

SUPPLEMENTAL APPLICATION

# ON-SITE SEWAGE SYSTEM

STAFF USE ONLY

**PLEASE NOTE: ALL APPLICATIONS AND SITE PLANS MUST BE COMPLETED IN BLACK OR BLUE INK ONLY**

**This application cannot be submitted alone. In addition to this form, a complete application includes:**

- ☐ Master Application
- ☐ \*For on-site sewage system projects within an urban growth area or city jurisdiction, this application must be taken to the city for review and comment prior to submittal.
- ☐ For new on-site sewage systems requiring a design: Five (5) site plans and three (3) on-site sewage system designs.
- ☐ For replacement of existing on-site sewage systems requiring a design: Three (3) on-site sewage system designs.
- ☐ For submittals not requiring a design (i.e. septic tank or pump chamber placement): Three (3) site plans.
- ☐ Applicable processing fees (refer to current fee schedules; additional fees may apply if base hours/fees at intake are exhausted).

**PERMIT TYPE:** ☐ On-Site Sewage with Residential Site Plan Review ☐ On-site Sewage System Only  
☐ Tank Only ☐ Drainfield Only ☐ Community Drainfield  
☐ Sand Filter or Mound Rebuild or Replace

**WORK TYPE:** ☐ New ☐ Repair ☐ Modification ☐ Change of Use

**PROJECT TYPE:** ☐ Residential Single Family: **Number of Bedrooms** \_\_\_\_\_  
☐ Residential Multifamily: **Number of Units** \_\_\_\_\_  
**Number of Bedrooms in Units** \_\_\_\_\_  
☐ Non-Residential Description: \_\_\_\_\_

**TAX PARCEL NUMBER:** \_\_\_\_\_ **Parcel Size (acres):** \_\_\_\_\_

**Property Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**JURISDICTION:** ☐ Thurston County  
☐ \*Urban Growth Area of \_\_\_\_\_ ☐ \*City of \_\_\_\_\_

**\*CITY JURISDICTION REVIEW AND COMMENT:** ☐ APPROVED ☐ DENIED

**Comments:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_



Community Planning and Economic Development  
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[permit@co.thurston.wa.us](mailto:permit@co.thurston.wa.us) / [www.thurstoncountybdc.com](http://www.thurstoncountybdc.com)

SEPTIC DESIGNER: \_\_\_\_\_

Company: \_\_\_\_\_

Email: \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Office Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### ADDITIONAL REQUIREMENTS & INFORMATION

#### **PROJECT SITE:**

The project site must be identified in the field by posting an identification sign visible from the access road and by flagging the property corners and the center of the driveway/road access location.

The following test pit requirements must be met:

- Test pits must be six (6) feet deep, although excavation may stop at a depth where the water table or restrictive layer is encountered;
- Test pits must be large enough and ramped for easy and safe access. The applicant is responsible for constructing and maintaining test pits in a manner so as to prevent injury to people;
- A cleared and marked path through any brush, fences or obstacles to all test pits must be provided;
- Each test pit must be numbered by a painted or flagged stake;
- Test pit construction shall be consistent with Washington State Department of Health's *Guidelines for Test Pit Construction for On-site Sewage Systems*, which can be found at <http://www.doh.wa.gov/Portals/1/Documents/Pubs/337-110.pdf>

#### **RIGHT TO APPEAL:**

Any person aggrieved by a decision, an inspection, or notice made by the Health Office shall have the right to appeal the matter as specified in Article I of the Thurston County Sanitary Code.

#### **EXPIRATION:**

On-site Sewage System applications expire one year after the date of application per Thurston County Sanitary Code, Article IV, Section 8.3.3.1. This period may be extended for a single one year period without charge, if specifically requested in writing by the applicant prior to the expiration date.

