

INTEROFFICE MEMORANDUM

**ACTION MEMO
HSES 00-034**

DATE: December 27, 2000

TO: County Health Department Directors/Administrators
ATTN: Environmental Health and Engineering Directors

THROUGH: Sharon L. Heber, Dr.P.H., Director, Division of Environmental Health

FROM: Gerald R. Briggs, Chief, Bureau of Onsite Sewage Programs

SUBJECT: Acknowledgement of Receipt of Procedures for Site Evaluations and Final Inspections

ACTION REQUIRED: Review and Implement

DUE DATE: 01/12/2001

We have developed instructions for the correct performance and recording of a site evaluation, using form DH 4015 and for a final inspection, using form DH 4016. This has been done as a result of information memo HSES 00-023, which removes the requirement for certified employees to be standardized before they can perform all functions in the OSTDS program, and to make all employees working in the OSTDS program aware of the minimum expectation for the performance of a site evaluation and a final inspection.

Each employee certified in the OSTDS program must acknowledge by their signature that they have received a copy and understand the instructions for the performance of a site evaluation and a final system inspection. Please return the original copy to David Wolfe, Certification Coordinator, in the Bureau of Facilities Programs for inclusion in the employees certification file. A copy should be given to the employee for their files.

CHDs should assure that all staff working in the OSTDS program understand the instructions and need to supply any training necessary for their staff to become familiar with the material. Any changes in the procedures will be identified through interoffice memorandum.

If there are any questions please call Bill Melton at SC 205-4070, (850) 245-4070.

Attachments

INSTRUCTIONS FOR COMPLETING SITE EVALUATION FORM: DH 4015, 10/96

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. Record net usable area available - lot area exclusive of all paved areas and prepared road beds within public rights-of-way or easements and exclusive of permanent nontidal surface water bodies and /or tidally influenced surface water bodies.

SEWAGE FLOW: Record the estimated sewage flow for the establishment from Table 1, Chapter 64E-6, FAC. 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 2 times as large as the drainfield absorption area and at least 75 percent of the unobstructed area must meet minimum setbacks in Chapter 64E-6, FAC. The unobstructed area must be contiguous to the drainfield.

BENCHMARK INFORMATION: A fixed reference point or benchmark must be established using a laser level or surveyor's level and stadia rod. 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.

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. 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. All information that is necessary to determine the total sewage flow and proper setbacks on the site ownership shall 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.

FLOOD INFORMATION: Record information on lots subject to flooding. For lots subject to flooding record 10-year flood elevation for site and actual site elevation in MSL or NGVD.

SOIL PROFILE INFORMATION: Two soil profiles within the proposed absorption area to a minimum depth of 6 feet or refusal are required. Soil identification must use USDA Soil Classification methodology (Munsell colors and USDA soil textures). Refusals must be documented. Provide USDA soil series. If the soil series cannot be determined, record "mapped as" from the current soil survey.

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 elevation based on site evaluation, USDA soil maps, and historical information. Indicate if there is high water table vegetation present. Indicate if mottling is present and depth.

SOIL TEXTURE: Record soil texture and loading rate for system sizing. Must be consistent with the recorded soil profile information.

DEPTH OF EXCAVATION: If applicable, record depth of excavation required. 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.

SITE EVALUATED BY: Signature of evaluator, title/identification number, and date of evaluation. Site evaluations shall be performed by an engineer with soils training who is registered in the State of Florida pursuant to Chapter 471, Florida Statutes, by certified department personnel, registered septic tank contractors, master septic tank contractors, and persons certified under s. 381.0101, F.S. Documentation submitted by a professional engineer must be sealed. At a minimum, initials or signature must accompany printed names.

DATE: Record the date of the site evaluation.

Changes in procedures will be identified through interoffice memorandums.

INSTRUCTIONS FOR COMPLETING INSPECTION FORM: DH 4016, 10/97

GENERAL INFORMATION

PERMIT #: Permit tacking number assigned by County Health Department.
APPLICANT: Property owner's full name.
AGENT: Property owner's legally authorized representative.
PROPERTY ADDRESS: P.O. box or street address of property.
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 or GIS location)

COUNTY HEALTH DEPARTMENT CHECKS [x] ITEMS NOT IN COMPLIANCE WITH CONSTRUCTION PERMIT AND STATUTE OR RULE. INFORMATION IS COMPLETED BY CHD ON FOLLOWING ITEMS:

TANK INSTALLATION

TANK CAPACITY: (Gallons) Tank capacity in legend must be confirmed by state health office approval number.
TANK MATERIAL: (Concrete, fiberglass, etc.) Tank material must be entered on the form.
OUTLET DEVICE: Tank outlet device must be confirmed.
MULTI-CHAMBERED: Multiple chambered tanks or tanks in series must have correct capacities and proper baffle.
OUTLET FILTER: (Manufacturer, make, model) Tank outlet filter must be confirmed. Filter type and approval must be verified.
LEGEND: (Manufacturer code) SHO tank approval number must be entered on the form.
WATERTIGHT: Tank lid, inlet, and outlet must be checked for proper sealing. Is watertightness test required?
LEVEL: Level of tank must be checked with a laser level or surveyors level. It is preferred to use the bottom of tank to obtain the most accurate degree of levelness. Inlet and outlet levels must be checked with a laser level or surveyors level.
DEPTH TO LID: Minimum requirements must be verified.
STRUCTURAL INTEGRITY: Check for holes, cracks, etc. Must look into all areas of tank.
DOSING TANKS: SHO approval number on dosing tank (legend) must be verified. Capacity of dosing tank must meet rule requirements. Dose volume must be set correctly for required dose.

DRAINFIELD INSTALLATION

DRAINFIELD AREA: Absorption beds and individual trenches must be measured for length and width.
D-BOX/HEADER: (Check box) D-box or header pipe must be confirmed and checked for level.
OF DRAINLINES: (Record applicable number installed) Number of drainlines/chambers must be checked for compliance with rule requirements.
DRAINLINE SEPARATION: Drainline separation must be measured for rule requirements.
DRAINLINE SLOPE: Must check drainlines at the beginning to the end at 10 foot intervals.
DEPTH OF COVER: Minimum requirements must be verified.
SYSTEM ELEVATION: (In relation to BM) Must be checked with laser level or surveyors level from established benchmark to lowest point of the drainfield. This must be referenced to the bottom of the drainfield.
SYSTEM LOCATION: Location in relation to approved site plan must be confirmed.
DOSING PUMPS: (Record number installed) Number of dosing pumps in system must be in accordance with permit specification.
AGGREGATE SIZE: Must be checked to meet rule requirements.
AGGREGATE QUALITY: Must be checked, i.e. size and fines. Must check in a minimum of two locations, preferably beginning and end of system. If trenches, two location for each trench, etc.
AGGREGATE DEPTH: Must check depth in several locations throughout drainfield. Must measure with a tool. Marking of 12 inches on probe is adequate.
DRAINLINE TYPE: Drainline type should be noted if not standard 4" line.

FILL / EXCAVATION MATERIAL

FILL: Sufficient, satisfactory material must be onsite to construct the system.
EXCAVATION: Backfill length, width and depth must be confirmed to required permit specifications. Backfill material (texture) must be checked in enough locations to justify approval of material (suggest minimum 4 locations, including under drainfield).

SETBACKS

MEASURING SETBACKS: All appropriate setbacks within 100 feet and any public wells within 200 feet of the system must be measured with a measuring device. Record actual setbacks in feet.

FILLED / MOUND SYSTEM

DRAINFIELD COVER: Depth of cover must be checked (measured).
SHOULDERS: Shoulders of fill or mound system must be measured and conform to permit/rule requirements.
SLOPES: Slope must be measured and conform to permit/rule requirements.
STABILIZATION: Mound must be properly stabilized with sufficient approved stabilization material. Indicate date stabilized.

ADDITIONAL INFORMATION

UNOBSTRUCTED AREA: Area must be determined to be available. Must be measured to conform to approved site plan.
STORMWATER RUNOFF: Stormwater runoff must be checked. (For example roof runoff, gutters, driveway sloping to drainfield, etc.)
ALARMS: Visual and audible alarm must be inspected and confirmed.
MAINT. AGREEMENT: Must conform to permit and rule specifications.
BUILDING AREA: An inspection to confirm the "as-built" structure conforms to the submitted floor plan is required.
LOCATION: Check for conformation with approved site plan.
FINAL SITE GRADING: OSTDS depth of cover must be checked after final site grading.
CONTRACTOR: The name of the contractor installing the system must be entered and confirmed.
ADDITIONAL INFO.: Document alternative drainfield product used in installation.

ABANDONMENT

ABANDONMENT: Enter the date the tank was pumped and the date the tank was crushed and filled.

EXPLANATION OF VIOLATIONS / REMARKS

EXPLANATION: Record item number and explanation of violation.

APPROVAL / DISAPPROVAL

CONSTRUCTION: Circle approved or disapproved, certified CHD employee signature and date. At a minimum, initials or signature must accompany printed names.
FINAL: Circle approved or disapproved, certified CHD employee signature and date. At a minimum, initials or a signature must accompany printed names. Final approval shall not be granted until the CHD has confirmed that building construction and lot grading are in substantial compliance with plans and specifications submitted with the permit application. All requirements must be confirmed before final approval.

Changes in procedures will be identified through interoffice memorandums.

I acknowledge that I have read and understand the policies and procedures for performing an onsite sewage treatment and disposal system site evaluation and how to properly complete form DH 4015, 10/96. I understand that changes in procedures will be identified through interoffice memorandums.

Employee Signature (Please Print)

Date

Employee Signature (Please Sign)

I acknowledge that I have read and understand the policies and procedures for performing an onsite sewage treatment and disposal system inspection and how to properly complete form DH 4016, 10/97. I understand that changes in procedures will be identified through interoffice memorandums.

Employee Signature (Please Print)

Date

Employee Signature (Please Sign)