

**NIAGARA COUNTY DEPARTMENT OF HEALTH
5467 UPPER MOUNTAIN ROAD, SUITE 100
LOCKPORT, NY 14094-1899
TELEPHONE: 439-7444**

**APPLICATION FOR APPROVAL TO CONSTRUCT AN ONSITE
SEWAGE DISPOSAL SYSTEM FOR AN EXISTING PRIVATE RESIDENCE**

This Department is prepared to assist you in the design of a proper onsite sewage disposal system to service your existing house. After a site investigation and soil percolation test on the property, this Department will provide you with a complete design of a satisfactory onsite sewage disposal system for your home. The design is based upon the daily estimated sewage flow, soil percolation test results, and site conditions.

If it is found that the soil on the property is too impervious, ground water levels are too high, or the property not large enough for the disposal of sewage through conventional subsurface leaching methods, a sand filter sewage disposal system or other alternative system will be designed.

To determine the ability of the onsite soil to absorb wastewater generated from your home it is necessary to conduct a soil percolation test. To perform the test it is necessary for you to dig at least **two holes 12 inches in diameter and 30 inches in depth**. Digging holes by hand rather than with a post-hole digging tool is recommended. The holes must be located on diagonal corners of the area in which the leach lines will be installed. This area will be no closer than 20 feet to the house foundation, no closer than 10 feet from any lot line and no closer than 100 feet to any well, or watercourse. The maximum length of any leach line is normally 60 feet. A **typical** leach field area is 50' wide x 60' long.

After the holes are dug, it is advisable to loosen the earth in the sidewalls of the holes with a knife blade or some other sharp instrument. This will relieve the compaction of the soil, which occurs during the digging process. Approximately 2 inches of washed gravel or crushed stone should be placed in the bottom of the holes to reduce the scouring and silting action when water is poured in the holes. These holes should be thoroughly pre-soaked just prior to the day on which the percolation test will be conducted.

At least 20 gallons of water must be provided for each hole at the time of the test. A garden hose and bucket is sufficient. The pre-soak water and the 20-gallons left at each hole must be clean water containing no oil, rust, or other material that could possibly seal the soil and give an unsatisfactory soil test. Any attempt to change the test holes in order to affect the percolation test would be a disservice to the owner of the home and would immediately negate any design based on such falsified data.

When the completed application is returned, and upon notification that the holes have been dug, saturated and water is available, this Department will arrange to conduct the test as soon as scheduling permits. A site investigation will be conducted at the time of the percolation test to try to determine if there are any factors such as surface drainage or private wells used as the water supply, which might have to be given special consideration.

This Department will then provide you with the design and all the required information to provide an adequate sewage disposal system to serve this property. This Department must also be notified when construction of the septic system begins. Investigations will be scheduled to see that construction conforms to design requirements.

A three hundred fifty five dollar (\$355.00) fee in U. S. funds must accompany all applications unless noted otherwise. All checks must be U.S. funds drawn on an U. S. bank and be made payable to the Niagara County Department of Health.

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APPLICATION FOR APPROVAL TO CONSTRUCT AN ONSITE
SEWAGE DISPOSAL SYSTEM FOR AN EXISTING PRIVATE RESIDENCE
APPLICATION FOR SAND FILTER SYSTEM- NO PERCOLATION HOLES REQUIRED

NAME OF APPLICANT: _____

MAILING ADDRESS: _____
_____ ZIP _____

TELEPHONE NUMBER: _____ EMAIL: _____

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OWNER OF PROPERTY, IF DIFFERENT: _____

MAILING ADDRESS (OF OWNER): _____
_____ ZIP _____

TELEPHONE NUMBER: _____ EMAIL: _____

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ADDRESS OF PROPERTY FOR NEW SYSTEM: _____
TOWN OF: _____

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DESCRIBE PROPERTY CONDITONS IN THE SPRING TIME: _____

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DRAINAGE ON PROPERTY: YES NO DITCH CULVERT SWALE OTHER

IF YES, DOES IT/DO THEY DRAIN PROPERLY: YES NO

KNOWN SOIL CONDITION: CLAY SANDY OTHER: _____ UNKNOWN

ANY KNOWN BEDROCK: YES NO UNKNOWN IF, YES DEPTH IF KNOWN: _____ FEET

FULL BASEMENT: YES NO GARBAGE DISPOSAL: YES NO

SIZE OF LOT: _____ NUMBER OF BEDROOMS: _____

AGE OF HOUSE: _____ YEARS OLD AGE OF SEPTIC SYSTEM: _____ YEARS OLD

EXISTING SEPTIC TANK SIZE: _____ GALLONS

CONDITION OF SEPTIC TANK: _____

POSSIBLE RE-USE OF SEPTIC TANK: YES NO NOT KNOWN

DRINKING WATER SUPPLY: PUBLIC PRIVATE WELL

WELL ON PROPERTY: YES NO ACTIVE INACTIVE

APPLICATION FEE INCLUDED (\$355.00): YES NOT REQUIRED (Failed Dye Test Funds Used)

PROVIDE A SKETCH OR SURVEY OF PROPERTY, SHOWING LOCATION OF SEWER EXIT PIPE(S), EXISTING SEPTIC TANK(S), LEACH FIELD(S), WATER SUPPLY LINE, PRIVATE WELL, BURIED UNDERGROUND UTILITIES, PONDS, WATER COURSES, DRAINAGE FACILITIES & ANY OTHER PERTINENT INFORMATION

SIGNATURE OF APPLICANT

DATE

REV AUGUST 2020