

Sanitary Works Subsidy Scheme

Report on Detailed
Criteria and Processes

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Foreword

The Ministry of Health acting on behalf of the Crown wishes to establish a subsidy scheme for Sanitary Works to assist small and medium-sized communities to fund the capital cost of new sewerage systems or of upgrading existing sewage collection, treatment and disposal systems to significantly reduce public health risk. The scheme will be required to comply in full with any requirements of the Resource Management Act 1991.

The Ministry of Health has commissioned Peter Walker Consultants Limited to assist with the development of such a subsidy scheme, including administration protocols, application procedures and the like, pertaining to the proposed subsidy scheme.

The scheme is to be known as 'The Sanitary Works Subsidy Scheme'.

The scheme is in two parts:

1. for wastewater works
2. for fluoridation of drinking-water supplies.

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Executive Summary

The subsidy scheme will provide assistance with the funding of the establishment of sanitary works for communities with assessed populations of between 100 and 10,000 persons. The scheme has two components: a wastewater works subsidy and a drinking-water fluoridation subsidy.

The allocation of wastewater works subsidy funding is dependent on applicants meeting several criteria, which will be used to prioritise applications:

- a reduction in public health risk.
- environmental benefits
- socioeconomic conditions
- the rating and debt-financing abilities of the relevant territorial authority
- the extent of any previous subsidy from earlier sanitary works / sewage subsidy schemes.

Applications for a wastewater works subsidy will involve a three-stage process:

1. a Preliminary Application, which will establish that the applicant will qualify for a subsidy
2. a Provisional Application, which will identify the amount of the subsidy and, provided priority ranking is sufficiently high, will reserve funding for a two-year period. Provisional Applications will be ranked in order of priority on the basis of scoring against the criteria. This application will involve the preparation of a preliminary assessment of environmental effects (AEE) which must include a full public health impact assessment. This will provide information to allow scoring against stated criteria. It will assist applicants in preparing a full assessment of environmental effects in support of their application for resource consent, which is required before construction can commence and subsidy monies paid.
3. a Final Application, which can proceed when resource consents and finance arrangements have been completed.

Drinking-water fluoridation subsidy: a subsidy for 50% of the cost of installation of fluoridation equipment to drinking-water supplies is also available to eligible communities.

The potential applicants for a subsidy should first approach their local Medical Officer of Health for more information about the scheme.

Glossary

Commercial and/or industrial discharge	Any liquid, with or without matter in suspension or solution therein, that is or may be discharged from trade premises in the course of any trade or industrial process or operation or in the course of any activity or operation of a like nature. This does not include surface water or domestic sewage.
Direct participant	A person who resides within the participating community, and the dwelling in which he or she resides will be directly connected to the proposed works such that all wastewater shall be removed from the site on which the said dwelling is located.
Eligible capital cost of the works	<p>Either the estimated cost of the proposed construction works, excluding the costs of resource consents but including:</p> <ul style="list-style-type: none">• all design, construction and equipment costs• the cost of managing the design and construction of the works• provision for insurances, cost escalation and contingencies• GST. <p>This estimate is to be that presented with the Final Application for subsidy.</p> <p>Or the actual cost of the construction works, when they have been completed, excluding the costs of resource consents but including:</p> <ul style="list-style-type: none">• all design, construction and equipment costs• the cost of managing the design and construction of the works.• GST <p>whichever is the least.</p>
Equivalent contribution	The local share of funding provided by the relevant territorial authority (RTA). The equivalent contribution is to be raised by funds from across the whole district, including other local government funding. The equivalent contribution can be any combination of funds, including the region, whole of district, reticulated communities, participating community and any other basis considered appropriate by the RTA. All such funding is to be in accordance with the revenue and financing policy of the RTA.
Existing reticulation system	An existing network of pipes connecting properties to a common collection point. The collection point is usually the inlet point of a treatment plant. The reticulation system does not include the treatment plant.
GST (goods and services tax)	Section 5(6)D of the GST Act deems grants or subsidies to be consideration for a supply of goods and services, and accordingly they are subject to GST. Accordingly the amount of subsidy granted shall be inclusive of GST.

Health risk

The potential impacts of biological, physical, chemical or social agents on a specified human population.¹

¹ Adapted from enHealth Environmental Risk Assessment Guidelines Glossary definition of health risk assessment.

Participating community

A specific locality, inclusive of its inhabitants, being a distinct geographical entity within its own community of interest. The population of a participating community shall be based on the potential (within five years) occupation of dwellings within the community.

The following are exceptions to this definition:

- (i) any wastewater installation owned and operated by an industrial or commercial business entity that is necessitated by the nature of its operations (*note: companies who build and operate schemes on behalf of, or in conjunction with an RTA are not excluded from the Sanitary Works Subsidy Scheme*)
- (ii) any wastewater installation owned by a government department, Crown agency or state owned enterprise
- (iii) any wastewater installation owned by a school
- (iv) a marae that is within a locality and that forms only a part of that locality would be considered a community in its own right, except where the wider community formed by the locality is or has been an applicant to this scheme for a proposal that would encompass the marae.

Notes on exclusions:

The scheme excludes:

- (i) industrial and commercial activities that require their own wastewater treatment because of the nature of their activities. They are required to be responsible for their own wastewater disposal. This does not exclude them from participating in subsidised wastewater treatment schemes, but requires them to bear that portion of the cost of the scheme that equates to the wastewater load that they impose on the scheme.
- (ii) government-owned and controlled activities that require their own wastewater disposal scheme (eg, defence establishments, AgResearch facilities, Department of Conservation facilities), on the basis that the establishment, operation and maintenance of such schemes is the responsibility of the particular organisation. This does not exclude them from participating in subsidised wastewater treatment schemes, but requires them to bear that portion of the cost of the scheme that equates to the wastewater load that they impose on the scheme.
- (iii) schools, on the basis that separate funding is available from the Ministry of Education for their facilities. This does not exclude them from participating in subsidised wastewater treatment schemes, but requires them to bear that portion of the cost of the scheme that equates to the wastewater load that they impose on the scheme.

Relevant Territorial Authority (RTA)

The local government body that has administrative responsibility for the participating community.

SAWTAC (Sanitary Works Technical Advisory Committee)	Those persons convened by the Minister of Health to periodically review and decide applications for subsidies under the Sanitary Works Subsidy Scheme. In addition, they will review the operation of the scheme annually.
SWSS	Sanitary Works Subsidy Scheme
SWSS subsidy desk	That office within the Ministry of Health charged with receiving and reviewing applications for subsidies under the Sanitary Works Subsidy Scheme.
Wastewater	Water that has been used by persons or processes and is unfit for potable re-use. This does not include surface water or stormwater.

1. Wastewater Subsidy Scheme

- 1.1 The Ministry of Health acting on behalf of the Crown wishes to establish a subsidy scheme for sanitary works to assist small and medium-sized communities to fund new, or to upgrade existing, sewage collection, treatment and disposal schemes to significantly reduce public health risk and in so doing, minimise adverse effects on the environment. The scheme will be required to comply in full with any requirements of the Resource Management Act 1991.
- 1.2 The Sanitary Works Subsidy Scheme will be a partnership between local government and the Crown, aimed primarily at enabling disadvantaged small and medium-sized communities to achieve good environmental outcomes and safe sanitary conditions. While the provision of the local share of funding is a matter for the relevant territorial authority (RTA) to decide, the RTA is expected to provide additional subsidy to the extent necessary to make eligible sewerage schemes affordable for the benefiting community.
- 1.3 The Ministry of Health subsidy will be available for sewerage systems proposed for communities of between 100 and 10,000 people, all of whom are a part of the participating community in the proposed scheme.
- 1.4 The level of subsidy will be based on the eligible capital cost of the works. The maximum subsidy shall be 50 percent of the eligible capital cost of the works, where the number of direct participants in the scheme is between 100 and 2000 persons, reducing on a straight-line basis from the above, to a maximum subsidy of 10 percent of the eligible capital cost of the works, where the number of direct participants in the scheme is 10,000 persons.
- 1.5 Since the level of funding for this subsidy scheme is set annually, the Ministry of Health will establish a priority ranking protocol which will be reviewed from time to time, for the purpose of providing subsidies to the proposed schemes. The priority ranking shall be based on the following criteria:
 - 1.5.1 the reduction in public health risk expected from the proposed scheme compared to the existing treatment/disposal system
 - 1.5.2 the socioeconomic conditions of the participating community
 - 1.5.3 the environmental benefits
 - 1.5.4 the rating ability and available debt-financing levels of the relevant territorial authority (RTA)
 - 1.5.5 the participating community, comprising of the direct participants, has not had previous subsidy funding from any SWSS scheme; or, if the community has had such funding, it has made effective use of the funding for the purpose for which it was given.
- 1.6 Any proposal will be required to address environmental and cultural needs to the extent required to obtain the relevant resource consents under the Resource Management Act 1991.

1.7 Any subsidy shall be dependant on the relevant territorial authority (RTA) making all of the following commitments:

1.7.1 any subsidy made under this scheme will be at least matched with an equivalent contribution from the RTA (note: parties other than RTAs may be applicants)

1.7.2 the RTA will guarantee the ongoing operation and maintenance of the proposed works for a period of 20 years. The RTA shall ensure that adequate provision is made for the replacement or substantial upgrading of the scheme at the end of its useful life

and

1.7.3 the RTA shall enter into an agreement ensuring that the benefits of the Crown subsidy are passed on to those ratepayers who are the direct participants in the proposed works.

1.8 The following schemes, or parts thereof, are not eligible within this subsidy scheme:

1.8.1 commercial and industrial discharges, to the extent that these discharges contribute to an increase in system size or complexity

1.8.2 any new or future subdivisions approved after 23 March 2002

1.8.3 any schemes involving domestic wastewater discharges within the residential property boundary

1.8.4 any schemes where the RTA is a city council

1.8.5 any upgrading of existing reticulation assets

1.8.6 schemes that are under construction at 23 March 2002.

1.9 The application process will involve three stages, and each application must pass through each stage, although Stages 1 and 2 may be combined.

1. **Preliminary Application:** This stage is intended to allow potential applicants to determine whether or not their scheme would qualify for a subsidy without the applicant having to spend a lot of time and expense on this determination.

2. **Application for provisional acceptance:** This stage allows the application to be developed to a point where the amount of subsidy can be identified and funding reserved for a period. The applicant is required to:

a. carry out preliminary engineering

b. prepare a preliminary assessment of environmental effects (AEE) which includes a detailed health impact assessment (HIA). It is not intended that, for this stage, the preliminary AEE be sufficient to support a resource consent application, rather it is intended to identify the issues that must be addressed in future resource consent applications.

Resource consent applications and detailed engineering work will not be required.

Note: Where a combined preliminary and Provisional Application is made, that application must contain all information required by the preliminary and the Provisional Applications. Combined applications will be considered with the pool of Preliminary Applications, and if preliminary acceptance is granted would then be considered in the pool of Provisional Applications.

3. **Application for subsidy:** This stage requires all detailed engineering design to be complete, all resource consents issued and all funding arranged. The applicant is ready to commit to contracts to construct the scheme.
- 1.10 The second stage of application will allow all applicants to be ranked in order of priority. Those applications with the highest ranking (greatest need) will have funding reserved for a period of two years. The Sanitary Works Technical Advisory Committee (SAWTAC) shall have the discretion to extend this period should the circumstances of a particular application warrant this action. The two-year period is to allow for the application and issuing of resource consents and for engineering design work.
- 1.11 Those applications whose ranking is insufficient to get funding reserved will be advised accordingly. These applications will be reviewed at each application review period to see if ranking is sufficient to move the application into the funded group. This assumes that, over time, higher-ranked applications will receive funding and move from provisional acceptance to funded.
- 1.12 Subject to the time restrictions in clause 1.9 above, once an applicant has been advised that funding is reserved, that funding can only be withdrawn if either the application is withdrawn or a significant change to the proposed works takes place.
- 1.13 Once the third-stage application is made, and accepted, approval for funding will be made.
- 1.14 The first round of applications will close with the local Medical Officer of Health on 1 March 2003. The applications will be reviewed and decisions made by SAWTAC by 30 April 2003. Subsequent application rounds will close with the local Medical Officer of Health on 1 July and 1 February each year, starting July 2003. SAWTAC will meet and determine Preliminary Applications within two months of applications closing, and will determine Provisional Applications within three months of the application closing date.

2. Administration of Subsidy Scheme

Refer to Appendix 1 for a summary.

- 2.1 The need for sanitary works is identified, and the community/RTA makes a decision to apply for funding for the works.

Preliminary Application

- 2.2 Preliminary Application forms (see Appendix 2 for details) and Guidelines are uplifted from and discussed with the Medical Officer of Health.
- 2.3 The data required for the Preliminary Application is collected and RTA co-operation and agreement are sought.
- 2.4 The Preliminary Application is lodged with the local Medical Officer of Health. On receipt of the application by the Medical Officer of Health, the subsidy desk shall be immediately advised so that the register of Preliminary Applications can be updated.
- 2.5 The Medical Officer of Health considers and reports on the Preliminary Application, satisfying him/herself that:
 - i) the application has no attributes that would cause its immediate rejection
 - ii) the proposed works meet public health objectives (ie, there is a prima facie case that a public health risk assessment would show considerable reduction in public health risks should the proposed works proceed)
 - iii) the potential participating community is correctly identified and the potential participating population is correctly stated
 - iv) the RTA has provided a written undertaking, provided the works proceed, to:
 - a) provide an equivalent contribution
 - b) guarantee the operation and maintenance of the proposed scheme for 20 years.
- 2.6 The Medical Officer of Health will confer with the applicant and advise if any revisions and/or additional data is required.
- 2.7 The Preliminary Application form and supporting documentation are then forwarded to the SWSS subsidy desk by the Medical Officer of Health to be received within two weeks of applications closing.

- 2.8 With the Preliminary Application and the report from the Medical Officer of Health, the subsidy desk prepares a recommendation for SAWTAC to consider. The committee has three courses of action available:
- a) recommend to the Director-General of Health that the proposed works be granted preliminary acceptance for a subsidy
- or
- b) reject the application – the proposed works do not qualify
- or
- c) refer the proposal back to the subsidy desk seeking further clarification.
- 2.9 The subsidy desk relays SAWTAC's decision to the applicant. If the answer is positive, then the subsidy desk informs the applicant of the amount of subsidy that the proposed works is likely to qualify for, as a percentage of the eligible capital cost of the works.

Provisional Application

- 2.10 With an acceptance of the Preliminary Application the applicant can move to the next stage.

The applicant prepares a Provisional Application for subsidy (see Appendix 3). This requires the applicant to prepare a preliminary (AEE) incorporating a health impact assessment (HIA). The AEE does not need to be complete but must identify the issues to be addressed in detail at the next stage. However, the HIA should be detailed enough to enable public health risks to be reliably assessed.

Where a community has wastewater disposal based on septic tanks, the HIA must include an assessment of the performance of the existing septic tanks in the community. This assessment shall be based on a procedure that is acceptable to the Ministry of Health, such as the proposed protocol for assessing on-site wastewater systems prepared by Auckland Healthcare for the Ministry of Health.

In addition, preliminary design work for the scheme will need to be completed. This will involve the engagement of engineering services to prepare a preliminary design for one or more scheme options, together with cost estimates. There may also be a need for specialist advice, such as geotechnical or hydrogeology.

- 2.11 The applicant confirms that the information contained in the Preliminary Application is current, and provides a preliminary cost estimate together with any available engineering reports, design reports and the like, to assist the application. Documentation shall also be submitted showing the methods used and assumptions made in determining the population of the participating community. These documents are filed with the local Medical Officer of Health as a Provisional Application for subsidy. On receipt of the application by the Medical Officer of Health, the subsidy desk shall be immediately advised so that the register of applications can be updated.

2.12 The Medical Officer of Health satisfies him/herself that the information provided in the application, as filed, is an accurate portrayal of information requested and that the HIA is accurate. The Medical Officer of Health also substantiates that:

- i) the proposed works will provide a nett benefit in public health risk terms to the community
- ii) the proposed works meets all public health objectives
- iii) the AEE has been reviewed by the local regional council.

2.13 The Medical Officer of Health files his/her report, along with information provided by the applicant, to the subsidy desk.

2.14 With the documentation from 2.10 and 2.11 above, the ranking data sheet, the preliminary cost estimate and the confirmed Preliminary Application, the subsidy desk calculates the ranking score and prepares a recommendation for SAWTAC. At the same time the subsidy desk will insert the application into the ranking lists.

The recommendation will be in the following form.

[1] The proposed works meet the subsidy scheme criteria and therefore have provisional acceptance under the Subsidy Scheme.

[2] The subsidy will be ___% of capital cost.

either

[3a] The proposed works have a sufficiently high rating to be eligible for funding immediately. The provisional ranking is XX. The estimated subsidy will be \$_____ subject to the applicant finalising resource consents and the remainder of the necessary finance.

or

[3b] The proposed works have a provisional ranking of XX. The best estimate of likely timing of funds being available is _____ because there is \$_____ of proposed works ahead of this application on the priority ranking list.

[4] The proposed works are subject to resource consent and finance conditions, which the applicant has undertaken to satisfy before applying for final approval of subsidy. In the meantime the project has been placed on the ranking list.

2.15 SAWTAC considers the recommendation and either:

- (i) accepts the recommendation as it is
- (ii) accepts the recommendation with a change to its priority ranking
- (iii) rejects the recommendation
- (iv) refers the recommendation back to the subsidy desk with reasons for its referral, expecting the subsidy desk to take action on referral reasons and to request re-submission.

The committee's recommendations are then forwarded through the Director-General of Health to the Minister for a decision, after consultation with the Minister for the Environment.

2.16 On receipt of the Minister's decision, the subsidy desk informs the applicant using one of the following approaches.

- a) Your proposed works have been provisionally accepted for a subsidy under the Sanitary Works Subsidy Scheme. The level of subsidy is confirmed at ___ % of the eligible capital cost of the works. Funds have been allocated for your proposed works and these will be held for up to two years while you satisfy the provisional conditions. The conditions are as follows.
 - i) You must obtain all relevant consents for the proposed works, including any consents required under the Resource Management Act 1991.
 - ii) When all relevant consents are in place a revised capital cost estimate needs to be prepared and submitted, the agreement from the relevant territorial authority (RTA) that they will provide funding to an equivalent extent to the expected subsidy needs to be confirmed, together with confirmation of the RTA's guarantee of operation and maintenance for 20 years or for the life of the plant.
 - iii) Any other conditions applying to this proposed work.

If the above conditions are not satisfied within two years then your provisionally approved application will be reconsidered and re-ranked on the priority listing. In this case, the timing of any subsidy is not guaranteed.

Or

- b) Your proposed works have been provisionally accepted for a subsidy under the Sanitary Works Subsidy Scheme. The level of subsidy is confirmed at ___ % of the eligible capital cost of the works.

The proposed works have been assigned a priority ranking score of _____. As such there are proposed works to the value of \$_____ ahead of you on the priority list and unfortunately funds cannot be allocated for your proposed works at this time. The position will be reviewed in six months and you will be advised.

Final Application for subsidy

2.17 The applicant must now obtain the necessary resource consents, engineering design and cost estimates and confirmation that finance is available to fully fund the works.

2.18 On a quarterly basis the applicant will report progress on the resource consent process and on the securing of the remaining funding.

2.19 When the resource consents and finance have been secured, a Final Application for subsidy can be submitted. This application will nominate the milestones on which payment of the subsidy will be made. The application will also nominate a person who will certify claims for payment.

2.20 The subsidy desk will confirm that the conditions stated in the decision on the application for final approval have been met, that the application has had funding allocated, that the payment milestones are acceptable, and that the payment certifier nominated is acceptable.

A recommendation will be made to SAWTAC for the allocation of subsidy to the applicant.

The committee will then endorse the recommendation and forward it through the Director-General of Health to the Minister for approval, after consultation with the Minister for the Environment.

SAWTAC would have no grounds at this point for not seeking Ministerial approval for payment.

Payment

2.21 No payments will be made until the applicant provides proof that all costs relevant to the obtaining of resource consents have been paid.

2.22 Payments will be made on a milestone basis at agreed stages through the construction phase of the scheme.

2.23 Claims for payment will be required to be certified by the agreed certifier and be countersigned by the Medical Officer of Health.

Reports

Every three months the subsidy desk prepares four reports. The subsidy desk shall create and maintain a database as a way of holding the data on applications and of providing a means for statistical analysis and monitoring of the subsidy scheme.

1. Register of Preliminary Applications

The list of all Preliminary Applications, including those which have moved through the process to funding and those which have been withdrawn or rejected, which shows the status of each application.

2. Priority ranking list

- The list as it stood after the last SAWTAC meeting, less any proposed works that have been withdrawn.
- The list as it will stand if all subsidy desk recommendations are accepted.

3. Allocated funding list

The proposed works where the applicant has been informed that they have funding reserved for two years, budgeted subsidy, date of first notification of approved funding, progress report, ranking score and date for review.

This list will also provide for cost escalation on the estimated costs by updating those amounts of funding allocated by the change in the Capital Goods Price Index – Other Construction (S2GC), published by Statistics New Zealand.

4. Funded list

The works that have received funding.

Calculation of ranking score

2.25 The SWSS subsidy desk will calculate the ranking score on the following basis:

2.25.1 Each of the following criteria will be scored 0 to 10, the general principle being the higher the score the greater the importance.

- a. Public health and environmental risk: the score for public health risk and environmental risk are divided by the maximum possible score (680) then multiplied by 10 (see Appendix 4).
- b. NZDep2001 Index of Deprivation for the participating community: the index will be the score used. This may need to be the average of several Census area units that make up the participating community.
- c. RTA funding ability: the average index, across the whole of the RTA, from the NZDep2001 Index of Deprivation.
- d. No previous subsidy funding: score is either 0 (yes) or 10 (no).

2.25.2 Each of the criteria will then be multiplied by the weighting for that criterion and the weighted score for each of the criteria is summed to give a numerical score.

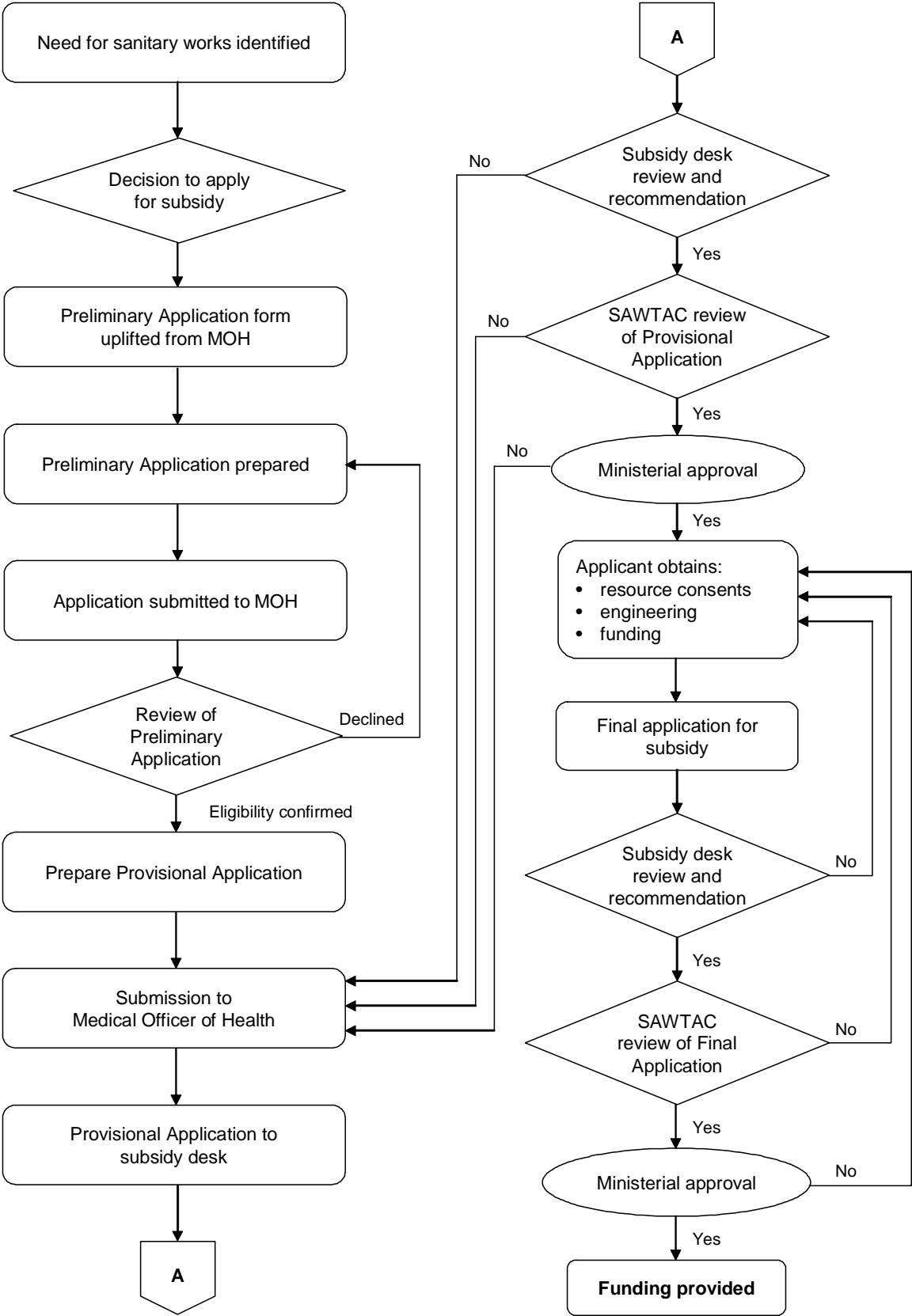
2.25.3 Criteria weightings

- | | |
|---|-----|
| a. Public health and environmental risk | 6.8 |
| b. Deprivation Index | 2.5 |
| c. RTA funding ability | 0.5 |
| d. Previous subsidy | 0.2 |

3. Drinking-Water Fluoridation Subsidy

- 3.1 A part of the Sanitary Works Subsidy Scheme is the provision of a subsidy on the cost of fluoridating local drinking-water supplies. The funds available for this subsidy are not to exceed 10 percent of the total annual appropriation for the Subsidy Scheme.
- 3.2 The subsidy shall be 50 percent of the cost of the eligible capital works. The subsidy will not cover the costs of operating or the supply of chemicals.
- 3.3 Applications from RTAs are to be made to the Medical Officer of Health in the form of a letter detailing the proposal.
- 3.4 The application will be forwarded to the SWSS subsidy desk with a recommendation from the Medical Officer of Health.
- 3.5 The application and supporting recommendation will be passed on to SAWTAC for their review.
- 3.6 SAWTAC will consider the application and forward through the Director-General of Health a recommendation to the Minister of Health for approval, after consultation with the Minister for the Environment.
- 3.7 On receipt of the Minister's approval the SWSS subsidy desk will advise the applicant that the subsidy has been approved, or otherwise.
- 3.8 Payment of the subsidy will be made once the applicant has provided evidence to the SWSS subsidy desk that either payment has been made for the installation of the necessary equipment, or an order has been placed, or a contract has been signed for the installation of the necessary equipment.
- 3.9 There will be no prioritising of applications, which will be dealt with on a 'first come first served basis'.
- 3.10 In the event that approved applications exceed available funds in any year, applications will be prioritised on the basis of the community's deprivation index. Other applications will carry over for payment in the following fiscal year.

Appendix 1: Application Flow Chart



Appendix 2: Form of Preliminary Application for Subsidy

The Preliminary Application shall take the form of a report that addresses each of the following points, together with any other factors that the applicant considers relevant to the application:

1. a description of the scheme
2. maps separately showing:
 - (i) location and number of properties intended to be connected to the scheme
 - (ii) location and number of properties which could potentially connect to the scheme
 - (iii) area benefiting by the reduction in public health risk
 - (iv) location of natural water courses.

All maps submitted shall conform to Land Information New Zealand standards and be to a scale that clearly shows all necessary information.

3. the reduction in public health risk that is expected if scheme is implemented
4. the Relevant Territorial Authority (RTA)
5. the size of the participating community (maximum population)
6. industrial connections – expected allowance for industrial load as a proportion of total scheme load
7. RTA commitment to equivalent subsidy
8. RTA agreement that it will guarantee the effective operation and maintenance of the scheme
9. RTA agreement that any subsidy benefits will be passed on to the participating community
10. a list of any previous subsidies that the RTA has received from central government for sewage-related schemes.

Appendix 3: Form of Provisional Application for Subsidy

This application form is to be used to help rank subsidy applications. It is to be submitted to the Medical Officer of Health with a preliminary assessment of effects on the environment (AEE) and a health impact assessment (HIA) covering the net benefits of the proposed scheme.

Relevant community name: Territorial authority:.....

Brief description of proposal:.....
.....
.....

Estimated cost (including GST):.....

Procedure used to generate estimated cost:
.....

Number of properties potentially serviced:

Number of property owners and properties agreeing to join scheme:

Area covered by scheme: (*location and description*):.....
.....

Current waste disposal method(s):

Estimated operating costs of proposed works (\$/year):

Estimated maintenance costs of proposed works (\$/year):

Does the proposal include allowances for growth or extension?
Describe:

How will the proposal deal with the public health risks identified in the HIA?

What new public health risks will the proposal introduce?

What resource consent implications does the proposal raise?

How are these implications being addressed?

Does the applicant have any indication that the RTA will provide an equal contribution?
Describe:

How is it proposed to finance the proposal?

Appendix 4: Guidelines for Scoring Public Health Risk and Environmental Risk

The following are guidelines to assist the **Subsidy Desk** and **SAWTAC** score public health risk for the purpose of establishing the public health risk component of the ranking score. Note that this list of questions includes issues common to both public health and environmental risk; the second part deals with items that are environmental only.

The information on which the scoring is based is from data contained within the Provisional Application. This is intended to score the effects of the present situation, not that which will exist after the proposed works are installed and commissioned.

The scores shown are indicative and show the full range of possible scores.

- | | | |
|----|--------------------------------|-----|
| 1. | Instance of community illness: | |
| | a. unknown | 0 |
| | b. suspected at times | 15 |
| | c. known at times | 60 |
| | d. frequent occurrence | 100 |
| 2. | Addition of toxic substances: | |
| | a. no evidence | 0 |
| | b. suspected at times | 20 |
| | c. known at times | 30 |

Note: In Question 3 either 3A and 3B or 3C or 3D is scored depending on the situation.

Either

- | | | |
|-----|-------------------------------------|----|
| 3A. | Septic tank and associated soakage: | |
| | a. generally modern, oversized | 0 |
| | b. adequate | 15 |
| | c. old, undersized, poor soakage | 30 |

and

- | | | |
|----|--------------------------|----|
| 3B | Septic tank maintenance: | |
| | a. generally good | 0 |
| | b. mixed | 15 |
| | c. generally poor | 30 |

or

- | | | |
|----|---|----|
| 3C | Direct discharge to land: | |
| | a. wastewater discharged directly onto or into soil | 60 |

or

- | | | |
|----|---|----|
| 3D | Direct discharge to water: | |
| | a. wastewater discharged directly into water course | 60 |

4.	Sources of potable water (vulnerability to contamination):	
a.	is not groundwater or is surface water	0
b.	groundwater – remote	10
c.	groundwater – high water table	50
d.	groundwater – alluvial soils	50
5.	Source of potable water is surface water:	
a.	no potential to contaminate (remote catchment is secure, upstream of discharge)	0
b.	slight potential to contaminate (upstream of but close to discharge, insecure catchment)	10
c.	considerable potential to contaminate (insecure catchment, a discharge upstream of catchment)	50
6.	Nature of soil structure:	
a.	free draining, coarse sands and gravels	0
b.	good drainage	6
c.	moderate drainage, sandy and silt loams	10
d.	slow draining, clay components	16
e.	poor drainage, rock layer close to surface	20
7.	Soakage rates:	
a.	> 300 mm per hour	0
b.	300–100 mm per hour	6
c.	100–50 mm per hour	10
d.	50–25 mm per hour	16
e.	< 25 mm per hour	20
8.	Contamination of ground water:	
a.	no evidence	0
b.	suspected	20
c.	confirmed	40
9.	Contamination of water courses:	
a.	no evidence	0
b.	suspected	30
c.	confirmed	60
10.	Contamination of coastline:	
a.	no evidence	0
b.	suspected	30
c.	confirmed	60

11. Height of water table:	
a. deep (> 10 m) and stable	0
b. deep (> 10 m) but rising over time	4
c. moderate (5–10 m) and stable	4
d. moderate (5–10 m) but rising over time	10
e. shallow (< 5 m) and stable	10
f. Shallow (< 5 m) but rising over time	20
12. Risk of direct human contact:	
a. non-existent	0
b. remotely possible	40
c. possible	80
13. Stormwater infiltration	
a. no evidence	0
b. suspected	5
c. confirmed	10

Environmental

The following questions cover environmental issues that do not have a public health component.

Care should be taken to ensure that the environmental risk factors present are attributable to the present wastewater collection, treatment and disposal methods.

14. Odour problems:	
a. no odour problem	0
b. occasional	12
c. frequent problem	25
15. Visual pollution:	
a. none	0
b. occasional	12
c. frequent problem	25
16. Addition of nutrients:	
a. no nutrient problem	0
b. occasional nutrient problem	15
c. frequent nutrient problem	30

Scoring example

a. Public health and environmental risk

Question	Maximum score	Actual score
1	100	15
2	30	0
3A	30	20
3B	30	30
3C	na	–
3D	na	–
4	50	0
5	50	10
6	20	10
7	20	10
8	40	20
9	60	30
10	60	30
11	20	10
12	80	0
13	10	0
14	25	15
15	25	10
16	30	0
	680	210

Score is $(210 \div 680) \times 10 = 3.09$

b. Index of Deprivation for community = 6

c. Index of Deprivation for RTA = 5

d. No previous subsidy = 10

Calculate score

(Item score x weighting)

Item score	Weighting	Score
3.09	6.8	21.01
6	2.5	15.0
5	0.5	2.5
10	0.2	2.0
		40.51