

# *Town of Eureka*

**PO Box 313  
Eureka, MT 59917  
406-297-2123**

April 3<sup>rd</sup>, 2019

TO: Landowners in the Wastewater Phase 1B Project

FROM: Mayor LeeAnn Schermerhorn  
Project Administrator, Tracy McIntyre

RE: Application for Direct Assistance Programs for the Wastewater Phase 1B Project

Dear Homeowner,

Your household is receiving this letter to make residents aware of possible financial assistance that may be available to residents through a Community Development Block Grant (CDBG) and State Revolving Fund (SRF) Loan awarded to the Town of Eureka. The financial assistance to landowners may be used for three items:

- Hook-Up Fee
- Abandonment of Septic Tank
- Installation of the Service Line from the Town's stub out to the house/building

The cost of the hookup fee for this project is \$750 if the landowner does the connection during 2019 and depending on the difficulty of the connection the cost for the construction to connect and abandon your septic can range from \$1,500 to \$5,000. It is also important to note that the Town of Eureka Council has passed an ordinance that by January 1<sup>st</sup>, 2025 all properties within the Town's limits are required to be connected to the wastewater system and individual septic systems be abandoned.

The CDBG program is a federally-funded program designed to help communities with their greatest community development needs, with special emphasis on meeting the needs of low and moderate-income (LMI) families. The CDBG program is administered by the Department of Commerce with funding from the U.S. Department of Housing and Urban Development.

Based upon income eligibility, the CDBG program may be able to pay for the construction costs for hookup to the new sewer system which requires pumping and abandonment of the existing septic tank and the hookup from your home to the new sewer service stub-out at your property line. The costs associated with this work can be paid by the CDBG grant if your household is eligible under the CDBG guidelines for assistance to LMI Households. You must complete a full application, enclosed including the income certification (part 2) in order to qualify for these funds.

Unrelated to your income is the SRF Loan funds. The Town of Eureka has worked with the State program to build a new program to do direct assistance to landowners. This is a direct loan to landowners that will be a 3-year term, 0% interest with an annual fee of \$160.00. The \$160 will be spread across the year and shown on your monthly bill as \$13.33. The loan payments will be amortized and on your monthly bills, and a lien for the amount of the loan will be filed on the property. Failure to repay the loan to the Town will result in immediate water shutoff (as per the Town Ordinances). You must complete the full application as well and it is optional to fill out the

income certification. If you are unsure if you qualify for grant funds it is recommended to complete the income certification and the Project Administrator can identify if you do qualify.

It is important to note that all applications must be delivered or mailed to the Town of Eureka.

Hand Deliver:  
11 Dewey Avenue

Mailed To:  
PO Box 313  
Eureka, MT 59917-0313

Please make sure your application is sealed for your privacy. Upon the receipt of your application, you will be assigned a number in order to protect your privacy further. The unique number assigned to you will be all that will be presented to the Eureka Town Council for review and approval.

You will not be displaced in connection with the proposed project. Although extremely unlikely, if you must move temporarily because of work associated with the project, suitable housing will be made available to you and you will be reimbursed for all reasonable out of pocket expenses, including moving costs and an increase in housing costs. You will need to continue to pay your mortgage. Upon completion of the sewer hookup, you will be able to occupy your present home.

Under the terms of the project, you are protected by a federal law known as the Uniform Relocation Assistance and Real Property Acquisition Policies Act (URA). One of the URA protections for persons temporarily relocated is that such relocations shall not extend beyond one year. If the temporary relocation lasts more than one year, you will be contacted and offered all permanent relocation assistance as a displaced person under the URA. This assistance would be in addition to any assistance you may receive in connection with temporary relocation and will not be reduced by the amount of any temporary relocation assistance previously provided. You will also have the right to appeal the agency's determination if you feel that your application for assistance was not properly considered.

(NOTE: Pursuant to Public Law 105-117, aliens not lawfully present in the United States are not eligible for relocation assistance, unless such ineligibility would result in exceptional hardship to a qualifying spouse, parent, or child. All persons seeking relocation assistance will be required to certify that they are a United States citizen or national, or an alien lawfully present in the United States.)

We urge you not to move at this time. If you choose to move, you will not be provided relocation assistance. Please remember:

- This is not a notice to vacate the premises.
- This is not a notice of relocation eligibility.

The Town of Eureka has established a pool of qualified Contractors that will be available to provide construction services. **If your household plans to apply for a grant and/or loan to assist in the connection of your house to the sewer line you must work with one of the following Pre-qualified contractors to develop a budget and outline the work to be completed.** In rare cases, some of your connections will require a grinder pump. The contractors will work with the Town Engineer to determine who will need a grinder pump. The Town of Eureka will pay for the grinder pump equipment but the cost of installing the pump needs to be outlined within your application.

**Pre-Qualified Contractors:**

- Kooacanusa Excavating- Sean McNamara  
Office number: 406-297-7609, Cell number: 406-885-1422
- Downing Underground, Inc – Randy Downing  
Cell number: 951-543-5855
- Ramesz Excavation – John Ramesz  
Office number: 406-889-5660, Cell number 406-270-9465
- D&H Hauling – Dallas Pluid  
Cell number: 406-261-6486
- High-Grade Construction- Brandon McLaughlin  
Cell number: 406-260-3284
- A-1 Sanitation Inc- Wade O'Myer  
Office number: 406-755-3938

Attached are three parts for the application. The application, which will require a budget and outline of the proposed work, should include a drawing, as provided by your contractor is Part 1; all applicants for SRF Loan and CDBG grant funds need to complete this application. Part 2 is the Income Certification Form for Direct Benefit to LMI Households to help assist you to apply for assistance under this program. According to CDBG regulation, assistance will be prioritized to serve households of low income first, then households of moderate income, to the extent that funds remain available. And lastly, Part 3 is an option for Demographic Data request.

If you believe you are eligible, please sign and return the Certification Form to our office and we will determine income eligibility and notify you in writing if you qualify for assistance. Again, all information provided to the Town is confidential and will be shared only with State CDBG program staff and will be destroyed four years after the project is completed.

All applicants are **encouraged to have your applications to the Town Hall no later than June 21<sup>st</sup>, 2019.** All SRF loan funds will be determined prior to July 1<sup>st</sup>, 2019 with no exceptions. CDBG grant funds will remain open until exhausted, though we expect for those funds to go fast so please do not delay. The Town will be approving loan and grant awards at their monthly meeting of April 8<sup>th</sup>, May 13<sup>th</sup>, and June 10<sup>th</sup>. We except to have a special meeting after June 21<sup>st</sup> to process any of the applications received after the last scheduled council meeting. If you have any questions or need additional information, please contact our project administrator Tracy McIntyre at 406-291-1416.

Sincerely,

  
LeeAnn Schermerhorn  
Mayor

  
Tracy McIntyre  
Project Administrator

cc: file

Town of Eureka, Montana  
Wastewater Phase 1B Connection Assistance Programs

**IMPORTANT**

Please complete, sign, and mail to

Town of Eureka  
Wastewater Phase 1B Connection Program  
PO Box 313  
Eureka, MT 59917 -0313

OR

Hand-Deliver to the Eureka Town Hall  
11 Dewey Avenue  
Eureka, MT 59917

**Qualifications and Conditions:**

- Must be a landowner within the project area (see attached map)
- Must meet low to moderate income requirements if seeking Grant funds
- Must agree to the terms of the grant and loan programs as outlined below
- All work for the connection to be completed by December of 2019.
- Must coordinate the application with one of the pre-qualified contractors provide a budget. A contract with the contractor can be in place prior to the application or after award of grant/loan funds
- Understand that all funds received will be paid directly to the pre-qualified contractor. NO Work completed by other contractors not on the Town of Eureka's list will not qualify for the grant or loan funds
- Must complete the application (Part 1 and 2) in full to receive or be considered for Grant funds and include all required documentation. Part 3 of the application is optional.

**Instructions:**

- 1) Complete, sign, and return the enclosed application with all necessary documentation to the **Town of Eureka no later than June 21<sup>st</sup>, 2019 to be considered for SRF Loan Funds**
  - a. CDBG Grant Fund applicants are encouraged to return a completed application by June 21<sup>st</sup>, 2019 but will remain open until funds are exhausted.
- 2) If applying for a CDBG Grant the applicant and all other adult household members (18 years of age or older) must sign the final page of this application, including the General

Release form certifying truth and accuracy of disclosed information and authorizing the release of information.

- 3) All information on this application must be true, complete, and accurate. Incomplete applications will not be accepted. Applications deemed to contain incomplete, misleading, or false information will be rejected.
- 4) Submission of this application does not guarantee that you will be approved for receipt of the grant funds. The Town of Eureka will verify the household income and assets to determine if the program guidelines are being met.

**Required Documentation for the CDBG Grant Program (for all people residing in the household 18 years and older):**

- ☐ Personal Tax Returns including all schedules for 2016 and 2017; 2018 if completed
- ☐ W-2 statements from all employers 2017 and 2018
- ☐ Valid Driver's License Number or Identification Card
- ☐ Social Security Number of applicants living in the household
- ☐ The proposal from a licensed contractor with a layout of the property and connection, and estimated costs.

**Required Documentation for the SRF Loan Program (for Applicate and Co-Applicant/Titled Owner):**

- ☐ Valid Driver's License Number or Identification Card
- ☐ Social Security Number of applicants living in the household
- ☐ The proposal from a licensed contractor with a layout of the property and connection, and estimated costs.

The Town of Eureka may also request as needed:

- Bank Statements all pages, all bank/saving accounts for the three (3) most recent/consecutive months
- Three (3) recent consecutive IRA/401 K statements/mutual funds/stockbroker statement
- Three (3) years 1099 forms
- Most recent Social Security Benefit letter and a copy of the original award letter
- Any bankruptcy filings and discharge documents

All documents will be kept in a secure locked file to be destroyed four years after the application is received. The 4-Years is a requirement by the CDBG-Public Facilities funding source. All information will be confidential and only shared with the Project Administrator, and the CDBG/SRF staff and if needed due to a dispute or any issues that arise with the Town Attorney and Mayor.

WASTEWATER PHASE 1B APPLICATION FOR DIRECT FUNDING ASSISTANCE

**LANDOWNER INFORMATION**

1. Name: \_\_\_\_\_

2. Co-Applicant/Other titled Owner(s) Name(s): \_\_\_\_\_  
\_\_\_\_\_

**3. Addresses:**

Mailing: \_\_\_\_\_  
City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Physical Address: \_\_\_\_\_  
(NOTE: The physical address must be located within the designated project area- see attached)

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**4. Contact Information:**

Home Phone No: \_\_\_\_\_ Cell Phone No: \_\_\_\_\_

Email Address: \_\_\_\_\_

5. Do you live at this address? \_\_\_\_ yes \_\_\_\_ no

6. Is this a rental property? \_\_\_\_ yes \_\_\_\_ no

7. Years that you have owned this property? \_\_\_\_

**8. Social Security Numbers:**

Application: \_\_\_\_\_

Co-Applicate/Other Titled Owner(s): \_\_\_\_\_  
\_\_\_\_\_

9. Have you or Co-Applicate/Other Titled Owner(s) ever declared bankruptcy?  
\_\_\_\_ yes \_\_\_\_ no

If so please state the date: \_\_\_\_\_

**HOUSEHOLD COMPOSITION**

1. Number of Adults (18 and over) Living in Household: \_\_\_\_\_

2. Indicate the relationships of each member of the Household over 18: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SELECTED PRE-QUALIFIED CONTRACTOR:**

1. We have selected \_\_\_\_\_
2. Date the Contractor Visited the Property: \_\_\_\_\_
3. Has a Contract been signed between Landowner and Contractor?  
\_\_\_\_\_ yes \_\_\_\_\_ no

If Yes, please include with the application.

**PROPOSED PROJECT AND REQUEST FOR FUNDS:**

1. Outlined the Proposed Project Scope of Work to be completed:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Is a drawing of the property and proposed line location attached? \_\_\_\_\_ yes \_\_\_\_\_ no  
If no, explain why not: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. What is the Landowner applying for?
- a) Town of Eureka Sewer Hook Up Fee Assistance of \$750: \_\_\_\_\_ yes \_\_\_\_\_ no
- b) Abandonment of Septic System: \_\_\_\_\_ yes \_\_\_\_\_ no  
If Yes what is the Contractor's budgeted amount: \$ \_\_\_\_\_
- c) Installation of the Service Line from House to Town's stub-out: \_\_\_\_\_ yes \_\_\_\_\_ no  
If Yes what is the Contractor's budgeted amount: \$ \_\_\_\_\_

*NOTE: In rare cases, the Contractor will need to install a grinder pump. The grinder pump equipment will be purchased by the Town of Eureka (separate of the CDBG grant and SRF Loan funds) but installation is the Landowners responsibility. All maintenance or replacement of the grinder pump after the initial purchase is the responsibility of the landowners.*

- d) Did the contractor state that a grinder pump is needed? \_\_\_\_yes \_\_\_\_no  
If Yes, was it discussed this with the Town Engineer? \_\_\_\_yes \_\_\_\_no  
What is the additional Cost to install the Grinder Pump? \$ \_\_\_\_\_

**Total Amount Requested:**

Hook Up Fee:	\$ _____
Abandonment of Septic System:	\$ _____
Service Line:	\$ _____
Grinder Pump	\$ _____
<b>Total</b>	<b>\$ _____</b>

**CHECKLIST FOR APPLICATION**

- ☐ Completed Part 1 of this application with signature(s)
- ☐ Completed Part 2- Income Certification with signature(s)
  - ☐ If you have renters have them fill out the Income Certification and sign in the appropriate area
- ☐ Complete Part 3- Optional
- ☐ Ensure that all required information as outlined on page 2 of this application document is enclosed
- ☐ Drawing, work description, and budget from Contractor
- ☐ If applicable- signed agreement with Contractor

**SIGNATURES**

\_\_\_\_\_  
Applicant's Name (printed)

\_\_\_\_\_  
If Applicable: Co-Applciant/Other Titled Owner

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Co-Applciant/Spouse Signature

Signatures of anyone 18 Years or Older Residing in the Household:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date



**INCOME CERTIFICATION FORM**  
**FOR DIRECT BENEFIT TO LMI HOUSEHOLDS**

The following information is necessary to establish your household's eligibility for assistance under our community's Community Development Block Grant (CDBG) project. The CDBG program is a federal program intended to assist "low and moderate income" households. Your response will be kept confidential and will not be available to the general public.

Included in the **federal definition of "annual income"** are **all payments from all sources received by the family head (even if temporarily absent) and each additional member of the family household who is not a minor (a minor is defined as a person under age 18).** Income includes:

1. The gross amount, before any payroll deductions, of wages and salaries, overtime pay, commissions, fees, tips and bonuses;
2. The net income from operation of a business or profession or from rental or real or personal property (this includes gross receipts, minus operating expenses, received from the operation of an unincorporated farm or ranch);
3. Interest and dividends;
4. The full amount of periodic payments received from social security, annuities, insurance policies, retirement funds, pensions, disability or death benefits and other similar types of periodic receipts;
5. Payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation and severance pay;
6. Public assistance;
7. Periodic and determinable allowances, such as alimony and child support payments, and regular contributions or gifts received from persons not residing in the dwelling; and
8. All regular pay, special pay and allowances of a member of the armed forces (whether or not living in the dwelling) who is head of the family or spouse.
9. Any 401K, SEP or other Retirement Accounts owned.

**INSTRUCTIONS:** In **Table A** below, for the column for your family's size, was the combined unadjusted gross income for the year **2018** for all **adult members** of your household, **ABOVE** or **BELOW** the income listed in **Table A**?

**EXAMPLE:** If there are **four persons** currently residing in your household and the total gross income of the **adult members** was \$35,000, you would check "**BELOW A**" under Table A, and "**ABOVE B**" under Table B.

**Table A**

Family Size	1	2	3	4	5	6	7	8
Family Income	\$37,350	\$42,700	\$48,050	\$53,350	\$57,650	\$61,900	\$66,200	\$70,450

ABOVE \_\_\_\_  
BELOW \_\_\_\_

(Place an "X" beside the word that applies.)

**INSTRUCTIONS:** In Table B below, if your income was **BELOW** the income for your household size in Table A, was your combined gross income for all adult members of the household for the year 2018, **ABOVE** or **BELOW** the income listed for your household size in Table B?

**Table B**

Family Size	1	2	3	4	5	6	7	8
Family Income	\$23,350	\$26,700	\$30,050	\$33,350	\$36,050	\$38,700	\$41,400	\$44,050

ABOVE \_\_\_\_  
BELOW \_\_\_\_

(Place an "X" beside the word that applies.)

**EXAMPLE:** If there are four persons currently residing in your household and the total gross income of the adult members was \$35,000, you would check "**BELOW A**" under Table A, and "**ABOVE B**" under Table B.

**CERTIFICATION**

I certify that, after reviewing the CDBG definition of "annual income", the statement above is correct and complete to the best of my knowledge and belief. I agree to provide income verification if requested by local officials. **NOTE:** Anyone who knowingly provides false or incomplete income information may be subject to penalties for fraud under federal law.

\_\_\_\_\_  
Applicant's Name (printed)

\_\_\_\_\_  
If Applicable: Renter's Name (printed)

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Renter's Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Renters Address

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

## DEMOGRAPHIC DATA REQUEST

To be completed by the Applicant and Renter if applicable: The following information is requested by the federal government in order to monitor CDBG compliance with fair housing laws. You are not required to furnish this information, but are encouraged to do so. The law provides that an Agency may neither discriminate on the basis of this information, nor whether you choose to furnish it. However, if you choose not to furnish it, under federal regulations, the Agency is required to note data on the basis of visual observation or surname. If you do not wish to furnish the above information, please initial below. Data will NOT be considered in determining an applicant's eligibility.

I do not wish to furnish this information. (Initials) \_\_\_\_\_

\*\*\*\*\*

### First, designate your ethnicity as:

- ☐ Hispanic or Latino; or  
☐ Not Hispanic or Latino

<b>Hispanic or Latino Defined</b>	A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish Culture or origin regardless of race.
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### Second, indicate one or more races that apply from among the following:

- ☐ American Indian or Alaska Native  
☐ Asian  
☐ Black or African American  
☐ Native Hawaiian or Other Pacific Islander  
☐ White

Race Categories Defined	
<b>American Indian or Alaska Native</b>	A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.
<b>Asian</b>	A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
<b>Black or African American</b>	A person having origins in any of the black racial groups of Africa.
<b>Native Hawaiian or Other Pacific Islander</b>	A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
<b>White</b>	A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

### Other information; circle all that apply:

Female Head of Household

Mental or Physical Disability

Senior Citizen – Over Age 62