

"This application expires 6 months from the initial date if permits have not been issued"

"This application to be filled out when applying for a septic system inspection."

ty Health Department Application for Improvement Permit and/or Authorization to Construct RMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED. THEN THE IMPROVEMENT PERMIT IZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon submitted. (Complete site plan = 60 months; Complete plat = without expiration)

nmental Health New Septic System

property irons must be made visible. Place "pink property flags" on each corner iron of lot. All property lines must clearly flagged approximately every 50 feet between corners.

lace "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out uildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.

Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.

property is thickly wooded, Environmental Health requires that you clean out the undergrowth to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. Do not grade property.

All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.

Environmental Health Existing Tank Inspections

Follow above instructions for placing flags and card on property.

Prepare for inspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if possible) and then put lid back in place. (Unless inspection is for a septic tank in a mobile home park)

DO NOT LEAVE LIDS OFF OF SEPTIC TANK

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

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FIC plying for a	uthorization t	to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
Accepted		{_} Innovative { \(\sum_{\conventional} \) Conventional
Alternation Alternation Alternation Alternation Section Alternation Alternatio		{} Other the local health department upon submittal of this application if any of the following apply to the property in the season of the supplicant MUST ATTACH SUPPORTING DOCUMENTATION:
_}YES {	NO NO	Does the site contain any Jurisdictional Wetlands? Do you plan to have an <u>irrigation system</u> now or in the future? Does or will the building contain any <u>drains</u> ? Please explain.
}YES}YES {}YES	N NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property? Is any wastewater going to be generated on the site other than domestic sewage?
<pre>{_}YES {}YES {}YES</pre>	L NO NO	Is the site subject to approval by any other Public Agency? Are there any Easements or Right of Ways on this property? Does the site contain any existing water, cable, phone or underground electric lines?
		If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.