

REPLACEMENT SEWAGE TANK APPLICATION

h Environmental Health <u>www.wicomicohealth.org</u> Phone: 410-546-4446

Application fee: \$150.00 Cash Credit/Debit Check #	:: Receipt #:
Date:	Property ID:
Owner (s):	
Location of property:	
Mailing address (if different):	
Phone: Email address:	
Installer:	Subdivision:
Tax Map: Parcel: Section:	Block: Lot:
Use of property if not primary residence:	
Reason for replacement/repair:	
Has the existing system been inspected as part of a real estate transfer? Yes No If yes, please provide a copy.	
Date of most recent pumping/repair: # of bedr	rooms: # of people:
Do you have a water treatment system? \Box Yes \Box No *Lo	ocation of discharge:

The Wicomico County Health Department has my permission to enter onto this property to perform such tests as necessary in order to adequately site and size this proposed replacement septic system. I understand this process may require me to locate my own well, other wells on neighboring properties, and my property boundary lines. Non residential uses will require an engineer or qualified consultant to submit a proposed system design. Septic contractors must be licensed in Wicomico County. At-grade mounds and sand mounds require additional certifications from the Maryland Department of the Environment.

Do you wish to be contacted prior to the site visit? \Box Yes \Box No

No refunds will be granted once field work has begun or after 30 days from application date. There will be a \$50.00 fee on all NSF checks.

Owner signature

^{*}The Wicomico County Health Department recommends that all water conditioner backwash be disposed of in a separate drainage system that does not interfere with the septic system. Please keep in mind that this additional drainage system must be located 100' from all wells.



Replacement Sewage System Application Checklist

Provide a scaled site plan with measurements

- Location of house, outbuildings, and any other external structures
- □ Location of wells on property and all wells within 100 feet of property line
- □ Location of current septic tank and drainfield
- Does the yard contain an irrigation system? (Yes/No)
- Provide a copy of a septic system inspection, if one was completed
- Provide the name of the licensed system installer, if one has been selected
- □ For the initial evaluation, will a backhoe or excavator be used

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