| **STONE COUNTY HEALTH DEPT** **Onsite Wastewater Treatment System Permit Application** | Parcel ID # | | Permit # |
|---|---|---|---|
| | Date: | Ck#: | Amount: |

| 1. Property Owner Name        (Last, First, MI) | Payee: |
|---|---|
| | EPHS Signature                                    # |

| 2. Site Address (911/ENS) | Subdivision | Lot # |
|---|---|---|
| City                                              Zip Code | Reviewed By | Final Inspection Date |

Is repair/replacement due to sale of property ?    (Please check applicable box)     ☐ Yes          ☐ No

Directions to Site

| 3. **Mailing Address** (if different from above) | Day Phone Number | Night Phone Number |
|---|---|---|
| | (     )     - | (     )     - |
| City | State | Zip Code |

4. **System Is:**    New Construction ☐        System Replacement ☐        System Repair / Replacement ☐

| 5. **System Serves** | Residence ☐ | | Business ☐ | |
|---|---|---|---|---|
| Single Family ☐ | No. Bedrooms: | Basement ☐ Whirlpool Bath ☐ Garbage Disposal ☐ Dishwasher ☐ Water Softener ☐ | Food Service ☐ Lodging ☐ Vacation Home Rental ☐ | Daily Sewage Flow (gallons per day) |
| Laundry Facility ☐ | No. Bathrooms: | | | |

| 6. **Water Supply** | Public ☐            Private ☐   Date of Last Water Test _____ |
|---|---|
| | Name of Supply          Type Supply:   Bored Well ☐   Dug Well ☐   Driven Well ☐   Drilled Well ☐   Other (specify): |

| 7. **Lot** | Size   # acres   # square feet | % Slope                          Indicate direction of slope on Site Layout |
|---|---|---|

8. **Soil Information**    Include soil morphology report with the application

Soil Morphology ☐   Application Rate (gpd/sq. ft.)

| 9. **Name of Soil Evaluator** | Tester Identification Number |
|---|---|
| Address | Phone Number (     )     - |
| City                                     State | Zip Code |

10. **Proposed System**:        Complete information only for the system you plan to construct
Indicate location of discharge pipe, fence, gate, and all setback distances on Site Layout.

| A. ☐ Sewage Tank | | ☐ Absorption Field | |
|---|---|---|---|
| Septic Tank ☐ | Liquid Capacity    gal. | Distribution Box ☐ | Pipe & Gravel-width _____ ☐ |
| Manufacturer: | Material/Construction | Serial Distribution ☐ | Chamber-width _____ ☐ |
| NSF Class I Aeration Unit ☐ | Treatment Capacity   gpd | Flat Lot Layout ☐ | Gravelless Pipe-dia. _____ ☐ |
| Manufacturer: | Material/Construction | Dosed ☐ | Other (specify) _____ ☐ |
| Pump Tank ☐ | Liquid Capacity    gal. | Pressure Distribution ☐ | Total Absorption Area _____ |
| Manufacturer: | Material/Construction | Trench Length(s) | No. of Trenches |
| | | Trench Width | Trench Depth |

| Distance from:   Well      House | | Distance from:   Well      House | |
|---|---|---|---|
| Property Lines | Water Lines | Property Lines | Water Lines |
| Stream, River, Pond, or Lake | Neighbor's Well | Stream, River, Pond, or Lake | Neighbor's Well |

Show location of house, tank, absorption field, wells, water lines, bodies of water, geological features, easements, and all setback distances on the Site Layout.

B. ☐     Alternative System

| Low Pressure Pipe System ☐ | Sand Filter ☐ | Mound System ☐ |
|---|---|---|
| Drip Irrigation ☐ | Wetlands ☐ | Other (specify) ☐ |

Include supporting data, calculations, and drawings with the packet.

| 11. **Installer** | Registered/Basic     Y ☐ N ☐<br>Registered/Advanced Y ☐ N ☐ | Identification Number | |
|---|---|---|---|
| Name | | Phone Number (    )      - | |
| Address | | | |
| City | State | | Zip Code |

All information contained in and with this application packet is true and accurate to the best of my knowledge.

12. **Signature** _____

Please circle appropriate title:
        Property Owner      Installer      Builder

**Date**_____

**Before any concrete is poured you *must obtain* a Building Permit from Planning and Zoning. Failure to do so will result in P&Z fees being doubled.**

## 13.  Site Layout             **TO BE COMPLETED BY THE INSTALLER**

Drawn By:
Property Owner:

Indicate on Drawing the Direction North
Attach Computer Diagram if Used

1. Show property lines and dimensions to reflect the
   shape and size of the property.

2. Diagram proposed system.  Show appropriate
   elevations to indicate proper fall for system.  System
   must be staked on the property prior to the site
   evaluation.

3. Show distances to house, well, water lines, property
   lines geological features such as sinkholes, rock
   outcrops, lakes, ponds, streams, rivers, etc.

4. Show distances to neighbors' wells, homes, and sewage
   disposal systems.

5. Show locations of soil morphology test pits.  Holes
   must be flagged on the property for pre-site
   evaluation.

6. Indicate any known easements that exist for utilities,
   roads, private driveways, or other easements.

**TRENCH DETAILS**

Backfill

Barrier Material
_____Type

____" of Clean Rock

____" of Clean Rock

Total
Trench Depth

____" Wide