

Wayne County Health Department
2023 Water Pollution Control Loan Fund (WPCLF) Household Sewage Treatment System
(HSTS) funding

Program Description:

The WPCLF is providing financial assistance in the form of principal forgiveness subsidies to counties and local health districts so that they can assist low to moderate income homeowners with the repair or replacement of failing household sewage treatment systems (HSTS). The principal forgiveness subsidies do not require a repayment of principal nor any payment of interest.

Who funds the program?

Ohio EPA issued the final 2023 Program Management Plan and Project Priority List for the Water Pollution Control Loan Fund (WPCLF). The fund provides financial and technical assistance for a variety of projects, addressing the quality of Ohio's rivers, streams, lakes and other water bodies. Wayne County Health Department is an approved recipient for \$150,000.

What type of assistance is available?

This is a forgivable loan, and the dollar limit is determined by the cost of the repair or replacement not to exceed \$30,000. The scope of work is limited to one septic system per property owner.

Who determines what work is needed?

The WCHD staff conducts an inspection to determine what work needs to be done to correct the emergency problem or hazard to meet the state's sewage treatment rules.

Can the homeowner do the work?

No, the work must be completed by a contractor who is approved by the WCHD staff and qualified to do the work required.

Who determines how much the rehabilitation will cost?

Using the WPCLF specifications and cost estimate analysis, the WCHD will solicit competitive bids from approved contractors. A contract will be signed with the lowest and best bidder. WCHD has the option of walking away from a project if costs are too high or does not meet "failed" criteria.

Who decides what contractor does the work?

WCHD will determine the lowest and best bidder. Contracts must be completed between the WCHD and the contractor. The contractor must be a registered septic installer and approved bidder.

How are payments to the contractor made?

Payments will be made only for work that is done. Prior to final payment, the contractor will be required to produce all necessary paperwork and warranties from subcontractors and suppliers and pass a septic installation inspection.

The basic program outline includes the following steps:

1. Homeowner properties are determined to be eligible because the properties septic system is proven to be either creating a nuisance or in a state of failure needing repaired or missing required treatment components. Homeowners are determined to be eligible to participate because they meet the income requirements. Their particular applications will be rated according to need. Most first come basis.
2. The WCHD staff conducts a detailed inspection of the eligible homes and identifies needed improvements which have to be completed in order to repair or replace the septic system. Plot plans, soils (if required), permits and NPDES applications are then developed at the cost of the homeowner.
3. Homeowner and WCHD staff agrees upon improvements.
4. The WCHD staff solicits bids from approved contractors. (At least three if possible).
5. Bids are reviewed and accepted; contract is executed between WCHD and contractor.

-OVER-

6. Rehabilitation begins; WCHD staff inspects contractor work.
7. Contractor requests payment for work completed.
8. When rehabilitation is completed, a final inspection is conducted and final payment made. A portion of your payment may be held as a certified check/cashier's check and held in safe upon completion.
9. **Should you qualify for 15% or 50% a certified check or cashier's check shall be made out to the contractor who is selected to perform the work as stated in the contract. The check is to be received by the WCHD prior to any work and placed in a secured location (safe) at the WCHD until the installation work is completed (not including rough re-grade). The WCHD will supply the check to the contractor.**

How does one find out more about this program?

Contact the WCHD office at 428 W Liberty St, Wooster, Ohio 44691 or call Vaughn Anderson, Director of Environmental Health at (330) 264-2426. The following are the income limits for the WPCLF:

Property Owner Acknowledgment: I have read and understand the 2023 Water Pollution Control Loan Fund process.

Property Owner Signature

DATE



Public Health
Prevent. Promote. Protect.

WAYNE COUNTY HEALTH DEPARTMENT

Nicholas Cascarelli, Ed.D. *Health Commissioner* **Eric A. Smith, MD** *Medical Director*

Submit Information on each resident in the home earning an income. You must list each resident's income. Please print or type the information.

Name of the individual with Income	Income Amount	Circle the Time Income Earned
1. _____	\$ _____	Year / Month / Week / BiWeekly
2. _____	\$ _____	Year / Month / Week / BiWeekly
3. _____	\$ _____	Year / Month / Week / BiWeekly
4. _____	\$ _____	Year / Month / Week / BiWeekly
Total household income	\$ _____	

Number Living in HOUSEHOLD: _____

PLEASE INCLUDE MOST RECENT PROOF OF INCOME IN THE FORM OF PAYSTUBS, DIRECT DEPOSITS OR BANK ACCOUNT. AT A MINIMUM OF 2 CONSECUTIVE PAY PERIODS. ADDITIONAL INFORMATION MAYBE REQUIRED.

Initial Here The owner acknowledges that he/she may be responsible for and agrees to pay 15% (100%-200%) or 50% (200%-300%) Income Bracket of the total estimated cost of repairs based on the total household income annually. The owner is required to provide a receipt from the contractor showing 15% or 50% of the total payment was made before work is approved. This occurs only if contract is executed.

Please estimated your qualification based on income being **0%, 15% or 50%**. Write estimated amount here: _____

******* This Section to be filled out by the Applicant in the presence of a Notary of Ohio *******

I verify that the information provided above is complete and accurate to the best of my knowledge. I understand that should any of this information be found to be purposely inaccurate the funding will be revoked and I will be responsible to pay 100% repairs/replacement and labor costs. I also understand that this application will not be processed without complete information.

_____, being duly sworn did appear before me on this ____ day of _____, 20____
(Print applicant's name)

And I, _____, do WITNESSES my hand and seal.

Applicant's Signature

Date

Notary

Date

Vital Statistics – Community Health Services - WIC

203 S. Walnut St. Wooster, OH 44691

Phone: (330) 264-0100

Fax: (330) 262-_____

info@wayne-health.org



Environmental Health

428 W. Liberty St. Wooster, OH 44691

Phone: (330) 264-2426

Fax: (330) 262-8433

ehinfo@wayne-health.org



**SEWAGE SYSTEM SITE REVIEW REQUIREMENTS
FOR PERMIT APPROVAL
\$100 APPLICATION FEE**

PROPERTY ADDRESS: _____ TOWNSHIP: _____

Structure Information: # Bedrooms: _____ or # Employees and Type of Business: _____

Acres/Lot size: _____ **CIRCLE:** Well or City Water **Vacant Land:** YES / NO

PLEASE ATTACH A COPY OF SOIL ANALYSIS or NPDES PERMIT WITH THIS APPLICATION

Property Owner MAILING ADDRESS or Owner Designee Information:

Owner _____ Address _____

Home Phone _____ Cell Phone _____ Email _____

Applicant _____ Address _____

Business Phone _____ Cell Phone _____ Fax _____ Email _____

Why Requesting Site Evaluation: _____

APPLICATION FOR: **0 New Installation** **0 Replacement** **0 Alteration**

TO BE COMPLETED BY THE HEALTH DEPARTMENT:

The following items must be submitted, reviewed, and approved by this office to obtain a sewage system installation/alteration permit. Only a registered sewage system installer or a property owner who has taken and passed the sewage system installer's test can obtain a sewage system installation/alteration permit. **NOTE:** The area designated for sewage system installation must be protected from construction traffic, storage of materials, encroachment of any kind, or other potential damage. Stake or flag both primary and replacement septic area.

Initials	Date	Rec #		FEE DUE
			Complete site application/Re-evaluation or re-flagging(SG09,SG32)	\$100/\$50
			Site Evaluation completed and approved. Stake Area.	
			Final design submitted with soil analysis/Re-evaluation/Conceptual (SG14/SG31/Lot Split SG03)	\$125/\$50
			Final design plan approved	
			Septic Installation Permit applied/ Alteration SG01/SG06	P-\$450 A-\$250
			Septic Installation Permit Issued- PERMIT #	

0 LEACH 0 PRETREATMENT LEACH 0 MOUND 0 SMALL FLOW 0 NPDES 0 SPRAY 0 Amish

Comments/Limitations of Site:

The above information has been approved. Building Permits may now be issued.

Sanitarian Name: _____
REVISED 1/3/2022

Date: _____