

RALLS COUNTY HEALTH DEPARTMENT

&

HOME HEALTH AGENCY

Office (573) 985-7121

405 W FIRST STREET/ PO BOX 434
NEW LONDON MO 63459

Fax (573) 985-1531

On-Site Sewage Disposal System Permit Application

Permit # 2-173-

Owner/Applicant _____ Phone Number _____

Mailing Address _____

City/State/Zip Code _____

Site Address/City/Zip Code _____

Sec. _____ Township _____ Range _____

Installer Name/Phone number _____

General Information

Number of Persons Served _____ Basement Drain-Yes No

Lot Size _____ Garbage Disposal-Yes No

Number of Bedrooms _____ Baths (3Pc) _____ Ground Slope _____

Water Supply Public Private

Septic Tank

New Existing Size-Gallons _____ Tank Construction-Concrete Poly

Tank Supplier _____ Filter-Yes No Type _____

Manholes Provided At Ground Level-Yes No

Secondary Treatment

Absorption Trench-New Existing Size-Square Feet _____ Width of Trench _____

Number Of Trenches _____ Length Of Trenches _____

Distribution Box-Yes No Pump Chamber-Yes No

Lagoon

Size Square Feet _____ Overflow Pipe Distance To Property Line _____

Distance To-Home Served _____ Nearest Home _____ Lake Or Stream _____

Distance from Waters Edge to Property Line _____

Fence Material-Welded Woven Chain Link Cattle Panel Other _____

Fence shall be at least 4 feet in height with a gate to allow access for maintenance. It shall be no closer than the center of the berm to the water's edge and no further than 30 feet from the water's edge.

Soil Evaluation

Conducted By _____ Date _____

Number of Holes Tested _____ Results of Test _____

Curtain Drain Required-Yes No

The on-site sewage disposal system shall be constructed in accordance with the Ralls County On-Site Wastewater Treatment Systems Ordinance Section 7.01 and the State Of Missouri Minimum Construction Standards for On-Site Sewage Disposal Systems 19 CSR 20-3.060.

Applicant Signature _____ Date _____

Reviewed By _____ Date _____ Application Approval-Yes No

Site Layout (To be filled out by the owner or owner's agent)

It is the responsibility of the owner or owner's agent to disclose the locations of property lines, easements, right-of-ways, and other restrictions prior to placement of the on-site sewage disposal system.

- ❖ Document property lines and dimensions to reflect the shape and size of the property.
- ❖ Document current on-site system or area for proposed on-site system.
- ❖ Document distances to the house, well, water lines, property lines, geological features such as sinkholes, rock outcrops, lakes, ponds, streams, rivers, etc.
- ❖ Document distances (in feet) to neighbor's home(s), well(s), and sewage disposal systems.
- ❖ Document fence location around lagoon if lagoon will be the on-site disposal option.
- ❖ Document the slope using arrows to show direction the land slopes.
- ❖ Document where North is in relation to the property.
- ❖ Document known easements that exist for utilities, roads, or private driveways.

Inspector Use Only-Notes

Due to conditions that could adversely impact the life expectancy on an on-site sewage disposal system, the Ralls County Health Department nor its representative(s) guarantee that a permitted on-site sewage disposal systems will function as designed and are not liable for damages.

On-Site Sewage Disposal System Final Inspection Date: _____

Approved Yes No RCHD Representative: _____ EPHS # _____