

ON-SITE WASTEWATER TREATMENT SYSTEM GRANT APPLICATION APPLICANT INFORMATION Name: Home Phone: Cell Phone: Email: Address: **HOUSEHOLD INFORMATION** Household Members (Please list the names and ages of all household members): Name: Age: Gross Annual Household Income (Please attach income tax returns): \$ Assessed Property Value: \$ **PROPOSED WORK** Please Describe the Proposed Work: **COST ESTIMATES** Please attach three dated copies of estimates for the work described above. The service providers must be certified by the Pennington County Planning and Zoning Department. BID#I Service Provider: Cost Estimate: Date of Estimate: **BID #2** Service Provider: Cost Estimate: Date of Estimate: **BID #3** Service Provider: Cost Estimate: Date of Estimate:



SIGNATURES

I certify that the residence at the address listed above is a single-family home, is not currently for sale, and is my primary residence. I also certify that I own the property listed above and I am responsible for the on-site wastewater treatment system serving the residence.

Signature of applicant: Date:

In order for your application to be complete, you must include the following items with your application:

- 1) Three dated bids for the proposed work
- 2) Copy of last year's income tax return
- 3) Copy of your identification
- 4) West Dakota Water Development District reserves the right to request additional documentation to ensure that program eligibility requirements are being met.

If you have questions, or would like additional information on the grant program, please call the WDWDD administrator at 394-2685 or wdwdd0@outlook.com.

Send completed application to:

West Dakota Water Development District 402 Saint Joseph Street, Suite 6 Rapid City, SD 57701

If you are approved to receive a grant, you will receive written notice of the award. In order to use the grant funds, you must receive West Dakota Water Development District approval **BEFORE** any work is done.