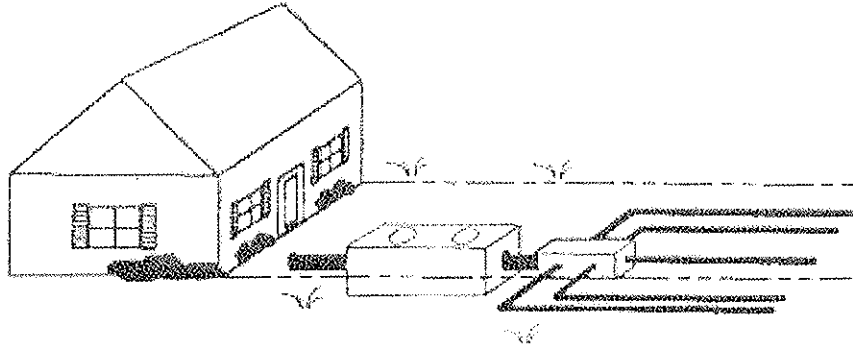


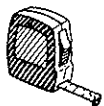
HOUSEHOLD SEWAGE TREATMENT SYSTEMS PROCEDURE BOOKLET



BOOKLET CONTENTS



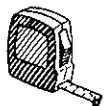
Homeowner Process Information Sheet



Homeowner Site Plan Worksheet



List of Soil Evaluators



Site Review Application

HOUSEHOLD SEWAGE TREATMENT SYSTEM (HSTS) PROCESS FOR THE HOMEOWNER

Select a location for your proposed home and flag off the 4-corners of the property.

Complete the **Application for Site Review for a Household Sewage Treatment System** (enclosed). This form will be returned to the Health Department.

Complete the **Homeowner Site Plan Worksheet** (enclosed). The information on this worksheet will be used by your soil evaluator and the Health Department.

Contract the services of a qualified soil scientist/soil evaluator to conduct a soil evaluation for your proposed residential site. Provide your soils professional with a completed **Homeowner Site Plan Worksheet** located in your packet. As part of this process:

You or the soils evaluator should stake off the evaluated areas on the property suitable for your proposed septic system installation. **Note: identified installation areas must remain staked and undisturbed until your septic system is installed.**

Have the soil evaluator provide you with two completed **Site/Soil Evaluation for Sewage Treatment Forms** for each proposed septic installation area. A minimum of two evaluations will be required for each site. (Therefore, you will be turning in at least four soil evaluations - a minimum of two for the proposed septic system area and a minimum of two for the proposed replacement septic system area.)

Once all of the required information from your soil evaluator has been received, you should then contract the services of a qualified septic system designer. A qualified septic system designer will work with you, based upon the results of your soil evaluation, to design a septic system for your proposed home. Your septic system designer should then provide you with a detailed design/layout plan for your proposed dwelling.

Once you have obtained a proposed septic system layout from your system designer, you are ready to apply for a Health Department Site Review. Submit the:

Application for Site Review Form along with the fee

Completed Site/Soil Evaluation for Sewage Treatment Forms and the Site Plan Worksheet

Completed design/layout plans

Once your application materials have been submitted, Health Department personnel will review the application, soils evaluations, proposed system designs, conduct site visits, and provide you with written confirmation of the results of our evaluation and any possible permit conditions applied to the systems installation and operation. **All written site review approvals expire one year from their issuance.**

After your site has been approved, you are ready to apply for a **Permit to Install a Household Sewage Treatment System**. These permits are obtained from the Health Department and are valid for one year. Prior to issuing the Installation Permit, the property will need to have an assigned mailing address (obtained from the Crawford County Engineer's Office).

After a Permit to Install has been issued, a registered septic system installation contractor may install your system.

As soon as your system has been installed, your contractor must contact the Health Department to schedule an installation inspection. Within 18 months after the system has been installed, a follow-up inspection by the Health Department will also be conducted.

After installing an approved Household Sewage Treatment System, you may need to apply for an **Operation Permit**. Some systems may be mandated to renew the Operation Permit yearly as well as meet minimum sewage treatment maintenance requirements.

Homeowners are encouraged to contact our office at **(419) 562-5871** with any questions related to the Home Sewage Treatment System Program.

HOMEOWNER SITE PLAN WORKSHEET

To be given to soil evaluator for reference

Place a check (✓) in the block of each item that has been indicated on your site plan

Dimensions and acreage of the property.

Proposed location of the house. (Show approximate distance from the road and property lines to the house.)

Area preferred for sewage system installation. (N/A if you have no preference)

Preferred driveway location. (N/A if you have no preference)

Location of future structures or improvements to the property such as garages, workshops, barns, pastures, pools, etc. (N/A if there are none)

Location of any existing sewage systems and water systems on the property and neighboring properties within 50' of the property lines.

Location of easements or rights of way on the property (N/A if none)

Location of designated wetlands on the property. (N/A if none)

Location of 100 year floodplain on the property. (N/A if none)

Use this space to draw your site plan or attach a separate sheet if more space is needed

*Soil Evaluators

H.S.T. Services LLC

Mr. Rick Emmons
1566-A Baney Rd.
Ashland, OH 44805
419-606-2625

Soil and Environmental Consulting Services, Inc.

Mr. Steven Miller
CPSSc.
1974 N. 3 Bs and K Rd.
Sunbury, OH 43074
614-579-1164

Hull & Associates, Inc.

Mr. Shawn McGee
P.E.
3401 Glendale Ave. suite 300
Toledo, OH 43614
419-385-2018

Norwalk Concrete

Mr. Jim Charville
80 Commerce Dr., P.O. Box 563
Norwalk, OH 44857
800-733-3624

Terra Firma Soil Investigations, Inc.

Mr. Jim Russell
308 Bellevue St.
Marietta, OH 45750
740-383-3300

J. Musteric & Associates

303 South Arch Street
P.O. Box 190
Fremont, OH 43420

Accurate Onsite

Andy Hill and Bill Walker
PO Box 1653
Wooster, OH 44691
Email: arhill1@msn.com
330-601-0499 or 419-651-1490

* These companies/individuals are not registered or certified with the Crawford County General Health District. This list is compiled by the above individual(s) requesting the Crawford County General Health District place them on a list to notify homeowners of their services. The Crawford County General Health District does not endorse and can not make recommendations on behalf of any of these companies/individuals.

Crawford County General Health District, 130 N. Walnut St., Suite B, Bucyrus, OH 44820
 Phone: (419)562-5871 Fax: (419)562-2048

Application for Site Review for Household Sewage Treatment System (HSTS)

Proposed system to serve:
 Single family dwelling Two family dwelling Three family dwelling Other (specify) _____

Proposed system type: New Replacement Alteration

Type of Water Supply: Public Water Supply
 Private Water Supply - circle type: drilled well, cistern, hauled water storage tank, pond

Owner / Applicant (circle)	Phone #
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Mailing Address

City	State	Zip Code
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Location of Property:

Street Address of Property, if applicable:

City	Zip Code	Township	Parcel #
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Size of existing/proposed building lot: Acres: _____ Dimensions: _____ # of Bedrooms: _____

The following accompanying documents are required for consideration for site review:

- | | |
|----|-----------------------------------------------------------------------------------|
| 1. | Site and soil evaluation form completed as outlined in CCGHD Chapter 29-08 (B). * |
| 2. | Scaled site drawing as outlined in CCGHD Chapter 29-08 (B). |
| 3. | Layout or design plan as outlined in CCGHD Chapter 29-09.1 |

Before the site review can be scheduled, the following must be done by the applicant:
 1. All property lines must be clearly marked, and
 2. Primary and secondary sewage areas must be clearly marked and protected from disturbance.
 I, the undersigned, hereby certify that the above information, and that included in the accompanying documents is correct and truthful. I also understand that any deviation from the above may nullify approval of this site for a permit to install. I understand that this site review is not a permit to install. A separate permit will be required for installation, upon site approval.

Owner / Applicant Signature	Date
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*For replacement of existing systems, site and soil evaluation may be waived by our department, if it is determined that there is no suitable area for an on-lot replacement system. Alterations of existing systems do not require the site and soil evaluation.

Health Department Use Only

Fee:	\$	Receipt #	Site ID #
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Site meets requirements?	Yes	No
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Design plan / layout plan meets requirements?	Yes	No
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Date of Health Department site review inspection:

Name of Soil Evaluator:	System Designer:
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Date of approval / denial	Reviewer
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