



Vanderburgh County Health Department
 Environmental Division
 420 Mulberry Street
 Evansville, Indiana 47713-1231
 Phone: (812) 435-2400 opt 3
 E-mail: health@vanderburghcounty.in.gov
 Web Page: www.vanderburghcounty.in.gov/health



Public Health

APPLICATION FOR AN ONSITE SEWAGE DISPOSAL PERMIT

Please complete the entire application. Incomplete applications will not be processed

Date: _____ Residential System Commercial System **Permit Number** _____

Purpose of Application: New Subdivision New home construction Repair/Replace existing system

Property Information

Property Address _____
 Is any part of this property located below the Regulatory Flood Elevation (RFE)/ base flood elevation?
 Yes No (no permits will be issued for sites below the RFE)
 Lot Size _____ Lot in a Subdivision? Yes No Name _____ Lot # _____
 Directions to site: _____

Owner/Agent Information

Owner's Name: _____ **Email** _____
Mailing Address: _____ **City** _____ **Zip** _____
Phone # Home: _____ **Daytime:** _____ **Fax:** _____
Applicant's Name: _____ **Email** _____
Mailing Address: _____ **City** _____ **Zip** _____
Phone # Home: _____ **Daytime:** _____ **Fax:** _____

Dwelling Information

Number of Bedrooms* in Home _____ Number of full and half baths _____
 Water Supply: Public Private Well Cistern Jetted Bath Tub >125 gls Yes No
 Plumbing Fixtures (e.g. sinks) in Basement? Yes No Total Square Footage _____ Ft²
 Will water softener be used or is one currently in use? Yes No
 *bedroom is defined as any room equal to or greater than 70 square feet, with a closet and a window or door for emergency egress.

Certification

I hereby certify that to the best of my knowledge, the above information is correct. All installations will be made as outlined in this application and in accordance with all provisions of the Indiana State Board of Health Regulation 410 IAC 6-8.3, the Vanderburgh County Code of Ordinances providing standards for private sewage disposal, and amendments thereto.

Print Name: _____ Signature: _____ Date: ___/___/___

MEMO

OFFICE USE ONLY

Received Completed Application	____/____/____	Plans Reviewed	____/____/____
Soil Test Completed	____/____/____	Onsite Consultation	____/____/____
Requirement Sheet Sent	____/____/____	Permit Issued	____/____/____

FEE PAID

Permit \$ _____ Check # _____ Receipt #: _____ Date: ___/___/___

Vanderburgh County Health Department

Onsite Sewage Disposal System

Permit Application Progress Sheet

Keep this check sheet for reference.



The following steps must be completed before a permit will be issued.

- Obtain an application packet from the Health Department.**
The application must be completely filled out, signed and returned to the department. The property owner must sign repair applications. ***Incomplete applications will delay processing.***
Contact the Health Department at 435-2400 opt 3 with any questions.
- Contract with a soil scientist, registered in Indiana, to prepare a site/soil evaluation.**
This department cannot conduct the soil evaluation. Soil borings must be done at the proposed system location. Disturbing the soil after the evaluation is done may invalidate the test and require retesting. Submit the application and soil evaluation by fax to (812) 435-5871 or mail/hand deliver to:
Vanderburgh County Health Department
Environmental Division
420 Mulberry St
Evansville IN 47713
- After reviewing the application and soil report, the department will issue MINIMUM specifications for the onsite sewage disposal system.** These specifications will be mailed or faxed to the applicant or may be picked up at the health department office.
- Submit an onsite sewage disposal system plan to the department for review.**
The plans must contain all applicable information requested on the site plan requirement sheet in the application packet. An engineer or the contractor installing the system may prepare the drawing. Plans may be faxed to (812) 435-5871 or mailed/hand delivered to the above address.
- The department will review all submitted materials.**
Please allow seven (7) working days for this process. After reviewing the materials, the department will grant the permit, deny the application or request additional information.
The permit fee must be submitted prior to the issuance of the OSDS permit.
Permit fees are: \$80 for new construction or repair or replacement of an existing system or component and \$100 for a commercial system.
- The installer is to **notify the department 24 hours prior to the completion of the system** so an inspection may be scheduled. The department will make multiple inspections as needed.
- The department conducts inspection of all system components prior to covering** and orders any needed corrections. If the corrections are made, the system is granted approval. If the corrections are not or cannot be made, the permit will be revoked.
- The homeowner is responsible** for insuring the final grading and vegetative cover meet state and county requirements.

Site Plan Criteria for Residential Onsite Sewage Disposal Systems

The site plan must include all of the required elements. The plan may be drawn by an engineer or the contractor installing the system. Please use the form provided. All site plans must be drawn in ink.

1. The lot size, dimensions, and configuration.
2. North, South, East, West directions.
3. Location of dwelling, other structures, driveways, well, etc.
4. Location and type of all onsite system components. Note tank size and measurements in feet of all piping.
5. Show any drainage characteristics, such as ditches or swales that could impact the system.
6. All applicable setbacks required by 410 IAC 6-8.3 must be shown. (e.g., wells, property lines, etc.)
7. Show locations of utilities and easements that could impact the system.
8. Elevations at the four corners and the center of the proposed field bed or mound site.
9. Extent of area below the regulatory flood elevation (aka base flood elevation) if applicable. Flood zone information is available from the Building Commissioner at (812) 436-7867
9. A cross section of the trench and subsurface drain if applicable.

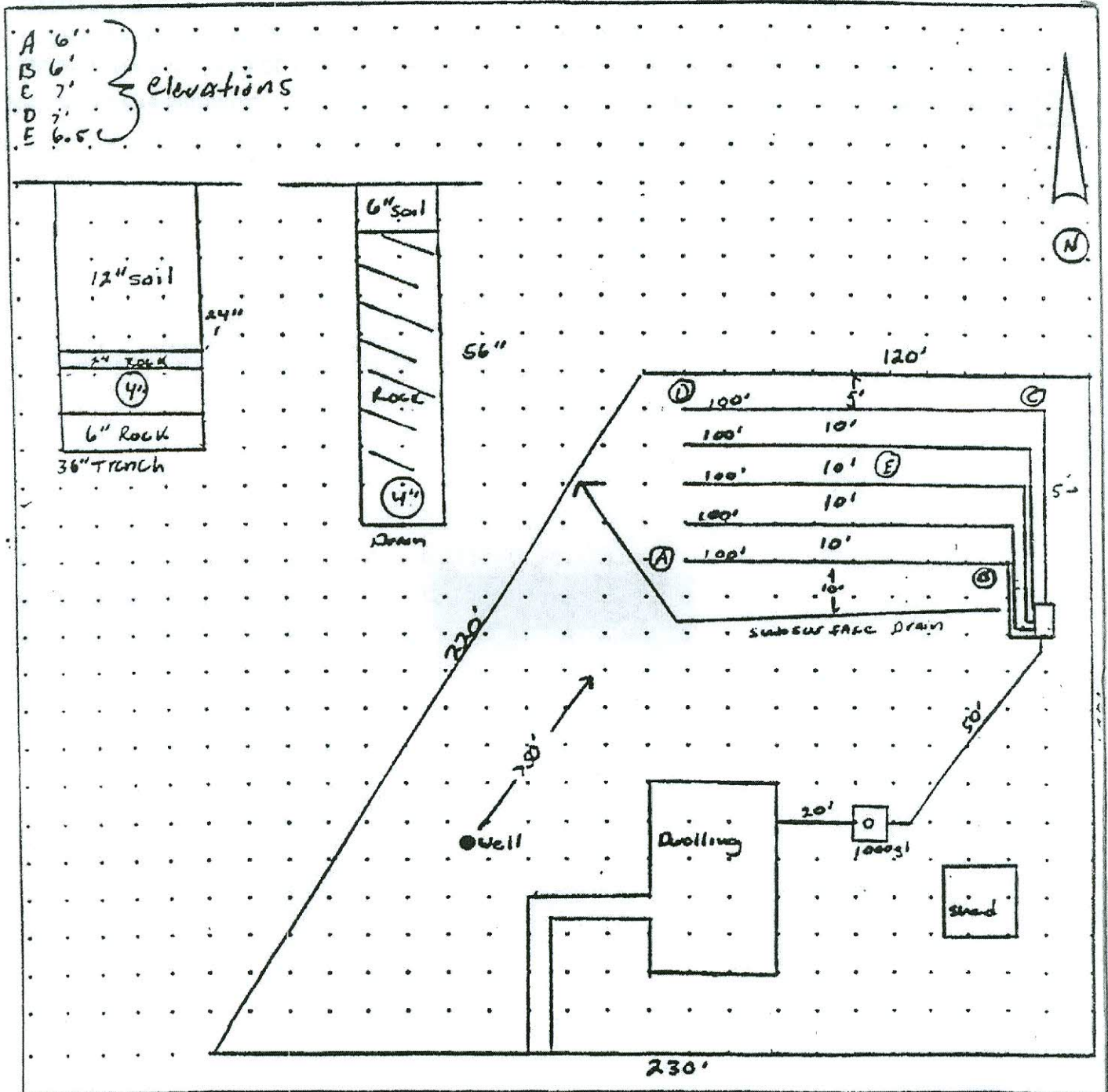
Please fax all information to (812) 435-5871

Or mail to
Vanderburgh County Health Department
420 Mulberry Street
Evansville, IN 47713

Contact the Health Department at (812) 435-2400 opt 3
with any questions.

Vanderburgh County Health Department
Onsite system Site Plan

Location of proposed system: 1313 Mockingbird Lane

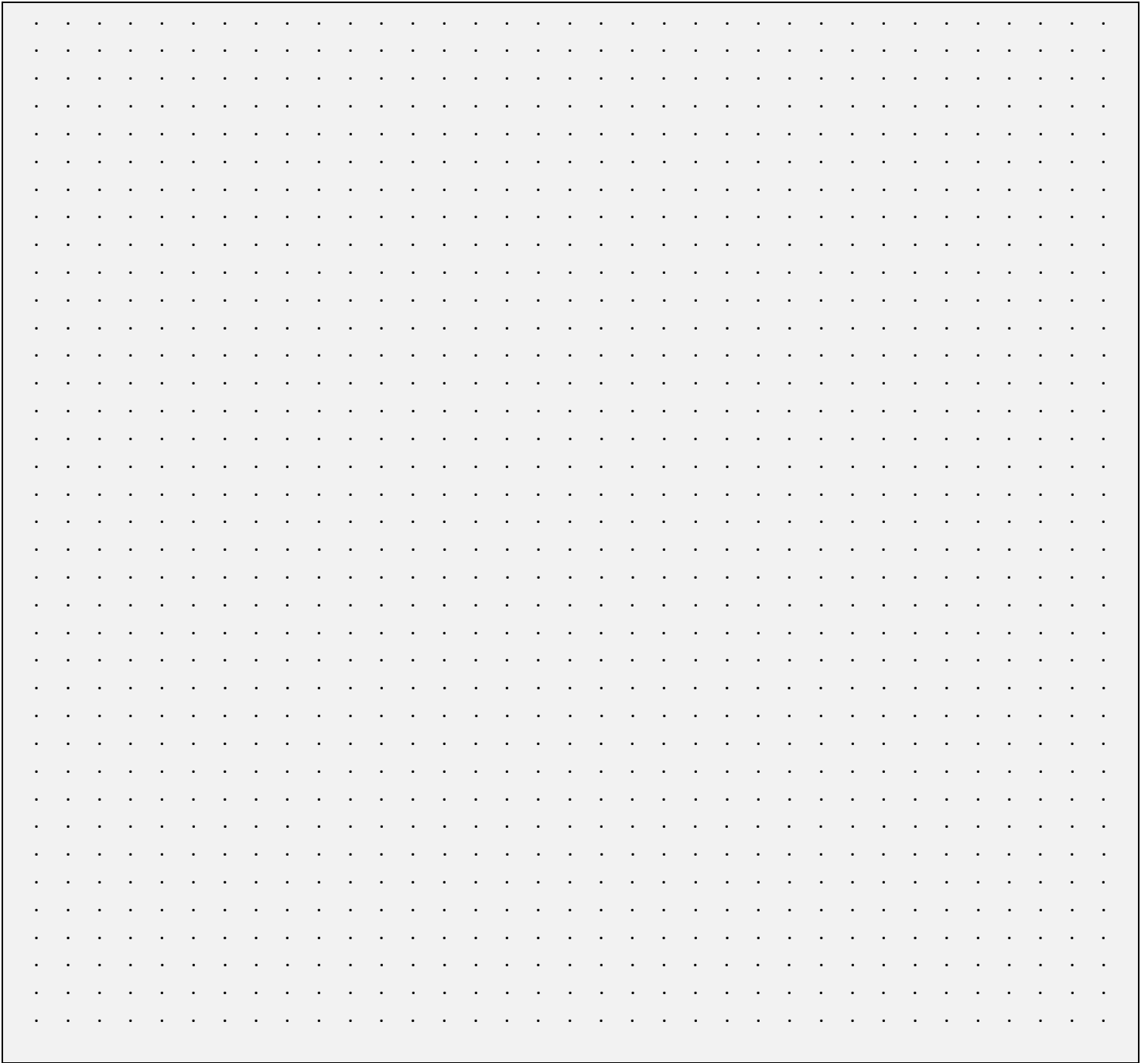


Please include all required information on the drawing

Prepared by John Q. Installer Date: _____
 Reviewed By: Jim REHS Date: _____
 Comments: _____

Vanderburgh County Health Department
Onsite System Site Plan

Location of proposed system _____



Please include all required information on the drawing.

Prepared by: _____ Date: _____

Reviewed by: _____ Date: _____

Comments: _____



Onsite Sewage Disposal System Voluntary Installer Certification

The installers on this list have been voluntarily certified. To achieve certification the installer must receive a passing score on a test pertaining to onsite wastewater disposal. This list is meant as a reference tool for those seeking an onsite sewage disposal system permit.

The applicant is not required to choose an installer from this list. This list does not constitute an endorsement of the listed installers nor is it a guarantee of their work or the operation/function of the onsite sewage disposal system.

NAME	ADDRESS	PHONE
Jeff Angel	8180 Bald Knob Rd Mt Vernon IN 47620	812 838-2255
Joe Bolin Plumbing (Todd)	9039 Broadway Ave Evansville In 47712	812 985-3100
Jerry Chastain Jr	8220 Darnell School Rd Mt Vernon IN 47620	812 985-5514
Jerry Chastain, III	8220 Darnell School Rd Mt Vernon IN 47620	812 985-5514
Joe Fischer	9224 Upper Mt Vernon Rd Mt Vernon IN 47620	812 985-9764
Garland Herrmann	11505 Buente Rd Evansville IN 47720	812 963-6205
W J Martin Excavating	14838 Buente Rd Evansville IN 47720	812 963-6753
Larry Nass	2267 W SR 68, Haubstadt IN 47639	812 768-6450
Cameron Niedhammer	3505 Mann Rd Haubstadt IN 47639	812 963-9014
O'Risky Excavating (Jeff)	11721 Boberg Rd, Evansville, IN 47712	812 985-5974
Allen Relleke Excavating LLC	3500 Mann Rd Haubstadt IN 47639	812 305-3051
Greg Russel	PO Box 512 Mt Vernon IN 47622	812 838-2471
Jeff Russel	PO Box 512 Mt Vernon IN 47622	812 838-2471
Andy Shoulders	722 Pelzer Rd Boonville IN 47601	812 897-0367
Craig Vieira	PO Box 24 Inglefield, IN 47618	812 305-5424
Bud Wildeman	3500 Wildeman Rd Mt Vernon IN 47620	812 480-0717
Lee Wirthwein	5344 S Yankeetown Rd Boonville IN 47601	812 853-5007
Martin Woodard Backhoe Service	15515 N Posey Co Line Rd Poseyville In 47633	812 963-8026

Soil Scientists Serving SW Indiana

Rebecca L. Langford

Professional 60, **Available**

5301 Cunningham Dr
Evansville, IN 47711

Work Telephone/Fax: 812-425-1413; E-mail: langfordllc@gmail.com

Work Area: **Vanderburgh, Posey, Warrick, Gibson, Spencer, Dubois, Perry, Knox, Pike and Daviess Counties**

Mark S. McClain

Professional 79, **Available**

CPSS/CPSC/CPESC/RPSS-IN/PWS

SOILS1® Soil Science Consultants

10740 Cheryl Court

Carmel, IN 46033

Cell: 765-212-7645 (SOIL); E-mail: mmcclain1313@gmail.com

www.linkedin.com/in/marksmcclain/en

Work Area: **Entire State of Indiana**

Dave S. Ralston

Professional 38, **Available**

Soil Tech, Inc.

5144 W Timberwood Drive

Newburgh, IN 47630

Work Telephone: 812-858-7003; Toll-Free: 800-684-1358; Fax: 812-858-0888; E-mail:

ralston@soiltech.com

Work Area: **Southwest Indiana**

John M. Robbins, Jr.

Professional 5, **Available**

Soil Services

1903 S. Finley Firehouse Road

Scottsburg, IN 47170

Work/Home Telephone: 812-752-7160; Fax: 812-752-7160; E-mail: johnrobbins@3cbb.com

Work Area: **South Half of Indiana**

Spencer G. Williams

Professional 19, **Available**

Southeastern Environmental Consulting

1771 S St Rd 3

Scottsburg, IN 47170

Work Telephone: 812-889-3524; Toll-Free: 877-556-1557; E-mail:

spencergene@yahoo.com

Work Area: **South Half of Indiana**



Existing Tank Inspection

Must Be Submitted every time an existing tank is reused with a new absorption field or system expansion.

SEPTIC TANK

OR

DOSE TANK

- ▶ ENTIRE TOP SEVEN INCHES OF TANK MUST BE UNCOVERED
- ▶ TANK MUST BE PUMPED PRIOR TO INSPECTION AND REPAIR

Name of Septic Pumper _____

Date Tank Pumped _____

HOMEOWNER NAME _____

SITE ADDRESS _____

Date of Tank Inspection ___/___/___ Installer Performing Inspection _____

TANK Capacity (gal) _____ Manufacturer (if Known) _____ Approximate Age _____ Compartments _____ Sealed above water line Watertight

Inlet "T": <input type="checkbox"/> Good <input type="checkbox"/> Replaced	<i>Installer Comments:</i>
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Concrete <input type="checkbox"/> Never were on this tank Baffles: <input type="checkbox"/> Broken & Dropped to bottom <input type="checkbox"/> By this installer <input type="checkbox"/> By someone at a previous time	<i>Installer Comments:</i>
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<input type="checkbox"/> Outlet "T": <input type="checkbox"/> Good Condition & Proper Dimensions <input type="checkbox"/> Replaced by this installer	<i>Installer Comments:</i>
<u>OR</u>	
<input type="checkbox"/> Outlet Filter —MUST BE REPLACED WITH NEW FILTER OR "T" <input type="checkbox"/> REPLACED WITH "T" <input type="checkbox"/> REPLACED WITH NEW FILTER: Manufacturer: _____ Model #: _____ GPD: _____	

Riser w/Lid: <input type="checkbox"/> Existing—good shape and sealed <input type="checkbox"/> Installed <input type="checkbox"/> To Be Installed	<i>Installer Comments:</i>
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Additional Installer Comments:

Installer Signature _____ Date: _____