

North Central District Health Department

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- □ Vernon—375 Hartford Turnpike, Room 120, Vernon, CT 06066 * (860) 872-1501 Fax (860) 872 1531
 □ Windham—Town Hall, 979 Main Street, Willimantic, CT 06226 * (860) 465-3033 Fax (860) 465-3034
- ☐ Stafford—Town Hall, 1 Main Street, Stafford Springs, CT 06076 * (860) 684-5609 Fax (860) 684-1768

Patrice A. Sulik, MPH, R.S. Director of Health

PLANS SUBMITTED FOR REVIEW FOR THE REPAIR/REPLACEMENT OF SEPTIC SYSTEMS THAT ARE NOT PREPARED BY AN ENGINEER SHALL BE PREPARED TO INCLUDE THE FOLLOWING:

- 1. Submitted on blueprint stock or $8 \frac{1}{2} \times 11$ paper. Plan must be drawn to scale (1" = 20' or 1" = 30')
- 2. Show permanent benchmark within 12' horizontally and in close proximity to the proposed septic system. (Assumed elevation is okay.)
- 3. Show original grade spot elevations in leaching area. Highest elevation within each trench must be shown.
- 4. Show slope in, and immediately below, proposed septic area.
- 5. Show significant setbacks.
- 6. Show primary and reserve areas.
- 7. Show leaching system detail (components) in primary area.
- 8. Show maximum depth into grade.
- 9. Show a written description of system components and number of bedrooms in home.
- 10. Show separation distances to proposed and existing wells, including wells on adjacent properties. If no wells exist within 75 feet of proposed system, state on plan.
- 11. Show boundaries and easements.
- 12. Show location of percolation hole and test pits.
- 13. Show MLSS if mottles or a restrictive layer has been observed within 60 inches of soil surface.
- 14. Show wetlands and/or water bodies.