



Septic System Improvement Initiative Cost-Share Program

NHDES Watershed Assistance Grant Program

Acton Wakefield Watersheds Alliance
P.O. Box 235, Union, NH 03887
(603) 473-2500 • www.AWwatershed.org

Overview and Guidelines

The Acton Wakefield Watersheds Alliance (AWWA) has been awarded a Watershed Assistance Grant from the NH Department of Environmental Services to help households in the watershed upgrade, repair, or replace old septic systems a.k.a. individual sewage disposal systems (ISDS).

Septic systems, if not functioning properly, can release nutrients, bacteria, pharmaceuticals and other contaminants into the groundwater. The NHDES Watershed Assistance Grant Program and AWWA recognize that septic system repairs can be costly and would like to assist homeowners in the Saco and Salmon Falls watersheds in making needed repairs to their systems and drain fields in order to protect groundwater and surface water quality.

The funds will be dispersed to eligible households in the form of a grant that will cover up to 60% (not to exceed \$5,000 per system) toward the cost for upgrading or repairing an outdated septic system to a modern septic system. Preference will be given to upgrading systems deemed a high risk to water quality (see #5 Eligibility) and located within 250 feet of Province Lake, Pine River Pond, Lake Ivanhoe, Great East Lake, Horn Pond, or Lovell Lake.

Eligibility Requirements:

1. Property must be located wholly or in part within 250 feet of the lake.
2. Property must be in the state of New Hampshire.
3. Funding is only for residential single-family homes, duplexes, or seasonal camps.
4. Must have an existing sewage disposal system on property that is outdated, undersized, damaged, or non-functional. **New home construction or expansion that requires a septic upgrade is not eligible.**
5. Property on which the home is located cannot be in any stage of sale or foreclosure. Applicant must either own property outright or be current on any mortgage, contract for deed, etc.
6. 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. Systems for which no permitting history exists **may** be considered high priority; i.e. no construction and/or operational permits on file with NHDES. A review of the *Septic System Evaluation and Certification Form* will determine priority level.
7. Property must be on a lake that is covered under an existing Watershed Management Plan. As of 2025 this includes: Province Lake, Pine River Pond, Lake Ivanhoe, Great East Lake, Horn Pond, and Lovell Lake.

Program Terms:

1. Participation in the program is voluntary.
2. Funds may only be used toward the cost for repair, replacement, or upgrade of the ISDS.
3. **Application must be approved by AWWA before septic system construction begins.**
4. The reimbursement for cost-share is for up to 60% of the total cost of construction, not to exceed \$5,000, to repair, upgrade, or replace an ISDS.
5. Cost share will not pay for pumping of a septic tank or other maintenance on an existing system.
6. Applicants must have the system evaluated by a NH Licensed Septic Inspector. The inspector must fill out the *Septic System Evaluation and Certification Form* as part of this application.
7. Grant recipients must sign an agreement to maintain their septic systems and to have them pumped out every 3-5 years depending on usage. Grantee will keep pumping records on file and make them available to AWWA upon request for a minimum of 10 years.

Application process:

1. Complete the enclosed application form. Include a copy of the *Septic System Evaluation and Certification Form*, filled out by a certified septic inspector.
2. **All owners of record** (listed on municipal assessment and tax records) 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 and processed on a first come, first served basis until the cost-sharing funds are fully committed.
5. Application will be accepted on a rolling basis **until available funding has been depleted.**

If application is approved:

1. AWWA 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 AWWA and will represent the cost-sharing execution date.
2. **Property owners will individually contract with a NH Licensed Septic Designer/Installer** to perform necessary improvements to the individual sewage disposal system. The homeowner will not make any award (subgrant or subcontract) at any tier to any party which is debarred, suspended or otherwise excluded from or 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/> or the Granite State Designers and Installers website: <https://gsowa.org/find-a-professional/>
3. Property owners will be responsible for the full design, permitting and construction costs.
4. Provide documentation for **at least three quotes for construction** to AWWA.
5. The cost-share grant **will not cover any work done prior to the cost-sharing approval date.**
3. All work must be completed within one year of the cost-sharing approval date. An extension may be obtained by submitting a letter to AWWA explaining the delay. The letter must be submitted at least 60 days prior to the expiration of the application/contract. AWWA and NHDES will review the letter to decide if an extension will be approved.
4. Funds will be available upon issuance of the NHDES subsurface program operational approval.
5. Cost-share grant is not transferable upon a sale or transfer of a property



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Application Form

Owner Name(s): _____ Date: _____

Mailing Address: _____

Phone: _____ Alt. Phone: _____ Email: _____

A. Property Information:

Tax Parcel Number: _____ Lot Number: _____ # of Bedrooms: _____

Legal Street address: _____

Town: _____

Number of years the property has been in current ownership? _____

Approximate year the home was built: _____

Approximate days per year home is occupied: _____ Average # of occupants _____

Type of individual sewage disposal system (ISDS) _____
(septic system, cesspool, holding tank, other)

Age of individual sewage disposal system _____

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

Have permits and designs for a new ISDS already been obtained? If so, please attach copies.

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

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 Acton Wakefield Watersheds Alliance. The applicant fully understands that their participation is subject to the following provisions of this agreement.

1. THIS APPLICATION MUST BE APPROVED BY AWWA 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 AWWA for the program within the time frame indicated.
5. The AWWA will have final approval of all applications for cost-share participation and benefits.
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 AWWA or NHDES to be inaccurate, AWWA 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 AWWA 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 (3) estimates obtained for repair or replacement of ISDS (if available).

Recommendation for Application Approval *(Administrative Use Only)*

Technical Verification: _____ Title _____ Date: _____
(NHDES Watershed Assistance Section)

Technical Verification: _____ Title _____ Date: _____
(Acton Wakefield Watersheds Alliance)

E. Approval for Payment of Cost-Share Funds

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

Jon Balanoff, Executive Director
Acton Wakefield Watersheds Alliance

Date: _____

NOTES:
