



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
SITE EVALUATION AND SYSTEM SPECIFICATIONS

PERMIT #. _____

APPLICANT: _____ AGENT: _____

LOT: _____ BLOCK: _____ SUBDIVISION: _____

PROPERTY ID #: _____ [Section/Township/Parcel No. or Tax ID Number]

TO BE COMPLETED BY ENGINEER, HEALTH DEPARTMENT EMPLOYEE, OR OTHER QUALIFIED PERSON. ENGINEERS
MUST PROVIDE REGISTRATION NUMBER AND SIGN AND SEAL EACH PAGE OF SUBMITTAL. COMPLETE ALL ITEMS.

PROPERTY SIZE CONFORMS TO SITE PLAN: ☐ YES ☐ NO NET USABLE AREA AVAILABLE: _____ ACRES

TOTAL ESTIMATED SEWAGE FLOW: _____ GALLONS PER DAY [RESIDENCES-TABLE 1/OTHER-TABLE2]

AUTHORIZED SEWAGE FLOW: _____ GALLONS PER DAY [1500 GPD/ACRE OR 2500 GPD/ACRE]

UNOBSTRUCTED AREA AVAILABLE: _____ SQFT UNOBSTRUCTED AREA REQUIRED: _____ SQFT

BENCHMARK/REFERENCE POINT LOCATION: _____

ELEVATION OF PROPOSED SYSTEM SITE IS _____ [INCHES/FT] [ABOVE/BELOW] BENCHMARK/REFERENCE POINT

THE MINIMUM SETBACK WHICH CAN BE MAINTAINED FROM THE PROPOSED SYSTEM TO THE FOLLOWING FEATURES

SURFACE WATER: _____ FT DITCHES/SWALES: _____ FT NORMALLY WET? ☐ YES ☐ NO

WELLS: PUBLIC: _____ FT LIMITED USE: _____ FT PRIVATE: _____ FT NON-POTABLE: _____ FT

BUILDING FOUNDATIONS: _____ FT PROPERTY LINES: _____ FT POTABLE WATER LINES: _____ FT

SITE SUBJECT TO FREQUENT FLOODING: ☐ YES ☐ NO 10 YEAR FLOODING? ☐ YES ☐ NO

10 YEAR FLOOD ELEVATION FOR SITE: _____ FT MSL/NGVD SITE ELEVATION: _____ FT MSL/NGVD

SOIL PROFILE INFORMATION SITE 1

MUNSELL #/COLOR	TEXTURE	DEPTH
_____	_____	TO
_____	_____	TO
_____	_____	TO
_____	_____	TO
_____	_____	TO
_____	_____	TO
_____	_____	TO
_____	_____	TO
_____	_____	TO
USDA SOIL SERIES: _____		

SOIL PROFILE INFORMATION SITE 2

MUNSELL #/COLOR	TEXTURE	DEPTH
_____	_____	TO
_____	_____	TO
_____	_____	TO
_____	_____	TO
_____	_____	TO
_____	_____	TO
_____	_____	TO
_____	_____	TO
_____	_____	TO
USDA SOIL SERIES: _____		

OBSERVED WATER TABLE: _____ INCHES [ABOVE / BELOW] EXISTING GRADE. TYPE: [PERCHED / APPARENT]

ESTIMATED WET SEASON WATER TABLE ELEVATION: _____ INCHES [ABOVE / BELOW] EXISTING GRADE

HIGH WATER TABLE VEGETATION: ☐ YES ☐ NO MOTTLING: ☐ YES ☐ NO DEPTH: _____ INCHES

SOIL TEXTURE/LOADING RATE FOR SYSTEM SIZING: _____ DEPTH OF EXCAVATION: _____ INCHES

DRAINFIELD CONFIGURATION: ☐ TRENCH ☐ BED ☐ OTHER (SPECIFY) _____

REMARKS/ADDITIONAL CRITERIA: _____

SITE EVALUATED BY: _____ DATE: _____

INSTRUCTIONS:

PERMIT #:

Permit tracking number assigned by County Health Department.

APPLICANT:

Property owner's full name.

AGENT:

Property owner's legally authorized representative.

LOT, BLOCK,SUBDIVISION:

Lot, block, and subdivision for lot.

PROPERTY ID#:

27 character number for property (property appraiser ID # or section/township/range/parcel number).

PROPERTY SIZE:

Check if property size at site conforms to submitted site plan. Record net usable area available - lot area exclusive of all paved areas and prepared road beds within public rights-of-way or easements and exclusive of streams, lakes, normally wet drainage ditches, marshes, or other such bodies of water.

SEWAGE FLOW:

Record the estimated sewage flow for the establishment from Table 1 (residential) or Table 2 (non-residential), Chapter 64E-6, FAC. Record the authorized sewage flow for the lot based on net usable area and water supply (1500 gallons per day per acre for private water supplies and 2500 gallons per day per acre for public water supplies). If authorized sewage flow does not equal or exceed the estimated sewage flow, the application must be denied.

UNOBSTRUCTED AREA:

Record the square feet of unobstructed area available and the amount required. Unobstructed area must be at least 2 times as large as the drainfield absorption area and at least 75 percent of the unobstructed area must meet minimum setbacks in Chapter 64E-6, FAC. The unobstructed area must be contiguous to the drainfield.

BENCHMARK INFORMATION:

Record the location of the benchmark. If using a surveyor's benchmark record the actual elevation. Record the elevation of the proposed system site in relation (above or below) to the benchmark.

MINIMUM SETBACKS:

Record minimum setbacks which can be met to all listed features. Actual measurements must be recorded or "NA" for non applicable features. Features on site plan or within 75 feet of the applicant lot must be measured. The location of any public drinking well within 200 feet of the applicant's lot must also be verified.

FLOOD INFORMATION:

Record information on lot's subject to flooding. For lots subject to flooding record 10 year flood elevation for site and actual site elevation.

SOIL PROFILE INFORMATION:

Two soil profiles within the proposed absorption area to a minimum depth of 6 feet or refusal are required. Soil identification will use USDA Soil Classification methodology (Munsell colors and USDA soil textures). Refusals must be clearly documented. Provide USDA soil series if available, record "UNK" if the series cannot be determined.

WATER TABLE:

Record the depth of the observed water table at the time of the evaluation. Mark "perched" or "apparent" as appropriate. Record the estimated wet season water table elevation based on site evaluation, USDA soil maps, and historical information. Indicate if there is high water table vegetation present. Indicate if mottling is present and depth.

SOIL TEXTURE:

Record soil texture or loading rate for system sizing.

DEPTH OF EXCAVATION:

If applicable record depth of excavation required. Record "NA" if not applicable.

DRAINFIELD CONFIGURATION:

Check drainfield configuration required. If other, specify type.

ADDITIONAL CRITERIA:

Record any additional remarks pertinent to site or installation. Ex. Dosing required.

SITE EVALUATED BY:

Signature of evaluator, title, and date of evaluation. Professional engineers must seal all documentation submitted.

ELEVATION WORKSHEET		ELEVATION OF BENCHMARK / REFERENCE POINT IS: _____					
BENCHMARK	_____	SITE 1		SITE 2		SITE 3	
[+] SHOT	_____	H.I.	_____	H.I.	_____	H.I.	_____
H.I.	_____	[-] SHOT	_____	[-] SHOT	_____	[-] SHOT	_____
	_____		_____		_____		_____