



**COUNTY OF LAKE**  
**Health Services Department**  
**Environmental Health Division**  
 922 Bevins Court  
 Lakeport, California 95453-9739  
 Telephone 707/263-1164  
 FAX 707/263-1681



**COUNTY OF LAKE**  
**HEALTH SERVICES**  
 prevent.promote.protect.

**LAND USE APPLICATION**  
*(Incomplete applications will not be processed)*

<b>OWNER NAME</b>		<b>APPLICANT NAME</b>	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP		CITY / STATE / ZIP	
CELL / BUSINESS #		CELL / BUSINESS #	
EMAIL		EMAIL	
<b>CONTRACTOR NAME</b>		<b>CONTRACTOR LICENSE # / TYPE</b>	
MAILING ADDRESS		<b>CONTRACTOR CELL / BUSINESS #</b>	
CITY / STATE / ZIP		<b>CONTRACTOR EMAIL</b>	

<b>JOB LOCATION</b>	<b>SITE ADDRESS</b>		<b>CITY</b>	
	<b>NEAREST CROSS STREET</b>		<b>APN</b>	
<b>PROPOSED USE</b>	<b>SINGLE FAMILY RESIDENCE?</b>	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<b>NUMBER OF BEDROOMS:</b>
	<b>COMMERCIAL FACILITY?</b>	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<b>TYPE:</b>
<b>WATER SUPPLY</b>	<b>PUBLIC WATER SUPPLY NAME</b>			
	<b>PRIVATE SUPPLY SOURCE</b>			

By my signature, I certify that I am the owner or authorized representative and that the information I have furnished is correct, and hereby grant Lake County and its authorized agent permission to enter into the above described property for the purpose of this application.

- Applicant
- Auth Rep
- Contractor

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY**

Date Rcvd:	Fees Pd:	Payment Method: <input type="checkbox"/> Cash <input type="checkbox"/> Check	Permit #:	ON #:
PE Code:	FA #:	Receipt #:	Invoice #:	Staff:

**Application Type and Fee(s)**  
**(Applicant and EH Staff must sign Application Acknowledgement)**

<b>PE</b>	<b>Permits for new systems</b>	<b>Fee</b>	<b>CDD</b>
1112	<input type="checkbox"/> Standard or Alternative OWTS (=2500 gal/day)	\$642	\$98.45
1117	<input type="checkbox"/> Standard or Alternative OWTS (>2500 gal/day)	\$1245	\$98.45
1140	<input type="checkbox"/> Alternative Seepage Trench OWTS (<2500 gal/day)	\$642	\$98.45
1124	<input type="checkbox"/> Alternative Capping Fill OWTS (<2500 gal/day)	\$748	\$98.45
1113	<input type="checkbox"/> Alternative Supplemental (aerobic) Treatment OWTS with Subsurface Drip Disposal (<2500 gal/day)	\$787	\$98.45
1139	<input type="checkbox"/> Alternative Pressurized Distribution OWTS (<2500 gal/day)	\$684	\$98.45
1143	<input type="checkbox"/> Alternative Redundant OWTS(<2500 gal/day)	\$752	\$98.45
1122	<input type="checkbox"/> Sand Filter or Experimental Systems (first 8 hrs)	\$1,203	\$98.45
<b>PE</b>	<b>Permits for repairs</b>	<b>Fee</b>	<b>Fee</b>
1142	<input type="checkbox"/> Major Alteration (w/o SE)	\$446	N/A
1118	<input type="checkbox"/> Major Alteration (w/SE) relocating leach field	\$488	N/A
1120	<input type="checkbox"/> Major Repair (w/SE) moving leach field	\$366	N/A
1119	<input type="checkbox"/> Minor Alteration Repair	\$273	N/A
1121	<input type="checkbox"/> Minor Repair	\$162	N/A
<b>PE</b>	<b>Miscellaneous</b>	<b>Fee</b>	<b>Fee</b>
1135	<input type="checkbox"/> Land Clearance / Plan Sign off	\$135	N/A
1103	<input type="checkbox"/> OWTS Tank Abandonment	\$137	N/A
1115	<input type="checkbox"/> OWTS Permit Renewal (excludes expired/abandoned permits)	\$85	N/A
1130	<input type="checkbox"/> Annual Operating permit for OWTS Holding Tank (with approved Variance)	\$237	N/A
	<input type="checkbox"/> Planning Fee (collected for Community Development Department – CDD)		\$98.45
<b>PE</b>	<b>Inspections</b>	<b>Fee</b>	<b>Fee</b>
1111	<input type="checkbox"/> Site Evaluation (includes evaluation of two test pits)	\$431	N/A
1138	<input type="checkbox"/> Each Additional Test pit (Site Eval)	\$137	N/A
1126	<input type="checkbox"/> Field Authorization (valid for one year from date of issuance)	\$203	N/A
1127	<input type="checkbox"/> Field Clearance (two hour minimum)	\$135	N/A
1125	<input type="checkbox"/> Annual Inspection (experimental or other required systems)	\$184	N/A
1114	<input type="checkbox"/> OWTS Re-inspection	\$137	N/A
<b>PE</b>	<b>Work</b>	<b>Fee</b>	<b>Fee</b>
1010	<input type="checkbox"/> Hourly Rate	\$135	N/A
1132	<input type="checkbox"/> System Evaluation Sewage Disposal and Water (lab fees additional)	\$263	N/A
1131	<input type="checkbox"/> System Evaluation Sewage Disposal or Water (lab fees additional)	\$198	N/A
1141	<input type="checkbox"/> Tile de-watering system inspection (applies to any OWTS permit and includes two inspections)	\$307	N/A
1128	<input type="checkbox"/> Variance (2 hr minimum)	\$310	N/A

**I understand that I will receive an invoice for any additional time spent (at the current hourly rate) which exceeds the paid fee; permits are valid for one year only; unissued permits are considered abandoned and will be denied without prejudice one year after application.**

**I have been provided a copy of both the Site Preparation Guidelines and the Environmental Health Refund Policy and both have been explained to me.**

\_\_\_\_\_ **Initial**

## Site Preparation Guidelines

### Plans submitted for review:

- 3 Plot/Site maps drawn to scale
- Well (or adjacent wells) are shown
- All structures are shown
- Property lines are indicated
- Required setback measurements are indicated
- Septic tank indicated (with setbacks)
- Septic system leach field and expansion areas are indicated
- Leach lines have the correct linear feet for proposed system
- If the parcel is sloped, the slope direction is indicated
- Leach lines conform to contour
- Detailed site plan includes location of all buildings, roads, driveways, property lines, easements, springs, wells, lakes, ponds, rivers, streams, drainage areas and other physical features; and also demonstrates the location of the septic tank, distribution box or drop boxes and leach lines.
- Plot plan consider: foundations, cut driveways, basements, retaining walls or garages

### Prepare site for inspection:

- Uncover the septic tank lids (do not remove the lids)
- Uncover the distribution box or drop boxes
- Stake the ends of the leach lines

### Site will be prepared for site evaluation – If these instructions have not been completed prior to our appointment time, a new appointment time and fee will be required.

- Two holes: 5' deep, 4' long and 2' wide
- Four corners of the property must be marked clearly with stakes and flagging material
- Lot needs to be marked with street address at the roadside
- If the property is heavily brushed or overgrown with thistle, a path must be cleared to both holes. Also, clear enough of the property in order to read the slope of the land.
- Roots blocking access to the holes must be removed so as to provide easy access.
- If there is poison oak in the area of the profile holes or along the path of a heavily brushed lot, it must be cleared prior to our inspection.

**By my signature on the application, I certify that I understand what I am applying for and how I must prepare the subject site for inspection and that if I fail to properly prepare the site, a new inspection and fees will be required.**



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Jonathan Portney  
Health Services Director

Jennifer Baker  
Deputy Health Services Director

Craig Wetherbee  
Environmental Health Director

# NOTICE

## EFFECTIVE DATE 7/9/2020

### Environmental Health Land Program Refund Policy

- 1. Refund requests must be submitted in writing, using form RF-001.**
- 2. Refund requests are subject to 10% retention of the permit or service fee.**
- 3. Refund requests are subject to 50% retention of the permit or service fee if an inspection has been performed.**
- 4. Permits can be renewed BEFORE the expiration date and will be extended for another year (expiring two years from original date of issuance).**
- 5. Expired permits are non-refundable.**
- 6. Applications / unissued permits expire after one year.**

**Any customer requesting a refund must complete the Refund Request Form (Form RF-001).**

By my signature on the application, I certify that I have received a copy of the Environmental Health Refund Policy and I understand the circumstances of refunds.