

Southwestern District Health Unit

528 21st St. West, Dickinson, North Dakota 58601

Telephone: (701) 483-0171 Toll Free: 1-866-483-3050 Fax: (701) 483-4097

APPLICATION FOR SEWAGE & WATER FACILITIES

Type of Facility:

- ☐ Residential Home / Cabin (# of bedrooms _____) ☐ Residential Garage / Shop ☐ Man Camp
☐ Commercial / Industrial Shop ☐ RV / Trailer Park ☐ Office Building ☐ Other _____

Minimum lot size for an onsite sewer system is 40,000 square feet (About 1 Acre).

If the system will be used by 25 or more people on a daily basis, have greater than 14 service connections, or for RV parks, have greater than 12 RV hook-ups, the plans will have to be approved by the ND Department of Environmental Quality.

General Information:

Owner: _____ Mail or Rural Address: _____ City: _____

Legal Description: _____ County: _____ Lot #: _____ Block: _____

Subdivision: _____ Lot #: _____ Block #: _____

Sewer System Type: Septic Tank / Drainfield ☐ Holding Tank ☐

Septic Tank: (1000 gallon **working capacity** minimum.) Size: _____ gallons Number of Tanks: _____

Material: Concrete Poly (Circle One)

Distance from: Foundation: _____ ft. Lake / Stream / High Water Level _____ ft. (100 ft. minimum)

Well: _____ ft. (50 ft. minimum for wells 100 ft. deep, or deeper if well is under 100 ft. deep, 100 ft. distance or greater is required)

Soil Type: _____

Lift Pump Used: YES ☐ NO ☐ Diameter of Chamber: _____ Inches Location: Basement By Septic Tank (Circle One)

Drainfield Information: Type: Gravel-less ☐ Rock/Perforated Tile ☐

Distance From: Septic Tank: _____ ft. (10 ft. minimum) Stream/Lake/Drainage _____ ft. (100 ft. minimum)

Property Line: _____ ft. (10 ft. minimum)

Length of Drainfield Tile: _____ ft. (200 ft. minimum for gravel-less) Trench Width: _____ Inches.

Width of Drainage Pipe/Chamber: _____ Inches

Depth of Pipe (top of pipe/chamber to surface) _____ in. (30 to 36 inches maximum- total depth should not exceed 48")

Total Amount of Absorption Area in Square Feet (length X width) _____ sq. ft.

Depth of Rock under Perforated Pipe (Gravel Systems): _____ Inches

Size of Rock: _____ Inches (washed gravel or crushed stone- **No scoria allowed**)

Well Information: Type: Drilled ☐ Dug ☐ Bored ☐ Community System ☐

Depth: _____ Diameter: _____

Distance from: Sewer: _____ ft. (50 ft. minimum for wells 100 ft. deep or deeper, if well is under 100 ft. deep 100 ft. distance or greater is required.) Foundation: _____ Property Line: _____ Buried Tanks: _____

Body of Water: _____

Please complete the information on the next page.



Draw a diagram of the proposed or existing sewer and water system. Please make the drawing as accurate as possible. Must include the locations of the building, well, septic tank, lift pump, drainfield, and any sources of contamination. *Please note some of the minimum & maximum distances on the front of the application. Be aware of topographical features. Sewer systems should not be installed in low-lying areas subject to flooding or areas subject to heavy water runoff. In areas of heavy soils or high water tables, the size of the drain field may need to be increased beyond that indicated on these plans.

NORTH ↑

**** Area over the drainfield should have topsoil, seeded into grass and not be driven on to avoid compaction****

I hereby submit the above information to be correct as to present or proposed installation:

Signature: _____ Installer: _____

Name: _____ Address: _____

Town: _____ Zip: _____ Phone #: _____

Send Approval Form To: Name: _____

Address: _____

City, State, Zip: _____

The proposed sewer and/or water system plans are hereby approved and subject to an onsite inspection before covering. This is only a plan approval; an onsite installation inspection is required for final approval. The Southwestern District Health Unit accepts no responsibility for systems that are installed improperly or not inspected at the time of installation.

(Date of Application)

(EHP signature for pre-approval)
(Inspection may be required)