



**State of Delaware
Department of Natural Resources and Environmental Control
Environmental Finance
Septic Rehabilitation Program**

Septic Rehabilitation Grant Application

Dear Applicant(s):

Thank you for your interest in our program. Before you begin the application, please review the qualifications below and read the terms to make sure you understand your obligations. Complete the application.

Qualifications:

1. Your property must be located in Delaware and owner-occupied.
2. There must be an existing failing system in use or that has been in use within the last 12 months on the property. This may include a cesspool, holding tank, or outhouse.
3. Your property must be your primary residence. Rental properties, leased properties, and land contracts are not eligible.
4. Your household income must fall within the limits listed in the income chart in this package.

Terms of Agreement:

1. During the application process Environmental Finance will be paying certain costs incurred to process your application. Costs may include the following: survey, site evaluation, design, permit, contractual services fee, and others as required. All finalized costs will be included in your grant agreement.
2. All individuals listed on the deed to the property must sign the application.
3. All individuals residing in the home must provide proof of income.

Note: Program requirements and guidelines are subject to change. Income guidelines are updated yearly.

I heard about this program through:

Please read and sign below indicating that you have read and understand the information presented above. Include this sheet with your application.

Applicant

Co-Applicant

Additional Applicant Information:

Regulations may require you to abandon your septic system and connect to a central sewer system if a system becomes available in your area. Contact your county office to determine if any plans exist in your area for a central sewer system. Our program can cover costs to connect to a central sewer system.

Kent County (302) 744-2430

Sussex County (302) 855-7370

New Castle (302) 395-5449

Program funding can cover the cost of planning and installing the septic system including:

- Septic system design and construction
- Site evaluation
- Permit fees
- Well relocation if required as a condition of the septic permit
- Abandonment of old system

The program does not cover:

- Pump outs of your existing system
- Service and maintenance
- New construction or projects with construction already taking place
- Rental Homes or Second Homes

Below are the HUD 2024 Income Guidelines

1 Person	\$59,550
2 Person	\$68,050
3 Person	\$76,550
4 Person	\$85,050
5 Person	\$91,900
6 Person	\$98,700
7 Person	\$105,500
8 Person	\$112,300

***These income levels are established by HUD and may change annually.**

Applicant Checklist

Please include the following:

- A completed application signed by everyone whose name is on the deed
- Copy of the Recorded Property Deed (Must have the recorded Book and Page)
- Copy of Plot Map or Land Survey

Verification of all income for **ALL individuals** living in the home.

- If self-employed: provide 3 years of taxes including all Schedules, and most recent bank statement.
- If employed: provide two most recent paystubs, current tax return (**tax return is required only if you are required to file per income standard deduction**) and most recent bank statement.
- Social Security: provide most recent Award letter, current tax return (**tax return is required only if you are required to file per income standard deduction**) and most recent bank statement.
- Disability: provide most recent Award letter, current tax return (**tax return is required only if you are required to file per income standard deduction**) and most recent bank statement.
- Retirement Income (Including Pension, Annuities and 401k: provide current tax return (**tax return is required only if you are required to file per income standard deduction**), most recent retirement statement and most recent bank statement).
- Child Support or Alimony: provide court order
- Zoning Certificate (**Sussex County Properties**) (See location below)

Sussex County
Planning & Zoning Certificate of Zoning Approval Form
Planning & Zoning Commission
Sussex County Courthouse, Room 112
Georgetown, DE 19947
(302) 855-7878

All information will be used solely for the purpose of evaluating your application.
Please mail application and documents to:

DNREC/Environmental Finance
Enterprise Business Park
ATTN: Jessica Velazquez/Loan Management Officer
97 Commerce Way, Suite 106 Dover, DE 19904

If you have any questions, concerns, or need help filling out the application, please call the office at (302) 739-9941 for assistance.

Below are the included estimated Fees.

The following is a good faith estimate of fees that may be incurred while processing your application. Any applicable fees will be added to your funding.

The following fees are charged if we have the soil testing and septic design done for you. Soil testing and septic designs are required for all septic systems. You have the option to obtain these services on your own.

Description	Fee
Site Evaluation Review Fee	\$75.00
Septic System Design	\$350.00 - \$1,075.00
Septic Permit Fee	\$50.00 - \$115.00
Site Evaluation	\$474.00 - \$1,500.00
Land Survey	\$400-\$1,200

***Fees are estimates only; actual charges may be more or less.**

DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL CONTROL (DNREC)
SEPTIC REHABILITATION GRANT PROGRAM

Construction Bid Requirement

A Program representative **will solicit** a licensed septic system installer on your behalf. The applicant will not be permitted to select an outside contractor.

Please sign below and return.

x _____
Applicant

x _____
Co-Applicant

SEPTIC REHABILITATION GRANT APPLICATION

OWNER OF PROPERTY	DATE PURCHASED	PURCHASE PRICE	PROPERTY TYPE
ADDRESS OF PROPERTY	NUMBER OF ROOMS	NO. OF BEDROOMS	NO. OF BATHROOMS
Have had a site evaluation done on your property? Yes___ No___	Have you had a septic design done on your property? Yes___ No___	Do you currently have an approved septic permit on your property? Yes___ No___	Is your septic system currently failing? Yes___ No___

***Please note the number of bedrooms listed needs to match with your county's website.**

SEPTIC REHABILITATION GRANT APPLICATION

Applicant Name: Date of Birth:	Property Address: Mailing Address: (If different from above)
Home Phone: Cell Phone: Email Address:	Employer Name: Employer Phone: Employer Address:
Grossly Monthly Income Employment Income \$ _____ Other Income \$ _____ Total Income \$ _____	Household Monthly Income (List monthly income for ALL individuals in home) Name/Income _____ Name/Income _____ Name/Income _____
Number of Dependents _____ Dependent Ages _____	Number of Household Members _____
Marital Status Married__ Single __ Divorced__ Widowed_	

IMPORTANT-APPLICANT(S) READ BEFORE SIGNING

I, WE UNDERSTAND THAT KNOWINGLY MAKING ANY FALSE STATEMENT CONCERNING THIS SEPTIC APPLICATION WILL RESULT IN A REJECTION OF THE APPLICATION.

APPLICANT SIGNATURE _____ DATE _____

SEPTIC REHABILITATION GRANT APPLICATION

CO-APPLICANT (S)

Co-Applicant Name: Date of Birth:	Co-Applicant Property Address: Mailing Address: (If different from above)
Home Phone: Cell Phone: Email Address:	Employer Name: Employer Phone: Employer Address:
Gross Monthly Income Employment Income \$ _____ Other Income \$ _____ Total Income \$ _____	
Marital Status Married__ Single__ Divorced__ Widowed__	

IMPORTANT-APPLICANT(S) READ BEFORE SIGNING

I, WE UNDERSTAND THAT KNOWINGLY MAKING ANY FALSE STATEMENT CONCERNING THIS SEPTIC APPLICATION WILL RESULT IN A REJECTION OF THE APPLICATION.

CO-APPLICANT SIGNATURE _____ DATE _____