



Summit County Public Health

1867 West Market Street ♦ Akron, Ohio 44313-6901
Phone: (330) 926-5600 ♦ Toll-free: 1 (877) 687-0002 ♦ Fax: (330) 923-6436
www.scphoh.org

Sewage Treatment System (STS) As Built Checklist:

Property Address: _____ Parcel #: _____

- 1. Labeled with address and parcel ID
- 2. Drawn to scale, using a scale of 1" = 50' or less
- 3. North arrow is shown
- 4. The shape of the lot is drawn and the lot dimensions are provided
- 5. Contour lines are drawn in two foot or appropriately identified increments using GIS or as assigned during site evaluation
- 6. The house and all other permanent structures, (garages, pole barns, etc.) are shown
- 7. A description of the house (how many bedrooms) and the minimum daily design flow is provided
- 8. All wells, cisterns, and/or drinking water sources are identified
- 9. All required isolation distances within 50 feet of all STS components are shown
- 10. Location of any buried utilities or easements is shown, if applicable
- 11. Location of all STS components to be abandoned are shown, if applicable
- 12. Location of existing drainage (tile, creek, road ditch, etc.) and direction of flow is shown, if applicable
- 13. Location of all ponds, wetlands, and riparian zones are shown
- 14. Location and dimensions (length, width, and height, if applicable) of the STS area are shown
- 15. System devices and materials, including tanks, dosing tanks, distribution piping, diversion mechanisms, and distribution materials are identified
- 16. Benchmark location and elevations of all pipe inverts and septic components are identified
- 17. Approximate locations of test holes or soil borings are shown (not required for NPDES)
- 18. All applicable calculations used to determine STS size and type are provided
- 19. Pump sizing and selection are provided, if applicable
- 20. Pressure distribution network calculations are provided, if applicable
- 21. Discharge point is identified and labeled (ex. discharge to covered road ditch), if applicable
- 22. Approved system manufacturer and model used is identified, if applicable
- 23. The construction and installation notes are provided if system varied from design plan
- 24. A statement is included that owner will be provided copies or electronic access to O&M requirements, manuals, and instructions for service provider
- 25. A signature of the person preparing the plan and the date it was prepared is provided
- 26. As-built details page was completed and submitted

Comments:

As-Built Reviewed by: _____ Date Reviewed: _____

Approved

Disapproved