Public Health Prevent. Promote. Protect. Wicomice County Health Department

Comments:

BAY RESTORATION FUND

APPLICATION FOR FINANCIAL ASSISTANCE (Pre-Treatment Tank Only)

Wicomico County Health	•		Property ID #:			
108 E. Main St., Salisbu (410)546-4446 Fax (410	•		Application Date:			
Property Owner:						
Address of Property:	Phone: Email Address:					
	Parcel: Section: Block: Lot: Installer:					
	Number of bedrooms: Gallons per day: Number of residents:					
Is the existing septic system failing? □ Yes □ No Is this property located inside the Chesapeake Bay Critical Areas? □ Yes □ No New Construction (limited to cost, income % below and, minus \$1,200) □ Yes □ No If drainfield assistance is needed, please see the attached income guidelines. Drainfield assistance is available						
		e met based on the attached sheet a				
Offig it incor	% of BAT	The based on the attached sheet a	and it failuring to available.			
Homeowners	Dulante I avala for Ovalifation					
(Pre-Treatment Unit Only)	by BRF	- Company				
Income ≤ \$300,000 yearly	100%	Failing OSDS in Critical Areas	4. Non Conforming OSDS outside the			
Income > \$300,000 yearly	50%	1. I dilling GODG III Gittical Areas	Critical Areas			
Non-profit entities	100%	2. Failing OSDS outside the	5. Other OSDS in the Critical Areas,			
For-profit business	50%	Critical Areas	including new construction			
Small business	75%					
		3. Non-Conforming OSDS in the Critical Areas	Other OSDS outside the Critical Area including new construction			
		Property Owners Statement	including new construction			
the Department from any clair pre-treatment technology and financial assistance applies t pre-treatment component of the approval of a pre-treatment ur records; 5) that completion of information may be given out to	ns arising there from that I must properl to the cost of enging the sewage system; a nit does imply a gual of this application of the ensure fair pricing.	onnel to enter my property to perform neces n. I understand that 1) I am applying to pay maintain the pre-treatment unit once it is neering, inspection, two years of maintenant all other expenses are the responsibility of trantee; 4) a signed pre-treatment agreement oes not imply approval or availability of fundaments.	ssary field work, inspections, etc. and indemnify rticipate in a program to investigate the use of installed; 2) this program and any associated ance, and the cost associated with only the the property owner; 3) the Health Department's int is required and must be recorded in the land ands to the applicant; and 6) that my contact			
i list two pages of	· .					
Owner's Signature:	If you don't file taxes, proof of income must be provided Date:					
For office use only						
Area Sanitarian:		Permit Number:	Installer:			
Model: Pro	Area Sanitarian: Permit Number: Installer: Model: Project Cost: \$ Qualifying %: % Amount awarded: \$					
Verified: Failing? ☐ Yes ☐ No Critical Area? ☐ Yes ☐ No New Construction: ☐ Yes						

	Cost/Lbs Nitrogen				
Vendor (in ranking order based on	Reduction		FY2024 Unit		
Cost/Lbs Nitrogen Reduction	Ranking	BAT System	Price/BAT	Contact	Phone
Fuji Clean	1	Fuji CEN5	\$18,302.00	Dwayne C Jones	410-692-6900
Fuji Clean	2	Fuji CEN7	\$20,690.00	Dwayne C Jones	410-692-6900
		Norweco		Towers	
Towers Concrete Products	3	(Singular TNT)	\$15,828.00	Concrete	800-773-9128
Towers Concrete Products	3	Norweco (Green)	\$15,828.00	Mark Hubbard	800-773-9128
Baystar Precast	5	Aquaklear	\$17,151	Baystar Precast	410-257-6777
		Orenco (Advantex			
Atlantic Solutions	6	AX20)	\$23,816.00	Bob Johnson	877-814-8426
Gillespie and Son Inc	7	Septitech	\$22,934.00	Bob Johnson	877-814-8426
Mayer Brothers Inc	8	Hoot (600 BNR)	\$22,053.00	Nancy Mayer	410-796-1434
		Bio-Microbic			
Gillespie and Son Inc	9	(RetroFast)	\$19,784.00	James Gillespie	410-778-0900
		Orenco (Advantex			
Atlantic Solutions	10	AXRT)	\$27,051.00	Bob Johnson	877-814-8426

Drainfield Assistance Income Eligibility Limits					
	Maximum Gross	Maximum Gross			
	Monthly Income	Yearly Income			
Household Size	Standards	Standards			
1	\$2,430	\$29,160			
2	\$3,287	\$39,444			
3	\$4,143	\$49,716			
4	\$5,000	\$60,000			
5	\$5,857	\$70,284			
6	\$6,713	\$80,556			
7	\$7,570	\$90,840			
8	\$8,427	\$101,124			
Each Additional					
Person Add	\$857	\$10,284			