

APPLICATION FOR FULTON COUNTY SEWAGE TREATMENT SYSTEM  
SITE REVIEW/SOIL EVALUATION

<p style="text-align: center;">Fulton County Health Department 606 S. Shoop Avenue Wauseon OH 43567</p> <p style="text-align: center;">Phone (419) 337-0915</p>	<p style="text-align: right;">Office Use Only</p> <p>Site Review App # _____</p> <p>Date site review app submitted _____</p> <p>Fee paid _____ Clerk _____</p>
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Applicant Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

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HOUSE NUMBER or LOCATION of PROPERTY: \_\_\_\_\_

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Township: \_\_\_\_\_ Number of Bedrooms: \_\_\_\_\_

Water Supply:  Proposed  Existing Type:  Deep well  Shallow well  Pond  Hauled Water Tank

Is the applicant the current property owner? Yes No

If no explain: \_\_\_\_\_

Please mark the correct box:  Existing recorded/deeded parcel – no property line changes  
 Proposed lot split – new property lines

I am applying for:

- A site review and soil evaluation at the above noted property. I have enclosed the following:
  - a. An application fee of \$125.00
  - b. A floor plan w/ rooms and plumbing fixtures labeled
  - c. A scaled diagram with all required information
- A soil evaluation only. This is being requested due to a proposed lot split. I do not know building size or location details at this time. I have enclosed an application fee of \$125.00 and the required signed lot split addendum.
- A soil evaluation only. This is being requested due to a property purchase. I do not know building size or location details at this time. I have enclosed an application fee of \$125.00.
- A site review only and in addition to a, b, and c above, I have enclosed the name and contact number of the soil evaluator who will provide completed soil forms.
- A review of a completed site review and soil evaluation and in addition to a, b, and c above, I have also enclosed the name and contact number of the soil evaluator who will provide completed soil forms.
- A site review only. My existing house and parcel are believed to be too small for a soil absorption system and I plan to install a discharging system with a NPDES permit. I have enclosed items listed in a, b, and c above. I understand that two permits are required; one to install the system (Health Dept.) and one to permit the system to discharge (OEPA).

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature of property owner (or agent) authorizing and requesting a site review and/or soil evaluation to be conducted on the above-noted property.

This is not the permit application. Before the sewage treatment system installation permit can be issued, you must submit the completed permit application and **\$290.00** permit application fee.

Once this form is completed and submitted with appropriate fee, floor plan and scaled drawing to the Health Department, the person who will be excavating the test holes may contact us for an appointment at (419) 337-0915.