

# Guide for Obtaining Permit to Install A Sewage Treatment System



## **How Obtain a New/Replacement Household Septic System Permit or for a Lot Split**

1. Get a soils test done using a certified soil scientist. See last page
2. Fill out site review/lot split application. Included in Homeowner Guide
3. Mail in: completed application, paperwork from soil scientist, any designs and \$250.00 application fee. (Make sure to check if it is for a lot split also) Marion Public Health 181 S Main St, Marion, Oh 43302. Fee amount subject to change.
4. Once we receive all of the above, a sanitarian will visit the site within approximately 1-2 weeks, weather dependent. A letter will be sent approving/denying the site for a new/replacement/alteration STS and for a lot split if needed. The site review is good for 5 years as long as site conditions have not changed.

### **Lot Splits are Done Here**

5. For new and replacement systems, the next step is to bring in the signed Zoning approval and then have your installer of choice submit a design for the septic system to be installed. (Make sure the designer discusses your options with you). Your installer must be registered with the Health Department. [Registered Installers](#)
6. Prior to beginning the project, purchase the installation permit for \$574.00. Work may not begin until the design drawing has been reviewed and approved and the permit has been purchased. The permit is only good for 12 months.
7. Once the system has been inspected and approved, purchase an Operation Permit for \$10.00. The Operation Permit must be renewed annually or every 5 years based on the type of system you have. This can also be paid at the time of the installation permit.

**Note:** A plumbing permit from the Health Department is required for new builds and remodels and must be inspected and approved prior to final approval of the septic system.

**Note:** Fees are subject to change.

**Note:** If you are replacing an aerator or septic tank to an off-lot tile (aka-discharging system), you will first need to get a permit from the EPA. Discharging systems have been disapproved since 2007 by the EPA for new lots or existing lots that have room for leach lines.

## **Process for Obtaining Permit to Install a Household Sewage Treatment System**

The purpose of this document is to guide the homeowner through the proper process of obtaining a new septic system for either a new house/new lot or replacement for an older house.

NOTE: If you are splitting a lot from an existing parcel that has a home on the property, then an evaluation needs to be done on both properties.

1. For a single proposed new lot less than 5 acres, a replacement system, and/or newly built systems the following steps need to be followed in order:
  - a. We need a soil evaluation report on the lot completed by a certified soil scientist using a state provided standard soil evaluation form. This will give us the necessary soil characteristics and the limiting layer information to determine whether the lot is suitable for an on-lot sewage system, and the types of system(s) that may be used. The lot boundaries must be clearly flagged.
  - b. Complete a site review application (included in packet) and submit with it the applicable fee, and copies of the soil evaluation reports. Leave all flags in place until the septic system is installed.
  - c. Upon review of the site and information provided, an approval or denial based on the lot's ability to properly treat sewage.
2. Upon approval, the next step will involve obtaining a design\layout plan completed by a knowledgeable sewage system designer or installer.

**When an existing parcel with a home is to be subdivided to provide a new parcel that is under 5 acres, an evaluation of the existing sewage system and water system needs to be done to ensure that both systems are not creating a nuisance and are contained in the new proposed lot lines. The following steps are involved:**

- a. Provide any information on the location and type of sewage system including the tank location and secondary treatment location. (Records are available from our department in most cases when a sewage system was permitted through our department.) If you do not know where and what you have for a septic system, you will be required to investigate and uncover enough of the system to accurately determine all details.
- b. Provide information and location of all water systems and any outside yard hydrants.
- c. Flag all proposed lot lines and boundaries.



- d. Contact a certified soil scientist to perform the soil evaluation on your new proposed lot and to evaluate a suitable area on your existing lot for a replacement sewage system for the future.

To obtain an installation permit, complete the installation permit application and submit applicable fee along with:

- a. The complete design/layout plan per chapter 29-09.1
- b. A scaled drawing plat with the information outlined in chapter 29-08 (B) must be provided. (Items needed are on Contractor Checklist) Use the form on following pages and complete with all required information. This will allow us to review your development plan to eliminate any problems and delays during construction.
- c. Copy of the zoning permit
- d. Copy of legally recorded easement(s), if applicable
  - a. A signed Operation Permit and any Operation Maintenance Agreements as required for the service of your new system.
- e. The permit application and layout\design plan will be reviewed by the health department and either approved or denied with recommendations, if not already done with the site review. Normal review time will be one week unless the application and sewage plans are incomplete.
- f. Upon installation permit approval, a registered installer must be contracted to perform the installation per the design plan stipulations. (List provided)
- g. The designated sewage areas must be protected from any traffic and disturbance until the sewage system is installed. Permits can and will be voided if this step is not followed. This is a common problem found with new builds, to avoid this problem mark off the areas designated during site evaluations for new septic systems and its replacement area by using some form of barrier.
- h. **Make sure the installer gives a 48 hour notice before installation of any system within the property.** This gives time for scheduling initial and final inspections of the system to be performed by the health department sanitarian. At the conclusion of the inspection, the installer will/should provide an “as-built” drawing to the inspector to be kept on file at the Health Department.

**NOTE:** If installing an NPDES system, a Notice of Intent (NOI) application fee of \$200 must be sent to the EPA and approved prior to installation. A service contract will need to be obtained from a qualified service provider to perform routine inspections of the system. A copy of this contract must accompany the Operation Permit application at the time of installation of the septic system.

**NOTE:** A Health Department Sanitarian will return within the first 12 months of the system installation to ensure that the system is operating properly. A letter will follow shortly giving recommendations if needed.

## **Needed Items for Septic System and New Lots**

### **Items Needed for a New Lot**

- \_\_\_\_\_ Soil Report from Certified Soils Scientist
- \_\_\_\_\_ Site Review Application (included in this guide), Filled Out Completely
- \_\_\_\_\_ Site Review Application Fee
- \_\_\_\_\_ Site Evaluation by Health Department REHS
  
- \_\_\_\_\_ Contact Regional Planning

### **Items Needed for a New Build**

- \_\_\_\_\_ Soil Report from Certified Soils Scientist
- \_\_\_\_\_ Site Review Application (included in this guide), Filled Out Completely
- \_\_\_\_\_ Site Review Application Fee
- \_\_\_\_\_ Site Evaluation by Health Department REHS
- \_\_\_\_\_ Zoning Permit (if applicable)
- \_\_\_\_\_ Plan/Design Layout
- \_\_\_\_\_ Easements (if applicable)
- \_\_\_\_\_ Installation Permit & Operation Permit with a named [Registered Installer](#)
- \_\_\_\_\_ Inspection
- \_\_\_\_\_ As-Built

### **Items Needed for a Replacement System**

- \_\_\_\_\_ Soil Report from a Certified Soils Scientist
- \_\_\_\_\_ Site Review Application (included in this guide), Filled Out Completely
- \_\_\_\_\_ Site Review Application Fee
- \_\_\_\_\_ Site Evaluation by Health Department REHS
- \_\_\_\_\_ Plan/Design Layout
- \_\_\_\_\_ Easements (if applicable)
- \_\_\_\_\_ Installation, Abandonment & Operation Permit with a named [Registered Installer](#)
- \_\_\_\_\_ Inspection
- \_\_\_\_\_ As-Built

### **Items Needed for an Alteration**

- \_\_\_\_\_ Site Review Application and Fee
- \_\_\_\_\_ Site Evaluation by Health Department REHS
- \_\_\_\_\_ Plan/Design Layout
- \_\_\_\_\_ Easements (if applicable)
- \_\_\_\_\_ Installation & Operation Permit with a named [Registered Installer](#)
- \_\_\_\_\_ Inspection
- \_\_\_\_\_ As-Built



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

Proposed system to serve:

- Single family dwelling
- Two family dwelling
- Three family dwelling
- Vacation, rental cabin
- Bed and Breakfast as defined in ORC 3717.42 (B)(2)
- Privy
- Holding Tank
- Private home as defined in ORC 3717.42 (B)(13)
- Government regulated residential facility as defined in ORC 3717.42(B)(4)

Proposed system type:  New  Replacement  Alteration  Lot Split (less than 5 acres)

Please Type or Print in Ballpoint Pen:

Owner / Applicant		Phone #	Email:
Mailing Address			
City	State	Zip Code	
Location of Property:			
Street Address of Property, if applicable:			
City	Zip Code	Township	Parcel #

Size of existing/proposed building lot: Acres: \_\_\_\_\_ Frontage: \_\_\_\_\_ Depth: \_\_\_\_\_

**\*\*NOTE: If 5 acres or more, a site evaluation is not required if only doing a lot split.**

The following accompanying documents are required for consideration for site review; **Must submit payment with application:**

1. **Site and soil evaluation form completed by a certified soil scientist as outlined in OAC 3701-29-07 (D) & 29-08.**
2. **Scaled site drawing as outlined in OAC 3701-29-07 (E) & 29-08.**
3. **Layout or design plan as outlined in OAC 3701-29-10 (C).**

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.

**This site review will expire five years after the approval date.**

\_\_\_\_\_  
Owner / Applicant Signature

\_\_\_\_\_  
Date

\* Site and soil evaluation may be waived by our department for replacement of existing systems, if it is determined that there is not sufficient area for an on-lot replacement system. NPDES permit is required.

**Health Department Use Only**

Fee: **\$ 250.00**                      Receipt # \_\_\_\_\_                      Site ID # \_\_\_\_\_

Site meets requirements set forth in OAC 3701-29-07 & 29-08?      \_\_\_\_\_ Yes                      \_\_\_\_\_ No

Design plan / layout plan meets requirements set forth in OAC 3701-29-10?      \_\_\_\_\_ Yes                      \_\_\_\_\_ No

Date of Health Department site review inspection: \_\_\_\_\_                      **Attach worksheets**

\_\_\_\_\_  
Date of approval / denial

\_\_\_\_\_  
Reviewer

Instructions for Preparation of a  
 Residential Site Plan

Site plan must be **current**, drawn to scale on **8 ½ x 11 paper**, and **show all property lines**. If unable to draw to scale, property lines must still be shown noting actual dimensions or total acreage. **Failure to include all of the items listed below may delay the review necessary to obtain a permit.**

**ITEMS THAT MUST BE SHOWN ON YOUR SITE PLAN:**

- 1. NORTH ARROW.**
- 2. SCALE OF DRAWING.** One square = \_\_\_\_\_ feet.
- 3. STREET NAME** accessing the parcel.
- 4. ALL PROPERTY LINES AND DIMENSIONS** – existing and proposed.
- 5. DRIVEWAYS AND ROADS** – existing and proposed.
- 6. EXISTING AND PROPOSED STRUCTURES** - label as “*Proposed*” and “*Existing*”. Include dimensions and distance to all property lines and other structures.
- 7. UTILITY LINES AND EASEMENTS.**
- 8. GEOGRAPHIC FEATURES** – ground slope and direction of slope, escarpments, streams, ponds, or other drainage ways.
- 9. WELLS** – existing and proposed on this parcel and adjacent parcels within 100 feet.
- 10. FENCES, RETAINING WALLS, OTHER HARDSCAPES** – location of existing and/or proposed.
- 11. LOT SPLITS** (if applicable) – shown by dotted lines, with parcels labeled as “*Parcel 1*”, “*Parcel 2*”, etc.
- 12. SEPTIC SYSTEM and REPLACEMENT AREA** – existing and proposed. Show existing septic tank, drain field lines and distance from structure(s).
- 13. CHANGES IN GRADE - CUTS/FILLS** – show existing and proposed.
- 14. ELEVATIONS** – at lot corners or construction area and at corners of building site.

Additional information, such as patio slabs, walkways, roof overhangs, etc., may be required for the issuance of your permit.

**SITE PLAN FOR PROPOSED RESIDENTIAL DEVELOPMENT**

Property Owner(s) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

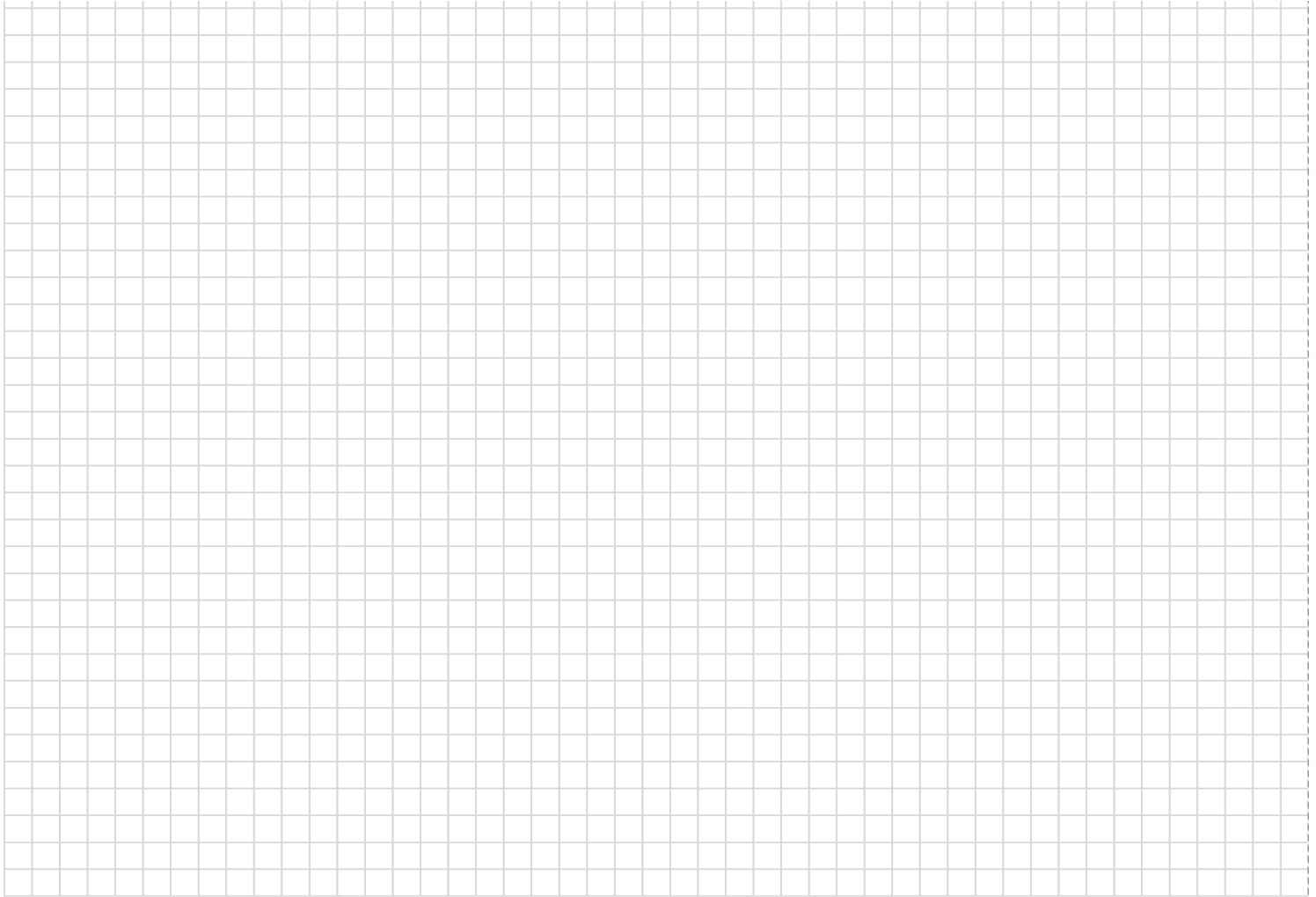
Site Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip \_\_\_\_\_

**USE THE FOLLOWING PAGE TO DRAW YOUR SITE PLAN**

**Site Plan Must Show All Property Lines and Dimensions**

Drawn to Scale: 1 square = \_\_\_\_\_

Feet Not Drawn to Scale: Total Acres \_\_\_\_\_



**I certify that the above information is accurate to the best of my knowledge.**

**I AM THE  Owner or  Authorized Agent**

Name (please print): \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

Applicants Phone Number: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

.....  
***FOR OFFICE USE ONLY***

PLAN APPROVED BY: \_\_\_\_\_ Date: \_\_\_\_\_



**Return this Form to Marion Public Health**

APPLICANTS NAME: \_\_\_\_\_

APPLICANTS ADDRESS: \_\_\_\_\_, \_\_\_\_\_  
(Street) (City)

\_\_\_\_\_  
(Zip code)

\_\_\_\_\_  
(Telephone):

The above applicant is requesting a Site Evaluation / Permits for well / septic system(s) in the township of \_\_\_\_\_

at the following location: \_\_\_\_\_

**ZONING INSPECTOR ONLY**

Does this site meet current minimum code standards of your township? YES NO  
If **not**, please explain: \_\_\_\_\_

Is there a need for a Zoning Variance? YES NO

If YES, no further action will be taken by the Health Department until notification of approved variance.

Any special environmental conditions at this site which the Health Dept. should be aware of? YES NO If yes, please explain: \_\_\_\_\_

Signed: \_\_\_\_\_ TWP: \_\_\_\_\_

**No construction of any kind is allowed prior to obtaining all necessary Marion Public Health permits (Sewage and/or Water). Failure to follow this procedure will result in a 25% penalty on all permits except plumbing. Construction prior to permit issuance may negate our ability to issue a permit.**

## **Operation Permit**

I, the undersigned, agree to abide by all rules and regulations regarding the installation and operation of a household sewage disposal system (HSTS), which include but are not limited to the following:

1. The owner must provide proof to the Board of Health that a maintenance service agreement has been obtained with an authorized manufacturer's representative after the initial two year service period provided by the manufacturer for any system with mechanical components. For non-mechanical systems that do not require a service agreement, pumping and service records must be submitted to the Health Department by the homeowner at least every 5 years. Operation Permits Expire Annually for Mechanical Systems and every 5 years for Non Mechanical Systems
2. Allow access to the property so Health District staff may perform HSTS operation inspections as needed, with an understanding that an annual operation inspection fee will be charged if the homeowner does not provide evidence of inspection by a registered service provider within the time frame of the Operation Permit, as well as re-inspection fees if the system is found to be operating improperly and re-inspections are needed to assure compliance with proper operating requirements.
3. For NPDES discharging systems, contract with a registered service provider to take samples to determine level of treatment, effluent quality, and other parameters required by the household general NPDES permit at a minimum of once per year and provide service records when those results reach the OEPA action limits. Must provide sample results to Marion Public Health. Owner / Operator will be required to reimburse the Health District for the cost of sampling if the owner/operator does not provide annual sampling results.
4. System shall be maintained as designed and annual inspections and maintenance shall be done by an authorized registered service provider for mechanical systems. Annual inspections shall include all minimum maintenance requirements as set by the manufacturer and/or Marion Public Health.

I further understand that I must disclose the nature of this septic system on a Residential Property Disclosure Form when I sell this property to a new buyer and that the new buyer will be required to ensure the same maintenance, inspections and testing requirements of this Operation Permit.

\_\_\_\_\_  
Signature of Owner/Operator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address (of the home with Septic Tank and Treatment System)

## **Contractors Checklist**

The following items must be turned in before applying for any permit. The following information will be stored in the file and will be used during the inspection. Please, keep a copy of the site plan for you records as you will use this to make corrections as you install and will be turned into the health department following installation. Include any change made during the installation of the system, if needed, otherwise write-in as-built on the form and turn in.

### **Layout/Design Plan**

- \_\_\_\_\_ To-scale Drawing
- \_\_\_\_\_ Primary and Secondary STS areas
- \_\_\_\_\_ Elevations from header lines to end lines for both primary and secondary fields
- \_\_\_\_\_ Size of Septic Tank or Aerator
- \_\_\_\_\_ Spec Sheet of Septic Tank or Aerator
- \_\_\_\_\_ Well location if known at the time
- \_\_\_\_\_ Effluent filter
- \_\_\_\_\_ Distribution box detail (showing layout of each leach line into distribution box)
- \_\_\_\_\_ Elevations from house to tank with proposed sewer line hook up and elevations from tank to D-box
- \_\_\_\_\_ Gradient\Interceptor drain discharge point (if to a tile: show elevations, direction of flow and inspection port, if daylight: show animal guard)
- \_\_\_\_\_ Trench Depths
- \_\_\_\_\_ Trench Lengths
- \_\_\_\_\_ Trench and Drain Separation Distances
- \_\_\_\_\_ Isolation Distances including P/L
- \_\_\_\_\_ North Arrow
- \_\_\_\_\_ Gravel size or non-gravel products being used plus the spec sheets
- \_\_\_\_\_ Lift Station size and spec (if needed)
- \_\_\_\_\_ Owner name
- \_\_\_\_\_ Address
- \_\_\_\_\_ Number of Bedrooms
- \_\_\_\_\_ Homeowner Signed Operation and Maintenance Agreement Form

Once design plan has been turned in, apply for a permit and the information will be reviewed before being approved. Make sure the design is in accordance with the Ohio Sewage Rules, Ohio Administrative Code 3701-29. Once approved, the installation can go forward. Contact the Marion Public Health for an inspection at least 48 hours before starting the septic system. Once the ok to cover has been given, go ahead and cover the septic system with the approved material and turn in the as-built drawing at that time or within 30 days of completion.

### Site/Soil Evaluators\*

ID #	BUSINESS NAME / PHONE / CONTACT	ADDRESS
7	SOIL & SITE LLC 419-718 4301 STEVE ROSS	3344 TOWNSHIP RD 26 CARDINGTON, OH 43315
1	SOIL AND ENVIRONMENTAL CONSULTING 1-614-579-1164 STEVEN MILLER, CPSSC	1974 N. 3 BS AND K RD SUNBURY, OH 43074
6	SOIL CONSULTANT MAPES SOILS 740- 548-6788 REX D. MAPES	41 HIGHMEADOWS CIRCLE POWELL, OH 43065
2	TORNES SOIL INVESTIGATIONS LTD740- 965-3254 LARRY TORNES	811 SR 61 N SUNBURY, OH 43074
8	W.S.C.S., LLC 419- 963-2542 FRANK GIBBS	PO BOX 346 RAWSON, OH 45881

### System Designers\*

BUSINESS NAME / PHONE	ADDRESS
BB DESIGN & CONSULTING, LLC 1-419-357-5643	CRAWFORD, OH
MVP SEPTIC DESIGN, LLC 1-614-859-0039	DELAWARE, OH
ROGER DIETRICH 1-740-223-4130	222 W CENTER ST MARION,OH 43302
SOIL AND ENVIRONMENTAL CONSULTING 1-614-579-1164	1974 N. 3B'S & K ROAD SUNBURY, OH 43074

**\*Marion Public Health is providing these lists as a convenience and does not endorse or recommend any particular business.**