



**Town of Shelter Island**  
**Water Improvement Quality**

**Innovative/Alternative Septic Rebate Program Introduction**

- TO: Shelter Island Homeowner**
- FR: Water Quality Improvement Advisory Board**  
38 N. Ferry Road  
Shelter Island, NY 11964-0970  
Attn: Coco Lee Thuman, WQIAB Clerk  
[cthuman@shelterislandtown.gov](mailto:cthuman@shelterislandtown.gov)  
631-749-0758
- RE: The Town of Shelter Island offers funding and assistance to upgrade your wastewater septic system to an Innovative/Alternative Septic Wastewater System to reduce nitrogen intake.**

Dear Homeowner,

Please review and complete the following forms before applying to for a I/A Rebate:

*NOTE: All documents are on the Town website: <https://www.shelterislandtown.us/water-quality>*

- 1. Flowchart and Process Summary**
  - ✓ **Outline of the 12 to 18 Month Application Process**
- 2. Funding Policy and Restrictions**
  - ✓ **Regulations and explanation of Application Requirements**
- 3. Application Form and Instructions**
  - ✓ **How to complete the Application to determine Eligibility**
- 4. Request for Payment and Calculation Form**
  - ✓ **Review items and complete checklist**
- 5. Low-Nitrogen Sanitary System Conditional Rebate Agreement**
  - ✓ **Sign and have Agreement Notarized**

**Once all paperwork is finished please submitted the application and required forms to the WQIAB Clerk. Once received it will be presented to the WQIAB for approval and a Town Board Resolution.**



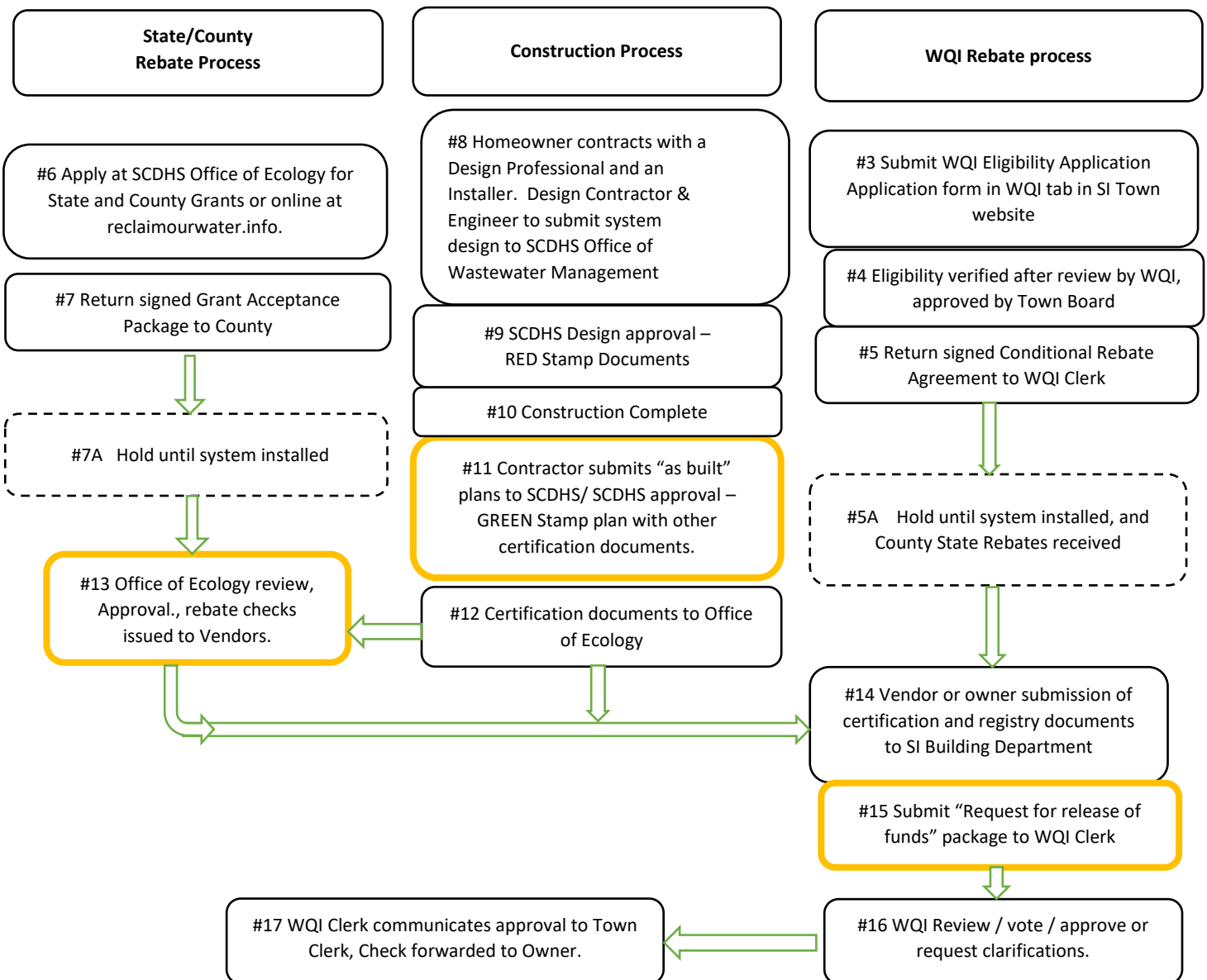
# Town of Shelter Island

## Water Improvement Quality - Innovative/Alternative Septic Rebate Program

### FLOWCHART AND PROCESS SUMMARY

Outlines the full 12 to 18-months application course

**Do Your Homework**  
items 1 and 2 Do research on suppliers / review WQI Policy  
Design Engineer agreement letter





## Process Summary

There are many organizations involved in this process, including:

- (1) Shelter Island WQI Advisory Board, Building Department, and Town Board,
- (2) SCDHS Office of Wastewater Management [SCDHS Wastewater]
- (3) SCDHS Office of Ecology for State and County Grants [SCDHS Ecology]
- (4) Design Professional (engineer or architect) (designs layout of the system),
- (5) Vendors including the primary I/A installers, plumbers, electricians, and occasionally others.

1. [Homework] Do your research on the new low-nitrogen septic treatment systems – talk to a design professional engineer or architect to determine what is the best system for your situation. Contract with a design professional. Discuss your project with a septic system installer.

2. [Homework] Review the WQI FUNDING POLICY and RESTRICTIONS. This describes the size of potential rebate, what expenses that will or will not be covered, and limits to future construction.

3. [WQI Rebate Process] Submit a Shelter Island Town eligibility application to determine if you are eligible for the Shelter Island I/A Rebate Program. Homeowner applies for Shelter Island Town Rebate with assistance from Engineer and Vendor.

The Application forms can be picked up from the Town Clerk's office (hard copy of application) or online on the Shelter Island Town website (under 'Forms'). Submit your Shelter Island application and documentation to the WQI Advisory Board Clerk.

4. [WQI Rebate Process] The WQI Advisory Board who will evaluate your application and make a recommendation to the Town Board whether to allocate funds to support your project. Applications will not be evaluated if any of the required documents are missing from the submission.

**ALL APPLICANTS ARE REQUIRED to apply for the Suffolk County and NY State Grant Septic Improvement Programs.**

Visit <http://www.reclaimourwater.info/Home.aspx> to fill out the application paperwork or call Suffolk County Department of Health Services at 631-852-5811.

5. [WQI Rebate Process] Conditional Rebate Agreement. If funding support is authorized by the Town Board, the Town Attorney will issue to the applicant the following documents:

1. Low-Nitrogen Sanitary System Conditional Rebate Agreement, and
2. Certified Release of Septic Information.

*These documents must be signed and returned to the Town Attorney within 30 days of receipt.*

If the size, manufacturer, design professional, installation contractor or other details of your application are changed after approval OF THE Conditional Agreement homeowner must submit an update explaining the change to the WQI Advisory Board. Failure to accomplish this may impact final authorization of your rebate.



## Process Summary

- 5A. [WQI Rebate Process] “HOLD” EXPLANATION. Please note that the release of the Shelter Island rebate is dependent on the speed of the I/A installation and approval. and for the release of funds to vendors from Suffolk County and New York State. This can be a one or two-year process.
6. [State and County Grant Process] Homeowner applies for the Suffolk County Department of Health Services Office of Ecology (SCDHS Ecology). Online at [reclaimourwater.info](http://reclaimourwater.info) or by paper application.
- In 8-12 weeks, the SCDHS Ecology will review the application and either request additional information or send the homeowner a Grant Acceptance Package.
  - Grant Acceptance Package contains a Grant Certificate, Grant Agreement and Application for the State Grant.
7. [State and County Grant Process] Homeowner signs and returns Grant Agreement and State Grant Application to the SCDHS Ecology.
- 7A. [State and County Grant Process] “HOLD” EXPLANATION. Release of funds from the Office of Ecology to vendors from Suffolk County and New York State can only occur after the installation has been completed and the system has been certified by the Office of Wastewater Management. This can be a one or two-year process.
8. [System Construction] Homeowner submits Vendor/Installer estimate to the County along with the Assignment of Payment form (which the Homeowner will receive from the County). Homeowner contracts with a Design Professional and a Vendor/Installer. Design Professional completes a permit application (Design) and submits it to the Suffolk County Department of Health Services (SCDHS) Office of Wastewater Management. The system design must be created by a New York State Licensed professional engineer or architect. A SCDHS Wastewater approved I/A OWTS installation contractor hired, any other required permits are secured if necessary (Town/Village/NYSDEC). SCDHS Wastewater issues a permit to construct with a RED STAMP on the plans.
9. [State and County Grant Process] Homeowner submits Vendor/Installer estimate to the Suffolk County Office of Ecology (SCDHS Ecology) along with the Assignment of Payment form (which the Homeowner will receive from the SCDHS Ecology).
10. [System Construction]. Once Assignment of Payment form is accepted by SCDHS Ecology the installation of the system can begin. The installation starts and continues to completion.
- Pump and Abandon old sanitary system.
  - Install I/A system and connect to the effluent leaching system (new or existing leaching pool), or a Pressurized Shallow Drainfield (PDS).
  - Electrician hooks up control panel.
  - SCDHS Wastewater inspection at startup.
  - Other vendors



## Process Summary

11. [System Construction] Engineer submits As-Built Plans to SCDHS office of wastewater management for final approval. If approved, a GREEN STAMP is applied to the plan with other certification documents. The SCDHS Wastewater Management office will issue final approval on the job by returning the As-Built plan with a GREEN stamp.
12. [System Construction] Engineer submits Certification forms, I/A OWTS Registration Form, Operation and Maintenance (O&M) agreement from the maintenance provider, Payment Vouchers and Invoices to the SCDHS Ecology
13. [State and County Grant Process] SCDHS Ecology review of documents, approves, and issues rebate checks directly to Vendors.
14. [WQI Rebate Process] After Green Stamp is issued, the applicant must complete the following items with the Shelter Island Building Department:
  - a. A "Shelter Island Septic Registry" form,
  - b. A "Shelter Island Well Registry" form,
  - c. A copy of the SCDHS "Green' Stamp" Final Survey cover page (to be included in the Request for Payment submission to the WQI).
15. [WQI Rebate Process] Upon final completion of your new I/A System complete and submit to the WQIAB Clerk the **Request for Payment and Calculation** Form with Checklist with a copy of each PAID Invoice and any supporting documentation for WQIAB for Payment.
16. [WQI Rebate Process] The WQI reviews the release of funds information, determines if the funding request is appropriate, or if not appropriate, reviews concerns with the owner.
17. [WQI Rebate Process] If appropriate the Town Clerk will issue check the owner.

**NOTE:** When an I/A OWTS is installed due to catastrophic failure, under direct supervision of the SCDHS a separate process is available for an emergency replacement of an unsafe failed cesspool or conventional two stage septic system. This situation will normally result in a shortened rebate funding release process. Application to the County and State rebate programs is still required.



## Town of Shelter Island

### Water Improvement Quality - Innovative/Alternative Septic Rebate Program

## **FUNDING POLICY AND RESTRICTIONS**

***NOTE: Please carefully review the list of regulations and explanation of application requirements***

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### **A. INTRODUCTION**

The objective of the Shelter Island Innovative/Advanced On-Site Wastewater Treatment System Rebate Program is to provide financial assistance to homeowners to voluntarily replace a cesspool or conventional septic system for the installation of advanced waste reduction systems. Innovative and Alternative Onsite Wastewater Treatment Systems (I/A OWTS) and Pressurized Shallow Drainfields (PSDs) reduce Nitrate contamination in our aquifer by converting it into harmless Nitrogen gas.

PSDs also enhance the biologic decomposition of pharmaceuticals, emerging contaminants of concern, and other organic compounds.

The program is administered by the Water Quality Improvement Advisory Board (WQIAB) and the Town Building Department. Funding support must be authorized by the Town Board.

## **B. CATEGORIES OF REBATE GRANTS**

### **B.1. Rebate Categories**

Eligible costs that have not been reimbursed by the State and Suffolk County will be reimbursed up to the Shelter Island Base and Incentive rebate grants allocated to the installation by the Town Board. The three categories for septic improvement installations are 1) the basic I/A system and 2) the installation of a PSD system, and 3) well relocation if mandated by the SCDHS. Authorized rebate grants will be merged as a single sum to represent the maximum reimbursement when calculating the amount that can be authorized for rebate payment.

### **B.2. Base Innovative Advanced OWTS Grant**

The maximum Base Grant that can be allocated to a project is \$12,000.

Approval of the Base Grant is based on an evaluation of the benefit (Nitrate reduction) to be provided to the aquifer. The evaluation considers:

1. Location Sensitivity
2. Nitrate Reduction Scoring (Kilograms per year)
3. Type and/or condition of Existing System

### **B.3. Reserved**

### **B.4. Pressurized Shallow Drainfield Grant**

Homeowners who install a Pressurized Shallow Drainfield system (rather than installing new or use an existing less effective leaching pool) are eligible for an additional grant. The PSD provides additional reduction of Nitrate contamination and reduces contamination of pharmaceutical and other compounds from the aquifer. This rebate may only be granted in conjunction with an I/A system installation.

To support installations of this system reimbursement of costs a maximum \$5,000 grant for the system will be awarded.

B.5. Suffolk County Mandated Private Well Relocation grant. A \$4,000 rebate will be provided if the Suffolk County Department Health Services (SCDHS) *mandates* relocation of the homeowner's private well to install an I/A system. Payment status of this grant will be determined based on SCDHS and Contractor document evidence to be provided in the "Septic Rebate Release of Funds (Form #2)" at the close of the project. This rebate may only be granted in conjunction with an I/A system installation.

## C) Expenses Eligible or Not Eligible for Rebate

### C.1 - Appropriate expenses

Financial support covers many but not all the costs associated with the replacement of a current ineffective waste system with an I/A OWTS. Covered expenses include equipment, labor, materials, and excavation causally related to the removal of the current sanitary system and installation of the I/A OWTS. Only the expenses deemed to be appropriate and necessary for the replacement of the system on the specific property are covered. In determining whether a cost is appropriate and/or necessary, the WQI AB will consider the usual and customary costs of certain equipment, materials, and labor, as well as any characteristics of the property that may aid or hinder the replacement. No expenditure shall be reimbursed, unless sanctioned by law and authorized by the Town Board. The homeowner must provide a full accounting of such costs for the project to the WQI AB and the Town Board.

#### Examples of expenses appropriate for rebate:

- Engineering inspection and design
- Survey maps
- Equipment
- Labor
- Materials
- Excavation or soil sampling required by SCDHS
- Relocation of private well if *mandated* by the SCDHS because of the I/A OWTS installation
- Costs for installation of a Pumped Shallow Drainfield system
- Requirements *mandated* by the SCDHS to meet their system design criteria
- Electrical and Plumbing installation **directly associated with the I/A installation**
- Salt brine redirection from a water treatment system to a dry well separate from the I/A
- **Leveling/grading and seeding after installation**
- **Abandonment of obsolete septic or leaching pool**

### C.2 - Expenses unsuitable for rebate

- An I/A OWTS installation mandated by Town Code or the SCDHS.
- Rehabilitation of landscaping **other than leveling and seeding of lawn areas (e.g., installation of trees, shrubs, garden areas, etc.)**
- Projects which have as their primary purpose the accommodation of new growth as opposed to remediation of water quality.
- Ordinary maintenance or repair of existing facilities
- New construction, including replacement of tear-down buildings.



**D. RESTRICTIONS ON I/A OWTS CAPACITY, MANDATED UPGRADES and TIME LIMIT ON FUTURE HOME IMPROVEMENTS**

**D.1 I/A System Capacity Limitation**

Rebates shall cover only those expenses associated with installation of a Nitrate reducing septic system which is the lowest capacity system recommended by the manufacturer for the current legally existing structure, as determined by the SCDHS (General Guidance Memorandum #19, dated April 12, 2005, subject to change). An applicant may install a higher capacity system using the applicant’s own funds to make up the difference in cost for purchase and installation between the lower and higher capacity system.

**D.2 Homeowner Initiated and SCDHS or Town building code mandated system upgrades**

WQI rebate eligibility may be authorized when the homeowner/applicant *voluntarily initiates* the process for removal of a Cesspool or a Conventional Septic System and upgrades to an I/A OWTS for the purpose of decreasing Nitrate contamination waste effluent. The SCDHS or the requirements of the SI Town Code may initiate a regulatory mandate to upgrade a Cesspool or a Conventional Septic System to an I/A OWTS as part of a review of home construction or other regulated change to the property. WQI policy bars providing rebates for an I/A OWTS when upgrading to an I/A OWTS is mandated by SCDHS or Section 43-10.4, Code of Shelter Island.

By WQI policy, I/A OWTS installation due to Catastrophic Cesspool failure, as defined by the SCDHS, is eligible for rebate support, regardless of the project’s benefit scoring in part B.2. See section D.4 regarding Time Limit on Future Home Improvements.

By WQI policy, replacement of a home after a “tear down-demolition” of an existing home as defined by section 43.8 Demolition Permits in the Shelter Island Code is considered new construction and is not eligible for rebate support.

**D.3 Reserved**

**D.4 Time Limit on Future Home Improvements**

The Conditional Rebate Agreement between the Owner and the Town limits expansion of the property for a three-year time period. This time period is based on the date the “Red Stamp” system design has been issued by the SCDHS. Violation of this agreement may subject the owner to the following penalty.

<b>Three-year Expansion Situations (Owner has received Rebate)</b>			
<b>I/A Capacity installed (example type)</b>	<b>Expansion without increase in design flow as determined by SCDHS (Example #1)</b>	<b>Expansion with increase in Design Flow as determined by SCDHS (Example #2)</b>	<b>Any expansion &gt;1500 sq. ft. regardless of Design Flow (Example #3)</b>
Installed the lowest appropriate (like a CEN 5)	OK – rebate agreement remains fulfilled, return not required	Expansion not allowed, rebate must be returned to the Town	Expansion not allowed, rebate must be returned to the Town

Installed larger capacity than required (Like a CEN7)	OK – rebate agreement remains fulfilled, return not required	Expansion not allowed, rebate must be returned to the Town	Expansion not allowed, rebate must be returned to the Town
Larger initial home size Design Flow gallonage homes follow a similar penalty. Example types will be different.			

Example #1 - Rebate return to SI is not necessary when owner installs a deck, garage, uninhabitable accessory structure, swimming pool, that the SCDHS determines does not change the existing Design Sewage Flow. Addition must be less than 1500 sq. ft. and may be for an I/A appropriately sized or larger than required.

Example #2 - Expansion where owner installs or wishes to install additional space in the structure that the SCDHS determines will INCREASE the Design Sewage Flow of the property. Such an expansion is not allowed. The rebate must be returned to the Town since the 3-year limitation from the date of the Red Stamp approval by SCDHS is in effect. Examples of disallowed expansion include addition of bedrooms, a change in floor plan that results in the reclassification of non-bedroom rooms causing an increase the design flow of a home, and accessory structures.

Example #3 - Expansion where owner installs or wishes to install additional space with an expansion greater than 1500 square feet. By Town Code any expansion over 1500 sq. ft. is categorized as “New Construction” and not eligible for a rebate. The rebate must be returned to the Town since the 3-year limitation is in effect.

**D.5 Voiding of Rebate Conditional Agreement and Extraordinary Exceptions**

If improvements in section D.4 violate restrictions, the prior rebate approval becomes void. The applicant is not eligible for any portion of the rebates, and any payments made to the applicant pursuant to this grant must be returned to the Town. Should the applicant fail to return the funds when requested, the applicant agrees to pay the Town’s legal fees in connection with the Town's recouping of the funds.

EXCEPTION: If an expansion is for the purpose of creating Affordable Housing the Town Board may rescind the three-year limitation on improvement plans as a variance to this policy. Homeowners must register with the Community Housing Board for this variance to be considered.

EXCEPTION: In the event of a change in ownership the three-year limitation on improvements is ended.

**E. DEFINITIONS**

***Contractor - Operation and Maintenance (O&M) provider*** - A private entity hired by a homeowner to provide tasks required by the SCDHS and/or the manufacturer of the I/A OWTS including, but not limited to, cleaning, inspection, and adjustment of control settings to ensure proper operation of the I/A OWTS and related components.

**Design Professional** – An Engineer or Architect licensed or registered in the State of New York and authorized by the State Education Law to design the installation of an I/A OWTS and Pressurized Shallow Drainfield.

**Onsite Wastewater Treatment System – Cesspool or Cesspit** - Any “single stage” buried chamber, including, but not limited to a perforated metal tank, perforated concrete or block vault or hollow excavation. A Cesspool receives direct discharge of wastewater for the purpose of collecting solids and releases effluent liquid directly into the surrounding subsoil without the aid of a leaching structure.

**Onsite Wastewater Treatment System – Conventional Septic System** – A “two stage” onsite sanitary system consisting of 1) a watertight chamber “septic tank” used for the settling, stabilizing and anaerobic decomposition of sewage that does not have any active aeration or mechanical means of treatment or any supplemental filtration components and 2) any associated interconnecting piping, leaching structure(s) and any associated interconnecting piping.

**Onsite Wastewater Treatment System – Innovative and Alternative Onsite Wastewater Treatment System(s) (I/A OWTS)** - An advanced onsite “two stage” wastewater treatment system that is designed to reduce total Nitrate in treated effluent to no more than 19 mg/l. The system consists of 1) the primary tank that operates through aeration and mechanical means to reduce Nitrate contamination with other supplemental filtration components and 2) any associated interconnecting piping, leaching structure(s) and any associated interconnecting piping.

**Onsite Wastewater Treatment System – “Design Sewage Flow” or “Capacity”** – Gallons of waste a septic system such as an I/A OWTS must be capable of treating is determined by the SCDHS based on the of structure and floor plan of the building. Frequently mis-interpreted simply as the number of bedrooms, the floor layout of other rooms may impact the SCDHS count. Determined by the SCDHS per “General Guidance Memorandum #19 Procedures of the Office of Wastewater Management for Classifying Bedrooms within Dwellings”, currently dated April 12, 2005, subject to change.

**Leaching Structure, Traditional (“Leaching Pool”)** – A concrete or other structure placed significantly below grade which distributes conventional septic tank or I/A OWTS effluent to allow it to infiltrate the surrounding subsoil. Provides poor conversion of Nitrates due to depth of distribution into subsoil.

**Leaching Structure, Innovative (“Pressurized Shallow Drainfield”, ‘PSD’)** – A structure placed just below grade which distributes I/A OWTS effluent to a piping system to allow soil organisms to convert Nitrates and other contaminants into less harmful compounds.

***I/A OWTS Registration*** - The approval process by which a Homeowner/Installation Contractor/Design Engineer completes and submits documentation required by the SCDHS to certify ownership and use of an I/A OWTS in accordance with Suffolk County Sanitary Code Section 760-1905 (I/A OWTS Registration Requirements). This includes arrangements for periodic maintenance by the Operation and Maintenance (O&M) provider.

***Homeowner Initiated I/A OWTS Upgrade***– An I/A OWTS upgrade voluntarily initiated by a homeowner for the purpose of decreasing Nitrates and other contaminants from their waste effluent. Homeowner initiated upgrades must not be the result of building additions or other changes as defined in SCDHS procedures. These upgrades are not considered.

***SCDHS or SI Town Initiated I/A OWTS Upgrade***– An upgrade from a Cesspool or Conventional Septic that is mandated as a result of building permit review of the owner’s planned construction for an addition, accessory building, waste system relocation due to the installation of a swimming pool, driveway, deck, shed, patio, or other actions that do not have as their primary purpose reduction in Nitrate contamination. SCDHS or SI Town Initiated mandated I/A system upgrades are not eligible for WQI rebate funding.

***Catastrophic Emergency Cesspool Failure***– A determination from the SCDHS that an existing cesspool requires accelerated emergency replacement to maintain safety. Emergency cesspool system replacement is eligible for WQI rebates regardless of the scoring criteria, provided the emergency replacement is not associated with expansion of the house or other action that cause it to be mandated by SI Town Code Section 43-10.4.

***Block Cesspool Status as categorized by SCDHS definition*** – An existing “block cesspool” system (i.e., a single stage cesspool fabricated from individual concrete blocks, not a preformed concrete structure) is considered “failed” by the SCDHS regulations. Cesspool system upgrades are mandated by SI Town Codes Section that meet the WQI Scoring Criteria, that would mandate installation of an I/A system per SI Town Code Section 43-10.4. are eligible for WQI rebates provided and are not required to install an associated with a revision of the structure or other action.



## Town of Shelter Island

### Water Improvement Quality - Innovative/Alternative Septic Rebate Program

## APPLICATION FORM AND INSTRUCTIONS

### *How to Complete Application to Determine Eligibility*

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This application form is used by the WQI AB to determine eligibility for residential advanced septic treatment system rebates. After the WQI AB has evaluated the information the Town Board must. Payment of rebates for appropriate expenses is provided after the system has been installed and certified by the SCDHS – this may take a year or longer.

#### **Filing Instructions:**

Deliver two (2) printed copies and email a PDF of all required signed forms/documentation to:  
Town of Shelter Island  
38 N. Ferry Road  
P.O. Box 970  
Shelter Island, New York 11964-0970  
ATTN: Coco Lee Thuman, WQIAB Clerk.

Drop off copies or mails via USPS and email the PDF copy to [cthuman@shelterislandtown.gov](mailto:cthuman@shelterislandtown.gov)

#### **Details on some items**

2e “Occupancy Days” are *estimates* used to determine the mass of Nitrates that will be eliminated by installation of an I/A system – ‘ballpark’ residency numbers are fine.

4h Note that you *must* file for County and State rebates to be eligible for Shelter Island funding support.

5a At this stage of the process it is *not* necessary to have the final design for the I/A system – hand drawn on a copy of the survey is adequate (submit the final design survey page if it has already been completed).

5c This section will be satisfied by either a letter retaining a design engineer or architect, or a copy of the final design (if already done).

# Shelter Island - Innovative/Advanced Septic Rebate Application Form

## DOCUMENT ACCESS REQUIREMENT

The applicants authorize the WQI AB and/or the Town of Shelter Island to have access to the Suffolk County Department of Health Service documents regarding septic installation design, grants, and other information pertinent to this application.

Print Name \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

## SECTION 1 - CONTACT INFORMATION

 Fill in all sections as appropriate.

- 1a) Owner's name -Click or tap here to enter text.
- 1b) Shelter Island Street Address -Click or tap here to enter text.
- 1c) Shelter Island PO Box, Post office, zip - Click or tap here to enter text.
- 1d) Off-Island address (if applicable) -Click or tap here to enter text.
- 1e) Primary contact cell phone # - Click or tap here to enter text.
- 1f) Shelter Island landline (if applicable) - Click or tap here to enter text.
- 1g) Off Island landline phone (if applicable) - Click or tap here to enter text.
- 1h) Email address(s) - Click or tap here to enter text.

Click or tap here to enter text.

## SECTION 2 RESIDENCE USAGE and DESCRIPTION INFORMATION –

Fill in all sections as appropriate.

- 2a) Year or age of home- Click or tap here to enter text.
- 2b) Number of bedrooms (as determined by your Design Professional) - Click or tap here to enter text.
- 2c) Is this your primary or second home?  Primary Residence  Second home
- 2d) Is this structure owner occupied or a rental property? Click or tap here to enter text.
- 2e) Provide an estimate of the number of people and occupancy days, based on last year's use pattern:

Usage by:	Number of individuals	Days annually
1. Primary residents	Click or tap here to enter text.	Click or tap here to enter text.
2. Guest residents	Click or tap here to enter text.	Click or tap here to enter text.
3. Summer Rental	Click or tap here to enter text.	Click or tap here to enter text.

2f) Do you plan to renovate, make additions, or have any other home improvement plans for the property in the next three years?     yes  no    If yes describe - Click or tap here to enter text.

### **SECTION 3 - EXISTING SEPTIC SYSTEM INFORMATION**

Fill in all sections as appropriate. If information is unknown, please indicate “not known”.

3a) Age of existing septic system - Click or tap here to enter text.

3b) Type of current system -

- Block Cesspool – “Failed” as determined by the SCDHS.
- Block Cesspool – “Failed Emergency Replacement” as determined by the SCDHS.
- “Two Stage” substandard conventional septic system,
- “Two Stage” conventional Septic System with or without SCDHS RO#
- other (describe) - Click or tap here to enter text.

3c) Capacity [if known] - Click or tap here to enter text.

3d) Last clean out of septic system (year – if known) – Click or tap here to enter text.

### **SECTION 4 - PLANS FOR INNOVATIVE AND ALTERNATIVE ONSITE WASTEWATER TREATMENT SYSTEM**

4a) Reason for replacement of existing system

- Voluntary Update
- System poor performance
- Building renovation or addition
- Mandate by SCDHS (describe below)
- Emergency replacement of a failed cesspool
- Other (describe below)

Comments/Describe Click or tap here to enter text.

4b) Has the system already been installed under an SCDHS Emergency Replacement assessment?

- yes  no

4c) Components of requested treatment system-

I/A OWTS Manufacturer and Model # - Click or tap here to enter text.

Use of existing or new leaching pool - Click or tap here to enter text.

Pressurized Shallow Drainfield (if applicable) – Click or tap here to enter text.

(Note: PSD installation offers an additional financial incentive over the base rebate)

Has the SCDHS *mandated* relocation of private well?  yes  no  not yet determined

4d) Is the capacity of the I/A system larger than required for the existing house?  yes  no

4e) Name of SCDHS approved Installation Contractor Click or tap here to enter text.

4f) Project Cost (estimated) \$ - Click or tap here to enter text.

4g) Owner's plan for periodic maintenance of system -

installer of the I/A system  other (describe) - Click or tap here to enter text.

4h) Homeowners *must apply* for the Suffolk County and NY State grants *to be eligible for a Shelter Town Rebate*. If the State or County decides that you are not eligible for a grant, you will be asked for proof of that decision when you request payment of the Town Rebate after installation of your I/A OWTS unit.

Have you applied for Suffolk County and NY State Grants for this project?  yes  no

4i) If the project requires a relocation of the well "Well Registry" paperwork must be filed with the SI Building Department before a rebate can be awarded.

### SECTION 5 REQUIRED REFERENCE DOCUMENTS

5a) Attach a draft or final site Survey document illustrating installation area of the I/A. The location of the I/A on the survey can be hand drawn onto a copy of the current survey document. It is not necessary to have an official survey illustrating the system location at this stage of the application. [attach]

5b) Well Water source or municipal water system?  Private Well  Public System

If Private well - If available, please provide a copy of a water quality test report. Not mandatory.

If Public water source - which public system is the property serviced by?

SI Heights  West Neck  Dering Harbor

5c) A letter from a New York State Licensed design professional or professional engineer, or architect who has been retained by the homeowner for design work of the system is required.

[Attach certification letter or design drawing]

5d) Provide specifics (capacity and types) of water treatment systems on site.

- Whole-house Reverse Osmosis  Partial service line Reverse Osmosis  
 Iron/manganese reduction  Water softening  Sediment Filtration  
 pH adjustment system  Chloride (salt) reduction  
 Other (describe) - Click or tap here to enter text.

**Note** If an existing osmosis or other water treatment system's backwash/purging fluid is directed into the obsolete existing septic system or cesspool SCDHS will mandate a separate dry well.

Discharge backwash/purging fluid during recycling must be dispersed into a separate dry well from the I/A system.



Document Checklist :

- Site Survey document (5a)
- Water test report – if available, not mandatory (5b)
- Engineer certification retention letter (5c)
- Water treatment systems list (5d)

**APPLICATION SUBMISSION:**

Send a PDF of all documents to the email address below, and mail or drop off two hard copies of the APPLICATION, REQUIRED REFERENCE DOCUMENTS and WATER TEST RESULTS to:

Deliver two (2) printed copies and email a PDF of all required signed forms/documentation (including Application, References Materials and Water Test Results) to:

Town of Shelter Island  
38 N. Ferry Road  
P.O. Box 970  
Shelter Island, New York 11964-0970  
ATTN: Coco Lee Thuman, WQIAB Clerk.

Drop off copies or mail via USPS and email the PDF copy to [cthuman@shelterislandtown.gov](mailto:cthuman@shelterislandtown.gov)



## Town of Shelter Island

### Water Quality Improvement - Innovative/Alternative Septic Rebate Program

# REQUEST FOR PAYMENT FORM / REQUIREMENTS / CHECKLIST

## *The Final Stage of Application Process*

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### **Instructions For Applicant Request to Release Shelter Island Rebate Funds for Residential Advanced Septic Treatment Systems**

#### **Timing:**

Applicants request funding release after the system is fully installed, approved by Suffolk County Department of Health Services, and County and State grants have been received by the applicant.

#### **Requirements:**

In order to receive funds reserved in the Shelter Island Conditional Rebate Agreement the applicant must complete and submit these forms with supporting documentation to the WQI Advisory Board. Fill in the pale-yellow fields in the "Request for Payment and Calculation Form".

The current versions are on the WQI website (title "4 – Request for Payment and Calculation Form with Checklist").

A member of the WQIAB may contact you to clarify the type or size of expenses.

#### **Filing Instructions:**

Deliver two (2) printed copies and email a PDF of all required signed forms/documentation to:

Town of Shelter Island  
38 N. Ferry Road  
P.O. Box 970  
Shelter Island, New York 11964-0970  
ATTN: Coco Lee Thuman, WQIAB Clerk.

Drop off copies or mails via USPS and email the PDF copy to [cthuman@shelterislandtown.gov](mailto:cthuman@shelterislandtown.gov)

## **Water Quality Improvement - Innovative/Alternative Septic Rebate Program**

### **Required documentation checklist to be submitted with rebate release request .**

- Xerox of the Suffolk County Final Survey approval cover page (color copy of green stamp cover page). The entire file is not required by the WQI.
- Xerox of copies of vendor expense invoices, showing “paid in full”.
- Completed and signed “Owners Certification of Application for Rebate Release and Access”.
- Completed and signed “Request for Payment and Calculation Form”.
- Xerox copy of Suffolk County and NY State septic upgrade grant rebate check or check stub, or if denied by them a copy of the denial letter.
- Verification that the Shelter Island Well Registry has been filed (a copy of the Well Registry document initialed by the Building Department Clerk is adequate)
- Verification that the Shelter Island Septic Registry has been filed (a copy of the Septic Registry document initialed by the Building Department Clerk is adequate).
- A summary page listing all expenses that are requested for reimbursement.

Note: See the Building Departments Tab in the Town website for the current instructions for completing the Well and Septic Registry forms.

**Directions:** Complete the OWNERS CERTIFICATION OF APPLICATION FOR REBATE RELEASE AND ACCESS contract in ink, original to be forwarded with other documents to the WQI clerk.

**Water Quality Improvement - Innovative/Alternative Septic Rebate Program**

**OWNERS CERTIFICATION OF APPLICATION FOR REBATE RELEASE AND ACCESS**

I/WE, (print full name(s),

Owner #1 \_\_\_\_\_

Owner #2 \_\_\_\_\_

the undersigned, certify that I/We are the legal titled owner(s) of the land identified in this application and that this application, including any appended documentation, constitutes a true statement of facts to the best of my/our knowledge.

Owner #1 signature \_\_\_\_\_ Date \_\_\_\_\_

Owner #2 signature \_\_\_\_\_ Date \_\_\_\_\_

**(Signing this form authorizes the Town to access to the site to perform an inspection of the system)**

Property Address \_\_\_\_\_

Suffolk County Tax Map # \_\_\_\_\_

Phone \_\_\_\_\_

Email address \_\_\_\_\_

**Directions to complete the REQUEST FOR PAYMENT AND CALCULATION FORM:**

Enter information in all of the pale-yellow fields. For expense types that are not being claimed place "none" in the "Vendor Name" field with zero as the expense. Sign and submit the form with the required documentation attached. Submit the original of the forms and xerox copies of other documents to the WQI Clerk.

A member of the WQI may contact you to clarify the type or size of expenses.

## TOWN OF SHELTER ISLAND

38 N. Ferry Road, P.O. Box 970, Shelter Island, NY 11964-0970

### Request for Payment and Calculation Form

Date \_\_\_\_\_  
 Owner \_\_\_\_\_  
 Property Address \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 SCTM # \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Email \_\_\_\_\_

**\* Complete fields with the invoice amount PAID and attached a copy of each invoice to the form:**

Expenses Paid	Vendor Name	Cost	Office Use	WQI Notes
Engineering				
Installer				
Survey				
Water Test				
Backwash line				
Backwash water filter drywell				
Test Hole Boring				
New Well Upgrade				
Other				
Total expenses (submitted/WQI Approved)				
<b>Less: NYS Grant payment amount</b> <i>(Include Copy of Check)</i>				
<b>Less: SCOH grant payment amount</b> <i>(Include Copy of Check)</i>				
Expenses subject to SI Town Rebate <i>(Submitted/WQI Approved)</i>				Expenses minus grants
Conditional Rebate Funding Reserved by Town Board				
<b>Recommended Rebate to be forwarded for Town Board authorization.</b>				

<b>Property Owners Signature:</b> _____	<b>Date:</b> _____
---	--------------------

**OFFICE USE ONLY:**      **WQIAB Approved on** \_\_\_\_\_ **Total Payment Approved \$** \_\_\_\_\_

WQIAB Chairperson (PrintName) _____	
Signature _____	Date _____



## LOW-NITROGEN SANITARY SYSTEM Conditional A/I Septic Rebate Agreement

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THIS AGREEMENT, is made this \_\_\_\_\_ day of \_\_\_\_\_, 2023 BETWEEN

\_\_\_\_\_, residing at

\_\_\_\_\_ (the "APPLICANT(S)")

and the TOWN OF SHELTER ISLAND, a municipal corporation, having its principal offices at

38 N. Ferry Road, PO Box 970, Shelter Island, New York, 11964 (the "TOWN").

Red highlighted text revisions are recommended for the Town Attorney to consider.

### I. GENERAL AGREEMENT

1. The parties agree that pursuant to the attached Resolution of The Town Board of the Town of Shelter Island and in accordance with Chapter 88 of the Town Code, the TOWN has authorized a conditional rebate of up to ~~Six Thousand Dollars (\$6,000.00)~~ [update with amounts, for the I/A system and if installed a Presurrized Shallow Drainfield] for the APPLICANT's upgrade/installation of a Low-Nitrogen Sanitary System at \_\_\_\_\_, Shelter Island, New York subject to APPLICANT's compliance with the terms of this contract:

**This agreement must be executed and returned (with a postmarked envelope) to the TOWN within thirty (30) days of the TOWN's mailing of the agreement to the APPLICANT or the approval will be void and the application considered withdrawn.**

### II. REQUIRED APPROVALS

2. APPLICANT must obtain approval from the Suffolk County Health Department to install an approved Low-Nitrogen Sanitary System as defined in Chapter 88 of the Shelter Island Town Code; and

### III. INSPECTIONS

3. APPLICANT agrees to allow an inspection of the property for which the grant is sought by the TOWN at any reasonable time prior to, during or at the completion of the project; and

#### IV. REQUIREMENT TO APPLY FOR PRIMARY GRANTS

4. APPLICANT must apply for any available New York State and/or Suffolk County grant for which APPLICANT is eligible and must advise the TOWN [define who is to receive this? Attorney? WQI Clerk?] within 15 days of any such application; and
5. APPLICANT must execute a [Certified Release of Septic Information Form] ~~separate release~~ permitting the TOWN to obtain all records from Suffolk County and/or the State of New York regarding any application made for a [county/state] septic grant including complete copies of the application and ongoing updates and
6. If APPLICANT is ineligible for any County or State or provide the reason for such ineligibility and proof thereof; and
7. If combined with a New York State or Suffolk County grant or a grant issued by any other entity, the Shelter Island grant shall become secondary to all other grants and may be drawn upon only once other grant funds are exhausted; and

#### V. TIME FOR COMPLETION

8. APPLICANT must complete the project and submit the green-stamped final approval from the Suffolk County Health Department certifying proper installation of such system within one (1) year [one year timeframe is too short, does the WQI Clerk get the Conditional Rebate after signature?] from the date of ~~this conditional rebate approval~~ [the SCDHS “Red Stamp”] and
9. APPLICANT may apply for an extension from the Water Quality Improvement Advisory Board if the project cannot be completed within one (1) year year [one year timeframe is too short] from the date of ~~this conditional rebate approval~~ [the SCDHS “Red Stamp”] which extension shall be granted for a period of time to be determined by the Board if applicant can show substantial progress towards completing the project and sufficient funds are available; and;

[#8 is now the Conditional Rebate, #9 is not defined? “Red Stamp” may be appropriate for both]

#### VI. SEPTIC REGISTRY

10. Prior to issuance of any rebate funds, the APPLICANT must complete registration [at the Building Department] with the Town's septic registry; and

## VII. PAYMENT OF GRANT UPON COMPLETION

11. Only after completion of the project and satisfaction of **all** the conditions, including a review of the expenses and a recommendation by the Water Quality Improvement Project Advisory Board, the Town Board **has authorized the I/A Chairman to advise the Town Clerk to issue** ] a rebate check for the actual eligible cost of the system and installation up to **\$6,000 [ ... up to the maximum rebate authorized by the TOWN BOARD]** payable to the APPLICANT; and

12. APPLICANT must submit a list of appropriate expenses incurred for the project to the Water Quality Improvement Advisory Board which has sole discretion to determine which expenses are appropriate and eligible for the rebate and will measure the expenses against the usual and customary costs of certain equipment, materials, and labor, as well as any characteristics of the property that may aid or hinder the replacement. The following guidelines are offered as to appropriate and eligible expenses:

- a. Engineering inspection and design
- b. Survey maps
- c. Equipment
- d. Labor
- e. Materials
- f. **Excavation or soil sampling required by SCDHS**
- g. Relocation of private well if *mandated* by the SCDHS because of the I/A OWTS installation
- h. Costs for installation of a Pumped Shallow Drainfield system
- i. Requirements *mandated* by the SCDHS to meet their system design criteria
- j. Electrical and Plumbing installation **directly associated with the I/A installation**
- k. Salt brine redirection from a water treatment system to a dry well separate from the I/A
- l. **Leveling/grading and seeding after installation**
- m. **Abandonment of obsolete septic or leaching pool**

13. APPLICANT is the sole party responsible for paying for all costs and vendors associated with the project and APPLICANT agrees that the Town of Shelter Island is not responsible for either the quality of the work or payment of vendors for this project; and

14. APPLICANT is solely responsible for determination and payment of any taxes due as a result of the project; and



## VIII. INDEMNIFICATION

15. APPLICANT, as well as APPLICANT's successors and assigns agrees to fully indemnify and hold the TOWN harmless for any damages of any kind sustained as a result of or arising out of the project associated with this grant whether occurring prior to, during or after installation including, but not limited to any damages caused by defect or failure of the system itself while in use; and

## IX. TITLE CHANGES

16. The rebate is approved for the specific owner named above. If title changes at any time during the project, APPLICANT and the incoming owner must jointly ~~apply~~ [file an updated/amended Application] to the Water Quality Improvement Project Advisory Board [language that follows needs to be fixed] and Town Board amendment for an amendment of the conditional rebate approval [Town Attorney must generate a new Conditional Rebate Agreement?] and the incoming owner must execute a new Conditional Rebate Agreement. For the purpose of expediency this may be done on a contingency basis any time after the contract of sale of the property has been executed; and

## X. OPTION TO INSTALL LARGER SYSTEM & PROHIBITION OF FUTURE EXPANSION

17. This rebate shall cover only those expenses associated with replacement by a nitrogen reducing septic system which is the lowest capacity system recommended by the manufacturer for the current legally existing structure, but APPLICANT may install a higher capacity system using APPLICANT's own funds to make up the difference in cost of purchase and installation between the lower and higher capacity system; and
18. No rebate may be issued if any application is made for a permit from the Suffolk County Department of Health upon which the funded project is to proceed which would allow construction of any new or additional bedroom or bathroom or for which the Suffolk County Department of Health would require the replacement of the septic system.
19. If a larger than required system is installed, and at any time within three (3) years of the date of the issuance of the [Red Stamp] permit from the Suffolk County Department of Health, the above- described property is modified to allow construction of new or additional bedrooms or bathroom or if any application is submitted to the TOWN or to the Suffolk County Department of Health seeking such an expansion, **the rebate approval is void**, applicant is not eligible for any portion of the rebate, and any payments made to the APPLICANT pursuant to this grant must be returned to the TOWN. Should the APPLICANT fail to return the funds when requested, APPLICANT agrees to pay the TOWN's legal fees in connection with the TOWN's recouping of the funds; and

**IF ANY OF THE ABOVE TERMS ARE NOT MET, OR THE PROJECT IS ABANDONED PRIOR TO COMPLETION, APPLICANT IS NOT ELIGIBLE FOR ANY PORTION OF THE REBATE.**

Dated: \_\_\_\_\_

Town of Shelter Island

\_\_\_\_\_  
Gerry Siller/Supervisor

*Applicant certifies that he/she has read the above terms and agrees to them:*

Name (print) \_\_\_\_\_

(signature) \_\_\_\_\_

Leave space for co-owner signature?

Name (print) \_\_\_\_\_

(signature) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Premises Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Suffolk County Tax Map Number \_\_\_\_\_

**Notary:**

***NOTE:***

- *Applicant is required to return the original notarized **Agreement** and **Certified Release of Septic Information** form to the Water Quality Improvement Advisory Board Clerk, Coco Lee Thuman.*
- *Fully executed copies of the Agreement will be filed with the Town Clerk, Building Department, Building Permits Examiner and Town Attorney.*

**TOWN OF SHELTER ISLAND  
 WATER QUALITY IMPROVEMENT ADVISORY BOARD  
 Report to the Town Board - Innovative/Advanced Septic Rebate Request**

Owner's name: [ ] WQIP #: [ ]

Project Address [ ] Property ID: [ ]

Project Type -  Advanced Wastewater Treatment System  Pumped Shallow Drainage field.

WQIP AB Meeting Date – [ ]

**RECOMMENDATION – See Explanation below.**

- A.  **Fund Project at \$ [ ] WQI Ab Recommends Town Board Issue Conditional Rebate Agreement**
- B.  **Do Not Fund. Do NOT Issue Rebate. See Explanation below.**
- C.  **Set aside funding amount but Hold Conditional Rebate Agreement until provisions listed below are satisfied.**

Explanation for recommendation:

[ ]

Funding Amount: Base Grant - \$  
 PSD Incentive - \$  
 Well Replacement set aside -  
 Total funding requested - \$

**A. PROJECT BENEFIT IN NITROGEN REDUCITON:**

Project Benefit	score
Nitrate Reduction kilograms annually	[ ]

Result Summary – At this time the Location and Project Benefit Point Value Criteria are not being used in determining project approval. Reduction will continue to be calculated for potential future use in establishing Nitrate reduction from I/A funding support.

**B. DOCUMENTATION CHECKLIST:**

1. Ownership verified by:  SI Assessors list  Other [ ]
2. Engineer/Architect retention Certification letter or final design survey sheet  yes  no  
[ ]
3. SCDHS approved I/A OWTS?  yes  no [ ]
4. SCDHS approved contractor?  yes  no [ ]
5. Periodic maintenance plan established?  yes  no

**C. NITRATE REDUCTION SUMMARY**

- 1. Estimated Annual Nitrate Reduction-
- 2. Gallons of Effluent treated annually treated-
- 3. 5-year ROI Cost/result ratio – cost per Kg (calculated at max. grant)-

**D. HOME and EXISTING SYSTEM SUMMARY**

- 1. Home construction date -
- 2. Owner’s reason for installation  Voluntary  System failing  
 SCDHS or SI Town Code Mandated  Emergency Safety Replacement
- 3. Existing system:  two-stage vault/leech pool  single tank block cesspool.
- 4. Comments

**E. TOWN BOARD CERTIFICATION REQUIREMENT** Does the project....

- 1. Is fund balance available for the project?  yes  no
- 2. Have a minimum 5-year use life?  yes  no
- 3. Advance the articulated objectives consistent with one or more regional water quality improvement plan?  yes  no
- 4. Advances the measurable quality improvement of the region?  yes  no
- 5. Comply with state or regional water quality standards or targets?  yes  no
- 6. Results in the accommodation of new or additional growth? -  yes  no

COMMENTS on Town Board Certification This project is supports the goals of the Suffolk County Comprehensive Water Resource Management Plan, 2011; the Peconic Estuary Program’s Comprehensive Conservation and Management Plan (CCMP); the Long Island Commission for Aquifer Protection (LICAP) Plan, as well as other State, Regional and Shelter Island Town plans. This project meets Certification Requirements.

WQIAB Member \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Reduction in Nitrate contaminant:

The amount of Nitrate is estimated by a calculation using the reported number of days the property is occupied, the number of residents typically at the site, and published Nitrate values of the per-person waste generated before and after the I/A system is installed. The calculation provides kilograms of nitrates removed annually from the effluent discharge into the aquifer and gallons of effluent treated. “Nitrate” as used in the procedure is defined as the content of Nitrate (as N). The measurement does not include other Nitrogen compounds such as Ammonia, Nitrite, and organics. The Nitrates standard is currently established at 10 mg/L in potable drinking water.