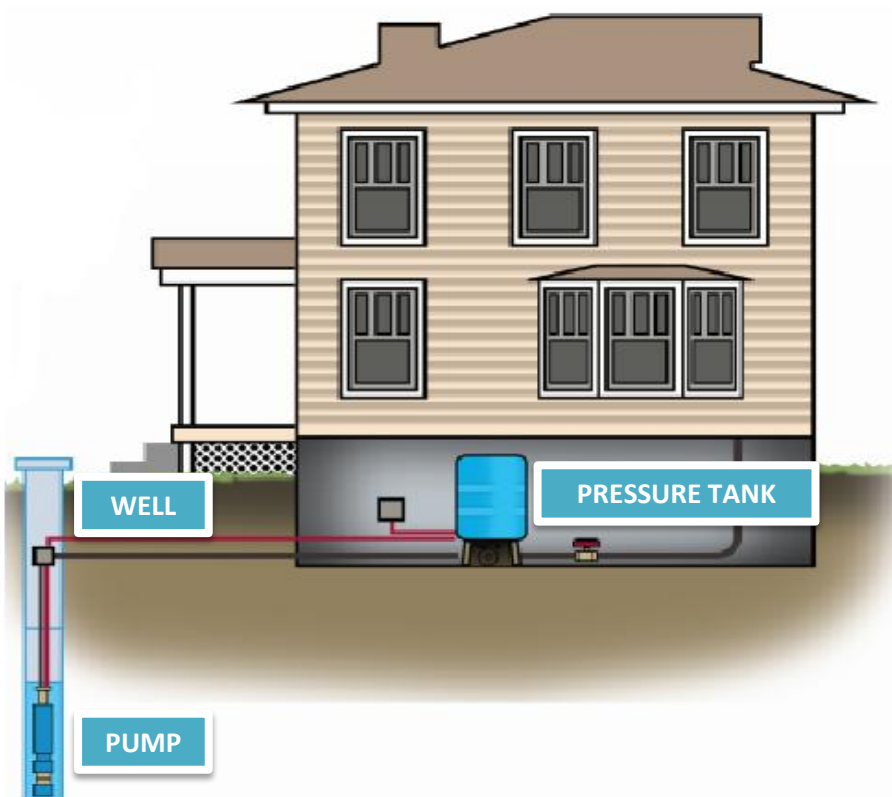


HOMEOWNERS GUIDE

PROCEDURES FOR THE PROPER APPROVAL & PERMITTING OF HOUSEHOLD WATER SUPPLY SYSTEMS



CRAWFORD COUNTY PUBLIC HEALTH

PREVENT • PROMOTE • PROTECT

PHONE
419-562-5871

1520 Isaac Beal Rd.
Bucyrus, Ohio 44820
E-mail: cchd@crawford-co.org

FAX
419-562-2048

SO YOU'RE BUILDING A NEW HOME OR NEEDING TO REPLACE YOUR EXISTING WATER SUPPLY SYSTEM

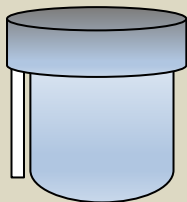
The information contained within this booklet will aid you in the proper procedures necessary to install a new or replace a failing household water supply system.

STEP 1

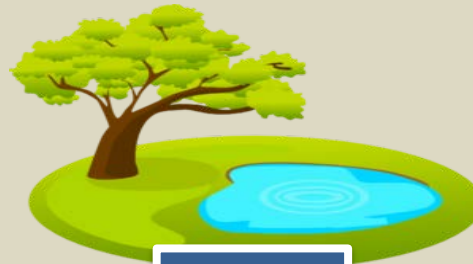
You will first need to determine the type of water system that will need to be installed on your property. Based on many factors, only specific systems may be able to be installed at your location.

It is best to contact a registered well driller to schedule a time where they can meet you at your property and assist you in determining the best water system for your property.

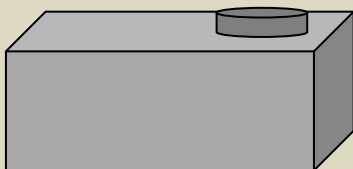
Listed below are the acceptable types of water systems that can be permitted and installed in Ohio. These systems are described in more detail on the following page:



WELLS



PONDS

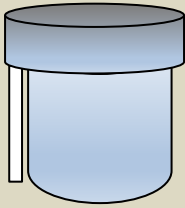


CISTERNS
OR
HAULED WATER STORAGE TANKS



SPRINGS

PRIVATE WATER SYSTEM TYPES



WELLS

A well is any excavation that is greater than 10 feet below the ground surface regardless of design or method of construction that is done for removing ground water to provide water for human consumption. Wells consist of a casing, cap, pumps and piping to protect the water supply and distribute it into a home. Wells require grout around them to prevent surface water from infiltrating and contaminating the ground water directly. Private water wells must be constructed by a contractor registered with the Ohio Department of Health.



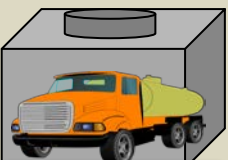
PONDS

A pond is a body of surface water for use as a private water system source. Rivers, streams, creeks, lakes, quarries and drainage ditches are bodies of water that are not acceptable for use as private water systems. The pond and its entire watershed (land up gradient from the pond that drains and directs surface water into the pond) must be under the ownership of the pond owner and located on a parcel or parcels placed under one deed. The watershed for the pond must meet several requirements which are highlighted in the Ohio Department of Health Private Water System Rules. Pond water must be under continuous disinfection and filtration, these requirements are also outlined in the ODH water rules.



CISTERNS

A cistern is a private water system utilizing rain water collected from a roof or other rain collection device as the water source. The cistern must be a watertight tank with a smooth interior of a capacity no less than 2500 gallons. The tank must have a 4 inch overflow pipe that is not connected to a sewer or other waste pipe. At least one **1** above-ground roof washer and debris filtering device must be installed for every 1500 sq. ft. of roof surface used to collect the rain water. A cistern and its components must be installed by a contractor registered with the Ohio Department of Health.



HAULED
WATER
STORAGE
TANKS

A hauled water storage tank is a private water system that stores potable water delivered from an approved water source by a registered water hauler. A hauled water storage tank must be watertight with a smooth, cleanable interior and of a capacity of at least 1000 gallons. Patios or decks can be constructed over a hauled water storage tank provided that proper access for filling and cleaning the tank is provided. A hauled water storage tank must be installed by a contractor registered with the Ohio Department of Health.



SPRINGS

A spring is a private water system in which water flows naturally from rock or soil onto the surface of the land or into a body of water or shallow aquifer that can be obtained at a depth of 10 feet or less from the surface. Water from these systems must be continuously disinfected and filtered. The system must be contained in a spring box with a construction of watertight concrete walls and a watertight cover. The owner of a spring must also own the land 50 feet downslope and 200 feet upslope of the spring. This area cannot be used for any other purposes besides the collection of water for the spring system.

INSTALLATION PERMIT

STEP 2

Once it has been determined which type of water system must be installed on your property, the next step is to obtain your installation permit. A permit can either be mailed or e-mailed to you where you can complete the permit at your convenience or you can stop into our office to complete the permit in person.

If completing the permit at home, you will need to submit the permit with the proper fee to our office to begin the issuance process.

If completing the permit in our office, you will need to provide the proper fee once you complete the permit and your permit can be issued to you on that day or mailed to you within a few days following your visit.

Please visit our website or request directly from our office a current fee schedule.

The following pages show what a Private Water System Permit Application looks like and highlights the information you will need to properly complete the permit prior to submitting the application to our office.

If you are uncertain on how to complete some of the required information, you may request your private water system contractor to complete and submit the application for you. The contractor you choose to install your system must be registered with the Ohio Department of Health to install water systems in the state of Ohio. If your contractor is not registered, they are not permitted to install a private water system and your application will be disapproved until the contractor becomes registered or you choose a properly registered contractor.

HOW TO COMPLETE THE WATER PERMIT APPLICATION

The following pages will guide you on those sections of the Private Water System Application that must be completed and how to complete these sections. If you should have any questions on completing your Private Water system application, please do not hesitate to contact our office.

County / City	Local Fee	State Fee	Total Fee Owed	Receipt #	Permit #
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OHIO DEPARTMENT OF HEALTH APPLICATION/PERMIT FOR A PRIVATE WATER SYSTEM

NOTE: Read the application instructions on the next page.

Complete form as directed. Form may be completed on the computer then printed or printed and completed by pen or typewriter.

CHECK ALL BOXES IN THIS SECTION THAT APPLY TO YOUR PERMITS REQUEST.

Type of Work:	System will Serve:	Type of PWS or Component:	System being Sealed:
<input type="checkbox"/> New Construction	<input type="checkbox"/> Single family dwelling	<input type="checkbox"/> Well	<input type="checkbox"/> Well
<input type="checkbox"/> Alteration (white expanding existing systems)	<input type="checkbox"/> Two or Three family dwelling	<input type="checkbox"/> Pond*	<input type="checkbox"/> Cistern
<input type="checkbox"/> Emergency Construction	<input type="checkbox"/> Multiple dwelling units* (includes MRPs / Campgrounds)	<input type="checkbox"/> Hauled Water Tank	<input type="checkbox"/> Hauled Water Tank
<input type="checkbox"/> Emergency Alteration	<input type="checkbox"/> Building*	<input type="checkbox"/> Continuous Disinfection	<input type="checkbox"/> Pond
<input type="checkbox"/> Sealing Only		<input type="checkbox"/> Other _____	<input type="checkbox"/> Spring
<input type="checkbox"/> Test Well			

Public Water Supply is being connected to the residence Geothermal system exists or is planned for this property

*NOTE: If the private water system will serve other than a one, two, or three family dwelling, detailed plans must also be submitted in compliance with rule 3701-28-03 (E) of the Ohio Administrative Code. See site plan addendums for ponds, springs, cisterns, multiple dwelling units, and buildings.

COMPLETE THE FOLLOWING INFORMATION:

Property Street Address or Location (include City and Zip Code)	Parcel # (optional)	Township/City/Village
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Owner's Name	Owner Mailing Address (Street #, Street, City, State, Zip Code)	Phone #
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Applicant's Name	Applicant Mailing Address (Street #, Street, City, State, Zip Code)	Phone #
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All permits, including interconnections, pertaining with a private water system must be registered with the Ohio Department of Health as required in Ohio Administrative Code Public Health 3701-28-03(A). If the contractor/proprietor is not known at time of application, it must be provided prior to the commencement of work as per the requirements in Ohio Administrative Code Public Health 3701-28-03(A)(1).

Private Water Systems Contractor	ODH Registration #	Phone #
Private Water Systems Contractor	ODH Registration #	Phone #
Private Water Systems Contractor	ODH Registration #	Phone #

Notice to Applicant: This application will not be processed until the form bears the signature of the applicant and the date (below). This application must be accompanied by the site plan form(s) and the appropriate fee. This application is not approved until it has the date and signature of a registered sanitarian or sanitarian-in-training employed by the local board of health.

- I, the undersigned, hereby agree to install, construct, develop or alter the private water system named in this permit application in accordance with the attached site plan and all applicable rules governed by Chapter 3701-28 of the Ohio Administrative Code.
- I, the undersigned, also understand that the issuance of this permit is conditioned upon the right of the department to enter upon the premises of the private system named in this permit at any reasonable time prior to, during, or after completion of the work specified in this permit for the purpose of determining compliance with Chapter 3701-28 of the Ohio Administrative Code.
- I, the undersigned, agree to contact the local health department upon completion of the private water system in order for the local health department to perform the final inspection and collect the water sample.
- I, the undersigned, understand that this permit will expire one (1) year from the date approved and all work must be completed by that date.

APPLICANT'S SIGNATURE	DATE OF SIGNATURE
-----------------------	-------------------

READ THE INSTRUCTIONS ON THE NEXT PAGE, THEN COMPLETE THE SITE PLAN FORM

Original w/ seal sticker - Health District Copy - Applicant/Property Owner Copy - Private Water Systems Contractor

County / City	Permit #
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OHIO DEPARTMENT OF HEALTH APPLICATION/PERMIT FOR A PRIVATE WATER SYSTEM SITE PLAN

Property Address

Owner / Applicant	Prepared by
-------------------	-------------

A site plan addendum form will be required in addition to this site plan form if this private water system permit request is being obtained for:
1) any private water system servicing greater than a three family dwelling, or a building;
2) any private water system servicing a pond, cistern, spring, or private water system located in an area of known flowing well conditions.

<p>SITE PLAN DRAWING <input type="checkbox"/> Check this box if the drawing is supplied on a separate sheet.</p> <p>-Clearly indicate the location of all proposed and existing private water systems. -Clearly indicate all possible sources of contamination from the list to the right, including but not limited to the house, the sewage system and the driveway. -Clearly indicate the north direction, property lines, roads and road intersections.</p>	<p>LIST OF POTENTIAL CONTAMINATION SOURCES. Write the distance from the proposed private water system location to the source listed below, if applicable. The minimum distance requirements are indicated in () to the right of the source. All distances must be specific to the private water system.</p> <ul style="list-style-type: none"> ft House, Building (10ft) ft Property lines (10 ft) ft Existing or properly sealed water wells (10 ft) ft Road right-of-ways and road utility easements (10 ft) ft Public Roadways (25 ft) ft Driveway or parking lot (5 ft) ft Sewer - waterline (10 ft) ft Sewage tanks, sewage absorption fields and watertight vault privies (50 ft) ft Leaching privies, leaching pits, dry wells, or drainage wells (100 ft) ft Unregulated constructed wells or boreholes (50ft) ft Geothermal systems (50 ft) ft Streams, lakes, ponds (25 ft) ft Storm water and other ditches with intermittent water flow (15 ft) ft Natural gas or propane tanks (20 ft) ft Fuel oil, diesel, chemical, gasoline and other petroleum liquid tanks (50 ft) ft Oil and gas wells (100 ft) ft Landfills (1000 ft) ft Construction and demolition debris facility (500 ft) ft Agricultural manure ponds, lagoons, or piles (50-300 ft) ft Other: _____ <p>Please refer to OAC 3701-28-07 for additional required distances.</p>
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Original w/ seal sticker - Health District Copy - Applicant/Property Owner Copy - Private Water Systems Contractor

HOW TO COMPLETE WATER PERMIT APPLICATION PAGE 1

Check the box that best describes the type of work being performed on your property.

OHIO DEPARTMENT OF HEALTH APPLICATION/PERMIT FOR A PRIVATE WATER SYSTEM

NOTE: Read the application instructions on the next page.

Complete form as directed. Form may be completed on the computer then printed or printed and completed by pen or typewriter.

CHECK ALL BOXES, IN THIS SECTION, THAT APPLY TO THE PERMIT REQUEST.

Type of Work:	System will Serve:	Type of PWS or Component:	System being Sealed:
<input type="checkbox"/> New Construction <input type="checkbox"/> Alteration (includes expanding existing systems) <input type="checkbox"/> Emergency Construction <input type="checkbox"/> Sealing Only <input type="checkbox"/> Test Well	<input type="checkbox"/> Replacement System <input type="checkbox"/> Emergency Alteration <input type="checkbox"/> Conversion to a PWS	<input type="checkbox"/> Single family dwelling <input type="checkbox"/> Two or Three family dwelling <input type="checkbox"/> Multiple dwelling units* (includes MHPs / Campgrounds) <input type="checkbox"/> Building*	<input type="checkbox"/> Well <input type="checkbox"/> Spring* <input type="checkbox"/> Pond* <input type="checkbox"/> Cistern* <input type="checkbox"/> Hauled Water Tank <input type="checkbox"/> Continuous Disinfection <input type="checkbox"/> Other _____
<input type="checkbox"/> Public Water Supply is being connected to the residence			<input type="checkbox"/> Geothermal system exists or is planned for this property

Check the box that best describes the structure the water system will serve.

OHIO DEPARTMENT OF HEALTH APPLICATION/PERMIT FOR A PRIVATE WATER SYSTEM

NOTE: Read the application instructions on the next page.

Complete form as directed. Form may be completed on the computer then printed or printed and completed by pen or typewriter.

CHECK ALL BOXES, IN THIS SECTION, THAT APPLY TO THE PERMIT REQUEST.

Type of Work:	System will Serve:	Type of PWS or Component:	System being Sealed:
<input type="checkbox"/> New Construction <input type="checkbox"/> Alteration (includes expanding existing systems) <input type="checkbox"/> Emergency Construction <input type="checkbox"/> Sealing Only <input type="checkbox"/> Test Well	<input type="checkbox"/> Replacement System <input type="checkbox"/> Emergency Alteration <input type="checkbox"/> Conversion to a PWS	<input type="checkbox"/> Single family dwelling <input type="checkbox"/> Two or Three family dwelling <input type="checkbox"/> Multiple dwelling units* (includes MHPs / Campgrounds) <input type="checkbox"/> Building*	<input type="checkbox"/> Well <input type="checkbox"/> Spring* <input type="checkbox"/> Pond* <input type="checkbox"/> Cistern* <input type="checkbox"/> Hauled Water Tank <input type="checkbox"/> Continuous Disinfection <input type="checkbox"/> Other _____
<input type="checkbox"/> Public Water Supply is being connected to the residence			<input type="checkbox"/> Geothermal system exists or is planned for this property

Check the box that best describes the type of water system that will be installed on your property.

OHIO DEPARTMENT OF HEALTH APPLICATION/PERMIT FOR A PRIVATE WATER SYSTEM

NOTE: Read the application instructions on the next page.

Complete form as directed. Form may be completed on the computer then printed or printed and completed by pen or typewriter.

CHECK ALL BOXES, IN THIS SECTION, THAT APPLY TO THE PERMIT REQUEST.

Type of Work:	System will Serve:	Type of PWS or Component:	System being Sealed:
<input type="checkbox"/> New Construction <input type="checkbox"/> Alteration (includes expanding existing systems) <input type="checkbox"/> Emergency Construction <input type="checkbox"/> Sealing Only <input type="checkbox"/> Test Well	<input type="checkbox"/> Replacement System <input type="checkbox"/> Emergency Alteration <input type="checkbox"/> Conversion to a PWS	<input type="checkbox"/> Single family dwelling <input type="checkbox"/> Two or Three family dwelling <input type="checkbox"/> Multiple dwelling units* (includes MHPs / Campgrounds) <input type="checkbox"/> Building*	<input type="checkbox"/> Well <input type="checkbox"/> Spring* <input type="checkbox"/> Pond* <input type="checkbox"/> Cistern* <input type="checkbox"/> Hauled Water Tank <input type="checkbox"/> Continuous Disinfection <input type="checkbox"/> Other _____
<input type="checkbox"/> Public Water Supply is being connected to the residence			<input type="checkbox"/> Geothermal system exists or is planned for this property

If the new water system being installed is replacing an existing water system, check the box that best describes the type of water system that will be properly abandoned [sealed].

OHIO DEPARTMENT OF HEALTH APPLICATION/PERMIT FOR A PRIVATE WATER SYSTEM

NOTE: Read the application instructions on the next page.

CHECK ALL BOXES, IN THIS SECTION, THAT APPLY TO THE PERMIT REQUEST.

Type of Work:	System will Serve:	Type of PWS or Component:	System being Sealed:
<input type="checkbox"/> New Construction <input type="checkbox"/> Alteration (includes expanding existing systems) <input type="checkbox"/> Emergency Construction <input type="checkbox"/> Sealing Only <input type="checkbox"/> Test Well	<input type="checkbox"/> Replacement System <input type="checkbox"/> Emergency Alteration <input type="checkbox"/> Conversion to a PWS	<input type="checkbox"/> Single family dwelling <input type="checkbox"/> Two or Three family dwelling <input type="checkbox"/> Multiple dwelling units* (includes MHPs / Campgrounds) <input type="checkbox"/> Building*	<input type="checkbox"/> Well <input type="checkbox"/> Spring* <input type="checkbox"/> Pond* <input type="checkbox"/> Cistern* <input type="checkbox"/> Hauled Water Tank <input type="checkbox"/> Continuous Disinfection <input type="checkbox"/> Other _____
<input type="checkbox"/> Public Water Supply is being connected to the residence			<input type="checkbox"/> Geothermal system exists or is planned for this property

If a geothermal system is present on or planned for the property, check this box.

HOW TO COMPLETE WATER PERMIT APPLICATION PAGE 1

County / City	Local Fee	State Fee	Total Fee Owed	Receipt #	Permit #
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OHIO DEPARTMENT OF HEALTH APPLICATION/PERMIT FOR A PRIVATE WATER SYSTEM

NOTE: Read the application instructions on the next page.

Complete form as directed. Form may be completed on the computer then printed or printed and completed by pen or typewriter.

CHECK ALL BOXES, IN THIS SECTION, THAT APPLY TO THE PERMIT REQUEST.

Type of Work: <input type="checkbox"/> New Construction <input type="checkbox"/> Alteration (includes expanding existing systems) <input type="checkbox"/> Emergency Construction <input type="checkbox"/> Replacement System <input type="checkbox"/> Emergency Alteration <input type="checkbox"/> a PWS	System will Serve: <input type="checkbox"/> Single family dwelling <input type="checkbox"/> Two or Three family dwelling <input type="checkbox"/> Multiple dwelling units (includes MHPs / Campsites) <input type="checkbox"/> Building* to the residence	Type of PWS or Component: <input type="checkbox"/> Well <input type="checkbox"/> Pond* <input type="checkbox"/> Spring* <input type="checkbox"/> Cistern*	System being Sealed: <input type="checkbox"/> Well <input type="checkbox"/> Cistern <input type="checkbox"/> Tank ty
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Complete all information asked for in this section.

It is not necessary to complete the Parcel # section, for our office files all properties by address.

*NOTE: If the private water system will serve other than a one, two, or three family dwelling, detailed plans must also be submitted in compliance with rule 3701-28-03 (E) of the Ohio Administrative Code. See site plan addendums for ponds, springs, cisterns, multiple dwelling units, and buildings.

COMPLETE THE FOLLOWING INFORMATION

Property Street Address or Location (include City and Zip Code)	Parcel # (optional)	Township/City/Village
Owner's Name	Owner Mailing Address (Street #, Street, City, State, Zip Code)	Phone #
<input type="checkbox"/> Check this box if the Owner and Applicant Information is the same. If checked do not fill in applicant information.		
Applicant's Name	Applicant Mailing Address (Street #, Street, City, State, Zip Code)	Phone #

All persons, including homeowners, performing work on a private water system must be registered with the Ohio Department of Health as required in Ohio Administrative Code Rule 3701-28-18(A). If the contractor information is not known at time of application, it must be provided prior to the commencement of work as per the requirements in Ohio Administrative Code Rule 3701-28-03(A)(1).

Private Water Systems Contractor	ODH Registration #	Phone #
Private Water Systems Contractor	ODH Registration #	Phone #
Private Water Systems Contractor	ODH Registration #	Phone #

Notarize Applicant: This application will not be processed until the form bears the signature of the applicant and the date (below). This and the appropriate fee must be submitted to the local health department. The contractor must be registered with the Ohio Department of Health and the appropriate fee must be submitted to the local health department. The contractor must be registered with the Ohio Department of Health and the appropriate fee must be submitted to the local health department.

You will need to know the name of the contractor or contractors that will be installing the water system and components of the water system and their phone numbers.

Our office has the capability to locate the ODH Registration # if you do not know this number.

I, the undersigned, agree to contact the local health department upon completion of the private water system in order for the local health department to perform the final inspection and collect the water sample.

I, the undersigned, understand that this permit will expire one (1) year from the date approved and all work must be completed by that date.

APPLICANT'S SIGNATURE	DATE OF SIGNATURE
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READ THE INSTRUCTIONS AND SITE PLAN FORM

Ensure to sign and date your application.

HOW TO COMPLETE WATER PERMIT APPLICATION PAGE 2

County / City

Permit #

APPLICATION/PERMIT FOR PRIVATE WATER SYSTEM

Please provide the information asked for in this section.

Property Address

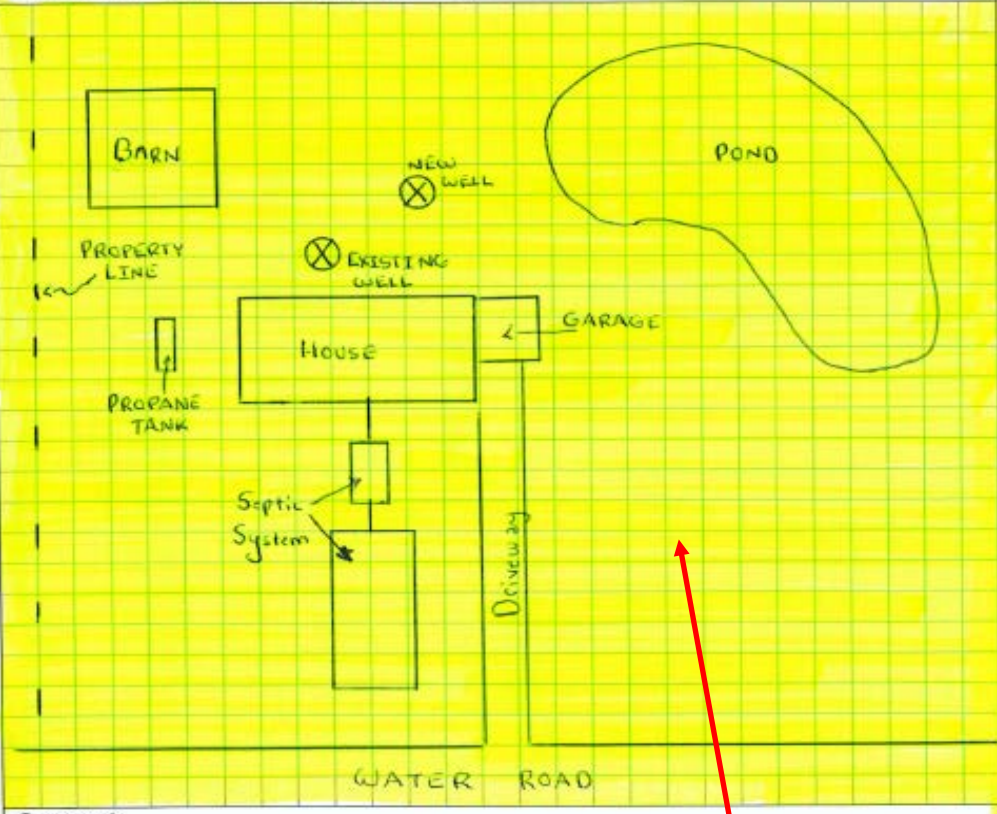
Owner / Applicant

Prepared by

A site plan addendum form will be required in addition to this site plan form if this private water system permit request is being obtained for:
 1) any private water system servicing greater than a three family dwelling, or a building;
 2) any private water system servicing a pond, cistern, spring, or private water system located in an area of known flowing well conditions.

SITE PLAN DRAWING Check this box if the drawing is supplied on a separate sheet.
 -Clearly indicate the location of all proposed and existing private water systems.
 -Clearly indicate all possible sources of contamination from the list to the right, including but not limited to the house, the sewage system and the driveway.
 -Clearly indicate the north direction, property lines, roads and road intersections.

LIST OF POTENTIAL CONTAMINATION SOURCES.
 Write the distance from the proposed private water system location to the source listed below, if applicable. The minimum distance requirements are indicated in () to the right of the source.
All distances must be specific to the private water system.



- _____ ft. House, Building (10ft)
- _____ ft. Property lines (10 ft)
- _____ ft. Existing or properly sealed water wells (10 ft)
- _____ ft. Road right-of-ways and road utility easements (10 ft)
- _____ ft. Public Roadways (25 ft)
- _____ ft. Driveway or parking lot (5 ft)
- _____ ft. Sewer - watertight (10 ft)
- _____ ft. Sewage tanks, sewage absorption fields and watertight vault privies (50 ft)
- _____ ft. Leaching privies, leaching pits, dry wells, or drainage wells (100 ft)
- _____ ft. Unregulated constructed wells or boreholes (50ft)
- _____ ft. Geothermal systems (50 ft)
- _____ ft. Streams, lakes, ponds (25 ft)
- _____ ft. Storm water and other ditches with intermittent water flow (15 ft)
- _____ ft. Natural gas or propane tanks (20 ft)
- _____ ft. Fuel oil, diesel, chemical, gasoline and other petroleum liquid tanks (50 ft)
- _____ ft. Oil and gas wells (100 ft)
- _____ ft. Landfills (1000 ft)
- _____ ft. Construction and demolition debris facility (500 ft)
- _____ ft. Agricultural manure ponds, lagoons, or piles (50-300 ft)
- _____ ft. Other:

Please refer to OAC 3701-28-07 for additional required distances.

A diagram of the property must be drawn to indicate the location of all structures and features. The above example shows a proper diagram. The main items that must be indicated on the diagram are provided in the example above. However, any other structures, water features, driveways or roads, buried tanks, or farm pastures must also be indicated if they are present on the property.

HOW TO COMPLETE WATER PERMIT APPLICATION

PAGE 2

private water system located in an area of known flowing well conditions.

is supplied on a separate sheet.
water systems.
ist to the right, including but not
ad intersections.

You will need to know the distance measurements from all property components to the new well. Place those measurements in this section of the form.

The minimum distance property components can be from the new water system are listed in parenthesis behind each component. The components on your property must meet or exceed these distances.

LIST OF POTENTIAL CONTAMINATION SOURCES.

Write the distance from the proposed private water system location to the source listed below, if applicable. The minimum distance requirements are indicated in () to the right of the source.

All distances must be specific to the private water system.

- _____ ft House, Building (10ft)
- _____ ft Property lines (10 ft)
- _____ ft Existing or property sealed water wells (10 ft)
- _____ ft Road right-of-ways and road utility easements (10 ft)
- _____ ft Public Roadways (25 ft)
- _____ ft Driveway or parking lot (5 ft)
- _____ ft Sewer - watertight (10 ft)
- _____ ft Sewage tanks, sewage absorption fields and watertight vault privies (50 ft)
- _____ ft Leaching privies, leaching pits, dry wells, or drainage wells (100 ft)
- _____ ft Unregulated constructed wells or boreholes (50ft)
- _____ ft Geothermal systems (50 ft)
- _____ ft Streams, lakes, ponds (25 ft)
- _____ ft Storm water and other ditches with intermittent water flow (15 ft)
- _____ ft Natural gas or propane tanks (20 ft)
- _____ ft Fuel oil, diesel, chemical, gasoline and other petroleum liquid tanks (50 ft)
- _____ ft Oil and gas wells (100 ft)
- _____ ft Landfills (1000 ft)
- _____ ft Construction and demolition debris facility (500 ft)
- _____ ft Agricultural manure ponds, lagoons, or piles (50-300 ft)
- _____ ft Other: _____

Please refer to OAC 3701-28-07 for additional required distances.

INSTALLATION & SAMPLING PROCESS

STEP 3

Once the INSTALLATION PERMIT has been issued, you will have one **① YEAR**, from the issuance date, to install your system. The system will need to be installed by a contractor registered by the OHIO DEPARTMENT OF HEALTH. A listing of registered contractors in our local area is available on our website at www.crawfordhealth.com. The link for Private Water System Registration Info can be found by clicking on "environmental programs" followed by "residential water." All water system contractors (drillers and plumbers) will be listed by county.

Upon completion of the installation process, the contractor is required to Chlorinate the water system to aid in reducing any contamination that might have occurred during the drilling and installation processes.



For water sampling purposes, it must be ensured that the person performing the plumbing work inside the home, install a smooth-nosed downturned sampling spigot at the pressure tank on the well side of the pressure tank.

The contractor performing the inside plumbing work must also be a registered contractor with OHIO DEPARTMENT OF HEALTH.



Once the contractor has completed the chlorination procedure, you will need to contact our office to schedule a water sample. You are allotted up to three (3) water samples with your permit should it be needed to obtain a water sample with a negative result. Please contact the number listed below to schedule your sample .

419-562-5871