challenge the accuracy and completeness of the data.