



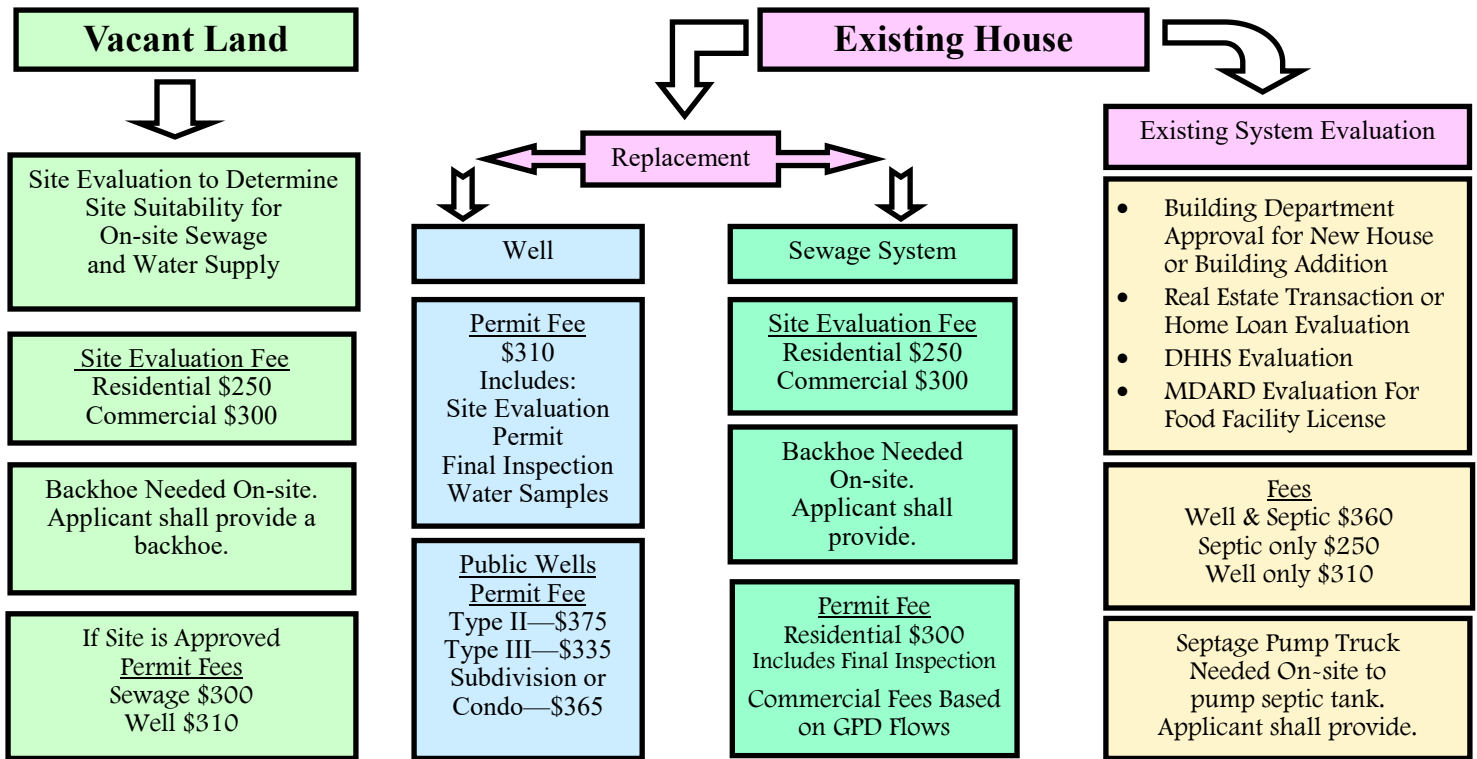
Environmental Health Request For Service Form Information

Key Information

- Only complete applications will be accepted.
- Fees must be paid before appointments are made
- Submit copy of property survey (if available).
- Appointments are scheduled a minimum of two weeks from date application is received.
- Do not clear trees or bulldoze the site prior to the site evaluation.
- Site evaluations are valid for one (1) year.
- Once issued, permits are valid for two (2) years.
- Site evaluation reports are processed within ten (10) business days after the site visit.

Applicant Responsibilities

- Contact MISS DIG to flag site for underground utilities prior to appointment. (72 hour notice) MISS DIG System, Inc. 1-800-482-7171
- Mark property lines or property corner markers.
- The applicant or representative shall be on-site during the appointment.
- Provide a backhoe (sewage system site evaluation).
- Provide a septage hauler on-site to pump septic tank during existing sewage system evaluations.
- Applicant is responsible for all fees associated with hiring a backhoe and septage hauler.



WUPHD 2023 Fee Schedule for Sewage & Water Supply Programs:	WUPHD Fees
Sewage System Site Evaluation (residential)	\$250
Sewage System Site Evaluation (commercial)	\$300
Sewage System Conventional Construction Permit	\$300
Well Construction Permit - Residential Well (includes site evaluation for well)	\$310
Well Hydraulic Fracture Permit	\$125
Existing Sewage System Inspection	\$250
Existing Well System Inspection (includes water samples)	\$310
Existing Sewage and Water Supply System Inspection (includes water samples)	\$360
Sewage System Site Evaluation—Revisit for an Expired Site Evaluation	\$150
Septic Tank Only, Privy Permit, Composting Toilet Permit	\$150
Less than 24 hour notice of cancellation for confirmed appointments (applies to all services)	\$100

Environmental Health Division Information for the Site Evaluation Process

Sewage System (New or Replacement)

- The applicant provides a backhoe at the property.
- Sanitarian uses the “Site Plan Layout” drawing you provide to determine if the site meets the requirements of the Code.
- The Sanitarian will ask the backhoe operator to dig two or more holes to a depth of six feet on either end of the proposed absorption system area.
- Sanitarian will evaluate soil type, texture, permeability, depth to limiting factors such as water table, bedrock, or soil with too fast or too slow permeability. A minimum amount (12-24 inches) of suitable natural soil is required to meet the minimum requirements of the Code.
- Sanitarian will determine the depth or above grade elevation of the sewage system necessary to treat wastewater and to prevent groundwater contamination. A 48 inch isolation to limiting factor is required.
- The Sanitarian will evaluate the slope and drainage patterns on the site to determine suitability.
- The Sanitarian will take measurements to surface water (wetlands, lakes, river/streams), property lines, water wells, and buildings to determine if minimum isolation distances in the Code can be met and if there is adequate space for an absorption field (initial and replacement) sized for the number of bedrooms in the proposed home.
- If your preferred sewage system location does not meet the Code requirements; you, your contractor, and the Sanitarian can discuss and evaluate alternate locations on the property if time allows.

Water Supply (New or Replacement)

- Sanitarian uses the “Site Plan Layout” drawing you provide to determine if the site meets the requirements of the Code.
- The Sanitarian will take measurements to potential sources of contamination (septic tanks, absorption systems, surface water, sewage ejector pits, fuel tanks, privies, known ground water contamination sites) and other items on the property such as abandoned wells, property lines, and buildings to determine if minimum isolation distances in the Code can be met and if there is adequate space to install a well.
- The Sanitarian will evaluate the parcel for a potential hydraulic fracture if the area is known for low water yield
- The Sanitarian will determine if special well construction requirements are required.
- The Sanitarian will evaluate the existing well (if applicable) to determine if it shall be plugged by the licensed well driller. Abandoned wells that are in disrepair, do not meet Code construction or minimum isolation distances are a threat to ground water and are required by State Law to be properly plugged.

Existing Sewage System Inspection

- The applicant provides licensed septage hauler (septic pumper) to be present at the time of the inspection.
- The fixtures shall be turned on inside of the house to run water through the system.
- The sanitarian will observe the operating level of the tank prior to the tank being pumped.
- The septic tank will then be pumped out by a septage hauler. The septage hauler will provide information to determine the size, water tight-ness of the tank, and condition of the baffles.
- The existing sewage absorption system will be evaluated to determine location, size, depth to limiting factors such as water table, and any evidence of failure.
- Measurements will be taken to surface water, property lines, water wells, and buildings to determine if minimum isolation distances in the Code are met.
- The Sanitarian will provide a report to the applicant indicating whether or not continued use or increased use of the existing sewage system can be approved.
- A correction order will be issued if substantial deficiencies are observed.

Existing Water Supply Inspection

- The water well head, well cap, distribution system, and pressure tank will be inspected for compliance with code.
- Measurements will be taken to sources of contamination to determine if adequate isolation is provided.
- The well pump will be ran for approximately 10-15 minutes to flush the water distribution system.
- Water samples will be collected and sent to a laboratory for analysis for coliform bacteria, chemistry, and uranium.
 - ◊ Water sample results can take up to two weeks to be analyzed at the laboratory.
- Upon receipt of water sample results, the sanitarian will interpret the result and provide drinking water advisories and treatment recommendations if necessary.
- The sanitarian will provide a report to the applicant indicating whether or not continued use or increased use of the existing water supply can be approved.
- A correction order will be issued if the water is unsafe for drinking or substantial construction deficiencies are observed.



Western Upper Peninsula Health Department

Main Office | 540 Depot Street | Hancock, MI 49930 | 906.482.7382

303 Baraga Avenue L'Anse, MI 49946 906.524.6142

210 N. Moore Street Bessemer, MI 49911 906.667.0200

408 Copper Street Ontonagon, MI 49953 906.884.4485

Health Department Use Only

- Site Evaluation: \$ _____ Case #: _____
- Sewage System Permit: \$ _____ New Replacement Tank Only Privy
- Well Construction Permit: \$ _____ New Replacement Hydraulic Fracture
- Existing System Inspection: \$ _____ Sewage System Water Supply Both

On-Site Sewage Program & Water Supply Program Request for Service

Reason for Site Evaluation:

- Building Department Approval
- Obtain Well/Septic Construction Permits
- Real Estate Transaction/Home Loan Evaluation
- DHHS Evaluation for Facility License
- MDARD Evaluation For Food Facility License

Site Evaluation For:

- Vacant Land (New Sewage System & Water Supply)
- Replace Existing Septic Replace Existing Well
- Evaluate Existing Septic Evaluate Existing Well
- Residential: Current # Bedrooms _____ Proposed # Bedrooms _____
- Commercial: Sewage Flow from Facility (current) _____ GPD
Proposed Flow from Facility _____ GPD

Applicant Information: Owner Contractor Buyer Real Estate Agent

Name: _____

Mailing Address: _____ City, State & Zip _____

Home Phone: _____ Cell/Work: _____ Email: _____

Property Owner Information (if different than applicant)

Name: _____

Mailing Address: _____ City, State & Zip _____

Home Phone: _____ Cell/Work: _____ Email: _____

Property Information (For which this service request is intended)

Property Tax ID Number (Required): _____ Property Previously Evaluated Yes No

Property Address: _____ City: _____ Zip: _____

County: _____ Township: _____ Section: _____ T _____ N R _____ W

Acres: _____ If less than one acre date split: _____ Lot Length (feet): _____ Lot Width (feet): _____

GPS Location of Proposed Septic System: Latitude _____ Longitude _____

Subdivision / Site Condo Name: _____ Assessor's Plat Name: _____ Lot # _____

Previous Property Owners Names: _____

Property Owner Authorization for a Representative to Sign for Permits / Applicant Signature

I authorize _____ to act as my representative who may sign for my well and/or septic permit application(s) for my property located at the address listed above. In doing so, I agree to install the system in accordance with the Superior Environmental Health Code, applicable State laws, and the specified requirements on the permit.

I certify that the information provided is accurate. I hereby authorize Western UP Health Department to access the above described property and involved or affected structures to determine its suitability for development plans indicated, to conduct such tests as may be necessary to obtain information required for this evaluation, and to conduct inspections of permitted lands and facilities. I agree to comply with the requirements of the Superior Environmental Health Code regulations and applicable laws of the State of Michigan.

Applicant Signature

Complete Back Side of Request Form

Date

