

**Danforth Ponds  
Septic System Improvement Initiative  
Cost Share Program**

**Overview and Guidelines**

The Green Mountain Conservation Group (GMCG) has been awarded a Watershed Assistance Grant from the NH Department of Environmental Services to help homeowners in the Danforth Pond watershed upgrade, repair, or replace old septic systems.

The NHDES Watershed Assistance Grant Program and GMCG recognize that septic system repair and/or replacement is expensive, and the available grants will assist homeowners on Danforth Ponds with replacement costs to protect groundwater and water quality.

The funds will be dispersed to eligible households in the form of a grant that will cover up to 33% (not to exceed \$5,000 per system) toward the cost for upgrading an outdated septic system to a modern septic system. Preference will be given to upgrading systems deemed a high risk to water quality (see #7 Eligibility) and located within 250 feet of Danforth Pond.

**Eligibility Requirements:**

1. Property must be located within 250 feet of Danforth Pond.
2. Funding is for residential year-round or seasonal homes, only.
3. The property must have an existing sewage disposal system that is outdated, in failure or close to failure.
4. New home construction or expansion that requires a septic upgrade is not eligible.
5. Properties that are for sale, currently or in the foreseeable future, are not eligible.
6. Properties cannot be in foreclosure or have any existing liens.
7. Type of system, age, and distance to surface water are criteria that will be used to assess priority. Cesspools and holding tanks are considered high priority for replacement, in addition to, systems for which no permitting history is on file with the NH Department of Environmental Services.
8. A review of the Septic System Evaluation and Certification Form will determine priority.

**Program Terms:**

1. Participation in the program is voluntary.
2. Funds may only be used toward the cost for repair, replacement, or upgrade of an existing septic system.
3. Application must be approved by GMCG **BEFORE** beginning any work on the septic system.
4. The reimbursement for cost-share is for up to 33% of the total cost, not to exceed \$5,000, to repair, upgrade, or replace an existing septic system.

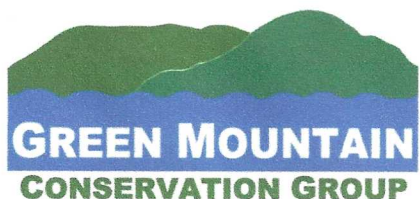
5. Applicants must have the system evaluated by a New Hampshire Licensed Septic Inspector. The inspector **MUST** fill out the Septic System Evaluation and Certification Form as part of this application.
6. Grant recipients must sign an agreement to maintain their septic systems and adhere to recommended pumping and inspection schedules.

#### Application process:

1. Complete the enclosed application form. Include a copy of the Septic System Evaluation and Certification Form.
2. All owners of record including spouse(s) or partner (s) must sign the application.
3. Submission of a signed and completed application indicates the applicant's agreement to the Program terms.
4. Applications will be reviewed and ranked according to criteria.
5. Only two applicants will be eligible to receive a \$5,000.00 grant.
6. **Applications will be accepted until August 15, 2024.**

#### If application is approved:

1. GMCG will send a Notification of Approval letter to the applicant. The signed approval letter along with the application will be considered a contract between the applicant and GMCG and will represent the cost-sharing execution date.
2. **Property owners will individually contract with an approved NH Licensed Septic Designer/Installer** to perform the necessary improvements to the homeowner's existing septic system. The homeowner's septic contractor should not be ineligible for participation in Federal assistance programs under Executive Order 12549, "Debarment and Suspension." A list of active NH Septic Designers and Installers can be found on the NHDES One Stop site: <https://www4.des.state.nh.us/SSBOneStop/> as well as the Granite State Designers and Installers website: <https://gsowa.org/find-a-professional/>
3. Property owners are responsible for the full design, permitting and construction costs.
4. Provide documentation for at least **two quotes for construction** to GMCG.
5. The cost-sharing grant will not cover any work done prior to the approval date.
6. Cost-share funding is not transferable.
7. **All work must be completed June 1<sup>st</sup>, 2025.** If the project is not able to be completed in the required amount of time an extension may be obtained by submitting a letter to GMCG explaining the delay at least 60 days prior to the expiration of the application. GMCG and NHDES will review the letter to decide if an extension will be approved.
8. Funds will be available upon issuance of the NHDES subsurface operational approval.



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Cost-Share Program

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**Application Form**

**Owner Name(s):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**A. Property Information**

Tax Parcel Number: \_\_\_\_\_ Lot Number: \_\_\_\_\_ # of Bedrooms: \_\_\_\_\_

Legal Street address: \_\_\_\_\_

Town/State: \_\_\_\_\_

The number of years the property has been in current ownership? \_\_\_\_\_

Approximate year the home was built: \_\_\_\_\_ Average # of occupants? \_\_\_\_\_

The number of months per year home is occupied: \_\_\_\_\_

Type of property septic disposal system (ISDS) \_\_\_\_\_  
(septic system, cesspool, holding tank, other)

Age of individual septic disposal system \_\_\_\_\_

Septic System Evaluation/Certification Form Completed? If yes, please attach a copy.

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Have permits and designs for a new ISDS already been obtained? Please attach copies.

Do you have an estimate of the cost to repair or replace the ISDS? Please attach estimate

Estimated Septic System Repair: \$ \_\_\_\_\_

Estimated Septic System Replacement: \$ \_\_\_\_\_



**B. Participation Terms and Conditions:**

The above-named applicant hereby agrees to take part in the Septic System Improvement Initiative (SSII) Cost Share Program offered by the Green Mountain Conservation Group. The applicant fully understands that their participation is subject to the following provisions of this agreement.

1. THIS APPLICATION MUST BE APPROVED BY GMCG PRIOR TO PARTICIPATION IN THE SSII COST-SHARE PROGRAM.
2. The applicant certifies that he/she has control of the property on which the practice is implemented.
3. The applicant agrees to properly maintain the practice(s) installed per guidelines and/or specifications.
4. The applicant agrees to follow the guidelines and application process established by GMCG for the program within the time frame indicated.
5. The GMCG will have final approval of all applications for cost-share participation and benefits.
6. 6. The applicant is responsible for securing any local, state, or federal permits that may be required.
7. To obtain reimbursement, the applicant must submit copies of the approved ISDS construction plans and the NHDES operating permit.

**C. AGREEMENT:**

The applicant hereby makes application for cost-sharing for repairing an existing ISDS or installing a new ISDS on their property agreeing to do all such work in accordance with all NHDES and local municipal Ordinances and comply fully with the terms of this cost-sharing program. Applicant agrees that application and other attachments submitted herewith are true and accurate and attests that s/he/they meet all program eligibility requirements. If any of the information provided by the applicant in their application is later found or determined by GMCG or NHDES to be inaccurate, GMCG may revoke any approved cost-sharing application and/or require repayment of any cost-sharing money the applicant(s) received based upon the supplying of inaccurate information. The undersigned further understands that providing false representations herein constitutes an act of fraud. I/we give permission for GMCG to verify any of the information submitted as part of this application with third parties. Applicant agrees that, if the application is approved for cost sharing, applicant herewith assumes full responsibility and liability for the repaired/replaced ISDS. Applicant also grants permission to allow for future septic system function analyses and environmental monitoring protocols to be carried out on the property. I have read and fully understand this application and its requirements, terms, and instructions.

Signature of owner(s): \_\_\_\_\_ Date: \_\_\_\_\_

Signature of owner(s): \_\_\_\_\_ Date: \_\_\_\_\_

**D. Application Checklist** (all information/materials should be submitted with application)

1. Complete and signed application.
2. Septic System Evaluation Form
3. Copy(s) of septic system design for new system (if available)
4. Copies of three (2) estimates obtained for repair or replacement of ISDS (if available).

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**Recommendation for Application Approval (Administrative Use Only)**

Technical Verification: \_\_\_\_\_ Title \_\_\_\_\_ Date: \_\_\_\_\_  
(NHDES Watershed Assistance Section)

Technical Verification: \_\_\_\_\_ Title \_\_\_\_\_ Date: \_\_\_\_\_  
(Green Mountain Conser Group)

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**E. Approval for Payment of Cost-Share Funds**

Approved for cost-share payment in the amount of: \$ \_\_\_\_\_

Date: \_\_\_\_\_

**X**

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Matt Howe, Executive Director  
Green Mountain Conservation Group

**NOTES:**

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