



Date received:

ANOKA COUNTY
Community Development
Agricultural Best Management Practices
AgBMP STSS PROGRAM

Application Date: _____
Name of Property Owner: _____
Name of Co-Owner/Spouse: _____
Business Name (if applicable): _____
Mailing Address: _____
City: _____ State: _____ Zip: _____ Township: _____
Home/Business Phone: _____ Mobile Phone: _____
Email: _____

Property Address loan funds will be applied to (**IF** different from above):

City: _____ State: _____ Zip: _____ Township: _____

Property Information:

- Year Structures/Home Built: _____ Year You Purchased Your Property: _____
 - Is property eligible to connect to city sewer or water? (circle one): YES NO
 - Are you current on your property taxes (circle one): YES NO
 - Are you current on all mortgages and property liens (circle one): YES NO
- Attach a copy of current mortgage statement or satisfaction of mortgage.**

Complete only the section for the repair / replacement requested (septic, well or both):

SEPTIC SYSTEM INFORMATION:

1. Age of SSTS: _____ Date of last system pump: _____
2. Is your SSTS within 1,000 feet of a lake, or 300 feet of a stream: (circle one) YES NO
3. Is your system failing according to Chapter 7080 (i.e. Discharges to surface or groundwater, contain a cesspool or leach pit, have less than two feet of separate to groundwater table)? (circle one)
YES NO I DON'T KNOW If yes, explain: _____
4. Does your system discharge directly to ground surface, into surface water or a tile line? (circle one)
YES NO I DON'T KNOW
5. Was a compliance inspection completed for your septic system? (circle one) YES NO

If yes, please attach and return with application

WELL INFORMATION

- 6. Age of Well: _____
- 7. Date of Last Inspection of Well: _____
 Inspection performed by: _____
- 8. Are there additional wells located on your property: (circle one) YES NO
- 9. Have you had a licensed site evaluator / contractor review the condition of the septic system or well? (circle one) YES NO if yes, what was result: _____
- 10. Have you received a cost estimate to repair or replace your well or septic system? (circle one) YES NO

If yes, please attach and return with application

All information is subject to review – project must address water quality issue.

Mail completed application with the following:

- 1) \$200 application fee (payable to Anoka County)**
- 2) Current Mortgage Statement or Mortgage Satisfaction**
- 3) Contractor Project Bid / Estimate**

**Anoka County Community Development
 Attn: Stephanie Nwaudo
 2100 3rd Avenue West Courthouse, Suite W250
 Anoka, MN 55303**

IN TESTIMONY WHEREOF, the parties have executed this Agreement as part of the application process as of the day and year written below.

_____ Date

Applicant

_____ Date

Co-applicant