

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Vision: To be the Healthiest State in the Nation

New Onsite Septic System Permitting Procedures

Please note: Application packets may be submitted electronically to the following email address:

dlchd29ostdspermit@flhealth.gov

The following information must be provided by the applicant:

- A completed Onsite Sewage Treatment and Disposal System (OSTDS) application. An address and folio/property ID# are required.
- A Site Plan. A survey or plan of the property that is **drawn to scale** and shows the following features on or within 75 ft. of the property;
 - Property lines with dimensions labeled in feet, easements, all building locations, waterlines, private potable and irrigation wells, proposed septic system location, driveways, sidewalks, swimming pools, ditches, swales, surface water bodies, obstructed area, parking areas, decks, patios, and if present any slope of the property. Any public drinking water well within 200 ft. of the applicant's property must be shown.
- If a permanent non-tidal surface water body exists on or within 75 feet of the applicant's property then a Mean Annual Flood Line must be determined. The applicant may request that the Department of Health delineate the surface water boundary by completing the Non-Tidally Influenced Surface Water Boundary Determination Form or they may contract with a certified professional surveyor and mapper. Contact our office if the surface water body is tidally influenced.
- Complete the site plan information sheet.
- A floor plan. For residences, a floor plan to scale with all rooms labeled and the square footage of the building area. If not to scale show all rooms and outside dimensions labeled along with the square footage of the building area. For non-residential establishments, a floor plan to scale showing the total square footage, plumbing drains and fixture types, and any other information that we need to determine composition and quantity of wastewater.
- A Letter of Authorization if the applicant's agent is not a licensed septic tank contractor or a contractor licensed in accordance with Chapter 489 Florida Statute.
- If you chose not to have the site evaluation conducted by the Department of Health, then a completed Site Evaluation must be performed by either a Florida licensed engineer with soils training, a licensed master septic tank contractor, a Florida licensed soil scientist, or persons certified under s. 381.0101, F.S. The information must conform to the USDA Soil Classification methodology as described in chapter 3 of the Soil Survey Manual, USDA, Handbook No. 18, October 1993 with the proper documentation of the seasonal high water table indicators.

Florida Department of Health – Hillsborough County

Division of Environmental Health
P.O. Box 5135
Tampa, FL 33675-5135
PHONE: (813) 307-8059 • FAX: (813) 272-7242

www.FloridasHealth.com

TWITTER:HealthyFLA

FACEBOOK:FLDepartmentofHealth

YOUTUBE: fldoh

- A \$425 fee if the site evaluation is performed by the Department of Health. Additional inspection fees may be required if an excavation and/or a stabilization inspection are necessary. Each additional inspection fee is \$50 and the charge(s) will be determined after the site evaluation has been completed. Payment for fees is to be made to the Florida Department of Health- Hillsborough County.
- Applications may be submitted electronically by email, however, the site plan submitted **must be drawn** to scale. In addition, all site plans must be signed and dated by the applicant or agent. Application fees may be paid by submitting the credit card authorization form (attached) along with the application or by contacting our clerical staff at 813-307-8059 to make payment over the phone.

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Steps to receive address assignment:

1. Go to the Building Department and fill out a **Building Permit Application**.
2. While you are there, the building department will fax that **building permit application**, your **site plan**, **legal description** and **folio #** of the property to streets and addresses to get an **address assignment**. (All of these documents are required for address assignment)
3. **Streets and addresses** will fax the address information back to the building department on the **building permit application** form with the newly assigned address and it will be given back to you.
4. Bring completed **building permit application** with address to the Department of Health with your completed onsite septic application for submittal.
5. If you have any questions during this process call **Streets and Addresses** at 744-5862.

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STATE OF FLORIDA
 DEPARTMENT OF ENVIRONMENTAL PROTECTION
 ONSITE SEWAGE TREATMENT AND DISPOSAL
 SYSTEM (OSTDS)

PERMIT NO. _____
 DATE PAID: _____
 FEE PAID: _____
 RECEIPT #: _____

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

- New System Existing System Holding Tank Innovative
 Repair Abandonment Temporary _____

APPLICANT: _____ EMAIL: _____

AGENT: _____ TELEPHONE: _____

MAILING ADDRESS: _____

=====

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

=====

PROPERTY INFORMATION OSTDS REMEDIATION PLAN? [Y / N]

LOT: _____ BLOCK: _____ SUBDIVISION: _____ PLATTED: _____

PROPERTY ID #: _____ ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: _____ ACRES WATER SUPPLY: [] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: _____

DIRECTIONS TO PROPERTY: _____

BUILDING INFORMATION [] RESIDENTIAL [] COMMERCIAL

| Unit No | Type of Establishment | No. of Bedrooms | Building Area Sqft | Commercial/Institutional System Design Table I, Chapter 62-6, FAC |
|---------|-----------------------|-----------------|--------------------|---|
| 1 | _____ | _____ | _____ | _____ |
| 2 | _____ | _____ | _____ | _____ |
| 3 | _____ | _____ | _____ | _____ |
| 4 | _____ | _____ | _____ | _____ |

[] Floor/Equipment Drains [] Other (Specify) _____

SIGNATURE: _____ DATE: _____

APPLICANT: Property owner's full name.
AGENT: Property owner's legally authorized representative.
EMAIL: Email address for applicant or agent.
TELEPHONE: Telephone number for applicant or agent.
MAILING ADDRESS: P.O. box or street, city, state and zip code mailing address for applicant or agent.

OSTDS REMEDIATION PLAN: Is the property subject to the requirements of an Onsite Sewage Treatment and Disposal System (OSTDS) Remediation Plan developed pursuant to 403.067(7)(a), Florida Statutes?

LOT, BLOCK, SUBDIVISION: Lot, block, and subdivision for lot (recorded or unrecorded subdivision). If lot is not in a recorded subdivision, a copy of the lot legal description or deed must be attached.

DATE OF SUBDIVISION: Official date of subdivision recorded in county plat books (month/day/year) or date lot originally recorded. Dividing an approved lot into two or more parcels for the purpose of conveying ownership shall be considered a subdivision of the lot.

PROPERTY ID#: 27-character number for property. County Health Department may require property appraiser ID # or section/township/range/parcel number.

ZONING: Specify zoning and whether or not property is in I/M zoning or equivalent usage.

PROPERTY SIZE: Area of lot in acres (square footage divided by 43,560 square feet). List only the square footage contained within the bounds of the legal description.

WATER SUPPLY: Check private or public <= 2000 gallons per day or public > 2000 gallons per day.

SEWER AVAILABILITY: Is sewer available as per 381.0065, Florida Statutes, and distance to sewer in feet?

PROPERTY ADDRESS: Street address for property. For lots without an assigned street address, indicate street or road and locale in county.

DIRECTIONS: Provide detailed instructions to lot or attach an area map showing lot location.

BUILDING INFORMATION: Check residential or commercial.

TYPE ESTABLISHMENT: List type of establishment from Table I, Chapter 62-6, FAC. Examples: single family, single wide mobile home, restaurant, doctor's office and number of occupants.

NO. BEDROOMS: Count all rooms designed primarily for sleeping and those areas expected to routinely provide sleeping accommodations for occupants per 381.0065(2)(b), Florida Statutes.

BUILDING AREA: Total square footage of enclosed habitable area of dwelling unit, excluding garage, carport, exterior storage shed, or open or fully screened patios or decks. Based on outside measurements for each story of structure.

BUSINESS ACTIVITY: For commercial/institutional applications only. List number of employees, shifts, and hours of operation, or other information required by Table I, Chapter 62-6, FAC.

FIXTURES: Mark Floor/Equipment Drains or Others and specify item or "NA" if not applicable.

SIGNATURE / DATE: Signature of applicant or agent. Date application submitted to the County Health Department with appropriate fees and attachments.

ATTACHMENTS: A site plan drawn to scale, showing boundaries with dimensions, locations of residences or buildings, swimming pools, recorded easements, onsite sewage disposal system components and location, slope of property, any existing or proposed wells, drainage features, filled areas, obstructed areas, and surface water. Location of wells, onsite sewage disposal systems, surface waters, and other pertinent facilities or features on adjacent property, if the features are within 75 feet of the applicant lot. Location of any public well within 200 feet of lot. For residences, a floor plan (residences) showing number of bedrooms and building area of each unit. For nonresidential establishments, a floor plan showing the square footage of the establishment, all plumbing drains and fixture types, and other features necessary to determine composition and quantity of wastewater.

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The following is a list of the most commonly encountered minimum setback requirements, which must be maintained to any part of the septic system including the septic tank, drainfield or other components of the system. Keep this in mind when indicating the proposed septic system location on your scaled site plan.

- 5' from property lines, swimming pool walls, and the building (Setbacks may increase depending on the type of system necessary)
- 2' from waterlines, if waterlines are constructed of schedule 40 PVC or stronger; otherwise 10'
- 15' from swales and dry ditches
- 30' from Hillsborough County Environmental Protection Commission (EPC) wetland delineation lines
- 50' from Non-Potable Wells
- 75' from mean annual flood line (MAFL) for non-tidal surface water bodies and the mean high water line (MHWL) for tidally influenced surface water bodies.
- 75' from all Private Potable Wells
- 100' from all Non-Community Wells
- 200' from all Community Wells
- 200' from the mean annual flood line of the Hillsborough River or tributaries.

YOUR SITE PLAN SHOULD INDICATE THE FOLLOWING:

- ✓ Show complete address with street and number, city or town and zip code.
- ✓ Show dimensions (length and width) of all property lines in feet and show directional North.
- ✓ Show proposed location of new septic system. (Where soil test is to be performed, see instructions for marking the area). Also, the location of any existing septic systems on your property or on the adjacent properties.
- ✓ Location of all wells (Public, Private, Irrigation or other non-potable), proposed or existing, on your property or on the adjacent properties. Show waterline from the well to the building(s).
- ✓ Location of all existing and proposed buildings (showing dimensions), pools, sidewalks and driveways, large trees or other "obstructed areas".
- ✓ Property slopes shall be indicated by arrow showing direction of slope.
- ✓ Location of proposed plumbing stub-out from the building.
- ✓ Show location of public water meter if you are on public utilities and waterline from the meter to the building(s).
- ✓ Location of all surface water or drainage features (canals, ditches) on your property or to adjacent properties.
- ✓ Show location of any recorded easements on the property.
- ✓ Show location of all filled areas on property, if applicable.
- ✓ Show location of all E.P.C. designated wetlands, if applicable.

INSTRUCTIONS FOR MARKING THE SITE.

1. **TWO FLAGS ARE PROVIDED TO CUSTOMERS. PROMPT PLACEMENT OF THESE FLAGS, WILL HELP ASSURE QUICK AND ACCURATE RESPONSE BY OUR INSPECTORS AND AVOID A \$50.00 REINSPECTION FEE.**
2. PLACE ONE FLAG MARKING THE ENTRANCE TO THE PROPERTY.
3. PLACE ONE FLAG MARKING THE PROPOSED DRAINFIELD AREA.

THE PROPERTY SHOULD BE CLEARED SO THAT IT IS ACCESSIBLE BY VEHICLE. IF THERE ARE LOCKED GATES OR GUARD DOGS, ARRANGEMENTS SHOULD BE MADE TO PROVIDE ACCESS TO THE SITE.



STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
SITE EVALUATION AND SYSTEM SPECIFICATIONS

PERMIT #.

APPLICANT: AGENT:

LOT: BLOCK: SUBDIVISION:

PROPERTY ID #: [Section/Township/Parcel No. or Tax ID Number]

TO BE COMPLETED BY ENGINEER, HEALTH DEPARTMENT EMPLOYEE, OR OTHER QUALIFIED PERSON. ENGINEERS MUST PROVIDE REGISTRATION NUMBER AND SIGN AND SEAL EACH PAGE OF SUBMITTAL. COMPLETE ALL ITEMS.

PROPERTY SIZE CONFORMS TO SITE PLAN: [] YES [] NO NET USABLE AREA AVAILABLE: ACRES
TOTAL ESTIMATED SEWAGE FLOW: GALLONS PER DAY [TABLE I / OTHER]

AUTHORIZED SEWAGE FLOW: GALLONS PER DAY [1500 GPD/ACRE OR 2500 GPD/ACRE]
UNOBSTRUCTED AREA AVAILABLE: SQFT UNOBSTRUCTED AREA REQUIRED: SQFT

BENCHMARK/REFERENCE POINT LOCATION:
ELEVATION OF PROPOSED SYSTEM SITE IS [INCHES/FT] [ABOVE/BELOW] BENCHMARK/REFERENCE POINT

THE MINIMUM SETBACK WHICH CAN BE MAINTAINED FROM THE PROPOSED SYSTEM TO THE FOLLOWING FEATURES
SURFACE WATER: FT DITCHES/SWALES: FT NORMALLY WET? [] YES [] NO
WELLS: PUBLIC: FT LIMITED USE: FT PRIVATE: FT NON-POTABLE: FT
BUILDING FOUNDATIONS: FT PROPERTY LINES: FT POTABLE WATER LINES: FT

SITE SUBJECT TO FREQUENT FLOODING: [] YES [] NO 10 YEAR FLOODING? [] YES [] NO
10 YEAR FLOOD ELEVATION FOR SITE: FT MSL/NGVD SITE ELEVATION: FT MSL/NGVD

SOIL PROFILE INFORMATION SITE 1

Table with 3 columns: MUNSELL #/COLOR, TEXTURE, DEPTH. Includes rows for soil profile data and USDA SOIL SERIES.

SOIL PROFILE INFORMATION SITE 2

Table with 3 columns: MUNSELL #/COLOR, TEXTURE, DEPTH. Includes rows for soil profile data and USDA SOIL SERIES.

OBSERVED WATER TABLE: INCHES [ABOVE / BELOW] EXISTING GRADE. TYPE: [PERCHED / APPARENT] ESTIMATED WET SEASON WATER TABLE ELEVATION: INCHES [ABOVE / BELOW] EXISTING GRADE

HIGH WATER TABLE VEGETATION: [] YES [] NO WSWT Indicator: [] YES [] NO DEPTH: INCHES

SOIL TEXTURE/LOADING RATE FOR SYSTEM SIZING: DEPTH OF EXCAVATION: INCHES
DRAINFIELD CONFIGURATION: [] TRENCH [] BED [] OTHER (SPECIFY)
REMARKS/ADDITIONAL CRITERIA:

SITE EVALUATED BY: DATE:

INSTRUCTIONS:

- PERMIT #:** Permit tracking number assigned by County Health Department.
- APPLICANT:** Property owner's full name.
- AGENT:** Property owner's legally authorized representative.
- LOT, BLOCK, SUBDIVISION:** Lot, block, and subdivision for lot.
- PROPERTY ID#:** 27-character number for property (property appraiser ID # or section/township/range/parcel number).
- PROPERTY SIZE:** Check if property size at site conforms to submitted site plan and legal description.
- NET USABLE AREA:** Record net usable area available per Rule 62-6.005(7)(c), F.A.C. Net usable area does not include paved areas and prepared road beds within public rights-of-way or easements and does not include surface water bodies. Contiguous unpaved and non-compacted road rights-of-way and easements with no subsurface obstructions that would affect the operation of drainfield systems may be included.
- SEWAGE FLOW:** Record the total estimated sewage flow for the establishment from Chapter 62-6.008(1)(a) or (b), F.A.C. Record the authorized sewage flow for the lot based on net usable area and water supply (1500 gallons per day per acre for private water supplies and 2500 gallons per day per acre for public water supplies). If authorized sewage flow does not equal or exceed the estimated sewage flow, the application must be denied.
- UNOBSTRUCTED AREA:** Record the square feet of unobstructed area available and the amount required. Unobstructed area must be at least 1.5 times as large as the drainfield absorption area and must meet minimum setbacks in Chapter 62-6, FAC. The unobstructed area must be contiguous to the drainfield.
- BENCHMARK INFORMATION:** Record the location of the benchmark. If using a surveyor's benchmark record the actual elevation. Record the elevation of the proposed system site in relation (above or below) to the benchmark for the most restrictive profile.
- MINIMUM SETBACKS:** Record minimum setbacks which can be met to all listed features. Actual measurements must be recorded or "NA" for non-applicable features. Features on site plan or within 75 feet of the applicant lot must be measured. The location of any public drinking well within 200 feet of the applicant's lot must also be verified.
- FLOOD INFORMATION:** Record information on lot's subject to flooding. For lots subject to flooding record 10 year flood elevation for site and actual site elevation.
- SOIL PROFILE INFORMATION:** Two soil profiles within the proposed absorption area to a minimum depth of 6 feet or refusal are required. Soil identification will use USDA Soil Classification methodology (Munsell colors and USDA soil textures). Refusals must be clearly documented. Provide USDA soil series if available, record "UNK" if the series cannot be determined.
- WATER TABLE:** Record the depth of the observed water table at the time of the evaluation. Mark "perched" or "apparent" as appropriate. Record the estimated wet season water table (WSWT) elevation based on site evaluation, USDA soil maps, and historical information. Indicate if there is high water table vegetation present and list in comments. Indicate presence and depth of shallowest WSWT indicator.
- SOIL TEXTURE:** Record soil texture or loading rate for system sizing based on the most restrictive profile.
- DEPTH OF EXCAVATION:** If applicable record depth of excavation required based on the most restrictive profile. Record "NA" if not applicable.
- DRAINFIELD CONFIGURATION:** Check drainfield configuration required. If other, specify type.
- ADDITIONAL CRITERIA:** Record any additional remarks pertinent to site or installation. Ex. Dosing required and document any WSWT indicators.
- SITE EVALUATED BY:** Signature of evaluator, title, and date of evaluation. Professional engineers must seal all documentation submitted.

| | | | | | | | |
|---------------------|-------|--|-------|----------|-------|----------|-------|
| ELEVATION WORKSHEET | | ELEVATION OF BENCHMARK / REFERENCE POINT IS: _____ | | | | | |
| BENCHMARK | _____ | SITE 1 | _____ | SITE 2 | _____ | SITE 3 | _____ |
| [+] SHOT | _____ | H.I. | _____ | H.I. | _____ | H.I. | _____ |
| H.I. | _____ | [-] SHOT | _____ | [-] SHOT | _____ | [-] SHOT | _____ |
| | _____ | | _____ | | _____ | | _____ |

FOR NEW/EXISTING/MODIFICATION SYSTEM APPLICATIONS: The plan must be **DRAWN TO SCALE** and must be for the property where the system is to be installed.

1. The site plan must **SHOW BOUNDARIES WITH DIMENSIONS** and any of the following **FEATURES THAT EXIST OR THAT ARE PROPOSED**:

- a. Structures;
 - b. Swimming pools;
 - c. Recorded easements;
 - d. Onsite sewage treatment and disposal system components;
 - e. Slope of the property;
 - f. Wells;
 - g. Potable and non-potable water lines and valves;
 - h. Drainage features;
 - i. Filled areas;
 - j. Excavated areas for onsite sewage systems;
 - k. Obstructed areas;
 - l. Surface water bodies *Requires a surveyor to set the Mean High Water Line boundary for tidally influenced surface water bodies. Requires a surveyor or department staff to set the Mean Annual Flood Line for permanent non-tidal surfacewater bodies.*
 - m. Location of the reference point for system elevation.
2. If the county health department is responsible for performing the site evaluation, the applicant or applicant's authorized representative must **indicate the approximate location of wells, onsite sewage treatment and disposal systems, surface water bodies and other pertinent facilities or features on contiguous or adjacent property. If the features are within 75 feet of the applicant lot, the estimated distance to the feature must be shown but need not be drawn to scale.**
3. If the county health department will not be performing the site evaluation, the applicant or authorized agent is responsible for the measurements to all features, including the pertinent features within 75 feet of the applicant lot. **The location of any public drinking water well, as defined in paragraph 62-6.002(44)(b), F.A.C., within 200 feet of the applicant's lot must also be shown, with the distance indicated from the system to the well.**
4. If an individual lot is five acres or greater, the applicant may draw a minimum one acre parcel to scale showing all required features, or the minimum size drawing necessary to properly exhibit all required features, whichever is larger. The applicant must also show the location of that one acre or larger parcel inside the total site ownership. *To scale parcel must be large enough to provide sufficient authorized flow.*
5. All information that is necessary to determine the total sewage flow and proper setbacks on the site ownership must be submitted with the application. The applicant lot shall be clearly identified. **A copy of the legal description or survey must accompany the application for confirmation of property dimensions only.**

FOR REPAIR APPLICATIONS: A site plan (*NOT REQUIRED TO BE DRAWN TO SCALE*) showing:

- property dimensions
- the existing and proposed system configuration and location on the property
- the building location
- potable and non-potable water lines, within the existing and proposed drainfield repair area
- the general slope of the property
- property lines and easements
- any obstructed areas
- any private well *show private potable wells if within 100 feet of system, non-potable within 75 feet*
- any public wells *show if within 200 feet of system*
- any surface water bodies and stormwater systems *show if within 100 feet of system. Requires a surveyor to set the Mean High Water Line boundary for tidally influenced surface water bodies. Requires a surveyor or department staff to set the Mean Annual Flood Line for permanent non-tidal surface water bodies.*
- The existing drainfield type shall be described. For ex., mineral aggregate, non-mineral aggregate, chambers, or other.
- Any unusual site conditions which may influence the system design or function** such as sloping property, drainage structures such as roof drains or curtain drains, and any obstructions such as patios, decks, swimming pools or parking areas.

FOR ALL SITE PLANS (IF APPLICABLE)

- A Coastal Construction Control Line Permit or an exemption notice from the Department of Environmental Protection if any component of the onsite sewage treatment and disposal system or the shoulders or slopes of the system mound will be seaward of the Coastal Construction Control Line, established under Section 161.053, F.S. Should the location of the proposed onsite system relative to the control line not be able to be definitively determined based on the site plan and the online products available on the DEP website, the applicant shall provide a survey prepared by a certified professional surveyor and mapper showing the location of the control line on the subject property.
- All plans and forms submitted by a licensed engineer shall be dated, signed and sealed.
- The evaluator shall document the **locations of all soil profiles** on the site plan.

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Onsite Sewage Treatment and Disposal System Application for Construction Permit

Site Plan Information

1. Is there any slope to your lot? No. _____ Yes _____
2. Are there any existing or proposed Public wells on or within 200 feet of your lot?
(A public well is any well which is used for anything other than a single family home.)
No _____ Yes _____
3. Is there a Proposed well or an Existing well on or within 75 feet of your lot?
No _____ Yes _____
4. Are there any lakes, streams, wetlands, canals, designed wet retention areas, or standing bodies of water on or within 75 feet of your lot?
No. _____ Yes _____
5. Are there any easements (Roads, pipe lines, underground utilities) on your property?
No. _____ Yes _____
6. Are there any drainage features (i.e. ditches, swales, drainage retention areas, etc.) on or within 15 feet of your lot?
No. _____ Yes _____
7. Are there any existing or proposed septic systems on or within 75 feet of your property? (i.e. your neighbor's septic system, are vacant lots already permitted?) Note: If a well is installed within 75 feet of an adjacent parcel septic, the well may have to be abandoned and another well drilled at the owner's expense.

No _____ Yes _____

*If you answered YES to any of the above questions, please draw and locate on your site plan.

8. Is the lot accessible (i.e. locked gate, dogs, etc.), cleared of vegetation (mowed), and flagged?
No _____ Yes _____

Note: It is the responsibility of the applicant/agent to ensure the submission of accurate information and site plans to the department. If the site plan submitted or actual field observations do not agree with the information provided, permit can be voided and you may be required to resubmit application.

Site Plan Submitted By: Printed Name: _____

Signature: _____

Title: _____

Date: _____

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LETTER OF AUTHORIZATION

I _____ authorize _____ to act as my agent for the permitting of an Onsite Sewage Treatment and Disposal System with the Florida Department of Health - Hillsborough County.

Signature of Applicant

Date

Florida Department of Health - Hillsborough County
Division of Environmental Health
P.O. Box 5135
Tampa, FL 33675-5135
PHONE: (813) 307-8059 • FAX: (813) 272-7242

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TWITTER: HealthyFLA
FACEBOOK: FLDepartmentofHealth
YOUTUBE: fldoh

OSTDS Permit # _____

Non-Tidally Influenced Surface Water Boundary Determination

In place of a certified professional surveyor and mapper, you have requested the _____ County Health Department (CHD) to determine and draw on your site plan the location of the Mean Annual Flood Line for the Permanent Non-Tidal Surface Water Body (PNTSWB) located on your property. Please note that CHD staff are not surveyors and as such will be determining the net area of your surface water by an Alternate Surface Water Boundary (ASWB) determination, a line landward of the actual MAFL. While this provides a simpler and less costly alternative, it will not be as accurate as a determination by a surveyor.

Please note your property lines must be clearly marked for the CHD to accurately determine the specific location of the PNTSWB on the property, so it may later be drawn on the submitted site plan. The CHD will identify the location (elevation) of the field verification indicators for the MAFL utilizing the criteria set forth in 381.0065(2) (i), F.S.

After making this determination, the CHD will delineate on your site plan an estimated area from your property to be considered as the surface water area. This area will be larger than the actual surface water body that is on your property. It will be considered when calculating the authorized sewage flow for your property and will result in a slightly lower authorized sewage flow for the property.

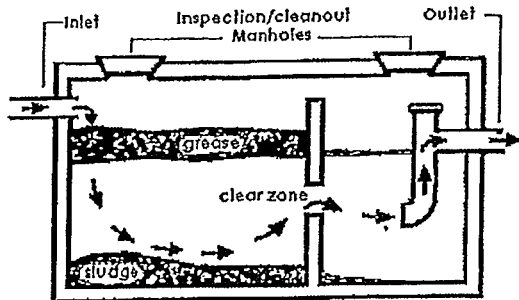
Based on the complete application submitted, along with the CHD delineated ASWB; placed on the site plan by the CHD, the CHD will determine if a permit can be issued. If all statute and rule requirements are met, as well as surface water setbacks, and the delineated area meets the authorized sewage flow, then a permit may be issued. If the lot size or the authorized sewage flow cannot be met, then the CHD will inform you of your option to obtain the services of a certified professional surveyor and mapper. Final permit determination would be made once the certified professional surveyor and mapper has delineated the MAFL and the MAFL has been drawn onto the site plan.

I acknowledge the CHD has explained the process that will be used to determine the ASWB, and that I request the CHD to perform the determination of the ASWB in place of the actual mean annual flood line.

Applicant or Property Owner Signature

Date

Information only. Keep this for reference.
**The Septic Tank Home Wastewater
Treatment and Disposal System**



What is A Septic Tank System?

A septic tank system consists of a large, watertight tank that receives wastewater from the home plumbing system. The tank is followed by an underground drainfield consisting of a network of perforated pipe or chambers for distributing partially treated water from the septic tank to the soil for final treatment and disposal.

How Does It Work?

Septic tanks contain bacteria that grow best in oxygen-poor conditions. These bacteria carry out a portion of the treatment process by converting most solids into liquids and gases. Bacteria that require oxygen thrive in the drainfield and complete the treatment process begun in the septic tank. If the septic tank is working well, the wastewater which flows out of the tank is relatively clear, although it still has an odor and may carry disease organisms. It should flow only into the drainfield. **NEVER ONTO THE GROUND SURFACE OR INTO FLORIDA WATERS!!!**

Location

Contaminants can travel long distances in some soils. Therefore, drinking water wells should be located at least 75 feet from any part of a septic tank system. With certain exceptions, septic tanks and drainfields must be located at least 75 feet away from the high water line of ponds, rivers and lakes. Also, the drainfield should be located so that it will not be saturated by surface water drainage or runoff from roof gutters.

Quick Do's and Don'ts

Do's

- Know the location and capacity of your septic tank system.
- Have a licensed contractor inspect the tank at least every three years.
- Install the system so that rainfall and surface water will flow away from the drainfield.
- Grow grass above the system.
- Install water conservation fixtures or devices to reduce the total volume of water entering the system.
- Keep plumbing fixtures such as toilets and faucets in good repair to prevent leakage and wasting of water.

Don'ts

- Never flush paper towels, newspapers, wrapping paper, rags or sticks into the system.
 - Quickly repair leaky faucets toilets to avoid overloading the system.
 - Never over-use ordinary household cleaning chemicals that will be flushed into the system.
 - Never allow grease or other bulky waste to enter the system.
 - Never allow harsh chemicals such as solvents, industry chemicals, or pesticides to be flushed into the system.
- Never plant trees or shrubbery in the drainfield , or allow vehicles drive or park across the drainfield.

CREDIT CARD PROCESSING SHEET

Please make sure that you complete the following sheet when accepting all credit card payments. We only accept Visa and MasterCard.

Date: _____

EHD Permit #/SDW PWS # _____

Address (if no permit #) _____

Credit Card Type: _____ Visa _____ MasterCard

Credit Card #: _____

Expiration Date: _____ / _____

CVV: _____

Amount: \$ _____ Service: _____

Email: _____

Phone: (_____) _____ Taken By: _____