

INDIAN HEALTH SERVICE - APPLICATION FOR SANITATION FACILITIES

RESERVATION:

APPLICANT NAME (Please Print):

ENROLLMENT NO.:

CURRENT MAILING ADDRESS:

CURRENT STREET ADDRESS (FIRE #):

MAILING ADDRESS OF NEW HOME (IF DIFFERENT FROM ABOVE):

STREET ADDRESS OF NEW HOME (FIRE #):

HOME PHONE:

WORK PHONE:

EMAIL:

Please note your email will only be used by IHS to correspond with you regarding your application and proposed facilities.

SERVICES REQUESTED: WATER: NEW SERVICE OR RENOVATION
SEWER: NEW SERVICE OR RENOVATION

Have you ever been served by the Indian Health Service before? YES NO
If yes, what year were you served?

Has the site you want served been served by the Indian Health Service before? YES NO
If yes, served under whose name?

HOME INFORMATION:

Is the home site on TRUST LAND TAXABLE LAND

Do you: OWN LEASE RENT Type of structure: MOBILE HOME HOUSE

Approximately what year was the home built (or if mobile home, moved to the site)?

Are you living in the home now? YES NO If yes, how long have you lived in the home?
If no, when will the home be ready for occupancy?

Number of bedrooms in your home? _____ Number of bathrooms in your home? _____

Number of people which will occupy your home? _____

Does your home have electric service? YES NO If no, when will electric service be provided?

Have there been any major improvements to the plumbing or rooms added to the home in the past year? YES NO
If yes, please describe.

Is there an: EXISTING WELL AND/ OR SEPTIC SYSTEM at the home site?

Are you having any problems with the WELL AND/ OR SEPTIC SYSTEM? Please describe.

SITE INFORMATION: THIS INFORMATION IS IMPORTANT. IT WILL HELP SOMEONE FROM THE INDIAN HEALTH SERVICE LOCATE AND VISIT YOUR HOME SITE.

LEGAL DESCRIPTION OF HOME SITE: ___ 1/4 OF ___ 1/4 OF SEC. ___ T ___ N R ___ E/W

Please attach a location map from a plat book showing the location of your home, or on the back of this form, please draw a map to your home, providing distances and directions from named paved roads, and a description of your home (or a neighbor's home) including color and /or size.

If available, please provide a survey map of your home site showing the property corners and dimensions of your home.

INDIAN HEALTH SERVICE - SANITATION FACILITIES CONSTRUCTION PROGRAM - INFORMATION FOR THE APPLICANT

Public Law 86-121 allows the Indian Health Service to assist members of federally recognized native tribes in obtaining a potable drinking water supply and a safe means of disposing of waste water for their home use, provided that funds are available and that the homes meet basic standard of living requirements (well insulated, have electricity, indoor plumbing, etc.).

Applications received late in the year, especially for those sites that require mound-type septic systems, may not allow sufficient time for service during the current construction season. Approval of a site by IHS will be determined on a case by case basis and will depend on the amount of funds available. The Tribe will set the priority of service on sites approved by IHS.

APPLICANT ROLES AND RESPONSIBILITIES

In signing this application, the applicant hereby agrees to the following terms and accepts all responsibilities to be completed by homeowner. The homeowner shall:

1. Provide proof of his or her legal right to reside on the site (e.g., a copy of a lease or deed). Attach a copy of the lease or deed to this completed application and return it to the tribal representative.
2. Grant access to the IHS, Tribe, and Contractor to enter onto the premises as needed to complete construction of the proposed sanitation facilities.
3. Stake the property corners and the proposed location of home, if it is not yet on site, prior to a visit by a representative of IHS. If the home location is moved after the soil evaluation has been completed, a new soil evaluation may be required, which will delay service.
4. Complete clearing and grubbing for the facilities to be installed.
5. Ensure the home meets current housing codes, is in sound condition with fully operable plumbing (including provisions against freezing in the winter, i.e. mobile homes must be skirted), and has 230V electrical power. Homes shall require only one sewer and one water connection.
6. For homes with slabs, provide cut-outs for water/sewer service connections at the locations required for the services; for homes with basements, provide sleeves for water/sewer service connections at the locations/elevations required for the services. If cut-outs/sleeves are not provided, Contractor will stop five (5) feet outside of building and the homeowner will be responsible for the water and sewer tie-ins to the interior plumbing.
7. Complete finish landscaping including seeding and mulching (if desired) on disturbed areas.
8. Provide for the proper operation and maintenance of the sanitation facilities after the date the system was put into use. System failures that occur within the first year after this date, which are determined to not be the fault of the homeowner, are covered by a 1-year warranty.
9. Be responsible for any construction costs that exceed the IHS site cost cap. The cost cap for sites receiving both water **and** sewer facilities is \$41,500.00 and for sites receiving only water **or** sewer facilities is \$27,700.00.

DRAW MAP HERE

(Please include details as listed on bottom of page 1)

APPLICANT SIGNATURE:

DATE:

TRIBAL REPRESENTATIVE SIGNATURE:

DATE: