



CRAWFORD COUNTY

501 Norway Street Suite #1 Grayling, MI 49738 (989) 348-7800

KALKASKA COUNTY 625 Courthouse Drive Kalkaska, MI 49646 (231) 258-8669

LAKE COUNTY 5681 S. M-37 Baldwin, MI 49304 (231) 745-4663

MANISTEE COUNTY 385 Third Street Manistee, MI 49660 (231) 723-3595

MASON COUNTY

916 Diana Street Ludington, MI 49431 (231) 845-7381

MECOSTA COUNTY 14485 Northland Drive Big Rapids, MI 49307 (231) 592-0130

MISSAUKEE COUNTY 6180 W. Sanborn Road Suite #1 Lake City, MI 49651 (231) 839-7167

NEWAYGO COUNTY

PO Box 850 1049 Newell Street White Cloud, MI 49349 (231) 689-7300

OCEANA COUNTY

3986 N. Oceana Drive Hart, MI 49420 (231) 873-2193

WEXFORD COUNTY

521 Cobb Street Cadillac, MI 49601 (231) 775-9942



f healthdept10

PERMIT APPLICATION INSTRUCTIONS

HEALTH DEPARTMENT REQUIREMENTS FOR WATER SUPPLY SYSTEMS, SEWAGE TREATMENT SYSTEMS, AND SOIL EVALUATIONS

Please follow the instructions below when completing your application for an on-site water supply and sewage treatment system permit.

- 1. Complete all areas of application except yellow area labeled "Office Use", then sign.
- Include the parcel number (Tax I.D. number) and the street address of the property. The parcel number can be obtained from your tax bill. (INCOMPLETE APPLICATIONS WILL BE RETURNED).
- 3. Complete a site plan area drawing on the permit application; be sure to identify well(s) and septic system(s) within 50 feet of the property. Also, write directions to and/or description of the property.
- 4. Flag your property to mark the location of the driveway and proposed location of the well and septic system prior to submitting your application. If the property is not flagged, you will be contacted by the sanitarian and a re-inspection fee must be submitted to the health department prior to the site visit.
- 5. Add contractor information in the appropriate field if you have selected one.
- Submit the required fee with the application. Make checks payable to District Health Department #10 or DHD#IO. (APPLICATIONS WITHOUT A FEE WILL BE RETURNED).
- Send/E-mail the completed application (with payment) to the county office that the permit will be issued from. Office locations/Email addresses are listed on page 2 of the application.
- 8. Payment Options:
- A. Mail in application with check made out to DHD #10
- B. Email application and pay with credit card* over the phone
- C. Pay with credit card* on-line on the DHD#10 website, email the application and receipt
- 9. It is necessary under Public Act 174 that utility lines also be marked prior to the site visit. This service is provided by Miss Digg. A locate request needs to be placed at least 3 business days prior to but no more than 14 days before the scheduled visit. Requests may be submitted by calling 811 or 1-800-482-7171; or online at www.missdig.org.

Once the properly completed application and fees have been received, a sanitarian will perform a field investigation to determine soil suitability and other factors pertinent to compliance with health code standards. It is not necessary for you to be present at the time of the site investigation. If conditions are favorable, a permit will be mailed to you. If you have any questions regarding this process, you may call or contact our office in person between the hours of 8:00 a.m. - 4:30 p.m. (8:30 a.m. - 5:00 p.m. for Mecosta County)

*Processing Fees Apply

OTHER PERMITS

Each location is a specific site and may require other permits not warranted by this department. These include but are not limited to: township zoning permit, soil and erosion permit, wetlands permit, driveway permit, etc. Please contact the appropriate agency for these determinations.

MINIMUM ISOLATION DISTANCE	REQUIREMENTS	
ISOLATION FROM SEPTIC TANK		DISTANCE DRAIN BED **
Property Line	5 feet	10 feet
Basement Wall	10 feet	10 feet
Lake or Stream	50 feet	100 feet
Bank or Drop Off	10 feet	15 feet
Residential Well Only	50 feet	50 feet
Non-Community Well	75 feet	75 feet
Water Line	10 feet	10 feet
Swimming Pool	10 feet	10 feet

**The ZONING REQUIREMENTS OR RESTRICTIVE COVENANTS, OR RIVER ZONING MAY require greater distances, as well as requirements from other commercial facilities.

**DISPOSAL METHODS other than a drain bed may require greater isolation distances.

PLEASE SHOW THE FOLLOWING ON YOUR SITE PLAN

- A. The location of any existing building, wells, or sewage disposal facilities on the property, or on adjoining property if closer than 50' from your property.
- B. Show the location of the proposed new buildings, wells, sewage systems, drive ways etc. Identify well(s) and septic system(s) within 50 feet of property line.
- C. Please indicate any easement, utility lines, lakes, streams, ponds, etc.
- D. Indicate distances between wells and septic tanks, disposal fields, property lines, lakes, rivers, streams, drop offs, etc. and adjoining property within 50 feet of this site.
- E. Please show the measurements of the width and depth of your property and indicate how many acres therein.

YOUR SITE PLAN DRAWING SHOULD BE LEGIBLE AND RESEMBLE THE EXAMPLE SHOWN BELOW.

EXAMPLE OF PROPERLY COMPLETED SITE PLAN

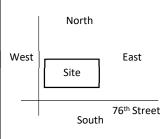


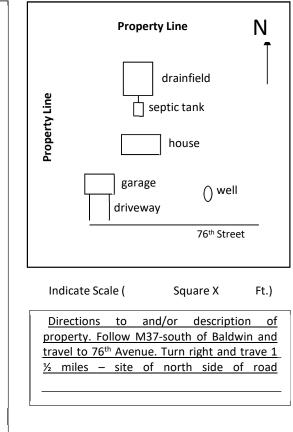
Show as much detail as possible on the site plan.

Please Include:

- Prominent landmarks on or nearby the site (surface waters, fences, large trees, buildings, neighboring houses, etc.
- 2. Site boundaries
- 3. Show location of buildings and drives.
- 4. Show location of well and/or sewage treatment system.
- 5. Indicate North

Map to Property (Closest major cross road/streets)





I, the owner or the owner's representative, agree to allow the representative of the District Health Department #10 access to the described parcel to perform necessary test, and observations. The above information is true and correct to the best of my knowledge, I agree to install any permitted water supply and/or sewage treatment facility in accordance with the District Health Department #10 Environmental Health Code and applicable State Law.

John Doe Signature

<u>January 31, 2021</u> Date

District Health Danartment #10 Fee Schedule	410 Faa Sehadula	HHS INSPECTIONS	
Figure Revenue Department of Health	alth	Full Inspection	\$250
	Calu	Partial (Septic and well only)	\$180
PROGRAM/PROVIDED SERVICE	Effective: January 1, 2022	Water Re-Sampling	\$ 25 plus laboratory costs
SEPTIC PERMIT (Residential)	•	CINER FEES Server Contractor Licence	\$ 30
Residential (evaluation without a backhoe)	\$330	Tanning Facility License	\$ 60, one hed only \$40
Residential (evaluation with a backhoe)	\$180	Swimming Pool/Spa Inspection Fee	\$80 each
Re-inspection/Re-evaluation Fee	\$100	Radon Kits	\$ 10
Septic Tank Only	\$80	Bacterial Water Sample	\$20
Vacant Land Evaluation (without a backhoe)	\$230	Nitrate Water Sample	\$20
Vacant Land Evaluation (with a backhoe)	\$140	Lead Test for Water	\$ 30
SEPTIC PERMIT (Commercial)		FOOD SERVICE	FEES Effective 1-1-2022
Commercial < 1000 gallons (without backhoe)	\$330	Fived food service	
Commercial <1000 gallons (backhoe)	\$180	Casconal (0 months or lace)	\$330 \$330
Commercial >1,000 gallons (without backhoe)	\$400	Turidental (2 monuus of 1033)	\$180 \$180
Commercial >1000 gallons (backhoe)	\$250	Transitory *Fee set by the state	0010
WELL PERMIT		Titutorio 100 octory and oracle	\$155
Private/Type III	\$180	Inspection	600
Type II	\$350	Mobile	\$135
Type II Level 2 Assessment	\$180	Mobile Commissary	\$100 \$100
WATER LABORATORY		TEMPORARY)) ;
Bacterial sample	\$20	For Profit	\$100
Nitrate sample	\$20	Non-Profit	860
MORTGAGE EVALUATION		No Charge/Donation Only	First 2 permits free, \$60 afterward
Septic & Well Evaluation	\$275	Application less than 7 days prior to event	\$60 additional fee
Septic Or Well Evaluation Only	\$180	PLAN REVIEW	
Water Re-sampling	\$ 25 plus laboratory costs	Fixed or Seasonal Facility	\$400
POS Report Review		Review/Consultation for approval of new	\$150
BUILDING PERMIT APPROVAL (BPA)		menu/procedures	
Office & Field Review	\$ 75	Re-Inspection Fee	\$150 5.15 2.25
Office Review Only	No Charge	Late Fee for annual license	Double tee atter 30 days
ADMINISTRATIVE FEES		Food Certification Class	\$150 \$150
Informal Hearing	\$150		
Appeals or Formal Hearing	\$400	Senior Mear Sue (Council on Aging)	INO CITALGE
Permit Renewal/Transfer	\$ 30	" Menu limited to popeorn, not dogs, nand-dipped ice cream, iountain pop, collee, solt	ream, iountain pop, corree, sort
Management Re-Evaluation	\$100		IIO
Plan Review – Subdivision/Condo	\$450 + \$25/site	TEMPORARY CAMPGROUND FEE SCHEDULE FOR 2022 (State Fee Amount)	LE FOR 2022 (State Fee Amount)
	(site fee waived for storage units)	Campground with 5 – 25 sites \$94 Campground	Campground with $76 - 100$ sites \$190
CAMPGROUNDS		5	Campground with 100 – 500 sites \$284
Annual Inspection	\$120		Campground with >500 sites \$632
Temporary Campground Inspection (local fee)	\$ 60 + \$0.25/site over 50		
Temporary Campground License (state fee)	** See fee schedule (bottom right)		



NOTICE

Beginning in 2019, District Health Department #10 will be encouraging the use of backhoes for soil evaluations instead of hand augers.

The purpose of the change is to allow for better determination of soil types and seasonal water table. In addition, the agency is now required by the state to evaluate the soils down to 7 feet, which is deeper than our hand augers.

We are adjusting the fee for a septic permit if a backhoe is provided in order to assist with the additional cost.



If you will be using a backhoe, please do the following:

1) Anyone with a backhoe can be contacted. It does not have to be a licensed sewage contractor.



2) It is best if the backhoe operator contacts the sanitarian directly and schedule a time for the soil evaluation.

3) DO NOT dig the holes in advance. Soil pits are dangerous. Children and pets may fall into the

pits and become seriously injured. The soil pits must be dug and covered when the sanitarian is present.

4) Please mark the location of all electrical, phone, gas, etc. It is easy to damage utility lines if we do not know where they are. If there are gas or electrical lines in the proposed area, it is recommended that you contact MISS DIG (1-800-482-7171) and have the locations marked prior to the backhoe cut.

