

Sewage Treatment System Rules Variance Application



PREVENT. PROMOTE. PROTECT.

Fee Paid _____

Receipt # _____

Date _____

SVAR _____

Received by _____

Residential Commercial New Construction Pre-Existing Structure HSTS SFOSTS GWRS

Site Location

Address _____ Township, Village, Contracting City _____

Property Owner

First _____ Last _____

Mailing address _____ Phone _____

City _____ State _____ Zip _____

Reason for Variance Request: _____

List the specific code section(s) from which you are seeking a variance: OAC 3701-29-_____

Attach with this application documentation that shows:

1. **Practical difficulties or other special conditions prevent compliance with OAC 3701-29.**
2. **Coming into compliance with OAC 3701-29 will cause unusual and unnecessary hardship.**
3. **The spirit and general intent of OAC 3701-29 will not be defeated.**
4. **The request is not contrary to the public's interest**
5. **The request will not adversely affect Public Health**
6. **The request will not cause contamination of the Environment**
7. **The request does not conflict with ORC 3718**

By signing below, I understand and agree:

1. To comply with the conditions of Hamilton County Public Health and any special variance conditions.
2. If granted, the variance will expire one year from granted date and all work must be completed by that date, or sooner, as outlined in other orders if a nuisance, safety hazard or other violation are present.
3. If I do not comply with the conditions set forth by the Hamilton County Public Health, or I do not complete installation, the Hamilton County Public Health will bring action against me to compel compliance, and may require me to abandon the property until such time as compliance is achieved.

Signature of Owner _____

Date _____

Office Use Only

Comments: _____

Recommendation: Approval Disapproval _____
Sanitarian's Signature Date

Recommendation: Approval Disapproval _____
Director's Signature Date

Action Taken: Approved Disapproved _____
Health Commissioner/Hearing Officer Date