



Ashtabula County Health Department
12 West Jefferson
Jefferson, OH 44047
Phone: 440-576-6010 option 3
FAX: 440-576-5527

Date of App
Site Evaluation #
Fee
Receipt #
Initials

APPLICATIONS ACCEPTED BETWEEN 8:00 A.M. & 10:00 A.M. ONLY
Items required at time of application

- (1) Survey Map supplied by one of the following:
a. Survey drawings of proposed lot (new lot or lot split) from your surveyor or
b. Survey map of existing lots dating back to 1997 from County Engineer's Office (576-2816) or
c. Tax map of existing lots created prior to 1997 from Auditor's Office (576-3691)
(2) Current or Newly Created Deed available at Recorder's Office (576-3762)
(3) If applicable, Legal Survey Description

NOTE: SITE APPLICATION FEES ARE NON-REFUNDABLE

I (or we), hereby apply for a site evaluation to install, alter, extend or modify a household sewage treatment system for a new, or existing bedroom dwelling on a property at the following location and with the following description:

New Replacement Alteration Lot Split

Township: Tax Parcel ID

Address Which side of the road?

Distance from and name of nearest intersecting road that the house is being built on:

Lot number and Development name, if applicable:

Property owner's name:

Year lot created: Total acreage of new lot: Lot frontage: ft. Lot depth: ft.

If lot split is required: Residual lot (acreage) Lot frontage: ft. Lot depth: ft.

Does property involve a land contract? yes no

If yes, read land contract - lot of record form and complete procedures.

Other features on property that would help us locate it (driveways, etc.):

Mark one (X): wooded property open field other

When will house and property stakes be up?

Applicant's Signature: Date:

Print Name: Phone:

Mailing Address: City State Zip

THIS HOUSEHOLD SEWAGE TREATMENT SYSTEM SITE EVALUATION IS GOOD FOR FIVE (5) YEARS FROM DATE OF ISSUANCE.

Date of on-site inspection: Sanitarian

Note:

Lot appears unsuitable because of: Soil Topography Size Other reasons



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Additional items required for sewage treatment system permit issuance:

- _____ completed soils evaluation from certified soil scientist
- _____ home sewage treatment system design from home sewage treatment system designer
- _____ legal survey description
- _____ copy of recorded deed
- _____ site plan
- _____ zoning permit
- _____ written copy of street address from political subdivision for proposed house.
- _____ floor plans
- _____ easement
- _____ other: _____

Revised 05/14/2018

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