

REQUIREMENTS FOR INDIVIDUAL SANITATION FACILITIES

PUBLIC LAW 86-121
CALIFORNIA AREA INDIAN HEALTH SERVICE

OCTOBER 2009



Sanitation Facilities Construction

California Area Indian Health Service

REQUIREMENTS FOR INDIVIDUAL SANITATION FACILITIES

DIVISION OF SANITATION FACILITIES CONSTRUCTION CALIFORNIA AREA OFFICE

What services does the Sanitation Facilities Construction program provide?

The Sanitation Facilities Construction (SFC) program is authorized to construct water supply and waste disposal facilities for new, renovated or "like new" residential housing units with Indian Health Service (IHS) "Housing Support" funds.

How do you apply for service?

Complete an "Application for Sanitation Facilities" and provide it to the nearest IHS Office (see attached application).

Who is eligible for sanitation facilities?

Eligibility for receiving services in California is defined under Public Law 93-437.

Applicants must meet at least one of the following:

- (1) Any member of a federally recognized Tribe.
- (2) Any descendant of an Indian who was residing in California on June 1, 1952, but only if such descendant; (A) is living in California, (B) is a member of the Indian community served by a local program of the Service, and (C) is regarded as an Indian by the community in which such descendant lives.
- (3) Any Indian who holds trust interests in public domain, national forest, or Indian Reservation allotments in California.
- (4) Any Indian in California who is listed on the plans for distribution of the assets of California Rancheria's and Reservations under the Act of August 18, 1958 (72 Stat. 619), and any descendant of such Indian.

What are the geographical boundaries (service area)?

The SFC program can provide sanitation facilities to eligible persons on or near Indian Reservations, but only in counties labeled IHS Contract Health Service Delivery Area (CHSDA)*.

In order for IHS to serve a home or community that is off-Reservation, but within a particular CHSDA, the request for sanitation facilities must come from the appropriate Tribal government associated with that CHSDA that provides health care delivery.

*The State of California, excluding the counties of Alameda, Contra Costa, Los Angeles, Orange, Sacramento, San Francisco, San Mateo, Santa Clara, Kern, Merced, Monterey, Napa, San Benito, San Joaquin, San Luis Obispo, Santa Cruz, Solano, Stanislaus, and Ventura, shall be designated as a Contract Health Service Delivery Area by the Service for the purpose of providing contract health services to Indians in such State per Section 810 of P.L. 102-573, the Amendments to the Indian Health Care Improvement Act.

What are the program requirements?

1. The house must be the primary residence of the applicant. Second homes or vacation homes are not eligible.
2. The house must meet basic regional standards that determine the home to be functional and long lasting (i.e. at least 20 years).
3. Mobile homes must be set on a secure foundation and anchored, be fully skirted and have its wheel removed. Mobile homes must be on-site, or a bill of sale and proof of arrangements to accomplish these items must be presented to the IHS. Campers or travel trailers are not eligible for service.
4. New homes must be substantially complete before the IHS will begin facility construction. The exception to this requirement is well drilling at a qualified home site before starting home construction or before electrical power is brought to the site (if available in the community). Well drilling will be preformed to determine that an adequate and potable water supply is available.
5. Sanitation facilities costs shall not exceed the geographic cost limits established within the California Area (construction cost only) for any sites, unless approved in advance by the Director, DSFC.
6. Requests for exceptions to the geographic cost limit will be evaluated, on case-by-case basis, for community facilities. The primary basis for granting an exception should be the likelihood that a new community water or sewer main extension to the proposed home site could serve additional new housing in the very near future.
7. All construction of sanitation facilities is subject to fund availability. No commitments shall be made to Tribes or individuals until project funds are allocated and an agreement executed with IHS.

8. The Tribe and/or occupant will be expected to provide right-of-way necessary for construction of water and/or wastewater facilities.

What are the water quality and quantity requirements?

1. Drilling will begin at the proposed home site when soils have been evaluated and found suitable; the applicant has verified that he/she has the funding and the intent (plans, permits, written documentation from electrical company that they will provide electricity, etc.) to develop the home site in a timely manner (within two months).
2. If drilling is successful, no other construction will be performed until the home is substantially complete. If the drilling is unsuccessful, the site will be rejected and the well abandoned. A successful well is defined as a well capable of producing 5 gallons per minute of water for 1 hour and having the well water level return to within 90 percent of the initial water level once pumping is stopped.
3. During the test pump for a new well, water samples are collected and tested for California's current Title 22 requirements for general mineral and inorganic chemicals. In general, the test results are compared to levels established for primary (health effects) and secondary (cosmetic and esthetic effects) contaminants for *public* water systems.
4. Currently, there are no specific water quality regulations for *individual* water wells either from the U.S. Environmental Protection Agency (EPA) or the State of California. The test results provide information on the adequacy of well construction (coliform bacteria), indicators of sewage pollution (nitrates), affects on household appliances and plumbing (hardness), and discoloration of clothes and fixtures (iron and manganese). The water quality analysis is used to consult with the homeowner on potential water quality issues and treatment alternatives.
5. New wells with water quality results that exceed *primary* levels are not recommended for development and will be abandoned. The only exception would be if homeowners sign a written letter of understanding for well use. The IHS would not provide treatment systems for the site due to potential contaminant breakthroughs and operation and maintenance issues.
6. Treatment can be provided for new wells with water quality results that exceed *secondary* levels for iron and manganese. Treatment for iron (Fe) can be provided when the levels exceed 1.0 mg/L. Treatment for manganese (Mn) can be provided when levels exceed 0.10 mg/L. The

provision of a treatment system is contingent upon the total cost of the site facilities (water and wastewater) not exceeding the cost limits.

What are the site requirements?

The participant's site must meet specific criteria before IHS will construct the required sanitation facilities. The site is evaluated based on the geology, topography and physical characteristics. In addition, the legal status of the land and the feasibility (engineering and economic) of serving the site must be considered. The site must meet all of the criteria listed below:

1. The participant must hold legal control of the land and the home, through ownership, allotment, assignment or lease. Property boundaries must be clearly identifiable. A copy of the legal description must be submitted to the IHS.
2. Site conditions must be such that construction of the necessary sanitation facilities is technically feasible. Factors such as slope, home site size, soil conditions, availability of water, and presence of high groundwater may be grounds for rejecting the site.
3. The site must have suitable access including all-weather access roads and all necessary easements for construction; water and sewer facilities; and entry-exit by occupant. If no road or easement exists, the applicant must provide them.
4. IHS will not serve homes located within a 100-year floodplain.
5. The site must be clear of construction obstacles (trees, vehicles, debris, etc.). The participant is responsible for removal of obstacles to allow construction.
6. The site must have commercial electrical power meeting state electrical codes. The only exception would be BIA-Housing Improvement Program (HIP) homes. Mobile homes must have an electrical service disconnect on their service pole.

Can IHS funding be used for HUD homes?

No. IHS cannot provide (with IHS funds) sanitation facilities for HUD homes managed by Tribal Designated Housing Entities (TDHE) where the homeowner does not hold title. Homes that were originally funded by HUD and have since been paid in full (Mutual Help/Home Ownership) *are eligible* for IHS Housing funds if the home meets applicable requirements.

Is there a priority list?

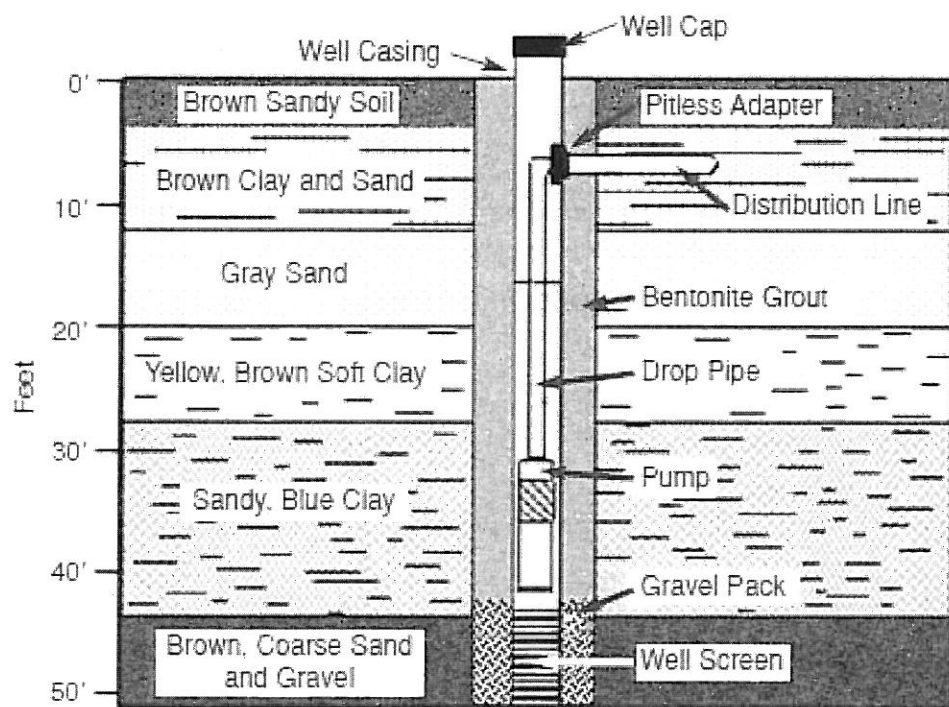
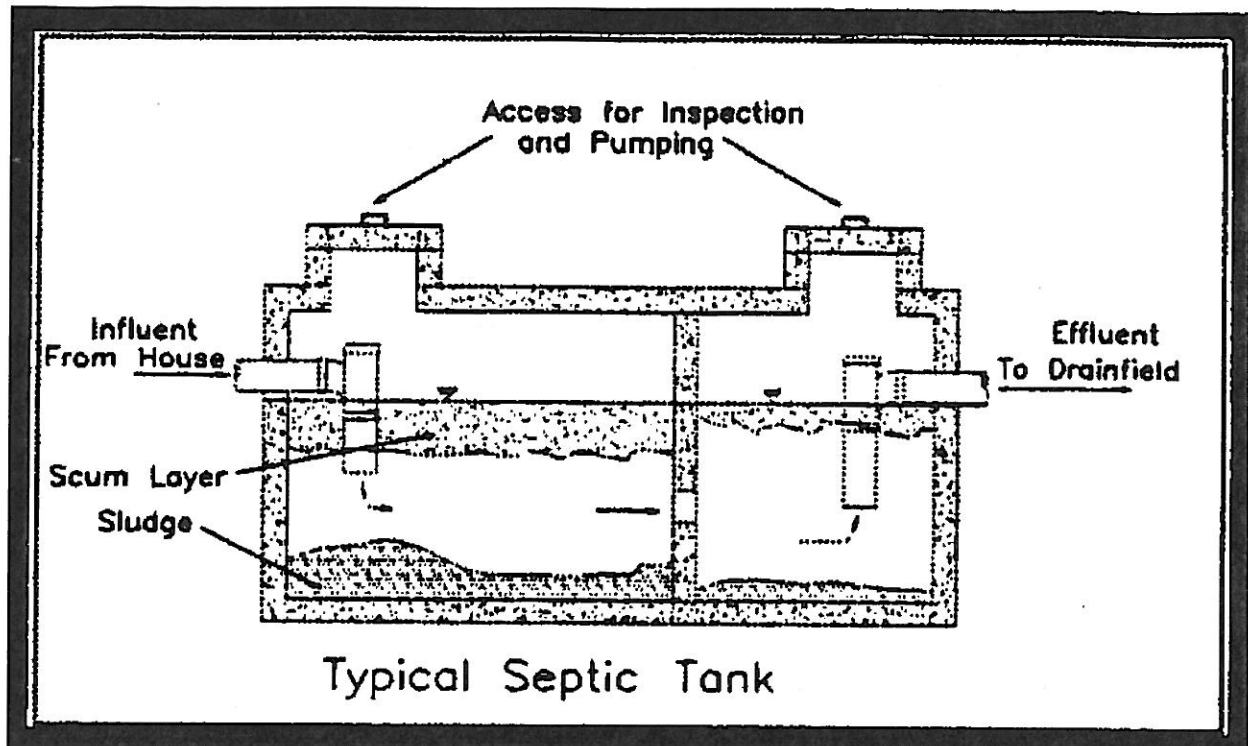
If sufficient funds are not available to serve all homes determined eligible for "Housing Support" projects, home service will be prioritized in the following order:

1. Highest priority will be given to homes constructed or renovated under the BIA Home Improvement Program.
2. Second priority will be given to new homes that were completed during the previous fiscal year.
3. Third priority will be given to new homes that will be completed during the current fiscal year.
4. Fourth priority will be given to existing "like new" homes.

Who is responsible for costs and fees?

The responsibility for paying costs and fees associated with serving qualified individual applicants at qualified sites will be as follows:

<u>Fee/Task</u>	<u>Responsibility</u>
a. Land Clearance	Applicant
b. Rights-of-Way or Easements	Applicant
c. Connection Fees	IHS
d. Capital Assessment Fees	IHS
e. Cost of Design of Sanitation Facilities	IHS
f. Cost of Construction of Sanitation Facilities	IHS
g. Site Improvements	Applicant



Basic Elements of Well Construction

Example of well construction

INSTRUCTIONS FOR COMPLETION OF APPLICATION FOR SANITATION FACILITIES

This instruction is to aid the individual Applicant requesting sanitation facilities and accompanies the Application for Sanitation Facilities Form. Call IHS if you have any further questions concerning the application.

APPLICANT NAME: Name of the person for whom the facilities will be constructed and to whom the facilities will be transferred

TRIBE & ENROLLMENT NO.: Federally recognized Tribe and Enrollment Number of the Applicant. If Applicant is unable to provide enrollment information, belongs to a federally un-recognized Tribe, or is not enrolled, attach information to verify Native American heritage and Tribe name. (An example of verification would be a letter from Applicant's Tribe, Applicant's name on the BIA California census rolls of 1928, Applicant's name on the 1950 or 1972 payment rolls, or proof that Applicant is a descendent of a person who appears on those rolls.)

MAILING ADDRESS: Current mailing address of Applicant.

FACILITIES LOCATION ADDRESS: Address or description of home where facilities will be constructed. Use space provided to draw map, if necessary.

PHONE NUMBERS: Applicant's home phone and a phone number where IHS can talk to Applicant or leave a message for Applicant during the day.

SERVICES REQUESTED: Check space for desired services and provide information on past participation.

HOME INFORMATION: Applicant must complete all questions to the best of his or her ability. Use "approx." if unsure of dates. Construction of facilities is dependent upon information provided by Applicant.

MAP: Attach an assessor's parcel map from plat book, or a surveyor's drawing showing dimensions of home and lot, if possible. If hand drawing a map, include dimensions, distances, directions, street and/or road names, color of house, or any other information pertinent to locating area for facilities construction.

APPLICANT RESPONSIBILITY: This section outlines the responsibility of the Applicant and the disposition and transfer of the completed facilities.

SIGNATURES: Applicant's signature (and landowner's signature, if different from Applicant's) will indicate Applicant accepts the responsibilities and provisions of the application. Signature of Tribal Representative indicates Tribal Government is in accordance with Applicant's request for sanitation facilities.

QUESTIONS: If you have any questions regarding this application, please contact any of the offices listed below. We are here to serve you. Mail your application to the office that serves your particular county:

<u>Butte, Glenn, Shasta, Tehama Modoc, Lassen or Plumas</u> Indian Health Service Redding District Office 1900 Churn Creek Road, Suite 210 Redding, CA 96002 (530) 246-5339 FAX: (530) 246-5210 <u>Humboldt, Del Norte Siskiyou or Trinity</u> Indian Health Service Arcata Field Office 1125 16 th Street, Suite 100 Arcata, CA 95521 (707) 822-1688 FAX: (707) 822-1692	<u>Amador, Butte, Calaveras, Colusa, Placer or Yolo</u> Indian Health Service Sacramento District Office 650 Capitol Mall, Suite 7-100 Sacramento, CA 95814 (916) 930-3960 FAX: (916) 930-3954 <u>Marin, Sonoma Mendocino or Lake</u> Indian Health Service Ukiah Field Office 1252 Airport Park Blvd. Ste. B5 Ukiah, CA 95482 (707) 462-5314 FAX: (707) 462-6907	<u>Madera, Mariposa, Kings, Fresno or Tuolumne</u> Indian Health Service Clovis Field Office 613 Harvard Ave., Suite 101 Clovis, CA 93612-1868 (559) 322-7448 FAX: (559) 322-7445 <u>Tulare</u> Indian Health Service Porterville Field Office 2780 Yowlumne Ave., Suite A Porterville, CA 93257 (559) 784-2715 <u>Imperial, Riverside, San Diego San Bernardino or Santa Barbara</u> Indian Health Service Escondido District Office 1320 West Valley Parkway, Suite 309 (760) 735-6880 FAX: (760) 735-6893
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APPLICATION FOR SANITATION FACILITIES (Public Law 86-121)

APPLICANT NAME: _____ **TRIBE & ENROLLMENT NO:** _____

MAILING ADDRESS: _____ **FACILITIES LOCATION ADDRESS:** _____
PHONE #: _____

SERVICES REQUESTED:

WATER: NEW SERVICE [] RENOVATION [] **WASTEWATER:** NEW SERVICE [] RENOVATION []

Has IHS or other Federal Agency provided sanitation facilities to this homesite before? YES [] NO []

If yes, during which year? _____

If yes, under what Applicant name? _____

Has IHS or other Federal Agency provided sanitation facilities to this Applicant before? YES [] NO []

If yes, during which year? _____

If yes, at what homesite address? _____

HOME INFORMATION:

The proposed homesite is on: TRUST LAND [] FEE PATENT LAND []

The property is: OWNED [] LEASED [] RENTED [] AN ALLOTMENT []

Within the property boundaries, there are the following underground utilities (complete attached site drawing):
None []; Electrical Lines []; Gas Lines []; Water Lines []; Sewer Lines []; Other _____

Structure type is: MOBILE HOME [] WOOD FRAME [] OTHER _____

Approximate year structure was built or moved to the site: _____

Is the house currently occupied? YES [] NO []

If yes, since when? MONTH _____

YEAR _____

If no, proposed occupancy date: _____

YEAR _____

Number of bedrooms _____ Number of bathrooms _____ Number of occupants _____

Ages of occupants? __, __, __, __, __, __, __, __, __, any special conditions regarding occupants?
(Health problems, disabilities, elderly, etc.) _____

Does the house have electric service: YES [] NO []

If no, when will electric service be provided? MONTH _____

YEAR _____

Have there been any recent bedroom or bathroom additions to the house? YES [] NO []

If yes, describe improvements during the last three years? _____

Completion date of improvements: _____

EXISTING FACILITIES: WELL [] SEPTIC SYSTEM [] COMMUNITY WATER [] COMMUNITY SEWER []

Describe any problems you are having with existing facilities: _____

Do you know of any archeological / historical sites on the property? YES [] NO []

(If yes show on site drawing)

THIS SECTION FOR IHS USE : Date Application Received: _____ Date Tribe Signed: _____

DRAW MAP HERE

Please provide a map showing applicable highways and roads as well as pertinent landmarks that will assist IHS personnel in finding your homesite. Written instructions, if deemed necessary, are encouraged as well.

County:

Section:

Township:

Range:

Assessor's Parcel No.

SITE DRAWING

Please show rough locations of property corners, proposed or existing house location, proposed or existing access road/driveway, buried utilities (gas, electric, water, sewer, etc.), etc.

APPLICANT'S RESPONSIBILITIES: READ CAREFULLY, THIS IS A LEGAL DOCUMENT.

1. This is an APPLICATION for service. The provision of sanitation facilities is dependent on Indian Health Service (IHS) site review, verification of home construction, improvements, and availability of funds.
2. No services can be provided without a completed and signed Application for Sanitation Facilities Form.
3. Application must be given to the Tribe associated with the service area that contains the homesite property. The Tribe will forward the Application to IHS. Applicants without Tribal representation will forward the Application directly to the IHS.
4. Applicant must provide proof of a legal claim to the land (e.g., copy of allotment, lease, or deed) as part of this application. The homesite must be a primary residence of the Applicant. No services can be provided to other than primary residences.
5. An IHS representative will visit the homesite to determine site suitability. Prior to this visit, the Applicant must locate property corners, underground utilities, and the proposed house location (new homes). See Site Drawing.
6. By way of the Applicant's signature, IHS representatives are granted permission to enter upon the land for the purpose of carrying out the site approved work. This work may include, but is not limited to, digging soil test pits, conducting percolation tests, and drilling test wells. The Applicant agrees to waive all claims which may arise from such entry and testing except those claims which may be recognized under the General Tort Claims Act. If the Applicant is not the landowner, the landowner must co-sign this application.
7. It is important that the Applicant understand that under Public Law 86-121, IHS cannot own, operate, or maintain the Applicant's completed facilities. All construction facilities will be transferred to the Applicant when construction is completed. For community facilities, the Applicant's responsibility is for individual facilities such as water service lines from the house to the curb stop or meter and sewer service lines from the house to the property line.
8. The IHS does not provide inside plumbing. Plumbing must be inside the house with a protruding stub 5-foot beyond the foundation to connect to outside plumbing.

IT IS STRONGLY RECOMMENDED THAT DEVELOPMENT OF NEW SITES NOT OCCUR UNTIL AVAILABILITY OF WATER AND SEWER SERVICE HAS BEEN DETERMINED. IT IS FURTHER RECOMMENDED THAT OCCUPANCY OF NEW HOUSES NOT OCCUR PRIOR TO RECEIPT OF SANITATION FACILITIES.

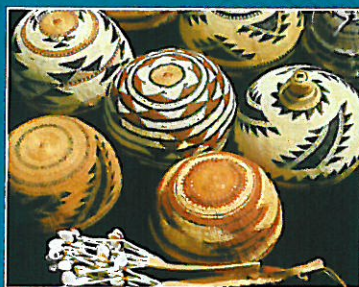
TRIBAL – AUTHORITY SIGNATURE REPRESENTS REQUEST FOR FACILITIES FOR THIS APPLICANT

I understand the Applicant's Responsibilities as described, and I agree to the IHS verifying information provided on this application.

LANDOWNER (IF NOT APPLICANT): _____ **DATE:** _____

APPLICANT: _____ **DATE:** _____

TRIBAL REPRESENTATIVE: _____ **DATE:** _____



U.S. Department of Health and Human Services
Indian Health Service
The Federal Health Program for American Indians and Alaska Natives

