



Washington County Septic System Grant Replacement Application

Complete this application form and submit it with the required documents, or determination and assistance may be delayed. Mail completed application with required documents/inspection report to:

County Administrator
Washington County Municipal Center
383 Broadway
Fort Edward, NY 12828

A. Applicant/Owner Information

1. Name: _____

2. Phone Number: _____

3. Mailing Address: _____

4. Email Address: _____

B. Property Information

1. Street Address of Septic System (if different from mailing address, above):

2. County: _____

3. Parcel Id #: _____

4. Property Type: Residential

Commercial

Other

4A. If you checked Commercial, please specify the nature and size of the business:

4B. If you checked Residential, please indicate whether the property is used as

Primary Residence

Seasonal

5. Number of bedrooms at the property: _____

6. Year septic system was installed: _____

7. Description of the septic system installed:

C. Project Information

1. Describe any problems with your existing system:

1A. If system has a septic tank:

a. What is the approximate size? _____ Gallons

b. When was the last time it was pumped? Month: _____, Year: 20 _____

c. What was the volume pumped out? _____ Gallons

d. Who was the pump contractor? _____

e. Has tank been pumped more than once? Yes _____, How frequently? Every _____ years

No

- 1B. What is septic tank constructed of? Concrete
- Steel
- Block Masonry
- Plastic
- Other
- Unknown

1C. Is an "As-Built" drawing of the construction of the septic system available? Yes

No

If yes, obtain a copy of the drawing and attach.

2. Project Type: Repair/Rehabilitation
- Replacement
- Upgrade (e.g., Advanced Nitrogen Removal System)

3. Total Estimated Project Cost: \$ _____

4. Name of Septic System Project Contractor: _____

Address: _____

Phone Number: _____

Inspection Report must be submitted with application

By signing this application form, the undersigned states that all the information contained in this application is true and correct.

Signed _____
(Applicant/Owner)

Date _____