

**Lenawee County Health Department / Environmental Health Division  
 Well and/or Sewage Disposal Construction Permit Application**

Application Date: \_\_\_\_\_  
 Applicant's Name: \_\_\_\_\_  
 Owner's Name: \_\_\_\_\_  
 Property Tax ID #: \_\_\_\_\_  
 Township: \_\_\_\_\_ Section #: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Acreage: \_\_\_\_\_ New build less than 1 acre, ask for more info  
 Subdivision (if applicable): \_\_\_\_\_  
 Lot Number (if applicable): \_\_\_\_\_  
 Owner Phone # (required) \_\_\_\_\_

Applied: ( ) Well ( ) Septic ( ) Both  
 ( ) Replacement or ( ) New  
 Sewage: ( ) Residential ( ) Bedroom(s)  
 ( ) Non-Residential - Explain Use \_\_\_\_\_  
 \_\_\_\_\_  
 ( ) Municipal Sewer  
 Backhoe required: ( ) YES ( ) NO  
 Sewage Contractor Name: \_\_\_\_\_  
 Water: ( ) Single family Home - Owner occupied? Y or N  
 ( ) Multi-family ( ) Municipal water ( ) Irrigation  
 ( ) Public - Type: ( ) I ( ) II ( ) III  
 ( ) >70gpm Y or N Registered? Y or N  
 Driller's Name: \_\_\_\_\_

**BUSINESS OFFICE USE**

Onsite Fee	Receipt #	Date	By
Both \$			
Well \$			
Septic \$			
Site Evaluation \$			
Sub Visit \$			

Permit Fee	Receipt #	Date	By
Both \$			
Well \$			
Septic \$			
Red Tag \$			
Renew \$			

**ENVIRONMENTAL HEALTH USE**

**On-Site Evaluation** Date: \_\_\_\_\_  
 By: \_\_\_\_\_ Subsequent Visits: \_\_\_\_\_  
**Application Status**  
 ( ) Withheld By: \_\_\_\_\_ Date: \_\_\_\_\_  
 ( ) Pending By: \_\_\_\_\_ Date: \_\_\_\_\_  
 Reason: \_\_\_\_\_  
 \_\_\_\_\_  
 ( ) Test Well approval By: \_\_\_\_\_ Date: \_\_\_\_\_  
 Test Well No \_\_\_\_\_ Date issued: \_\_\_\_\_  
 ( ) Approved By: \_\_\_\_\_ Date: \_\_\_\_\_  
 ( ) **MULTIPLE INSPECTIONS**  
 ( ) Issued By: \_\_\_\_\_ Date: \_\_\_\_\_  
 Permit #: \_\_\_\_\_ Expires: \_\_\_\_\_

I hereby make application in good faith for a well and/or onsite sewage disposal system. I give or have secured permission for the Lenawee County Health Department to enter the property referenced in this application for the purpose of making an onsite evaluation to determine the suitability of said parcel for construction of an onsite sewage disposal system and/or water supply, I understand that I must contact the local building inspector to determine if this property is properly zoned for my intended use.

Signature: \_\_\_\_\_ Address: \_\_\_\_\_  
Street City, ST ZIP  
 E-mail: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

Applicant wishes to be present for the onsite evaluation: ( ) Yes ( ) No

\*\*\*\*Owner mailing address IF different than above: \_\_\_\_\_  
STREET, CITY ST ZIP

Property Number \_\_\_\_\_

### PROCEDURES FOR SUBMITTAL OF SITE PLAN

*If you will be mailing this application, it will be your responsibility to obtain flags for marking the old and/or new well and your old and/or new septic system (old & new required for replacement well or septic), as well as the driveway and the 2 front corners of the proposed home (if a new build). We cannot complete your onsite unless those flags are posted. If not posted, a sub-visit fee will be assessed for staff to return to the property.*

You have been given a Site Plan to complete as part of your application. Check and make sure you have shown the location of the following facilities on your drawing:

- PROPERTY LINES (show the dimensions in feet & configuration of the lot, i.e., square, rectangular, or polygon);
- NEIGHBORING LOTS within 150 feet of your property line, including neighboring wells, sewage disposal systems, fuel tanks, and/or sewer lines, taps, mains;
- PROPOSED OR EXISTING BUILDING STRUCTURES, such as homes, businesses, garages, barns, outbuildings, etc.;
- PROPOSED OR EXISTING WELLS, CISTERNS, AND WATER LINES;
- PROPOSED OR EXISTING ONSITE SEWAGE DISPOSAL SYSTEMS – component parts can include storage devices such as: septic tanks, holding tanks, grease traps, and sewage pump chambers; disposal facilities usually include drainfields and/or dry wells – IT IS IMPORTANT TO IDENTIFY EACH COMPONENT OF THE SEWAGE SYSTEM ON YOUR DRAWING;
- NA  
  PROPOSED OR EXISTING MUNICIPAL SEWER SYSTEM (obtainable from the County Drain Commission 264-4698) – component parts usually consist of sewer mains, sewer service taps where the connection is made into the system and sewer line connecting the building to the tap – grinder tank, sewage pump chambers, and sewage treatment plants may need to be included on your drawing. An “AS BUILT” plan is required for application submission;
- Y N  
  STORAGE TANKS – include below ground tanks, above ground tanks or tanks located in basements – show with associated piping (may include but are not limited to those used for storage of substances such as heating fuel, kerosene, gasoline, diesel fuel, oil, pesticides, fertilizers or other chemicals);
- Y N  
  UNDERGROUND UTILITIES INCLUDING EASEMENTS (MISS DIG must be called to mark your property before we will perform our evaluation) – this includes, but is not limited to, buried gas lines, electrical lines, phone cables, TV cables, fiber optic cables, etc. NO HOLES MAY BE DUG OR DRILLED ON YOUR PROPERTY UNLESS MISS DIG HAS BEEN CALLED (1-800-482-7171) THREE (3) OR MORE WORKING DAYS BEFORE DIGGING OR DRILLING;
- Y N  
  COUNTY DRAINS AND DRAIN EASEMENTS, FIELDS UNDER CULTIVATION;
- Y N  
  AGRICULTURAL CHEMICAL/FERTILIZER STORAGE OR PREP AREAS;
- Y N  
  ANIMAL/POULTRY YARDS, OR OTHER \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

## SITE PLAN

PROPERTY NUMBER: \_\_\_\_\_

Street Address: \_\_\_\_\_

*Please use Procedure for Submittal of Site Plan to draw your Site Plan below:*

I hereby submit this site plan with the understanding that the information I have provided will be used to properly locate the well and/or onsite sewage disposal systems on this property. I have supplied the information requested above and attest to the accuracy and completeness of the information provided.

Signature: \_\_\_\_\_

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

Lenawee County Health Department / Environmental Health Division  
On-Site Evaluation Form

Applicant's Name: \_\_\_\_\_

Property No.: \_\_\_\_\_

Type Review: \_\_\_\_\_  
 \_\_\_\_\_ W)ell  
 \_\_\_\_\_ S)eptic  
 \_\_\_\_\_ B)oth

Is there a problem history with:

Sewage Disposal? YES NO  
 Water Quantity? YES NO  
 Water Quality? YES NO

Area's Major Soil Type: \_\_\_\_\_

Soil Boring Data

Depth    Hole #1

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Soil Boring Data

Depth    Hole #2

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Soil Boring Data

Depth    Hole #3

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Depth    Hole #4

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Depth    Hole #5

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

=====  
 Seasonal High Water Table: \_\_\_\_\_  
 Code Deviation:    Well            Y or N  
                                  Sewage            Y or N  
 Comments:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

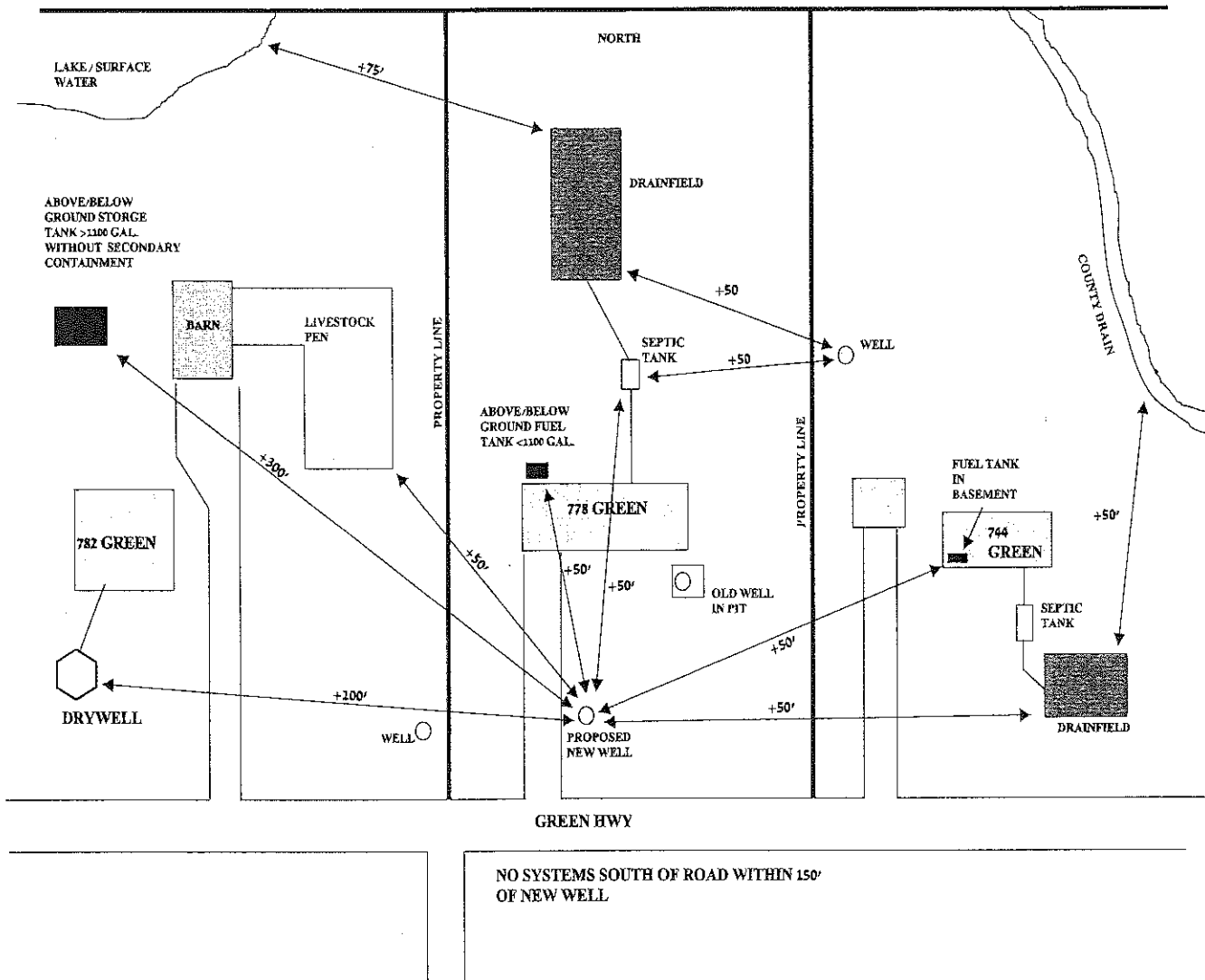
( ) SUITABLE    SANITARIAN: \_\_\_\_\_ DATE: \_\_\_\_\_  
 ( ) LIMITED    REASON: \_\_\_\_\_  
 ( ) UNSUITABLE REASON: \_\_\_\_\_

# SAMPLE SITE PLAN

Property Number:       SAMPLE      

Street Address: \_\_\_\_\_

*Please use Procedure for Submittal of Site Plan to draw your Site Plan below:*



I hereby submit this site plan with the understanding that the information I have provided will be used to properly locate the well and/or onsite sewage disposal systems on this property. I have supplied the information requested above and attest to the accuracy and completeness of the information provided.

Signature:       SAMPLE ONLY      

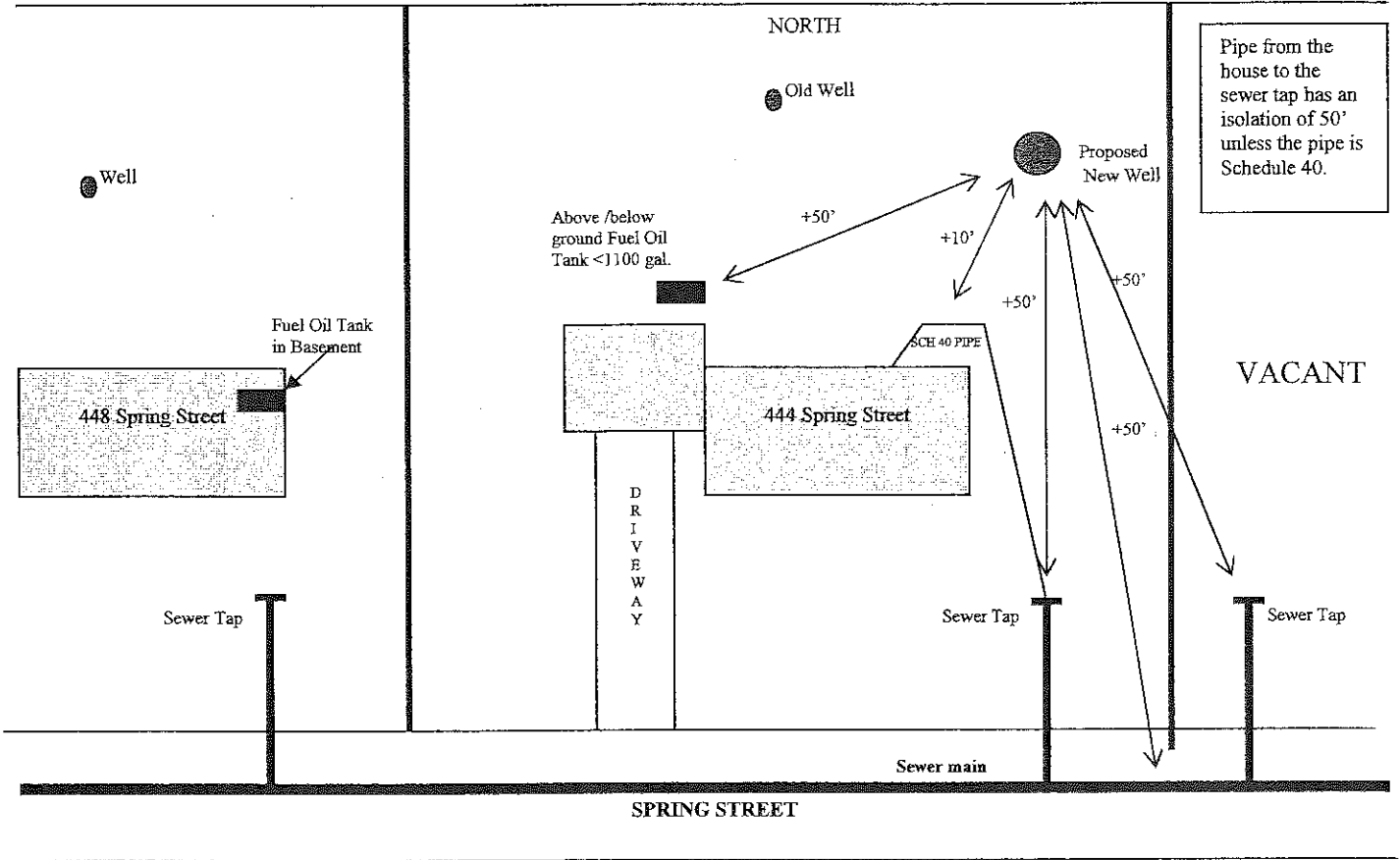
Date: \_\_\_\_\_

# SAMPLE WITH SEWER TAP SITE PLAN

Property Number:       SAMPLE      

Street Address: \_\_\_\_\_

*Please use Procedure for Submittal of Site Plan to draw your Site Plan below:*



I hereby submit this site plan with the understanding that the information I have provided will be used to properly locate the well and/or onsite sewage disposal systems on this property. I have supplied the information requested above and attest to the accuracy and completeness of the information provided.

Signature:       SAMPLE ONLY      

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