

Suffolk Health Department Application for Site Improvements

OWNER _____ PHONE NUMBER _____

AGENT _____ PHONE NUMBER _____

MAILING ADDRESS _____

LOCATION OF PROPERTY _____

TAX MAP _____ BLK/SECT. _____ LOT _____

If Residential, Current # Bedrooms: _____ Proposed # Bedrooms _____

If Non-residential, Current Use: _____

PROPOSED Use or Site Improvements _____

The property boundaries and building locations are clearly marked or identified at the property. I give permission to the Virginia Department of Health to enter the property described, if necessary, for the purpose of processing this application. An accurate sketch of the property, existing structures, wells, sewage disposal systems and proposed structure(s) is attached. I understand I may have to uncover parts of the sewage system in order for the Health Department to perform this evaluation.

Signature of Owner/Agent

Date

BUILDING/ZONING REVIEW

Planning/Zoning hereby requests that the Virginia Department of Health evaluate the onsite sewage system and/or water supply on the property described to determine whether:

_____ The existing/proposed onsite system sewage disposal system is safe, adequate and proper (SAP) for the proposed use (see §32.1-165 of the *Code of Virginia*). Structures designed for human occupancy.

_____ For pools, decks, garages, pole barns, sidewalk installations, and other structures not designed for human occupancy, the local building official may ask VDH to determine whether proposed construction will interfere with the existing sewage system's function.

BUILDING/ZONING REPRESENTATIVE

Date

HEALTH DEPARTMENT EVALUATION

Is the existing system onsite sewage system safe, adequate and proper or approvable as nonconforming for the proposed use pursuant to Va. Code §32.1-165? _____ Yes _____ No _____ Not applicable

There is no guarantee given or implied this sewage disposal system will continue to function properly in the future. In the event of a sewage disposal system malfunction, the owner will be responsible for any repairs or other actions deemed necessary by the Department to correct the situation.

_____ **Courtesy Review** There is no guarantee given or implied the proposed construction will not interfere with any components of the sewage disposal system and/or water supply. The Department is simply performing a courtesy review for the locality to try to identify any potential conflicts based on information available. In the event of damage to a sewage disposal system or well during construction, the owner will be responsible for any repairs or other actions deemed necessary by the Department to correct the situation.

COMMENTS _____

SIGNATURE HEALTH DEPARTMENT OFFICIAL

Date