

Application for Sewage Treatment System (STS) and Gray Water Recycling System (GWRS) Review for Property Improvements/Modifications

Fee Paid _____ Date _____

Receipt # _____ Received by _____

APD # _____

Check one: <input type="checkbox"/> Initial Inspection <input type="checkbox"/> Re-inspection	Check one: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial	Check one: <input type="checkbox"/> Household Sewage Treatment System (HSTS) - \$120.00 <input type="checkbox"/> Gray Water Recycling System (GWRS) - \$120.00 <input type="checkbox"/> Small Flow Onsite STS (SFOSTS) - \$300.00
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Location _____

Township/Village/City _____

Job Description
(Specify all work being done)

Contractor
 Name _____ email _____

Mailing Address _____ Phone _____

City _____ State _____ Zip _____

Owner
 Name _____ email _____

Mailing Address _____ Phone _____

City _____ State _____ Zip _____

By my signature below I certify that I agree to comply with the conditions of Ohio Administrative Code 3701-29 and the Hamilton County General Health District O&M Program for STS & GWRS.

 Owner's Signature

 Date

APPLICATION FOR SEWAGE TREATMENT SYSTEM (STS) AND GRAY WATER RECYCLING SYSTEM (GWRS) REVIEW FOR PROPERTY IMPROVEMENTS/MODIFICATIONS - GENERAL INFORMATION

The following are pertinent to any property using a gray water recycling system (GWRS), a single family, duplex (two-family) or triplex (three-family) dwelling that utilize a household sewage treatment system (HSTS), as well as, non-discharging semi-public facilities that utilize a STS which treats 1,000 gallons per day or less (a.k.a. - Small Flow Onsite Sewage Treatment Systems (SFOSTS)) when any of the following are proposed:

- Change in use or occupancy of a property, building or structure served by a SFOSTS;
- Construction of a dwelling, structure, room addition, accessory building, detached garage, deck, swimming pool, surface water impoundment, well, geothermal heating/cooling system, hardscape or other construction requiring a building permit;
- Relocation, swapping (ex. mobile home) or remodeling of a dwelling/structure served by a STS or GWRS

Purpose of the Sewage Treatment System (STS) and Gray Water Recycling System (GWRS) Inspection:

- To confirm the STS and GWRS is in proper working order and not creating a health nuisance.
- Confirm the proposal will not interfere with the STS and/or GWRS and setback distances listed below can be met.
- Determine whether or not the STS/GWRS can accommodate the applicant's proposal in compliance with all requirements.
- Assure the future replacement area for the STS/GWRS is not compromised.
- Verify that all components are permanently brought to grade level with property sized sealed risers and lids (see page 3).

Select STS or GWRS components shall maintain the minimum setback distances specified in Ohio Administrative Code 3701-29-06 as follows:

- All components of a STS or GWRS shall be at least **ten feet** from any utility service line, roadway or road surface, driveway or other hardscape, properly line or right-of-way boundary, properly sealed well, any building or other structure, areas with recorded easements, intermittent streams, swales, geothermal horizontal closed loop systems, irrigation lines and GWRS.
- All components of a STS or GWRS shall be at least **fifty feet** from any water supply source and vertical open and closed loop geothermal heating and/or cooling system.
- A STS or GWRS soil absorption component shall be at least **fifty feet** from any surface water impoundment, lake, river, wetland, perennial stream, and road cut-banks or stream cut-banks.

Hamilton County Board of Health requires the entire STS and/or GWRS be updated, upgraded, altered or replaced to compliance with the Ohio Administrative Code 3701-29 any of the under the following circumstances:

- When adding flow or increasing waste strength to any system in accordance with section 3701-29-11 of the Ohio Administrative Code (OAC). If the current system is not covered under a National Pollutant Discharge Elimination System Permit (NPDES) and uses a technology that has a higher rated capacity than is currently utilized (as prescribed by the OAC) and the proposal is to increase flow to the system (as prescribed by OAC), but not above the rated capacity, the existing system is required to be updated, upgraded, altered or replaced in compliance with this OAC 3701-29.
- When substantial changes occur to the dwelling/structure including, but not limited to:
 - Relocation of the dwelling/structure being served by the STS and/or GWRS;
 - Switching the dwelling/structure being served by the STS and/or GWRS;
 - Rebuilding the dwelling/structure being served by the STS and/or GWRS; which includes but is not limited to:
 - A dwelling/structure which has been or will be demolished, or partly demolished, so that the resulting "rebuilt" dwelling/structure has greater than fifty percent change to the walls, by adding and/or removing interior walls, including but not limited to, full walls, half walls, knee walls, doorways, archways, thresholds, closets, etc. **within a five year timeframe**. The general intent of the owner, as determined by the health district, is to build, replace or remodel a dwelling/structure.
- When proposing to add additional living area/space to a dwelling/structure on a property associated with or containing a system that utilizes a drywell or cesspool or other similar system specified in OAC 3701-29-06(E)(5).

Requirements for Application

- 1) All plans **must** be to **scale** and should **not** exceed 11 x 17, whenever possible.
- 2) Except as outlined below, STS components **must** be permanently brought to grade level with properly sized sealed risers and adequate lids including but not limited to: septic tank, distribution boxes, drywells, cesspools, drop/distribution boxes, inspection ports, etc. prior to inspection and approval by HCPH. Should you have prior knowledge, suspect, or question that the existing system may need to be replaced (i.e. - the home/structure is being reconfigured/rebuilt, the STS is not complaint with the current code, flows are proposed to be added to the STS, the STS is causing a public health nuisance, etc) then the current system may not have to be brought to grade level.
***Please discuss the possibility that the system may need replacement with the Health District prior to bringing components to grade and prior to making application. In all cases you should discuss the situation with a registered sanitarian before proceeding to spend money on the existing system.**
- 3) All corners of the addition/property improvement must be staked off at the time the application is submitted and they must remain until the application is approved by HCPH.
- 4) FEE: Personal cash (Do not send cash in the mail), check, credit card (nominal credit card company fee applies), or money order payable to H.C.P.H. for each inspection in the following amount:
 - \$120.00 – Sewage Treatment System (one, two or three family dwelling)
 - \$120.00 – Gray Water Recycling System
 - \$300.00 – Small Flow Onsite Sewage Treatment System
- 5) Site Plan, this can be drawn by hand but must be to scale, containing all of the following:
 - Owner's name, address, date and telephone number.
 - Scale.
 - North arrow.
 - Building Department application number, if known.
 - Location of private water systems (e.g., cistern, well etc.).
 - Location of all existing structures and hardscapes (e.g. house, driveway, garage, barn, etc.).
 - Existing STS or GWRS location and future replacement area, if known.
 - Proposed addition(s) to the property including dimensions of each.
 - Distance between STS or GWRS and proposed addition(s).
 - Thorough explanation of what is being proposed.
- 6) Please submit digital copies (preferred method) or paper copies of Construction plans for any structure requiring a building permit (not required only when applying for deck(s), porch (es), retaining wall(s), hardscape(s), in-ground or above ground swimming pool(s)). Floor plan of the **ENTIRE** structure (existing and proposed) with the addition/reconfiguration well marked. **The plans (existing and proposed) must contain the linear feet of all existing interior walls****, linear feet of proposed interior walls to be added, and linear feet of proposed interior walls to be removed.**
- 6) A calculation of the percentage of interior wall change (see calculation steps below on page 4) if applicable.
- 7) A completed application form (first page of this document).

The above items may be submitted electronically by email to hcpchstserv@hamilton-co.org, in person or by mail.

The inspection will usually be performed within 5 business days after submission of all items. The inspector will verify compliance with all the requirements for application and general requirements sections herein. **Failure to meet any of the requirements will result in denial of the application and the applicant needing to take corrective actions. Once all corrections have been made, the applicant will need to reapply and submit another application fee.** The building department or other applicable agency will be notified of the inspection results via computer and a letter will be issued to the applicant and owner.

Requirements for Application (cont.)

How to calculate the percentage of interior wall change

1. Calculate the existing linear feet of interior walls**** for the entire structure.
2. Calculate the interior wall linear footage that will change (feet of new and removed interior walls). Do not include proposed new interior walls contained within an addition proposed outside of the existing home's living space.
3. Divide the answer from step 2 by the answer from step 1.
4. Multiply the answer from step 3 by 100.
5. If the answer from step 4 is greater than 50%, the home has been reconfigured significantly enough to require that an outdated sewage treatment system (STS) be replaced with a new STS meeting today's standards.

****Interior walls include but are not limited to, full walls, half walls, knee walls, doorways, archways, thresholds, closets, etc.