DIRECTIONS FOR COMPLETING AN APPLICATION FOR ON-SITE SEWAGE DISPOSAL OR A VACANT LAND EVALUATION

1. Fill out the top part of the enclosed application **COMPLETELY**. The application will not be processed until the fee is paid and the application is properly completed. **Incomplete applications will be returned.** The Parcel Identification Number (Tax ID Number) **MUST** also be provided. This number is available from the County’s Equalization Office. Also be sure to include the subdivision/condominium name and lot number if available.

2. Draw an accurate site plan with measurements. Please see the Helpful Hints for Completing a Site Plan. It is also recommended that the applicant supply a copy of any property survey, land division approval, subdivision plat or any related property documents they may have. If pertinent site features have not been identified, another site visit may be necessary which could delay the review process.

3. Be sure the road directions to the property are complete and clear.

4. The application **MUST** be signed by the applicant and dated.

5. Return the completed application, site plan, and appropriate fee to the District Health Department #4 office in your county.

6. A soil boring or excavation 4’ deep and at least 6” in diameter is required in the proposed septic area. Holes may be dug with a post hole digger, auger, backhoe, or similar device. It is recommended that test holes be covered with a board or plastic pail. **Mark the test hole with a site flag.** **Notify DHD4 when the test hole is ready.**

7. **Mark the well with a site flag.**

8. **Mark the site driveway with a site flag.**

9. Applications will be processed in the order in which they are received. A representative will contact you if additional information is needed.

Information about DHD4 and the On-Site Sewage Disposal Program may be obtained at [www.dhd4.org](http://www.dhd4.org)

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If you have any questions, do not hesitate to contact us at:

- **Alpena County** 989-356-4507
- **Cheboygan County** 231-627-8850
- **Montmorency County** 989-785-4428
- **Presque Isle County** 989-734-4723
APPLICATION MUST BE FILLED OUT COMPLETELY AND PAID FOR TO PROCESS!

Property Owner:__________________________ Ph. # __________________
Mailing Address:__________________________

Applicant:______________________________ Ph. # __________________
Mailing Address:__________________________

Email Address:___________________________
Contractor:______________________________ Ph. # __________________
Mailing Address:__________________________

SITE INFORMATION

New System ( ) Replacement System ( ) Tank Only ( )

Tax ID #:______________________________

Property Address:________________________

Township__________________ Town________ N________ Range_________________ E/W________ Section________

Lot Size__________________ X__________________ Acreage__________________ Well Permit #:__________________

If Under 1 (one) Acre Date Divided After 1997 ______________________________

Subdivision__________________________ Lot #:________________________

Directions To Site:________________________

Residence: # of Bedrooms ( ) Non-Residential: # of Employees ( ) Other:________________________

Description of Project:____________________

Send Permit To:__________________________ Address:__________________________

(If being sent to someone other than the property owner) Email Address:__________________________

It is agreed that the work shall be done in accordance with DHD#4 regulations governing the construction and installation of septic tanks and sewage disposal systems. It is agreed to notify DHD#4 before backfilling the septic tank and/or septic system in order that an inspection can be made.

The system is required to be located in the area of the soil boring as indicated on the approved site plan. Should changes to this location be needed, contact DHD#4.

It is understood that this system is only a temporary means of sewage disposal. A permit is not a guarantee of performance. Life expectancy of this system will be directly affected by the homeowner pumping and maintaining this system. Footing Drainage, downsprouts, water softeners and any other waste not defined as sewage shall not be connected or discharged into the septic tank or disposal area. A certificate of inspection acknowledging proper system installation must be issued by the Health Department prior to assuming occupancy of this structure.

A permit for a sewage disposal system shall be valid for a period of two years (24 months) after the date of issuance unless declared void as provided in these regulations. Permits are not transferable to other persons or locations.

I certify this to be true and correct and that I have read and understand the above statements.

Signature of Applicant X____________________ Date____________________

FEE $________ Chk. #________ Rcpt. #________ Date________ Received By________

DHD No. 4 EH-1 R-04/17
DISTRICT HEALTH DEPARTMENT NO. 4
SITE PLAN
(Proposal)

Date __________________  Onsite Sewage Permit # ______________________

Water Well Permit # ______________________

Owner Name ________________________________

Applicant Name ____________________________

Include: Lot dimensions, building, driveways, easements, water well, septic area and a replacement area, surface water, soil boring locations, etc.

Site plan accepted □  Site plan revised □  ________________________ Date: __________

Environmental Sanitarian

DHD No. 4 EH-98 R-07/02

Original - w/Septic Permit  Yellow - w/Water Permit  Pink - Owner/Applicant Septic  Gold - Owner/Applicant Water

NATIONAL PRINTING SERVICE, INC.
HELPFUL HINTS FOR PREPARING A SITE PLAN

(Partial List)

1. In the space provided, draw an accurate dimensional site plan.
2. Include all existing and proposed features including garages, homes, sheds, neighboring and buried wells within 100 ft., septic tank/drainfield, driveways, ditches, utility or access easements, lot lines, swimming pools, buried utility lines, areas of flooding, subsurface drain tile, and any other significant details. Show natural features such as springs, streams, swamps, run-off areas and steep slopes.
3. Additional information which may be helpful to locate the site and test hole(s). (i.e. other structures on property, landmarks, trees)
4. Site plan drawing should be to scale (example: 1/4 inch = 10 ft.)
5. Locate replacement area of equal size.

<table>
<thead>
<tr>
<th>Isolation From</th>
<th>Septic Tank</th>
<th>Disposal Field</th>
</tr>
</thead>
<tbody>
<tr>
<td>Groundwater Table</td>
<td>NA</td>
<td>24”</td>
</tr>
<tr>
<td>Foundation or Basement</td>
<td>5’</td>
<td>10’</td>
</tr>
<tr>
<td>Property Lines</td>
<td>10’</td>
<td>10’</td>
</tr>
<tr>
<td>Surface Water, Lake, Stream</td>
<td>75’</td>
<td>100’</td>
</tr>
<tr>
<td>Residential Water Supply Suction Line</td>
<td>50’</td>
<td>50’</td>
</tr>
<tr>
<td>Ditch or Drainline: Continuous Flow</td>
<td>75’</td>
<td>75’</td>
</tr>
<tr>
<td>Intermittent Flow</td>
<td>50’</td>
<td>50’</td>
</tr>
<tr>
<td>Bank, Drop-off</td>
<td>10’ *</td>
<td>20’</td>
</tr>
<tr>
<td>Water Supply Pressure Line</td>
<td>10’ **</td>
<td>10’ **</td>
</tr>
</tbody>
</table>

*Slopes exceeding 25%
**Not specified in regulations, but may be included as a permit condition to protect water lines.

Note: Please check your deed restrictions for your subdivision/condominium as it may be more restrictive than the local health department requirements.

EXAMPLE:

[Diagram with labels for Shed, Replacement Area, Ditch Bank, etc.]