

Miami County Health Department Environmental Division

25 Court Street, Suite 211 Peru, Indiana 46970 765-473-0283 - Fax 765-473-0285

Septic Plan Review Submittal Form *for replacement system*

Legal property owner name: _____

Current Mailing address: _____ Current Phone: _____

Location of property: _____

Acres: _____ [# bedrooms: _____] Parcel #: 52- _____ # dwellings on property _____

- ★ Submit drawing showing North; Tank; D box; Trenches; Slope direction; Drain and drain outlet; Well 50' radius; Streams & ponds; All structures; Roads (if applicable) and drives; dispersal area & any other pertinent information.
- ★ Dwelling floor plans must be submitted with this form. Any bedroom discrepancy must be recorded in courthouse.
- ★ Indicate stone under pipe; over pipe and amount of earth over stone on stone and gravel systems.

INSTALLER PLANS: OK

Separations: Well residential _____ >50' commercial _____ > 100' 15 units/25 persons _____ > 200'

Other: Stream >25' Pond > 50' All Structures >10' D-box _____ > 5' property line >5'

OK

Septic tank: 750 1000 1250 1500 other: _____ composition: Concrete Polyethylene

Outlet Filter Co.: _____ Riser to grade Y N D box Concrete Polyethylene

OK

System: Type: Limestone Gravel 10" Round Infiltrator Biodifuser Hancor Drip Other

System over borings: _____ Soil Loading Rate: _____ Limiting layer: _____ " N/A

Site Slope: _____ % Distance between tank and D Box: _____ ft D box sealant: _____

Chamber Model: _____ N/A @ 100% 75% Trench width (18" (24" (36"

Ft² field: _____ Lineal Ft: _____ # trenches: _____ trench length: _____ ' trench depth: _____ " to _____ "

trench separation: 7 1/2' other: _____ ' SDR >26 ASTM # D 2665 F 891 D2661 D 2680

SDR < 26 ASTM # D 2241 D 3034 D 2751 Joints glued Gasketed Mechanical End caps

OK

Dosed N/A Elevation: _____ " Pump size: _____ gpm TDH _____ GPM _____ Pipe dia: _____ " Pipe length: _____ ft

90s _____ # 45s _____ # Ts _____ # valves _____ # couplings _____ Dose tank: [N/A] [750] [1000] [1250] [1500

OK

Perimeter drain: N/A Seasonal high water table: _____ Interceptor Perimeter Segmented Depth: _____

Outlet distance _____ ' N S E W from field to Tile Daylight varmint guard

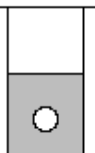
Diversion Y N dispersal area _____ ft. up slope down slope

Is system leach field individual runs, tank & d-box marked @ site? Y N

Special comments: _____

INSTALLER COMPANY: _____

INSTALLER SIGNATURE: _____



Required house plans Y N

Easement Y N NA

Stone Y N

Drawing Y N

OK

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Septic Plan Review Submittal Form *for existing system*

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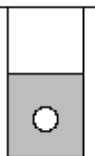
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Stone Y N

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OK