

## Instructions for Completing the Bay Restoration Fund Grant Application For a Nitrogen-Reducing Pretreatment Unit

The following are instructions for completing an application to upgrade existing septic systems with nitrogen-reducing pretreatment units. The information listed below corresponds to the items listed on the Bay Restoration Fund Grant Application.

Building: Indicate the type of building on the property.

Type: Indicate the type of septic system project for the property.

Water Supply: Indicate the type of water supply on the property.

Item 1. List the property owner's name and mailing address including the street address, city, state and zip code. Also include the home and work telephone numbers for the property owner.

Item 2. List the building address of the property, including the house number, street name and city.

Item 3. Transfer the 12-digit tax account number from the corresponding County property tax bill.

Item 4. Transfer the subdivision name and lot number from the corresponding County property tax bill.

Indicate the dimensions of the existing and proposed living space in square feet. Include dimensions for unfinished basements, finished basements, first floor, second floor and total floor areas.

Indicate the number of existing bedrooms.

Applicant Information: Applicant must sign the application and agree to the terms of the application. Provide name, mailing address and phone number of the applicant in the box provided.

Site Plan: Submit a site plan showing the size and shape of the property, house location, well and septic system on the property, property lines, rights of way, easements, and existing improvements such as decks, garages, sheds and swimming pools.

Mail Application To: Sanitary Engineering Program  
Bureau of Environmental Health  
Anne Arundel County Department of Health  
3 Harry S. Truman Parkway  
Annapolis, Maryland 21401

**For more information, call 410-222-7193 or visit [www.aahealth.org](http://www.aahealth.org)**

**Note:** The Bay Restoration Fund Grant will not cover any costs to repair, replace or upgrade the septic system beyond the installation of the nitrogen-reducing unit.



**ANNE ARUNDEL COUNTY DEPARTMENT OF HEALTH  
BUREAU OF ENVIRONMENTAL HEALTH  
SANITARY ENGINEERING PROGRAM  
3 HARRY S. TRUMAN PARKWAY  
ANNAPOLIS, MD 21401**

## BAY RESTORATION FUND GRANT APPLICATION NITROGEN-REDUCING PRETREATMENT UNIT

*This application is designed to aid in determining your eligibility. The information will be placed in your case file and is considered public information under the Freedom of Information Act. Submit completed applications to the address above.*

<b><u>BUILDING</u></b>	<b><u>TYPE</u></b>	<b><u>WATER SUPPLY</u></b>
<input type="checkbox"/> Residential	<input type="checkbox"/> Repair/Upgrade Septic System	<input type="checkbox"/> Existing Well Well Tag # _____
<input type="checkbox"/> Commercial	<input type="checkbox"/> Addition on Property with a Septic System	<input type="checkbox"/> Public Water
<input type="checkbox"/> Industrial		
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	

1. OWNER \_\_\_\_\_ ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_  
PHONE NUMBER: HOME \_\_\_\_\_ WORK \_\_\_\_\_

2. BUILDING ADDRESS \_\_\_\_\_  
(House Number, Street, City)

3. TAX ACCOUNT NUMBER \_\_\_\_\_

4. SUBDIVISION \_\_\_\_\_ LOT NUMBER \_\_\_\_\_

Describe any problems with your existing system: \_\_\_\_\_

<b><u>DIMENSIONS</u></b> (in square feet)	<b><u>Existing</u></b>	<b><u>Proposed</u></b>	
Unfinished Basement	_____	_____	Number of Bedrooms: _____
Finished Basement	_____	_____	
First Floor	_____	_____	
Second Floor	_____	_____	
Total Floor Area	_____	_____	

NAME, MAILING ADDRESS AND PHONE NUMBER OF APPLICANT:

**Attach a site plan showing the size and shape of the property, house location, well and septic system on the property.**

*The applicant hereby certifies and agrees that:*

(1) the applicant is authorized to make this application; (2) the information is correct; (3) the applicant will comply with all regulations of Anne Arundel County which are applicable hereto; (4) the applicant will perform no work on the above property not specifically described in this application; (5) the applicant grants County officials and approved contractors the right to enter onto the property for the purpose of inspecting the work permitted, posting notices, and performing 5-year maintenance.

**Signed** \_\_\_\_\_

**Date** \_\_\_\_\_