

# Subsurface Sewage Treatment System Fix Up Grant Policies

- Grants are only for repair or replacement of SSTS, including septic systems, that have been deemed to be an Imminent Threat to Public Health or Safety, or Failing to Protect Groundwater. A Notice of Non-compliance must have been issued by the appropriate permitting agency (typically the city or township).
- ACD may utilize various funding sources for this program. In the event of a difference between ACD policies in this document and funding source policies, the funding source policies take precedence. During the application and any award process, ACD staff will inform applicant of available funding and any funding-specific policies. Such policies commonly include income limits, grant award amount limit, and eligible areas for work.
- When funding sources require dollars be used in a “rural” area, ACD defines such areas as those properties where municipal sewer services are not reasonably available, as determined by ACD. ACD will not fund a septic system replacement where hookup to municipal sewer services is reasonably available.
- Funding is only for homesteaded single family homes or duplexes in Anoka County.
- Eligible expenses include:
  - Design and installation of SSTS replacement or repair.
  - Tree removal, if essential to the installation.
  - Black dirt and seeding of the construction area.
  - Permit costs.
  - Retaining walls or other landscaping essential to a functional SSTS. Excludes those the Anoka Conservation District (ACD) deems to be for aesthetic purposes.
  - Connecting the home to a municipal sewer line already in place on or immediately adjacent to the property.
  - Certificate of Non-compliance
- Grants may not be used to pay for septic tank pumping or other maintenance or management of a problem. Funds must fix the problem.
- Funding is limited. ACD reserves the right to fund applications with preference for those that provide greater public health and environmental benefit such as in shoreland areas where untreated wastewater may reach recreational lakes or streams. Partial grant awards may be provided at ACD’s discretion.
- Grants do not fund 100% of costs. The maximum grant award as a percentage of the cost of work is shown in the table below. Actual grant award will be determined by the ACD Board after consideration of available funds and benefits to natural resources. A sliding scale is established for income categories.
- The primary consideration for applicant income eligibility will be the most recent year’s state and federal income tax filing. ACD may additionally consider the last three months of pay stubs to identify income changes since the last tax filing, or other similar information provided by the applicant.
- Grant payments will be made only to licensed septic system installers upon completion of the work, issuance of a final inspection by the local permitting authority, and submittal of a final billing statement from the SSTS contractor that performed the work. The contractor must provide a copy of their State license before payment will be issued. It is the applicant’s responsibility to coordinate work with the contractor and ensure the contractor is compensated for any fees not covered by the grant award.



- Grant funds not used within 6 months of approval are forfeited unless otherwise specified by the ACD Board. The months of December, January and February are not counted. The ACD District Manager has the authority to provide extensions in extenuating circumstances or if satisfactory progress is being made.
- Applications are considered at monthly ACD Board meetings, generally on the third Monday of each month. Applications must be received by staff 1 week in advance of the meeting. In the case of raw sewage discharging at the ground surface or into a waterway, shorter-term emergency approval may be made by the ACD District Manager.
- ACD will provide estimates of individual project construction costs and determine how prevailing wage law applies. It is the owner's responsibility to secure construction quotes that include the applicable wage rates. ACD will not make payments until receipt of certified payrolls, if prevailing wages are required, and any other evidence required demonstrating compliance with prevailing wage requirements.
- The applicant is responsible to ensure all permits are secured and associated fees are paid.
- ACD reserves the right to require information, in addition to that listed in the application, to verify the applicants and proposed work are eligible.
- Applicants who provide false information within their grant application or fail to comply with the terms of the grant are liable for up to 150% of the grant amount issued.
- Applicants who sell or transfer ownership of the property within 18 months of the grant payment must repay 100% of the grant amount within 3 months of the ownership transfer. In this case, applicants are highly encouraged to secure these funds through the proceeds of sale.
- The ACD Board reserves the right to modify policies from time to time, or deviate from policies on a case-by-case basis to address unique circumstances.
- Applicants must have income at or below "low income." ACD uses the four-person household low-income limits for Anoka County, MN +/-8% for each additional or fewer persons in the household. The USDA limit is established and periodically updated (typically in June each year) by the USDA Rural Development for Anoka County, MN. If data are unavailable for just Anoka County, the area including or nearest to Anoka County shall be used. A sliding scale for grant awards is used.

Income Limit Category	Grant Award Amount as percentage of contractor low bid	Number of individuals residing in household							
		1	2	3	4	5	6	7	8
Very Low	90%	51,296	56,264	61,232	66,200	71,168	76,136	81,104	86,072
Low	80%	79,192	87,528	95,864	104,200	111,896	119,592	127,288	134,984

Data is from 6/18/2025 and is replaced as new income limits are published by USDA.

#### SUBMIT APPLICATION MATERIALS TO:

Anoka Conservation District

Attn: Kris Larson, Water Resource Specialist  
1318 McKay Drive NE Suite 300  
Ham Lake, MN 55304

Phone: 763-434-2030 ext. 110  
Email: kris.larson@anokaswcd.org

Applications and related materials are accepted by email or paper copy.



## **OTHER AVAILABLE GRANTS AND LOANS**

Applicants may also wish to explore other grant and loan programs including:

### **AgBMP Loan Program**

The AgBMP Loan Program provides low interest loans (typically 3%) to farmers, rural landowners, and agriculture supply businesses through participating local financial institutions. This program must fix a water quality issue and cannot be used for other mechanical failures. It can be used to connect properties to city sewer and water systems, or for septic system repair. Applicants must own the property and be current on their mortgage payments and property taxes. No reverse mortgages are allowed. Applicants need enough equity in their home to cover the lien amount. There are no income or credit limitations. Loans are repaid as a special assessment on the property tax bill.

### **Anoka County CDBG Rehabilitation Loan Program**

Loans for non-water quality related septic system work. Income is qualification required, and applicants can't have over \$25,000 assets, but this program has higher income limits than the MN Housing Finance program. It is Federal funds. Only half of the loan must be paid back if the homeowner still owns the home after 6 yrs. If the owner sells the property earlier, they owe 100%, up to \$24,999, which is repaid from proceeds of the sale of the property.

### **MN Housing Finance Rehabilitation Loan/Emergency and Accessibility Loan Program**

This program is available only to low income home owners. The eligible income limits are lower than some other programs. For example, the income limit for a single person household is \$19,000 and for a 4 person household is \$27,100. The loans are up to \$27,000 and have a 0% interest rate. No payments are required during the 10 or 15 year life of the loan if the owner continues to own the home during that period. The loan is forgivable after the loan term if the owner continues to own the home. If the home is sold during the loan term, the loan must be repaid with proceeds from the sale. 4-6 week application processing time.

### **Contact Information:**

All programs listed above have a shared email and phone number under Anoka County Community Development.

#### **Anoka County Community Development**

- 2100 Third Avenue, Suite 700  
Anoka, MN 55303
- Phone: 763-324-4650
- Email: [RS-CD-Loans@AnokaCountyMN.gov](mailto:RS-CD-Loans@AnokaCountyMN.gov)
- Website: [www.AnokaCounty.us/CD](http://www.AnokaCounty.us/CD)

Note that the summaries above were prepared by the Anoka Conservation District and are not official policies of these programs. Anyone interested in these programs should obtain policies and application materials directly from the program(s) of interest. The application on the following pages does not pertain to the three programs listed above.

# Subsurface Sewage Treatment System Fix Up Grant Application



## APPLICANT INFORMATION

Applicant(s) \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone number(s) \_\_\_\_\_

Email (optional) \_\_\_\_\_

Address of Proposed Work \_\_\_\_\_ (if different from above)

Parcel Identification Number \_\_\_\_\_ (from property tax statement)

Names of individuals residing  
at this residence  
(include children)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## DESCRIPTION OF SSTS WORK NEEDED

- ☐ SSTS Replacement
- ☐ SSTS Repair

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## QUOTES RECEIVED FROM LICENSED SSTS CONTRACTOR

Contractor: \_\_\_\_\_ Quote: \_\_\_\_\_

Contractor: \_\_\_\_\_ Quote: \_\_\_\_\_

Expired quotes are not acceptable.

## **INCOME**

Provide average monthly income for each income earner 18 year or older currently residing in the home in the table below. Income may be excluded for persons considered “full time students” by a high school, college, or similar. Income should be excluded for tenants renting space in the home unless they are immediate family members (spouses, siblings, parents, grandparents).



Name of Income Earner	Employment or Other Income*	Rental Property Income	Investment Dividends**	Child Support	Alimony	Other	TOTAL monthly income

\*Other income may include unemployment or disability compensation, worker’s compensation, severance pay, social security, disability/death benefits, pensions, retirement funds, annuities, insurance policies or similar.

\*\*Exclude investment dividends that are not easily and quickly converted to cash. For example, do not include dividends from retirement or education savings plans that can only be used for specific purposes or withdrawn at a specific future date unless a penalty is paid.



## **REQUIRED ATTACHMENTS TO THIS APPLICATION**

- ☐ Notice of Non-compliance for the SSTS to be repaired or replaced.
- ☐ Documentation of income for each income earner 18 years or older currently residing in the home, including the items listed below. Non-family tenants renting space need and persons considered "full time students" by a high school, college, or similar not be included.
  - W-2 forms for the last calendar year.
  - Most recent federal and state income tax filing.
  - Last 3 months of pay stubs (unless self employed, see below) and evidence of payments such as unemployment or disability compensation, worker's compensation, severance pay, social security, disability/death benefits, pensions, retirement funds, annuities, insurance policies, welfare assistance or similar.
  - Self-employed individuals who do not have pay stubs must submit their last 2 years of personal and business income tax filings, including any deduction forms.
  - Documentation of other income including rental income, investment dividends, child support, alimony, or others.
  - Note: Social security numbers, employee ID numbers or similar personal information may redacted (black out) from application attachments, provided names and addresses are clearly visible. That information is not needed for the grant application process.
- ☐ Photocopy of government issued photo identification card for each applicant, which is used to verify the applicants' identities.
- ☐ Two signed quotes from licensed SSTS contractors.

## **APPLICANT SIGNATURES**

I certify that I/we are the owner(s) of the real property described above and request SSTS grant funds. I understand that if I provide false information within this grant application or fail to comply with the terms and policies of the grant I am liable for up to 150% of the grant amount issued. I understand that if I transfer ownership of the property within 18 months of the grant payment I must repay 100%. (All owners must sign)

_____	Print Name		
_____	Signature	_____	Date
_____	Print Name		
_____	Signature	_____	Date