



## **Scattered Sites Program Eligibility Requirements**

### **1. Eligible Persons**

- Any member of a federally recognized tribe, band, group, or community of American Indians/Alaska Native persons who are within the scope of the program.

### **2. Eligible Homes**

- Homes are defined as 24-hour year-round family dwellings.
- Houses rented or leased to American Indians/Alaska Native that are tribally owned are eligible, provided that the primary purpose is not to produce a profit.
- American Indians/Alaska Native owned homes leased to American Indians/Alaska Natives are eligible provided the time remaining on the lease is at least 5 years and the lease price is not increased because of the newly installed facilities.
- Mobile homes can be served if they are permanently located, owned by or rented to American Indians/Alaska Native people.

### **3. Eligible housing types**

- Eligible New Homes are new homes for American Indians/Alaska Native constructed with Bureau of Indian Affairs Housing Improvement Program (BIA-HIP) funds, homeowner funds, or non-HUD housing program tribal funds. New homes are defined as newly constructed or newly manufactured.
- Like-New Homes are existing homes that are certified by a qualified inspector or engineer to meet basic regional standards that determine the home to be as functional and long-lasting (i.e., more than 20 years) as a new home. The structure and all the mechanical systems must be fully functional. Prior to service, the existing home must be permanent, must include a plumbed kitchen, at least one bathroom with toilet (flush toilet is required except in arctic Alaska), adequate insulation, permanently installed heating, electricity if available in the community, an adequate roof, and must also meet other locally set criteria.
- Homes of Patients with Medical Conditions: These are existing homes of American Indians/Alaska Native patients with medical conditions requiring immediate sanitation facility improvements. A physician must certify in writing that the patient has a medical condition that requires adequate sanitation facilities at the patient's home.
- Existing homes that are newly purchased and occupied by eligible persons, are titled solely in the occupant's name, and have sanitation needs can be served under a housing project, provided the home is renovated per renovation criteria (i.e., made like-new).
- HUD 184: Assistance may be provided to eligible homeowners that assume personal homeowner mortgages guaranteed by HUD under Section 184 of the Housing and Community Development Act of 1992 or others provided the home is titled solely in the occupant's name.

### **4. Homes Not Eligible**

- American Indians/Alaska Native homes leased to non-Indians are not eligible.
- Non-American Indians/Alaska Native owned homes are ineligible even if rented to an Indian/Native family.
- HUD funded Indian housing projects, grants to Tribally Designated Housing Entities
- HUD homes managed by Tribally Designated Housing Entities where the homeowner doesn't hold title.
- Second homes or vacation homes

# Scattered Sites Frequently Asked Questions

## ***What documents do I need to qualify?***

We need to have the 1) application; 2) archaeological and environmental questionnaire form; 3) State of Alaska property owner's statement; 4) a copy of the applicant's Certificate of Indian Blood or tribal enrollment card; 5) a copy of the home's deed or 5+ year lease; and 6) photos of the home's electrical system, interior plumbing, heat source, and exterior views.

## ***Why do you need photos of my home?***

Once your paper application and supporting documents are approved, your home's eligibility must be confirmed. In order to save money and prevent unnecessary travel expenses, a project manager may be able to confirm your home's eligibility by viewing current photos. In order to obtain funding for your project, we have to show that each home meets the requirements for the grant program. Once a home has been approved, it is marked on a satellite map along with all the previous homes served. This ensures that, eventually, all unmet needs will be served and that no one will unfairly be served more than once.

## ***Do I need to fill out the SOA DEC form?***

Yes, it is a formality that is required when we submit a new septic or well system to the State WELTS and SEPTS databases. It is just a form that states you own or lease your home as an individual and not as a business, corporation or partnership. The format of the form may make you hesitant because of the business portion of the form, but it is meant for everyone to fill out.

## ***How long does it take?***

A standard water and sewer project takes up to 24 months. With the current supply chain and labor shortages in the construction industry, projects have been delayed anywhere from 6 to 12 weeks. That, combined with Alaska's short construction season has caused some projects to take three years to complete.

## ***Why does it take so long?***

ANTHC is a non-profit organization so we do not have extra money to forward fund unvetted projects. Every new project must first go through the funding submission process and work cannot begin until the IHS approves our funding request. After approval, engineers design each system for the next construction season. Our engineers will consult with each homeowner to inform them of where their system will be installed on their property. If needed, local permits are applied for on behalf of the homeowners. Then a statement of work is written so contractors have the information they need to submit their bids. Any time public funds are being spent, the contracting opportunity must be shared in an open and fair process to the public. This involves hosting bidding periods, bid opening meetings, and posting bid award notices. Once a contract is awarded, the chosen contractor must submit their certifications, submittals and attend a pre-construction meeting before they can begin construction.

## ***Is there a priority list?***

No. Eligible applications are served in the order they were received. Although having a medical referral will allow us to serve a home that may not meet normal eligibility standards, the timeframe is the same for all projects that get funded that year. We get our project funding once a year and all eligible projects receive their funding at the same time. Sometimes, if a project is cancelled, we may be able to use the funds to serve a home that is on the list for funding the next year.

## ***Can I be reimbursed if I pay for my own system?***

No. At this time we do not reimburse homeowners who pay for their own water and sewer projects.

## ***Can my project be done sooner if I share the costs?***

No. Even with cost sharing agreements, we still perform our due diligence before spending any public funds.

***Is there a deadline to apply?***

Yes and No. We submit our applications for funding in the fall and need to have your completed application file ready for the funding submission process by the end of August. If you are still purchasing or building a home and are not concerned about making it into next summer's construction season, we will gladly accept your application any time of the year.

***Can I apply directly or does my tribe apply for me?***

Both. You can apply to our program directly or through your tribal representative. Sometimes tribes prefer to submit several applications at a time and often help their members obtain the documents they need in order to qualify for services. We would be glad to work either directly with you or with your tribal representative.

***What is the minimum number of houses for a project?***

The Scattered Sites program does not need to meet a minimum number of homes to begin a project in a community.

***Are tribal housing homes eligible?***

That depends on which agency financed the home – NAHASDA homes are not eligible but BIA-HIP homes are.

Homes that are financed through the Native American Housing Assistance and Self Determination Housing Act of 1996 (NAHASDA) are not eligible to receive services from Scattered Sites. The NAHASDA Act authorized two block grant programs to replace several older programs. These are the Indian Housing Block Grant (IHBG) and Title VI Loan Guarantee program. The loan guarantee program helps tribes finance the building of affordable housing for their enrolled members.

Homes that were built or renovated with the Bureau of Indian Affairs Housing Improvement Program (BIA-HIP) funds are eligible. The BIA-HIP program was created by the BIA to address unmet housing needs of tribal members who were unable to qualify for assistance through other agencies. Over half of BIA-HIP funds are used in renovating and repairing existing homes. In cases where repair isn't possible, new homes are built.

***Are HUD homes eligible?***

Only HUD 184 homes are eligible. However, other HUD homes do become eligible once they are paid off. If that is the case, please attach a copy of the pay-off statement or letter with your application.

***What is the minimum interior plumbing required for services?***

Homes must have at least one toilet and one sink installed.



If you have other questions about the Scattered Sites program, feel free to email or call us at:

**[DEHEapplications@anthc.org](mailto:DEHEapplications@anthc.org)**  
**(907) 729-3528**



### Scattered Sites Application for Individual Home Sanitation Facilities

Applicant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Street Address: \_\_\_\_\_

Legal Description (Subdivision, Lot/Block, etc.) \_\_\_\_\_

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

Directions to Home: \_\_\_\_\_

Phone Number

E-mail Address

Alternate Contact Name & Number: \_\_\_\_\_  
(Person authorized to discuss your service with ANTHC if you are unavailable - leave blank if you do not wish to authorize anyone.)

#### Household Information

List all 24 hour, year-round residents (Start with yourself)	Alaska Native / American Indian?	Relationship to Applicant	Can you provide a copy of CIB or Tribal Card as verification?
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No

#### Eligibility Requirements

☐ Yes ☐ No Have you been served with water or sewer services by ANTHC before?

If so, please describe: \_\_\_\_\_

☐ Yes ☐ No Is the home you're applying for currently your primary 24 hour year-round residence?

☐ Yes ☐ No Do you hold legal control of the land & home through ownership, allotment, assignment, or lease?

☐ Yes ☐ No Can you provide proof of legal ownership? (Lease must be for a minimum of 5 years.)

☐ Yes ☐ No Does your home have electricity? (Not from a generator.)

☐ Yes ☐ No Can you provide proof of electric utility?

☐ Yes ☐ No Is this a HUD/NAHASDA home that is paid in full? **Please provide a copy of payoff documents.**

Financing: ☐ HUD ☐ NAHASDA ☐ BIA-HIP ☐ Tribal ☐ HUD-Paid Off ☐ Personal ☐ Other



### Scattered Sites Application for Individual Home Sanitation Facilities

**Request for Services:** ☐ Well ☐ Septic ☐ Drain Field ☐ Water Service Line ☐ Sewer Service Line

**Home / Land Information:** *Please fill out to the best of your knowledge, if unknown, leave answer blank.*

Home Type: ☐ House ☐ Mobile Home ☐ Tiny Home ☐ Duplex ☐ Other \_\_\_\_\_ Age of Home/Year Built: \_\_\_\_\_

Description of home (*Color, trim color, roof color etc.*): \_\_\_\_\_ No. of floors: \_\_\_\_\_

No. of Bedrooms: \_\_\_\_\_ No. of Bathrooms: \_\_\_\_\_ Home Sq. Footage: \_\_\_\_\_ Land Sq. Ft/Acage: \_\_\_\_\_

Slope: \_\_\_\_\_ Vegetation: \_\_\_\_\_

Framing: \_\_\_\_\_ Flooring: \_\_\_\_\_

Permanent Foundation? ☐ Yes ☐ No Type: ☐ Slab on Grade ☐ Permafrost ☐ Block Wall ☐ Other \_\_\_\_\_

Crawl Space? ☐ Yes ☐ No If yes, Height: \_\_\_\_\_ Basement? ☐ Yes ☐ No If yes, Height: \_\_\_\_\_

Does the basement have appliances in use? \_\_\_\_\_

### Existing Well Information:

Is there an existing well? ☐ Yes ☐ No If yes, Year of Installation: \_\_\_\_\_ Depth: \_\_\_\_\_

Well Pump (Make / Model / Serial#): \_\_\_\_\_

Pressure Tank (Make / Model / Serial#): \_\_\_\_\_

### Existing Septic System Information:

Is there an existing septic tank? ☐ Yes ☐ No If yes, Year of Installation: \_\_\_\_\_ Capacity: \_\_\_\_\_

Is there an existing drain field? ☐ Yes ☐ No If yes, Year of Installation: \_\_\_\_\_ Size: \_\_\_\_\_

### Existing Sewer Service Line Information:

Is there an existing sewer service line? ☐ Yes ☐ No If yes, location: \_\_\_\_\_

### Existing Water Service Line Information:

Is there an existing water service line? ☐ Yes ☐ No If yes, location: \_\_\_\_\_

**Present condition of the water and sewer systems:** *(If system is failing, please describe the problem)*

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## Scattered Sites Application for Individual Home Sanitation Facilities

### Home Information continued:

Fuel Tank Size: \_\_\_\_\_ Location: \_\_\_\_\_ Thermostat: \_\_\_\_\_

Heating System (Primary): \_\_\_\_\_ Heating System (Secondary): \_\_\_\_\_

No. of Toilets: \_\_\_\_\_ No. of Sinks: \_\_\_\_\_ Other plumbed fixtures: \_\_\_\_\_

Water Tank (Capacity / Model / Year): \_\_\_\_\_

Water Heater (Make / Model / Year / Serial#): \_\_\_\_\_

Water Softener/Filtration (Make / Model / Year / Serial#): \_\_\_\_\_

Arctic Box? ☐ Yes ☐ No If yes, is it for water, sewer or both? \_\_\_\_\_

### Neighboring Homes:

Do your neighbors have wells? ☐ Yes ☐ No Do your neighbors have septic systems? ☐ Yes ☐ No

Do you know how well their wells/septics are performing? ☐ Yes ☐ No Notes: \_\_\_\_\_

Do you know if water treatment is required on their wells? ☐ Yes ☐ No Notes: \_\_\_\_\_

Additional Notes: \_\_\_\_\_

Sponsoring Tribe / Village: \_\_\_\_\_

\_\_\_\_\_  
Tribal Representative Signature

\_\_\_\_\_  
Date

*\*If you currently live outside of the area of your tribal affiliation and cannot obtain a tribal representative's signature,  
please write "Outside Area" on the line above*



## Scattered Sites Application for Individual Home Sanitation Facilities

### Archaeological and Environmental Information:

Federal funding that you are requesting in order to provide water and sewer service to your home requires an Environmental Review with regards to the National Environmental Policy Act, the Endangered Species Act, the Clean Water Act, and other Federal and State concerns. Our organization must follow these requirements. ANTHC DEHE is committed to protecting your land and culture.

***\*\*The State Historic and Preservation Office requires photographs of your home. Make sure you include them in your application.\*\****

Please answer each of the following questions:

- ☐ Yes ☐ No Do you know of any plant or animal species on your property that is on the endangered or threatened species list?  
If yes, describe: \_\_\_\_\_
- ☐ Yes ☐ No Is your home or building on your property over 50 years old?  
If yes, how old?: \_\_\_\_\_
- ☐ Yes ☐ No Do you know if any human burial sites have been discovered on or near your property?  
If yes, describe: \_\_\_\_\_
- ☐ Yes ☐ No Has there ever been artifacts of cultural significance discovered on or near your property?  
If yes, describe: \_\_\_\_\_
- ☐ Yes ☐ No Have bones or skeletal remains of extinct animals been found on or near your property?  
If yes, describe: \_\_\_\_\_
- ☐ Yes ☐ No Does your property contain any lakes, streams, rivers, ponds, or springs?  
If yes, describe: \_\_\_\_\_
- ☐ Yes ☐ No Is your home in a flood plain zone?  
If yes, describe: \_\_\_\_\_

\_\_\_\_\_  
Homeowner Printed Name

\_\_\_\_\_  
Homeowner Signature

\_\_\_\_\_  
Date





## Instructions for Filling Out the SOA Wastewater System Owner's Statement

Because the State of Alaska's Department of Environmental Conservation has different requirements for residential homes vs. commercial businesses, we must have every applicant fill out this form so we can let the State know that we are serving your home as a private residence and not a place of business. This is just a formality we have every applicant fill out. If you aren't sure about how to fill this form out, please contact us and we can help you.

Here are the required fields and how to fill them out:

### #1 Project Name:

For our record keeping purposes, just write your name on this line. We file everything under your name.

### #2 Legal description, Physical Address, and Nearest Community Name:



Write your home's street and/or legal address. If you do not know your home's legal address that's okay just write the address you know including the mile marker if you are on the road system. If you are outside of town, whichever is the closest town will work for this entry.

### #3 Project checkboxes:

Check the first box if your home is owned by you as a private individual or married couple and NOT a business. Also, if you are leasing the property you can check the first box as long as the home is a single family residence and not a multi-family apartment building or room inside a commercial building.

### Signature Area:

Please sign and date this form and add your mailing and email addresses.

	<b>State of Alaska</b> Department of Environmental Conservation <b>WASTEWATER SYSTEM OWNER'S STATEMENT</b>	
<p><b>Please type or print in ink:</b></p>		
1. Project Name: _____		
2. Legal Description, Physical Address, and Nearest Community Name: _____ _____ _____		
		ADEC Date Received Stamp: _____  ADEC Plan Review No. _____
3. I submit the enclosed items concerning the above referenced proposed project for review. By my signature, I certify that I have authority to sign this application as required under 18 AAC 15.030, and that the project is (check one):		
<input type="checkbox"/> privately owned and that I am the owner. <input type="checkbox"/> owned by a sole proprietorship and that I am the proprietor. <input type="checkbox"/> owned by a partnership of which I am a general partner. <input type="checkbox"/> owned by a corporation of which I am a principal executive officer of at least the level of vice-president, or a duly authorized representative responsible for the overall management of this project. <input type="checkbox"/> owned by a municipal, state, federal, or other public agency of which I am a principal executive officer, ranking elected official, or other duly authorized employee.		
Signature (please sign in ink) _____		Date _____
Name and Official Title _____		
Company or Agency (if applicable) _____		
Mailing Address _____		
Email Address _____		Phone Number _____
<small>18. AAC 15.030. SIGNING OF APPLICATIONS: All permit or approval applications must be signed as follows:          (1) in the case of corporations, by the principal executive officer of at least the level of vice-president or his duly authorized representative, if the representative is responsible for the overall management of the project or operation;          (2) in the case of a partnership, by a general partner;          (3) in the case of a sole proprietorship, by the proprietor; and          (4) in the case of municipal, state, federal, or other public facility, by either a principal executive officer, ranking elected official, or other duly authorized employee. (Eff. 11/25/77, Register 64) Authority: AS 46.03.020(10), AS 46.03.090, AS 46.03.100, AS 46.03.110, AS 46.03.160, AS 46.03.330, AS 46.03.720</small>		
OWNERS STATEMENT	REVISED NOVEMBER 25, 2019	





**State of Alaska**  
Department of Environmental Conservation  
**WASTEWATER SYSTEM OWNER'S  
STATEMENT**



Please type or print in ink:

1. **Project Name:** \_\_\_\_\_

2. **Legal Description, Physical Address, and Nearest Community Name:**

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

ADEC Date Received Stamp:

ADEC Plan Review No. \_\_\_\_\_

3. I submit the enclosed items concerning the above referenced proposed project for review. By my signature, I certify that I have authority to sign this application as required under 18 AAC 15.030, and that the project is (check one):

- ☐ privately owned and that I am the owner.
- ☐ owned by a sole proprietorship and that I am the proprietor.
- ☐ owned by a partnership of which I am a general partner.
- ☐ owned by a corporation of which I am a principal executive officer of at least the level of vice-president, or a duly authorized representative responsible for the overall management of this project.
- ☐ owned by a municipal, state, federal, or other public agency of which I am a principal executive officer, ranking elected official, or other duly authorized employee.

\_\_\_\_\_  
Signature (please sign in ink)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name and Official Title

\_\_\_\_\_  
Company or Agency (if applicable)

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

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

\_\_\_\_\_  
Phone Number

18. AAC 15.030. SIGNING OF APPLICATIONS: All permit or approval applications must be signed as follows:

- (1) in the case of corporations, by the principal executive officer of at least the level of vice-president or his duly authorized representative, if the representative is responsible for the overall management of the project or operation;
- (2) in the case of a partnership, by a general partner;
- (3) in the case of a sole proprietorship, by the proprietor; and
- (4) in the case of municipal, state, federal, or other public facility, by either a principal executive officer, ranking elected official, or other duly authorized employee. (Eff. 11/25/77, Register 64) Authority: AS 46.03.020(10), AS 46.03.090, AS 46.03.100, AS 46.03.110, AS 46.03.160. AS 46.03.330, AS 46.03.720

OWNERS STATEMENT

REVISED NOVEMBER 25, 2019

## Homeowner Pre-Construction Acknowledgements

Applicant: (Printed Name) \_\_\_\_\_

Service Address: \_\_\_\_\_

### Please initial each acknowledgement

\_\_\_\_\_ 1. By signing this acknowledgement form the homeowner attests that they are a year-round resident and acknowledges that a change in residency during the project will result in an immediate cancellation of the project.

\_\_\_\_\_ 2. By signing this acknowledgement form the homeowner agrees not hire their own contractor or perform work themselves that would have any damaging effect on ANTHC's work. ANTHC will not be responsible for any damages or poor workmanship that was not performed by ANTHC or its contractors.

\_\_\_\_\_ 3. The homeowner understands and agrees that ANTHC's project is only intended for health, life and safety and that the property's appearance or 'curbside appeal' is not ANTHC's responsibility. Specifically, grass seed is intended for basic erosion prevention, not recreational use or visual landscaping and that your previous lawn, if you had one, will not look the same after your system is installed.

\_\_\_\_\_ 4. The homeowner agrees to pay water and sewer bills as established by the Village or City if they are having service lines installed – OR – acknowledges that their electric bill will be higher after their system is installed. Heat trace, septic pumps, water pumps, and some water filtration equipment require electricity to function – if you are concerned with the increased electricity costs, please discuss this with the project manager prior to agreeing to have the system(s) installed.

\_\_\_\_\_ 5. The homeowner agrees to move vehicles, materials, equipment, debris, etc. out of the construction area. ANTHC will not be responsible for preparing the site for construction. If brush removal is needed, that can be added into the project but ANTHC will not be responsible for moving personal belongings, vehicles, sheds, garbage, boats, ATVS's etc.

\_\_\_\_\_ 6. If there are special trees, plants, gardens, memorial markers, etc. that need to be protected and saved from destruction or damage, please inform the project manager in writing so that those items can be clearly marked on the site plan by the engineer. ANTHC will not be responsible for the loss or damage of those items unless we are informed in writing during the design phase.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
ANTHC Representative Signature

\_\_\_\_\_  
Date



### Scattered Sites Application for Individual Home Sanitation Facilities

1. I certify the information provided in this application is true and accurate to the best of my knowledge.
2. I have reviewed the attached Scattered Sites Program Eligibility Requirements and understand that the requested facilities will be provided only if this application meets funding eligibility and qualification requirements and funding is available to ANTHC.
3. I understand that it is solely my responsibility to prepare my property for service. This includes relocating items in the yard and in the home as necessary to complete the installation.
4. I understand ANTHC or its contractors will not move personal items and assumes no responsibility for any personal items requiring relocation.
5. I understand ANTHC has the right to stop service if ANTHC finds that information in this application is incorrect, or finds the worksite is unsafe for ANTHC employees or its contractors.
6. I agree to allow access to my property to ANTHC, the Village and/or City, for the purpose of planning, installing, and inspecting proposed facilities.

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Applicant's Signature

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Date



## APPLICATION SUBMISSION CHECKLIST

Before you submit your application, please make sure you have all of the following:

- ☐ Completed Application - ALL pages must be filled out, including the DEC Owner's Statement
- ☐ Copy of Certificate of Indian Blood or a tribal enrollment card
- ☐ Copy of deed or 5+ year lease to home

Photos of your home's:

- ☐ Electrical junction box
- ☐ Interior plumbing fixtures
- ☐ Heat source with thermostat
- ☐ Exterior and street views

***Incomplete applications or failure to provide copies  
of required documents with this application will delay service.***