

DEFIANCE COUNTY
510 COURT ST, STE 201 DEFIANCE, OHIO 43512
APPLICATION FOR SANITARY / STORMWATER DISCHARGE PERMIT
 (Please type or print - Attach a to scale drawing of property and locations)

Name: (Owner) _____ **Date:** _____ **Phone:** _____

ADDRESS: _____ **CITY:** _____ **STATE:** _____ **ZIP:** _____

I / We hereby request permission to discharge sanitary effluent stormwater to the County / Township road drainage system at the following location:

_____ Road on the ___ N ___ S ___ E ___ W side of the road _____ feet
 ___ N ___ S ___ E ___ W of _____ Road in _____ Township.

GENERAL PROVISIONS

1. Sanitary effluent will not be permitted to discharge into roadside ditches unless there is water flow in the ditch during dry conditions.
2. Sanitary effluent will not be permitted to discharge into roadside tile as they are not designed for; nor are they maintained to ensure drainage of sanitary discharges; but for road drainage only.
3. Anytime the County Engineer deems it necessary, sanitary effluent shall be tested and again approved by the Defiance County Health Department. Should the effluent be found to be unacceptable, the property owner shall immediately remove said connection unless correction is made with the time ordered by the County Engineer.
4. The issuance of this permit is not to be construed to grant permission to cross or occupy land other than that owned by the applicant.
5. Permission to discharge sanitary effluent into the County drainage system shall in no way be interpreted to imply that the County will continue to maintain, restore, reconstruct the system if it fails.
6. If the above conditions are not met and maintained, by virtue of and in consideration of the acceptance of the permit issued by the County Engineer, applicant agrees that the County Engineer may, at his discretion, order the removal and / or plug the discharge line and all cost incurred for such work may be applied to the property taxes of said parcel.
7. By the application and acceptance of this permit, the applicant agrees to indemnify and hold harmless the Defiance County Engineer, the County and all officials of the County Engineer's office for any damage(s) that may result from the flooding of any receiving system which may occur during heavy rain events or other weather related anomalies.

REASON FOR ASSESSMENT (Check all that apply.)

New house construction New sewage installation
 Perimeter tile drain Replacement sewage system

FOR REPLACEMENT SYSTEM OR SEWAGE SYSTEM ALTERATIONS ONLY

Does the existing system discharge to a tile off your property? Yes No
 (If yes, on the scale drawing requested identify the tile your system discharges to and where the tile flows.)

WHAT TYPE OF DRAINAGE WILL YOU NEED TO ACCOMMODATE (Check all that apply.)

Drainage from sewage system Perimeter tile drain
 Other drainage from dwelling (Specify: _____)

Provide a to scale drawing of the proposed lot on the back of this sheet showing any buildings, driveways, wells, or existing tile on, or crossing the property and to where they discharge. For any identified tile discharging to a field tile, please indicate the location of the field tile in relation to the property. For a replacement sewage system must be indicated on the drawing.

Applicant: _____ Date: _____

SCALE DRAWING OF SITE
(Include reference / distance to nearest intersection.)

N
W E
S

(Office Use Only)

_____	_____	<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved
Defiance County Engineer	Date		
_____	_____	<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved
Defiance County SWCD	Date		
_____	_____	<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved
Defiance County General Health District	Date		

Conditions of use: _____

Discharge point location: _____

Defiance County General Health District	Telephone: (419)784-3818	Fax: (419)782-4979
Defiance County SWCD	Telephone: (419)782-8751	
Defiance County Engineer	Telephone: (419)782-4751	Fax: (419)782-3031