

**2020 FREEBORN COUNTY
COST-SHARE ASSISTANCE CONTRACT
SSTS Low-Income Fix-up Grant**

APPLICANT INFORMATION:

NAME:	ADDRESS:		
TELEPHONE:	SEWER SYSTEM ADDRESS:		
PID:	TOWNSHIP:	RANGE:	SECTION:

LICENSED CONTRACTOR:

_____ Licensed Contractor	_____ License Number
_____ Estimate Cost *Copy of final invoice is required prior to any payments	_____ Proposed Completion Date *Must be completed within 2020 construction season

APPROVAL:

I have reviewed and approved the SSTS Design.

_____ Freeborn County Environmental Services	_____ Date
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GRANT AMOUNT AUTHORIZED FOR COST-SHARE:

\$ _____

_____ Freeborn County Board	_____ Board Meeting Date
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Freeborn County USDA Adjusted Income Limits for Eligibility

<u>Program</u>	1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 Person
Low Inc.	57900	57900	57900	57900	76450	76450	76450	76450



CONTRACT INFORMATION:

I (We) the undersigned do hereby request cost-share assistance to help defray the cost of a new Sewer System. It is understood the 2020 SSTS Low-Income Fix-up Grant has limited funds available, and:

1. The land occupier or landowner is responsible for the hiring of a licensed sewer Contractor for the design and installation of the sewer system. Construction will be done in accordance with MS 7080 technical standards and specifications.
2. Land occupier is responsible for operation and maintenance of this sewer system under this program to ensure the conservation objective of the practice is met and an effective life (minimum of 10 years) is achieved.
3. Should the land occupier fail to maintain this sewer system for its effective life, the land occupier is liable to the State of Minnesota for an amount up to 150% of financial assistance received to fix-up this system; unless the failure was caused by reasons beyond the land occupier's control.
4. If title to this land is transferred to another party before expiration of the aforementioned life, it shall be the responsibility of the land occupier who signed this contract to advise any new owners that this contract is in force and to notify other parties to the contract and transfer.
5. This contract, when approved by the Board, will remain in effect unless cancelled by mutual agreement.
6. The sewer system fix-up will be started by _____ and installed by _____ unless this contract is amended by mutual consent to reschedule the work and funding.
7. Funding may only be used for homesteaded single family homes or duplexes and is not eligible at a transfer of property.
8. The sewer system is not grant eligible as a homeowner installation.
9. Maximum Grant amount shall not exceed \$5,000.00 (five thousand dollars) of total eligible costs.
10. Homeowner must be income eligible, as defined by U.S. Department of Agriculture Rural Development and Freeborn County.
11. Eligibility will be determined by Freeborn County Environmental Services.
12. Freeborn County Commissioners may review all cost-share requests and final approval for any financial assistance.
13. Freeborn County will issue final payments as a joint check listing both the applicant and the licensed contractor.
14. Applicant is responsible for the operation and maintenance of this system in accordance with U of M Homeowner Management Plan – prepared by SSTS Designer.
15. Existing system has been deemed to be (check all that apply)
 - Non-Compliant: Failing to Protect Groundwater
 - Non-Compliant: Imminent Threat
 - Surfacing Effluent
 - Connection to Field Tile
16. To be enclosed with application (please initial):
 - _____ Detailed cost estimate from MPCA licensed septic contractor
 - _____ Septic System Design
 - _____ Copy of 2019 Federal Income Tax Form

APPLICANT / LANDOWNER SIGNATURE

DATE