



# ON-SITE SEWAGE PERMIT APPLICATION PROCEDURES FOR COMMERCIAL, MULTI-FAMILY RESIDENTIAL, AND NON-RESIDENTIAL

**Environmental Health Offices:**

Stevens County	Pend Oreille County	Ferry County
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If you have questions or need additional information to complete the on-site sewage permit application, please contact the Environmental Health Office in the county where your property is located. Application help and information for projects in Ferry County can be obtained through either the Ferry County or Stevens County Environmental Health offices. Information is also available on the Northeast Tri County Health District (NETCHD) website.

➤ **Fee Schedule (fees are non-refundable)**

Application for new On-Site Sewage System Permit	
Less than 1,000 gpd flow.....	\$560.00
1,000 to 2,000 gpd flow.....	690.00
2,001 to 3,000 gpd flow.....	825.00
3,001 to 3,500 gpd flow.....	955.00
Application for Repair Permit.....	50% of permit fee
Permit Renewal.....	55.00
Additional Site Inspection.....	185.00
Design Correction.....	55.00
Major Revision to Approved Design.....	160.00
Re-Inspection.....	80.00
Violation.....	Equal to permit fee

**Payments can be made in the form of cash, check, or debit/credit card (Visa, Mastercard) (applicable fees will apply). Checks should be made payable to NETCHD.**

The following pages describe the steps for application submittal through the sewage system installation process. Please refer to each step on the following pages for detailed information about what is needed or required.

**STEP 1**—Application Form & Test Hole Excavation

**STEP 2**—Application & Site Review

**STEP 3**—Sewage System Design

**STEP 4**—Sewage System Design Review

**STEP 5**—On-Site Sewage System Installation

**STEP 6**—On-Site Sewage System Final Inspection

**BEFORE SUBMITTING YOUR APPLICATION BE SURE THE FOLLOWING ITEMS ARE COMPLETE OR INCLUDED**

- Site Analysis must be completed with the Planning Office
- Ensure all information on Part A and B of the application is complete and accurate
- Include a copy of a tax statement or recorded document to verify property ownership and legal description
- Include a site plan containing all of the information listed on the NETCHD Site Plan Instructions
- Include detailed directions to the site and test hole locations

## **STEP 1—APPLICATION FORM & TEST HOLE EXCAVATION** (COMPLETED BY APPLICANT)

Complete Parts A & B of the on-site sewage permit application form. Submit the application form, application fee, site plan, legal verification, and directions to the property to the Environmental Health Office. The application and supporting documents may be submitted in person, by mail, faxed or emailed. If the application is faxed or emailed, the applicant or primary contact must call the Environmental Health Office to pay the fee via phone. Payments can be made with a credit or debit card. There is an additional processing charge for credit or debit card payments.

1. The following information **must** be submitted along with the permit application. (See Part B of application for additional information)
  - Verification of ownership (copy of tax statement or printout from county assessor office)
  - Detailed directions to site & test hole locations
  - Site Plan (see site plan instructions)
  - Notice of site analysis review or approval

Failure to submit a complete application and all of the information described above may delay processing of the application and scheduling of site review.

2. Applications are valid for two years from the date the application and fee are received at the Environmental Health Office. Applications that do not proceed through the design and permit phase will expire within two years.
3. Test holes must be constructed to the correct specifications.
  - A. Refer to the Guidelines for Test Hole Construction and Placement for On-Site Sewage Systems.
  - B. Health District field staff are prohibited from entering any test hole that is not constructed in accordance with the requirements.
  - C. Notify the Environmental Health Office when test holes have been dug and are ready for inspection.
  - D. If additional site reviews are needed, a fee will be charged for each site inspection.

## **STEP 2—APPLICATION & SITE REVIEW** (COMPLETED BY ENVIRONMENTAL HEALTH OFFICE)

1. Application Review
  - A. Parts A & B of the application will be reviewed to verify that all of the required information and fees have been submitted, and to verify estimated wastewater flows.
  - B. In Ferry County, applications will be routed to the Ferry County Planning Office for review to ensure compliance with county land use and planning requirements. In Pend Oreille and Stevens Counties, verification that a Site Analysis Application has been submitted and approved by the county planning department will be required.
2. Site Review
  - A. The site review will be scheduled when all of the required information on Parts A & B of the application have been reviewed and verified by the Health District, review of county land use and planning requirements is complete, and the Environmental Health Office has been advised that test holes are ready for inspection.
  - B. The site review will include an evaluation of test holes to for soil type and conditions and a visual inspection of the proposed development site to determine suitability. Results of the site review will be documented by the field staff.
  - C. Site review information will be provided to the primary contact listed on the application. The information will include the minimum design requirements for the on-site sewage system or a request for additional test holes or other information needed to complete the site evaluation. If an additional site inspection is required, an additional site inspection fee will be required. (Note: This is not a permit to install the sewage system at this step. A sewage system design must be submitted to the Health District and approved before a permit is issued – see Step 3).

### **STEP 3—SEWAGE SYSTEM DESIGN** (COMPLETED BY APPLICANT)

1. The sewage system design must be developed by a designer or engineer licensed by the Washington State Department of Licensing.
2. Two complete sewage system designs, both with original signatures, must be submitted to the Environmental Health Office for review. Bound copies of designs are not accepted. Pages of design can be single or double sided and **must not be larger than 8 ½" X 11" when folded and individual pages not to exceed 11" X 17"**.
3. The sewage system design must be developed per the Northeast Tri County Health District On-Site Sewage Regulations to meet the soil and site conditions of the property proposed for development. Copies of sewage system regulations and standards and guidance documents can be obtained at the Environmental Health Offices or Health District website <http://www.netchd.org>.

### **STEP 4—SEWAGE SYSTEM DESIGN REVIEW & PERMIT ISSUANCE**

(COMPLETED BY ENVIRONMENTAL HEALTH OFFICE)

1. System Design Review
  - A. The design submitted to the Environmental Health Office will be reviewed to verify that it is consistent with the site conditions and meets the Northeast Tri County Health District On-Site Sewage Regulations.
  - B. If the system design meets all requirements, this will be documented, and the design will be approved.
  - C. If the design does not meet requirements, one copy of the design and the design review sheet listing the deficiencies and why the design could not be approved will be sent to the designer or engineer that submitted the designs. A copy of the letter and design review sheet listing the deficiencies will also be sent to the primary contact listed on the application.
  - D. Two complete revised sewage system designs, both with original signatures, must be submitted to the Health District. A design correction fee will be required for the review of the revised design.
2. Sewage System Installation Permit
  - A. If the application is complete, all required information has been received and verified, all applicable fees have been paid, and a sewage system design has been received and approved, a permit for sewage system installation will be issued.
  - B. The permit, any special permit instructions, and the approved system design will be sent to the primary contact listed on the application.
  - C. Permits for installation are valid for one year from date of issuance. Permits may be renewed for one additional year by submitting a written request for renewal and the renewal fee as established by the Northeast Tri County Health District Board of Health.

## **STEP 5—ON-SITE SEWAGE SYSTEM INSTALLATION** (COMPLETED BY APPLICANT)

1. On-Site Sewage System Installation
  - A. Installation of the on-site sewage system may begin when the permit is received by the primary contact and provided to the certified sewage system installer.
  - B. A copy of the permit and approved design must be available on-site during installation.
  - C. All parts of the on-site sewage systems construction must be completed by or under the supervision of an installer certified by Northeast Tri County Health District. This certified installer must be present at the site of installation when work is being done on the on-site sewage system.
  - D. The installation of the on-site sewage system must meet the permit requirements, approved system design, and the Health District regulations. If changes to the approved design are needed to complete the installation of the on-site sewage system, the changes must be approved by the system designer and the Health District prior to installation. A design correction fee may be required.
  - E. Upon completion of the on-site system installation and before the system is covered, the Health District must be notified that the system is ready for inspection.
  - F. A minimum 48-hour notice is required to schedule a final inspection.

## **STEP 6—ON-SITE SEWAGE SYSTEM FINAL INSPECTION**

(COMPLETED BY ENVIRONMENTAL HEALTH OFFICE)

1. On-Site Sewage System Final Inspection
  - A. Upon notification that an on-site sewage system has been installed, the Health District will schedule an inspection of the system.
  - B. The inspection of the installed on-site sewage system is to verify that the system was installed in accordance with the permit, approved system design, and all requirements of the Health District on-site sewage regulation.
  - C. If the installed system meets permit requirements, approved system design, and regulation requirements, it will be approved, and a notification will be left on site that the system can be covered.
  - D. If the installed system does not meet permit requirements, approved system design or regulation requirements, a notification will be left on site that the system should not be covered, and the primary contact will be notified of the changes or corrections that will be needed. A second inspection may be required. A fee will be charged for re-inspection of the sewage system. Contact the Environmental Health Office to request the follow-up inspection.
  - E. When the installed system is approved, a permit showing the date of inspection, approval of installation, and as-built drawing of the system will be mailed to the name and address indicated on the application.
  - F. All permit information is kept on file permanently in the Environmental Health Office and is considered a public record.

Decisions made by the Health District staff may be appealed within 30 days following the decision. The appeal process is available at all Health District Offices or on the Health District website at <http://www.netchd.org>.

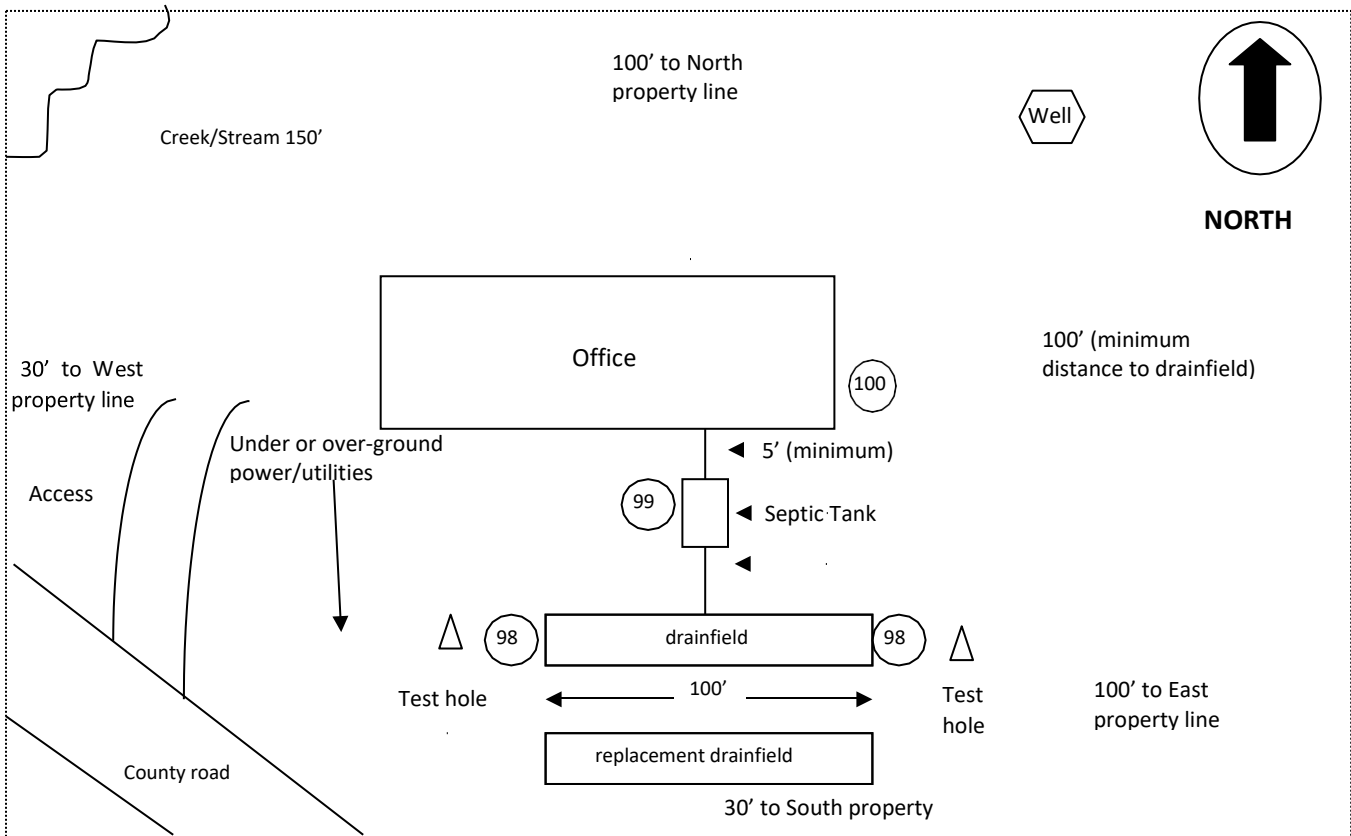
# NORTHEAST TRI COUNTY HEALTH DISTRICT SITE PLAN INSTRUCTIONS

An accurate and detailed site plan must be submitted for review with your sewage permit application. The site plan is important to help show what your development will be and how it will be located on your property. It is also used to determine the location of existing structures and on-site sewage system(s) to show that adequate setbacks can be maintained. Minimum set back requirements are listed on the back of this page. All of the following information that applies to your project must be shown on the site plan.

Show all **existing and proposed** for each of the following items and **label the distance** between each item:

- Size and dimensions of property
- Location of the structure(s) to be served by the sewage systems
- Location of the driveway and parking area that will serve the structure(s)
- Location of proposed septic tank and drainfield that will serve the structure(s)
- Location of test holes
- Location of well(s) and water lines
- Location of neighbors' wells within 100 feet of property line
- Location of any other structures on the property and the use (i.e. house, shop, barn, etc.)
- Location of existing on-site sewage system(s) and reserve area(s)
- Easements or utilities – show the location and dimensions of easements for roads, power lines, driveways, parking areas, etc.
- Location of underground or overhead power lines, electrical lines, telephone lines, cable, etc.
- Location of surface water, such as lakes, creeks/streams (year-round or seasonal), wetlands, etc.
- Topography – show slopes, drainages, elevations
- Other – show areas subject to slides, water erosion, rock outcrops and areas that have been excavated or filled

## SAMPLE SITE PLAN



## MINIMUM HORIZONTAL SEPARATIONS

Items Requiring Setback	From edge of soil dispersal component and reserve area	From sewage tank and distribution box	From building sewer, and nonperforated distribution pipe
Well or suction line	100 ft.	50 ft.	50 ft.
Public drinking water well	100 ft.	100 ft.	100 ft.
Public drinking water spring measured from the ordinary high-water mark	200 ft.	200 ft.	100 ft.
Spring or surface water used as drinking water source measured from the ordinary high-water mark <sup>1</sup>	100 ft.	50 ft.	50 ft.
Pressurized water supply line	10 ft.	10 ft.	10 ft.
Decommissioned well (decommissioned in accordance with chapter 173-160 WAC)	10 ft.	N/A	N/A
Surface water measured from the ordinary high-water mark	100 ft.	50 ft.	10 ft.
Building foundation/in-ground swimming pool/lined water features	10 ft.	5 ft.	2 ft.
Property or easement line	5 ft.	5 ft.	N/A
Interceptor/curtain drains/foundation drains/drainage ditches			
Down-gradient <sup>2</sup> :	30 ft.	5 ft.	N/A
Up-gradient <sup>2</sup> :	10 ft.	N/A	N/A
Other site features that may allow effluent to surface			
Down-gradient <sup>2</sup> :	30 ft.	5 ft.	N/A
Up-gradient <sup>2</sup> :	10 ft.	N/A	N/A
Down-gradient cuts or banks with at least 5 ft. of original, undisturbed soil above a restrictive layer due to a structural or textural change	25 ft.	N/A	N/A
Down-gradient cuts or banks with less than 5 ft. of original, undisturbed soil above a restrictive layer due to a structural or textural change	50 ft.	N/A	N/A
Other adjacent soil dispersal components/subsurface storm water infiltration systems	10 ft.	N/A	N/A

<sup>1</sup>If surface water is used as a public drinking water supply, the designer shall locate the OSS outside of the required source water protection area.

<sup>2</sup>The item is down-gradient when liquid will flow toward it upon encountering a water table or a restrictive layer. The item is up-gradient when liquid will flow away from it upon encountering a water table or restrictive layer.

# GUIDELINES FOR TEST HOLE CONSTRUCTION AND PLACEMENT FOR ON-SITE SEWAGE SYSTEMS

**Test Hole Siting:** Test holes must be dug around the perimeter of the proposed original and replacement drainfield, usually 100 feet apart.

Locate test holes away from:

- Rock outcrops
- Vehicular traffic areas
- Livestock areas
- Damp or poorly drained areas
- Excessive slopes
- Areas of fill material (non-native soils)
- Irrigated areas such as gardens or orchards
- At least 100' from wells and surface water

On sloping sites, holes must be dug at the same elevation and additional up-slope or downslope test holes are recommended.

**Required Number:** The number of test holes dug depends upon the project and site conditions.

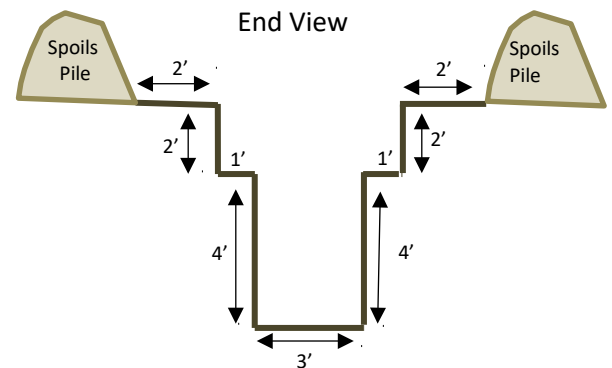
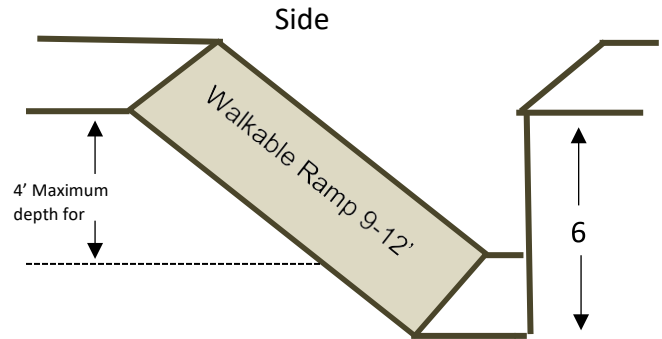
For single family residential development, a minimum of 2 test holes are required in the original and replacement drainfield area. A maximum of 6 test holes will be reviewed during the first site evaluation. For multi-family, non-residential, or commercial projects, 2 test holes per unit volume of sewage (450 gallons per day) is required. Additional site reviews can be conducted for an additional fee.

**What to Look For:** Desirable soils are those that provide both drainage and treatment of wastewater effluent.

Take effort to avoid soils and areas that are:

- Too porous to provide treatment (extremely gravelly and coarse sandy soil)
- Too impervious to allow proper draining, such as heavy clay soils
- Subject to high groundwater conditions
- Shallow depths to bedrock

Even though soil conditions may not be desirable, in most cases on-site sewage systems can be installed. However, these systems may require enhanced treatment and are more expensive.



## Construction Requirements:

- Call 811 to locate underground utilities prior to digging.
- Test holes must be constructed as shown.
- Every test hole must have a ramp that provides for entry and exit without the need of aid.
- Health District staff cannot enter improperly constructed or unsafe test holes. If additional site visits are necessary, a fee will apply.
- For safety, all equipment within 20' of the test pit must be shut down when a person is in the test hole.
- Test holes shall not be left open for extended periods unless properly barricaded per L & I regulation (such as orange construction fencing around excavation supported by metal fence posts). This is a property owner responsibility.
- When test holes are ready for evaluation, contact Northeast Tri County Health District.







# ON-SITE SEWAGE PERMIT APPLICATION FOR COMMERCIAL, MULTI-FAMILY RESIDENTIAL, AND NON-RESIDENTIAL

## PART A—GENERAL INFORMATION

**Property Owner Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Primary Contact:** Information concerning this application and NETCHD findings will be mailed or provided to the primary contact, and septic designer or engineer as appropriate. It will be the responsibility of the primary contact to provide the information to others involved with the project.

**Primary Contact Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Indicate how you would like to receive information:**     Standard Mail     Email (for fastest response)

**Applicant:** Please mark appropriate designation

Property Owner (will be resident)     Property Owner (will not be resident)     Purchaser (will be resident)

Purchaser (will not be resident)     Realtor     Contractor     Installer     Designer/Engineer

**Applicant Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

In accordance with Chapter 246-272A WAC, this application shall be signed by the property owner, the contract purchaser of the property, or the property owner's authorized agent. This application is made for the permit to authorize the activities described herein. I certify that I am familiar with the information contained in the application and that to the best of my knowledge, such information is true, complete, and accurate. I certify that I have received and read the permit application instructions and information. I grant permission to allow representatives of the Health Office to enter this property for the purpose of the application evaluation and any subsequent inspections. I understand that requests to be present for inspections must be made at least 72 hours in advance and appointments are scheduled as a multi-hour time slot based on the inspector's availability. All fees and required paperwork must be received prior to a permit being granted. Fees are non-refundable.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Mail Final Permit & Sewage System As-Built Drawing To** (Choose only one and notify us if address changes):

Property Owner     Primary Contact     Applicant

Other (Name & Address) \_\_\_\_\_

*** For Office Use Only ***				
Date Application Received:	Fee Received:	Invoice #:	ON#:	AR#:
<b>Planning Dept. Review:</b> _____				

## PART B—SITE AND PROJECT INFORMATION

Property Owner Name: \_\_\_\_\_

### LEGAL DESCRIPTION & OWNERSHIP

A copy of the most recent tax statement, printout from the county assessor office, or a recorded document (real estate contract, quit claim deed, etc.) verifying property legal description and ownership must be submitted with the permit application. **If ownership and legal description verification documents are not submitted, the application will not be processed.**

Parcel #: \_\_\_\_\_ Acreage/Lot Size: \_\_\_\_\_

Legal Description: \_\_\_\_\_

(Rural Description or Lot, Block & Subdivision)

Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_

Site Address (if available): \_\_\_\_\_

### SITE PLAN

An accurate and detailed site plan must be submitted with the on-site sewage permit application for review. The site plan must show all **existing and proposed** elements for this project. See site plan instructions and sample site plan for more information.

### DIRECTIONS TO SITE

Provide accurate and detailed directions to the site on a separate document. If there is a driveway or access to the property, it is helpful if this is flagged or marked to help identify the access. Mark or flag the test hole locations if they are not visible from the access to the property.

### SITE ANALYSIS

A site analysis must be completed and paid for prior to test hole review. Please contact your local county Planning Office for more information.

### TEST HOLES

Are new test holes dug and ready for inspection?     Yes     No

Were test holes dug on this property previously?     Yes     No     Unknown

IF YES, INDICATE DATE AND REASON: \_\_\_\_\_

### ON-SITE SEWAGE SYSTEM INFORMATION

New     Repair     Replacement     Expansion     Existing     Alteration

Total Estimated Wastewater Flow: \_\_\_\_\_

Use:

- |   |   |
|---|---|
| <input type="checkbox"/> Multi-Family Residential<br># of Homes/Apartments _____<br># of Bedrooms per Home/Apt. _____   | <input type="checkbox"/> Commercial Building<br>Type of Business _____<br># of Employees _____  |
| <input type="checkbox"/> RV Park/ Recreation<br># of spaces _____<br>Restrooms/Shower/Laundry Facilities <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If yes, please describe: _____ | <input type="checkbox"/> Private Shop (not used for commercial business)<br><input type="checkbox"/> With Living Quarters<br><input type="checkbox"/> Without Living Quarters |

Will wastewater from other structures be disposed into this on-site sewage system or will other structures be connected?  
 Yes     No

If yes, describe what type of structure or wastewater (i.e. private shop, RV dump, etc.): \_\_\_\_\_

### WATER SUPPLY INFORMATION

### SITE ANALYSIS

- Private Well- One (1) Residential Connection  
 Private Well- Two (2) Residential Connections  
 Public or Community Water Supply (Name/ID#): \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Application Approved:     Yes     No     Unknown