

## NORTH CENTRAL DISTRICT HEALTH DEPARTMENT

### SOIL TEST HOLE PREPARATION

1. The applicant will be required to provide the services of an engineer who is registered in the State of Connecticut to be responsible for conducting the soil and percolation test.
2. Lot boundary lines must be clearly marked.
3. Proposed house location must be staked.
4. A backhoe must be available at the time of your appointment for the excavation of observation pits (ten feet deep). These holes are necessary for the soil profile study as required by Section 19-13-B103f(d)(2) of the Connecticut Public Health Code.
5. The lot must be made accessible for the backhoe to get to the test area.
6. A sufficient water supply (not less than ten gallons) in suitable, clean containers must be provided at the site of each percolation hole (at least two) for the engineer to conduct the test.
7. It is the responsibility of the applicant to have the percolation test holes dug (usually 36 inches deep) at the time of inspection. This is usually done with a post hole digger or long handled shovel.
8. If for any reason you have been unable to prepare the lot as indicated above, you must contact our office before the sanitarian leaves the office to conduct the test, which is by appointment only.
9. In case of inclement weather (rain, snow, etc.), your engineer should contact our office to discuss rescheduling the site test.
10. Field experience has shown that soil tests in one disposal field, as well as in adjacent building sites, may vary markedly. This is the reason we must conduct tests on each and every individual site.
11. As soon as possible following the test, a report will be sent to you indicating the results of the test.

## NORTH CENTRAL DISTRICT HEALTH DEPARTMENT

### **PERCOLATION TEST INFORMATION FOR SUBDIVISIONS**

It is required that the following information be provided to the Health Department with a percolation test application for three lots or more (subdivision).

An overall site plan proposal prepared by an engineer is required (recommended scale: one inch to 100 feet or one inch to 40 feet).

This plan shall indicate the location of proposed property lines, houses, primary and reserve septic system areas and well sites (if applicable).

Also, the plan shall indicate the location of existing wells and septic systems immediately adjacent to or on the site; preliminary soil deep test pits and percolation tests conducted by the engineer; topography; significant landmarks; wetland boundaries; streams; ponds; etc.

Along with the plan, the engineer shall submit information pertaining to the basis for the proposed septic system locations; i.e., preliminary soil deep test pit data, percolation test results, S.C.S. soil types, ground water data, etc.

If review of the preliminary information submitted is satisfactory, the application for site testing will be accepted. A percolation test date for the subdivision will then be scheduled with the applicant. The applicant shall have a representative of the engineering firm who is familiar with the proposed plan present on the site at the time of testing. If the engineering firm's representative is not present on the site, no test will be witnessed by the North Central District Health Department.

The applicant's engineer shall be responsible for locating and excavating soil deep test pits and recording data. At least two deep test pits are required on each lot; one each in the primary and reserve areas. The engineer shall conduct at least one percolation test on each lot. Site conditions may require additional deep test pits and percolation tests at the discretion of the engineer. Applicant/engineer is responsible for the back-filling of test pits and percolation holes.

In case of rain, no tests will be witnessed by the Health Department. Excessive dry weather (generally from July through September) may not permit the scheduling of site testing.

January 1, 1988

**REFUND POLICY - SOIL TEST APPLICATIONS**

Effective January 1, 1988, there will be a handling and processing fee of \$25.00 per lot for soil applications which are withdrawn on sites where no tests or inspections have been made.

There will be no refund on any site where tests, scheduling or inspections have begun.

Policy 12-87  
Board of Directors  
North Central District Health  
Department

NORTH CENTRAL DISTRICT HEALTH DEPARTMENT

**GROUND WATER MONITORING POLICY**

During site testing, if there is evidence of ground water, actual water, or mottling at less than three feet below the ground surface, the applicant/engineer will be required to install ground water monitoring pipes in the proposed septic system areas; primary and reserve.

Generally, ground water monitoring pipes shall be placed four feet into existing grade with as little disturbance as possible of the surrounding soil. The monitoring pipes shall be field marked and located on the site plan.

Ground water monitoring is generally conducted during the wettest part of the year; March through May. Readings should be recorded on a weekly basis.

The applicant=s engineer shall be responsible for recording the ground water data and upon completion, this information shall be submitted to our office for review.

NORTH CENTRAL DISTRICT HEALTH DEPARTMENT

APPLICATION FOR SITE INVESTIGATION AND SEEPAGE TEST

Information to be supplied by the applicant: (Please Print)

Date: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Daytime Tel. No. \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Daytime Tel. No. \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Assessor's Identification of Lot: (Map, Block and Lot No. of the proposed lot must be obtained from the Assessor's Office)

Map No. \_\_\_\_\_ Block No. \_\_\_\_\_ Lot No. \_\_\_\_\_

Location of Property: (include street and town) \_\_\_\_\_

\*Professional Engineer: \_\_\_\_\_

Lot Dimensions: \_\_\_\_\_

Water Supply: Public \_\_\_\_\_ Private Well \_\_\_\_\_

If Subdivision - Name: \_\_\_\_\_

Number of Lots to be Tested: \_\_\_\_\_

Is this lot approved by Zoning? \_\_\_\_\_

Was this lot previously tested? \_\_\_\_\_

If yes, by whom? \_\_\_\_\_ Date tested: \_\_\_\_\_

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PERMISSION IS HEREBY GRANTED TO THE NORTH CENTRAL DISTRICT HEALTH DEPARTMENT AND/OR THEIR REPRESENTATIVE TO ENTER ONTO THE PROPERTY ALONG WITH YOUR ENGINEER WHO IS RESPONSIBLE FOR CONDUCTING A SOIL TEST ON THE ABOVE MENTIONED PROPERTY. THE INFORMATION PROVIDED ABOVE IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE AND CORRECT. I ACKNOWLEDGE RECEIPT OF THE REFUND POLICY.

Signature: \_\_\_\_\_

Owner of Property

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Assessor's lot identification **MUST** be included on the application. Please enclose **\$200.00 application fee, per lot in subdivision** to be tested. ALL SITE TESTING IS REQUIRED TO BE CONDUCTED BY YOUR ENGINEER.