



TRINITY COUNTY

Environmental Health Department

PO Box 476 61 Airport Rd.
Weaverville, CA 96093
Phone (530) 623-1459 FAX (530) 623-1353
Kristy Anderson, REHS, Director

Application for Onsite Wastewater Treatment System		<u>OFFICIAL USE ONLY</u>
Owner _____ <div style="display: flex; justify-content: space-between; width: 80%; margin-left: 20px;"> First Name Last Name </div> APN _____ <small>New Trinity APN Format: 123-456-789-012</small> Parcel Address _____ City _____ Zip _____ Email _____ Phone _____		Date _____ OWTS# _____ \$650.00 <small>CC / CA / CK#</small> _____ Receipt _____ Staff Initials _____
Mailing Address _____ City _____ State _____ Zip _____ Directions _____		
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> _____ Number of Bedrooms _____ Detailed Site Map _____ Perc Tests </div> <div style="width: 45%;"> _____ Number of Bathrooms _____ Contractor or Owner/Builder Form _____ Engineering </div> </div>		
<p><small>This permit is good for 1 year from the date received. If your permit expires after 1 year you must start the entire process over again, filling out a new permit, resubmitting all new information and fees. It is your responsibility to reinstate this permit before it expires in order to keep it valid. Reinstatement fee is the same original fee but you do not have to fill out new paperwork and go through the approval process and will keep permit valid for one additional year. The system cannot be installed until an initial onsite inspection has been performed and approved by a TCEH Official. Call at least 72 hours in advance (530) 623-1459 to schedule the final inspection – DO NOT cover the system until inspected. See attachments for setback guidelines, detailed site map directions, perc test directions & owner / builder / contractor forms. Insure equal distribution to each leach line. Install leach lines on the contour. If conditions under which this issued permit should change, including changes in surrounding parcels, making the placement, design or system location a violation of the local, state or federal regulations, this permit will become invalid. Any significant grading, cutting or filling of soil, prior to final approval may invalidate this permit.</small></p>		
Signature _____		Date _____
<u>OFFICIAL USE ONLY</u>		
Minimum Tank Size: 750 Gal _____ 1000 Gal _____ 1200 Gal _____ 1500 Gal _____		
Leach Trench - Total Length _____ Width _____ Depth _____ Minimum Distance between Lines _____		
Soil Perc Data _____ Leach Gravel Over _____ Leach Gravel Under _____		
Approved Chamber System (Make / Model) _____		
Effective Date _____ Expiration Date _____ Reinstatement Date _____		
Initial Inspection Approved By _____ Date _____		
Final Inspection Approved By _____ Date _____		
Final Notes _____		



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Onsite Wastewater Treatment System (OWTS) SETBACKS

Use these minimum setbacks to create a site map / plot plan for a septic system

10 feet	From New Structures (can be 5 ft from existing structures)
10 feet	From Property Lines
50 feet	From Septic Tank to Water well
100 feet	From Leach Lines to Water Well
100 feet	From Unstable Land Masses
100 feet	FROM EPHEMERAL STREAMS (SPRINGS / WATERWAYS) Ephemeral Stream: A stream that flows only briefly during and following a period of rainfall in the immediate locality.
150 feet	FROM PERENNIAL STREAMS / HIGH WATER MARKS Perennial Stream: A stream or river that has continuous flow in parts of its stream bed all year-round during years of normal rainfall.
200 feet	FROM WETLANDS / LAKES / VERNAL POOLS / POND HIGH WATER MARKS Seeps are small, critical habitats only detected through site visits. Seeps or seepage wetlands are springs, pools, or other wet places where groundwater naturally comes to the surface. Seepage marshes can occur in association with wetland borders, in headwaters, and along stream drainages. Vernal Pools , also called vernal ponds or ephemeral pools , are seasonal pools of water that provide habitat for distinctive plants and animals.

Plan ahead – call ahead to schedule an inspection as inspectors may be scheduled out at least one to two weeks.

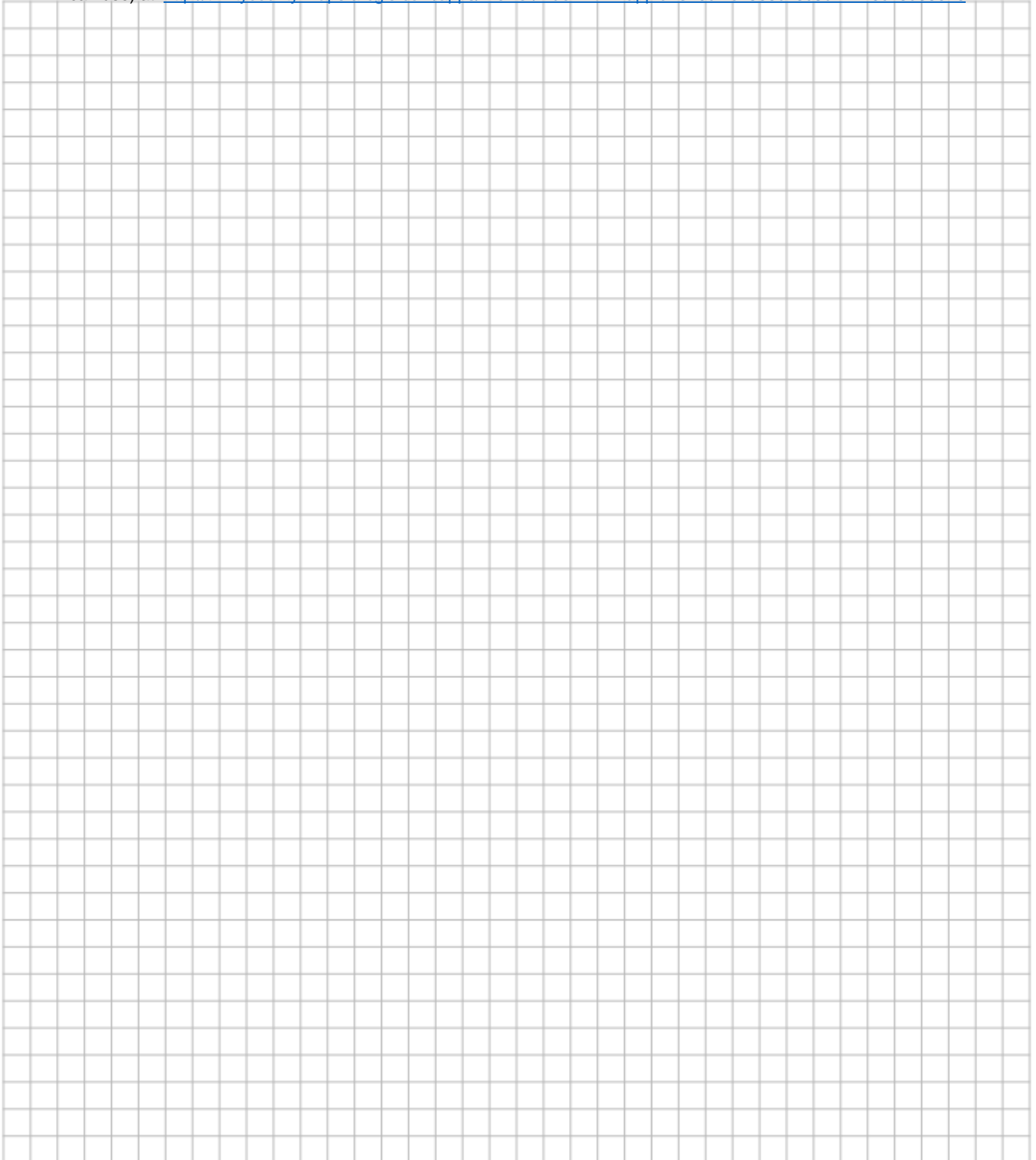
Do not assume you will be able to schedule an inspection on the day you complete system exposure, especially if you have a contractor or rented equipment on site.

Do not cover anything up until the inspection is complete & always take pictures as backup - no matter what!

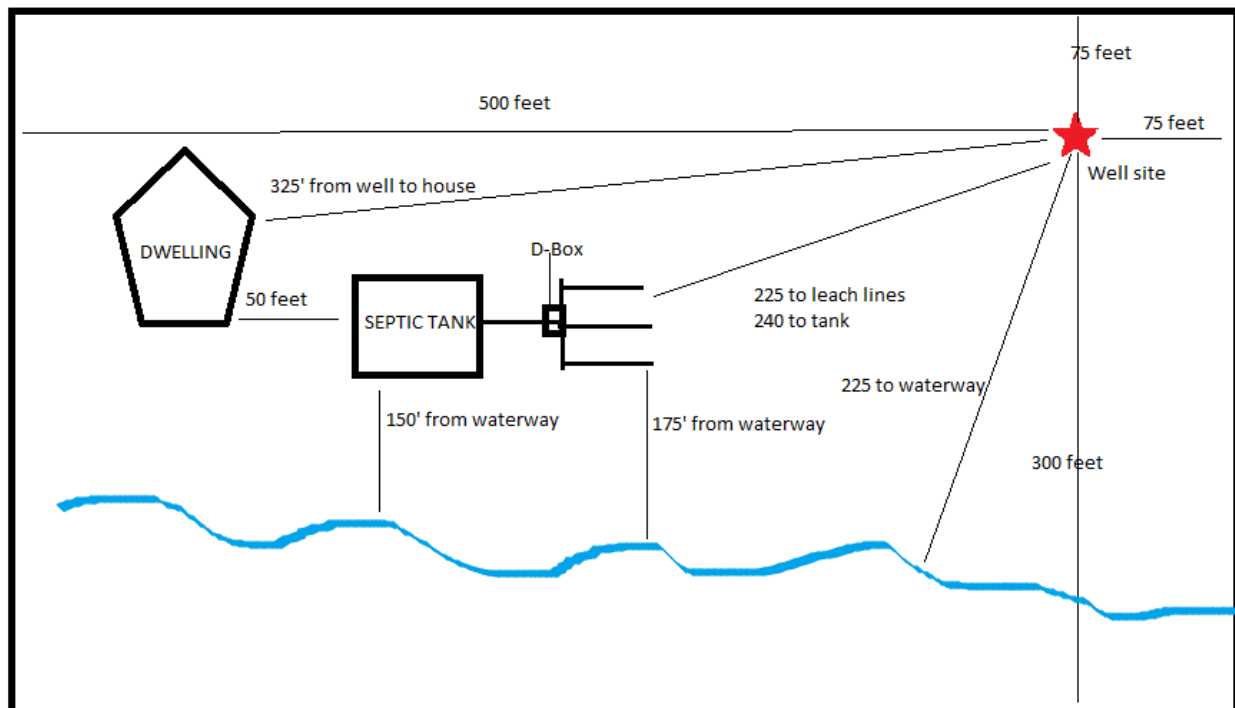
The Site Map/Plot Plan must accurately reflect the location of your proposed system, Showing setback distances – you can draw it, print out a Google Earth map or any satellite map that shows the parcel, with accurate setback distances reflected on the map. Your application may be **DENIED** if the site map is not accurate. You will be required to start the entire application process over again, including paying all associated fees.

DETAILED PLOT PLAN / SITE MAP

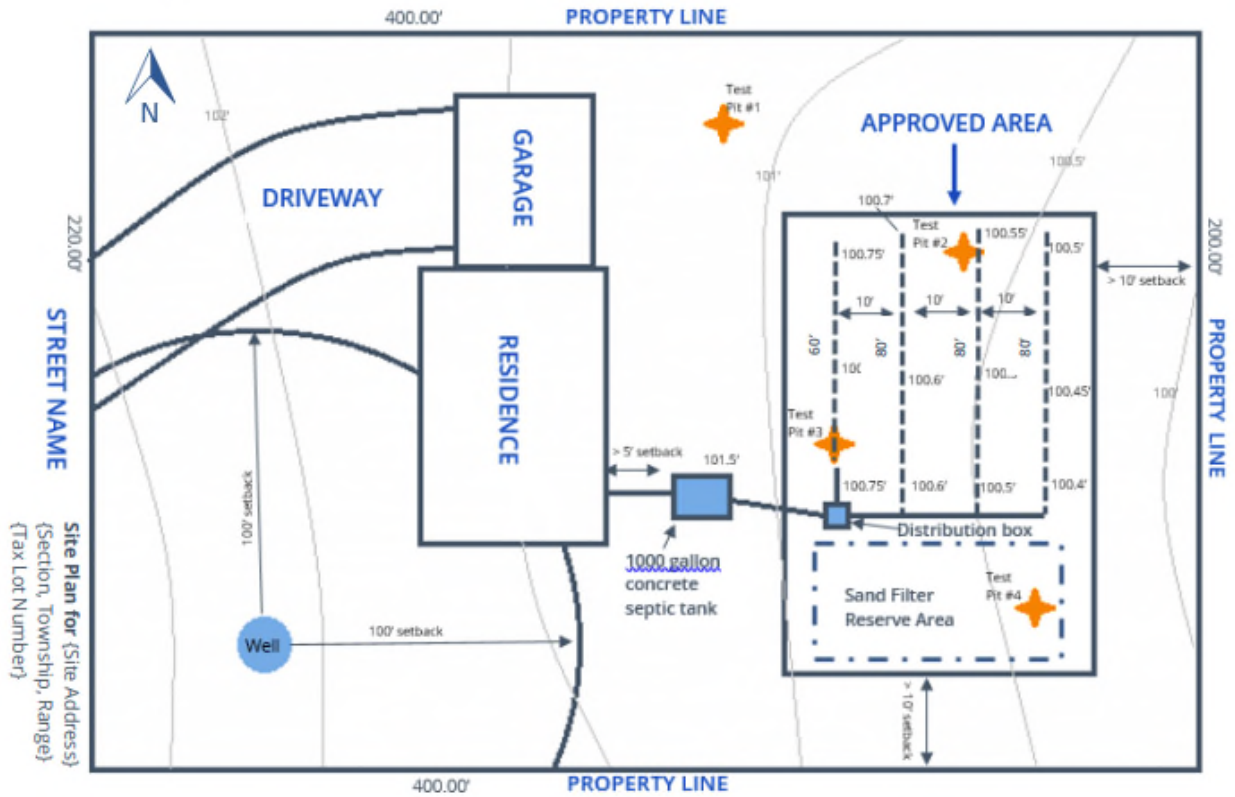
Plot Plan / Site Map must be DETAILED or you will be charged a Re-Inspection Fee of \$342.00, if incorrect. You may print out a map of your parcel and use that rather than this grid map. Any map used must show the setback distances in US feet from your proposed or existing well(s) and septic system to all structures (house, garage, sheds, greenhouses, pools etc.); List distances to property boundaries, roads, and any other significant land formations. Show distance between the well(s) and the septic tank, show distance between the well(s) and the leach field. Show the distance from well(s) and septic system to all waterways (even seasonal "ephemeral" waterways) traversing through or near the property (see list of Setback distances). If the well(s) or septic system is closer than 95 feet from the property line, your application may be denied if it is unknown where the neighboring well(s) or septic is located, as setbacks apply to neighboring parcels too. View the Trinity County Parcel Viewer to locate your parcel (there is a measuring tool in US feet you can use) at: <http://trinitycounty.maps.arcgis.com/apps/Viewer/index.html?appid=320cf1c1558c43c8b1f2f70c23d35026>



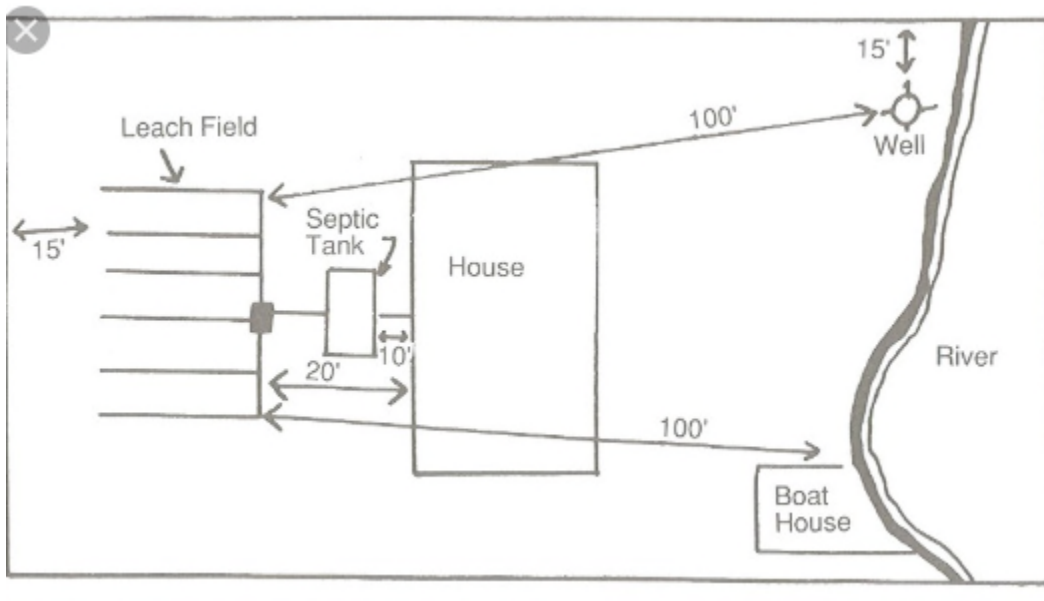
PLOT PLAN EXAMPLE



Sample Plot Plan / Site Map 3 of 4



Sample Plot Plan / Site Map 4 of 4



TRINITY COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

61 AIRPORT ROAD, PO BOX 476, WEAVERVILLE, CALIFORNIA 96093 PHONE: (530) 623-1459

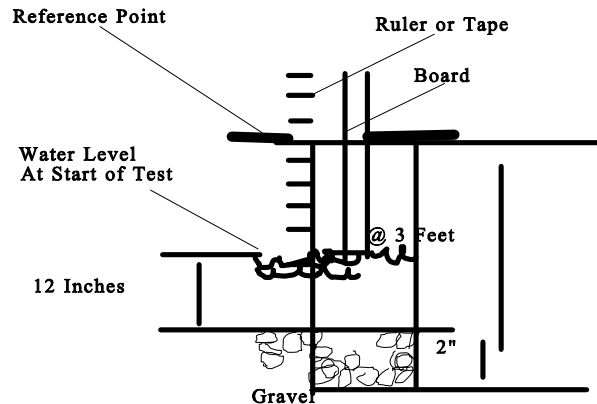
PERCOLATION TEST PROCEDURES

The object in conducting percolation tests of soil in which a drain field or seepage pit is to be installed, is to determine the length of time required for the soil to absorb one inch of water when the ground has been saturated. The information obtained from these tests, together with knowledge of the approximate amount and type of sewage to be discharged, makes it possible to determine the size of the drain field.

Holes 4 to 6 inches in diameter have been found to be the most convenient. However, this diameter is not critical, and particularly in very loose soils, it may be easier to dig larger holes. Sides of the holes should be vertical and the depth should be approximately that of the proposed drain field, (3 feet deep). The holes (2 or more) should be approximately 20 to 40 feet apart and in the area where the drain field will be installed.

1. The sides should be roughed up to eliminate packing caused by the shovel or post hole digger, which would reduce the percolation rate. Two inches of fine gravel should be placed in the hole to prevent bottom scoring.
2. Fill the hold with clear water being careful to avoid washing down the sides of the hole. By refilling, if necessary, keep at last 24 inches of water in the hole for at least 24 hours. After the above saturation, start with no more than 12 inches of water above the gravel (remove water if necessary) and begin the measurements.
3. Select a reference point from which to measure (a board laid across the mouth of the hole is satisfactory) and measure the distance from the reference point to the level of the water. Enter the time and distance measured on the chart below.
4. Repeat the measurement at the end of 30 minutes. **Continue making measurements at 30-minute intervals for 4 hours = 8 measurement readings.**
5. If the water level drops too low for further readings, refill to the 12-inch level at the end of a 30-minute period, measure and proceed as before.
6. If the hole consistently drains in less than 30 minutes, make readings at 10-minute intervals.
7. Sketch plot plan of location of the perc holes on the back of this form and/or on the application form.

Percolation Test Results			
Hole 1		Hole 2	
Time	Depth to Water	Time	Depth To Water



I hereby certify that the above percolation tests were done in accordance with the instructions and the results recorded here are true and correct.

Date _____

AP Number _____

Signature _____

Owner's Name _____

**TRINITY COUNTY BUILDING & DEVELOPMENT SERVICES
ENVIRONMENTAL HEALTH DIVISION**

P O Box 476, 61 Airport Road, Weaverville, CA 96093-0476

Phone: (530) 623-1459

Owner-Builder Information

Dear Property Owner:

For your protection, you should be aware that as the 'owner-builder' you are the responsible party of record on such a permit. If your work is being performed by someone other than yourself, you may protect yourself from possible liability if that person applies for the proper permit in his/her name.

Contractors are required by law to be licensed and bonded by the State of California. They are also required by law to put their license number on all permits for which they apply.

If you plan to do your own work, for your benefit and protection, with the exception of various trades that you plan to subcontract, you should be aware of the following information:

1. If you employ or otherwise engage any person(s) other than your immediate family, and the work (including materials and other costs) is \$200.00 or more for the entire project, and such persons are not licensed as contractors or subcontractors, then you may be an employer.
2. If you are an employer, you must register with the state and federal government as an employer and you are subject to several obligations including state and federal income tax withholding, federal social security taxes, workers' compensation insurance, disability insurance costs, and employment compensation contributions.

There may be financial risks for you if you do not carry out these obligations, and these risks are especially serious with respect to workers' compensation insurance.

For more specific information about your obligations under federal law, contact the Internal Revenue Services, and if you wish, the U.S. Small Business Administration. For more specific information about your obligations under state law, contact the Department of Benefit payments and the Division of Industrial Accidents.

For information concerning hiring practices and employer information, call the California Labor Commissioner at (916)225-2654. To verify the contractor's license number, call the California Contractor's License Board at (916)225-2640, or go to www.cslb.ca.gov. For Workers' Compensation insurance information, call the State Compensation Insurance Fund at (916)243-8400.

A frequent practice of unlicensed persons professing to be contractors is to secure an 'Owner-Builder' Sewage Disposal Permit, erroneously implying that the property owner is providing his/her own labor and materials.

Please complete and return the enclosed Owner-Builder Verification form so that we can confirm you are aware of these matters. The Sewage Disposal Permit will not be issued until the verification is received by Environmental Health.

Please Read and Keep for Your Records

**TRINITY COUNTY BUILDING & DEVELOPMENT SERVICES
ENVIRONMENTAL HEALTH DIVISION**

P O Box 476, 61 Airport Road, Weaverville, CA 96093-0476

Phone: (530) 623-1459

Owner-Builder (Sewage Disposal) Verification

Please complete the appropriate sections and return this information with your application for a permit. The Sewage Disposal Permit will not be issued until it has been received.

1. I have received a copy of the "Owner-Builder Information Sheet". Yes ___ No ___
2. I personally plan to provide the major labor and materials for construction of the proposed property improvement. Yes ___ No ___
3. I have _____ or have not _____ signed an application for a Sewage Disposal Permit for the proposed work.
4. I have contracted with the following person/firm to provide the proposed construction:

Name: _____ Phone: _____

Address: _____ License No.: _____

5. I will provide some of the work, but I have contracted/hired the following person(s) to provide the work indicated:

<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Type of Work</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Workers Compensation Declaration

I hereby affirm under penalty of perjury one of the following declarations:

- ☐ I have and will maintain a certificate of consent to self-insure for workers' compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work, which this permit is issued.
- ☐ I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier: _____ Policy No.: _____

- ☐ I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California, and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

Date: _____ Signature: _____

APN: _____ Owner's Name (Print): _____