

## **Sewage Treatment System (STS) Site Review Application**

## The following must be submitted along with this application:

- A **Soil Evaluation** completed in accordance with OAC 3701-29-07:
  - o A qualified soil evaluator must conduct an examination of the soils on your property and will provide detailed information on the required report.
  - o A list of Certified Soil Scientist that work in NW Ohio can be obtained through our department.
  - o If the lot is not large enough to support an On-Lot STS, the soil evaluation may be waived, contact WCHD prior to a soil evaluation to have a determination made.

<ul> <li>A sewage Treatment System Design completed in accordance with OAC 3701-29-10:</li> <li>A sewage system design plan must be provided for review by the Wood County Health Department.</li> <li>This plan must include proposed layout of the property, layout of components of the proposed STS, how adequate sewage treatment will be achieved in the soil conditions present on the property, etc.</li> <li>A list of qualified professionals that work in NW Ohio can be obtained through our department.</li> </ul>								
Complete the following information – Please print legibly								
Type of Sewage Treatment System: ☐New HSTS (\$728) ☐ Replacement HSTS (\$478) ☐ SFOSTS (\$728)								
Sewage Treatment System will serve: Single Family Dwelling Two/Three Family Dwelling Commercial Building: Use of Building: # of Employees: # of Employees:								
Proposed number of Bedrooms:	Basement: Water Supply: □ City Water □ Private Wa □ Yes □ No				Vater	r Township:		
Property Address/Location:				Which side of the road is property located on? □North□South □East □West				
Parcel Number: Crossroads:								
Owner Name:					Date:			
Owner Mailing Address:								
City: State:			z			Zip Code:		
Phone #: Email Address:								
<ul> <li>Once this completed form is submitted, with the appropriate fee(s) and documentation to WCHD, an EHS will review the entire package to ensure the proposed STS meets OAC 3701-29;</li> <li>After the review of the proposed STS, an EHS will contact you to schedule an appointment for the Site Evaluation;</li> <li>The proposed STS must be staked out along with the house, drive and any permanent structures on the property;</li> <li>Once completed, Site Review, Soil Evaluation, &amp; Sewage System Design are valid for a period up to 5 years;</li> <li>Soil evaluations/STS designs may be transferable.</li> <li>I have completed this application to the best of my ability and agree to all terms and conditions on this application and that to the best of my knowledge, all the information provided with this application is factual. By signing this form, I am authorizing and requesting a site review and/or soil evaluation to be conducted on the abovenoted property.</li> </ul>								
Signature:					I	Date:		
Builder, if applicable:						Phone:		
Builder Mailing Address:					[	Email:		
*********OFFICE USE ONLY*********  Date: Amount Paid: Receipt #:						Sanitary Sewers		
Site Review #:	Sanitarian:		Initials:	HSTS SFOSTS Available?  YES NO				