

Date Received Code Compliance Stamp

TOWN OF NEWBURGH
SEPTIC PERMIT APPLICATION
 21 Hudson Valley Professional Plaza
 Newburgh, NY 12550
 Ph: (845)564-7801 Fax: (845)564-7802
(Please Print)

Permit #: _____
 Tracking #: _____
 Fee: \$ _____
 Receipt #: _____

 (OFFICE USE ONLY)

JOB LOCATION: _____

S.B.L.: _____ CONSTRUCTION COST: _____

OWNER:	APPLICANT? Y / N	CONTRACTOR:	APPLICANT? Y / N
ADDRESS:		ADDRESS:	
CITY/STATE/ZIP:		CITY/STATE/ZIP:	
PHONE:		PHONE:	
CONTACT EMAIL:		CONTACT EMAIL:	

DESCRIPTION OF WORK TO BE PERFORMED:

(CHECK ALL THAT APPLIES):

- NEW
- SEPTIC TANK ONLY
- SEEPAGE PITS
- OTHER _____
- REPAIR
- LEACH FIELD
- COMPLETE SYSTEM

PERMIT FEES:

\$100.00 NEW RESIDENTIAL
 \$200.00 NEW COMMERCIAL
 \$50.00 REPAIRS
PRIOR BUILT: RES. \$50.00
COMM. \$200.00

- NO WORK IS TO BE STARTED WITHOUT A SEPTIC PERMIT.
- ALL APPLICATIONS MUST BE ACCOMPANIED BY A SURVEY SHOWING ALL EXISTING OR PROPOSED STRUCTURE(S) AND SEPTIC SYSTEM.
- ONE COMPLETE SET OF PLANS & SPECIFICATIONS MUST BE FILED WITH THIS APPLICATION.
- PROOF OF OWNERSHIP
- PROOF OF LIABILITY INSURANCE, LIST TOWN OF NEWBURGH AS CERTIFICATE HOLDER.
- PROOF OF NYS WORKERS COMPENSATION INSURANCE OR EXEMPTION FORM, LIST TOWN OF NEWBURGH AS CERTIFICATE HOLDER.
- PROOF OF NYS DISABILITY INSURANCE, IF APPLICABLE.
- ANY CHANGES TO THE ORIGINAL PLANS MUST BE APPROVED IN WRITING BY THE BUILDING INSPECTOR.
- INDIVIDUAL RESIDENTIAL SYSTEMS MUST BE DESIGNED IN ACCORDANCE WITH APPENDIX 75-A AND THE NYSDOH DESIGN HANDBOOK.
- COMMERCIAL SYSTEMS MUST BE DESIGNED IN ACCORDANCE WITH THE APPROPRIATE NYSDEC GUIDELINES.
- APPROPRIATE FEES ARE REQUIRED TO BE SUBMITTED WITH THE APPLICATION.

THE UNDERSIGNED CERTIFIES THAT THE PLANS AND SPECIFICATIONS AS FILED ARE IN ACCORDANCE WITH THE APPROPRIATE REGULATIONS AS STATED ABOVE AND AGREES THAT ALL WORK AND MATERIALS SHALL BE IN STRICT CONFORMITY WITH THE RULES AND REGULATIONS GOVERNING SEPTIC SYSTEMS. THE PERSON SIGNING THIS APPLICATION AGREES TO NOTIFY THE BUILDING INSPECTOR AS NEEDED FOR THE REQUIRED INSPECTION(S). FAILURE TO DO SO MAY RESULT IN LEGAL ACTION AND POSSIBLE FINES.

APPROVED: _____

APPLICANT'S SIGNATURE: _____

DISAPPROVED: _____

(FILL IN INFORMATION ON REVERSE SIDE)

ITEMS NEEDED FOR A COMPLETE APPLICATION

HOUSE	PLANS AND RES-CHECK	WORK / COMP LIABILITY	SURVEY	HIGHWAY PERMIT	SEPTIC DESIGN	SUB DIVISION	PAYMENT
ADDITION	PLANS AND RES-CHECK	WORK / COMP LIABILITY	SURVEY PLOT PLAN	LIMBER ID SHEET			PAYMENT
ACCESSORY BUILDINGS	PLANS OR PICTURE	WORK / COMP LIABILITY	SURVEY PLOT PLAN				PAYMENT
POOLS	PLANS/ PICTURE/ POOL DETAILS	WORK / COMP LIABILITY	SURVEY PLOT PLAN	POOL / DOOR ALARM	BARRIER TYPE & LOCATION		PAYMENT
DECK	PLANS	WORK / COMP LIABILITY	SURVEY PLOT PLAN				PAYMENT
SOLAR	PLANS	WORK / COMP LIABILITY	SURVEY PLOT PLAN			OWNER CONSENT	PAYMENT
GENERATOR	PLANS	WORK / COMP LIABILITY	SURVEY PLOT PLAN	MANUFACTRE CLEARANCES	PROPANE TANK SIZE LOCATION	ELECTRIC LICENSE	PAYMENT
CONVERTING SPACE	PLANS	WORK / COMP LIABILITY	SURVEY PLOT PLAN				PAYMENT
FIREPLACE	PLANS OR PICTURE	WORK / COMP LIABILITY	FLOOR PLAN	MANUFACTRE CLEARANCES			PAYMENT
OIL TANK INSTALLATION	TANK DETAILS	WORK / COMP LIABILITY	FLOOR / PLOT PLAN	FURNACE SEPARATION	TANK SUPPORT	PIPING DETAILS	PAYMENT
DEMO	SCOPE OF WORK	WORK / COMP LIABILITY	SURVEY PLOT PLAN	DEBRI LOCATION	SERVICE DISCONNECT	OWNERS CONSENT	PAYMENT
ELECTRIC	SCOPE OF WORK	WORK / COMP LIABILITY	FLOOR PLAN	ELECTRIC LICENSE			PAYMENT
COMMERICAL	PLANS COM-CHECK	WORK / COMP LIABILITY	APPROVED SITE PLAN	SPRINKLER APPLICATION	HIGHWAY		PAYMENT
SIGNS	PLANS	WORK / COMP LIABILITY	SURVEY PLOT PLAN	SIGNS LOCATIONS			PAYMENT
CHANGE OF OCCUPANCY	PLANS COM CHECK	WORK / COMP LIABILITY	FLOOR PLAN	NATURE OF BUSINESS			PAYMENT
FIT - OUT	PLANS COM CHECK	WORK / COMP LIABILITY	FLOOR PLAN	SPRINKLER APPLICATION			PAYMENT
ALTERATIONS	PLANS / SCOPE OF WORK	WORK / COMP LIABILITY	FLOOR PLAN				PAYMENT
SEPTIC SYSTEMS	TANK DETAILS AND SIZE	WORK / COMP LIABILITY	DETAILED PLOT PLAN				PAYMENT

If electric is involved supply a copy of the Orange County electrical license.

SITE CONDITIONS

- 1) NUMBER OF BEDROOMS: _____, FULL BATHROOMS _____, HALF BATHROOMS _____
- 2) ANY NEW BEDROOMS PROPOSED: _____, IF YES HOW MANY? _____
- 3) SEPTIC TANK CAPACITY: _____ GALLONS, LINEAL FEET OF LEACH FIELD _____ FEET.
- 4) IS THERE A GARBAGE GRINDER: _____, ARE THERE ANY PROPOSED: _____
- 5) IS THERE A HOT TUB/SPA OVER 100 GALLONS: _____, IS THERE ONE PROPOSED: _____
- 6) SOURCE OF WATER SUPPLY: PUBLIC _____, PRIVATE WELL _____, OTHER _____
- 7) IF INSTALLING A LEACH FIELD, LIST TYPE: _____

TO BE COMPLETED BY INSPECTOR

◆ TRENCH INSPECTION: _____ DATE: _____

◆ COMPLETE INSPECTION UNCOVERED: _____ DATE: _____

REMARKS: _____

APPROVED BY: _____ DATE: _____

(PLEASE RETAIN THIS SHEET FOR YOUR INFORMATION)

From the: Individual Residential Wastewater Treatment Systems Design Handbook
 By the: New York State Department of Health

TABLE 2

REQUIRED SEPARATION DISTANCES FROM WASTEWATER SYSTEM COMPONENTS

System Components	Well (f) or Suction Line	To Stream, Lake, Watercourse (b), or Wetland	Dwelling	Property Line	Drainage Ditch (b), (g)
House Sewer (Watertight Joints)	25' if cast iron or PVC with o-ring joints, 50' otherwise				
		25'	3'	10'	---
Septic Tank	50'	50'	10'	10'	10'
Effluent Line to Distribution Box	50'	50'	10'	10'	10'
Distribution Box	100'	100'	20'	10'	20'
Absorption Field	100' (a)	100'	20'	10'	20'
Seepage Pit	150' (a)	100'	20'	10'	20'
Dry Well (Roof and Footing)	50'	25'	20'	10'	10'
Raised or Mound System (c)	100' (a)	100'	20'	10'	20'
Intermittent Sand Filter (c)	100' (a)	100'	20'	10'	20'
Evapotranspiration-Absorption System (c)	100' (a)	50'	20'	10'	20'
Composter	50'	50'	20'	10'	10'
Sanitary Privy Pit	100'	50'	20'	10'	20'
Privy, Watertight Vault	50'	50'	20'	10'	10'

NOTES:

- (a) When sewage treatment systems are located in coarse gravel or upgrade and in the general path of drainage to a well, the closest part of the treatment system shall be 200 feet away from the well.
- (b) Mean high water mark.
- (c) For all systems involving the placement of fill material, separation distances are measured from the toe of slope of the fill.
- (d) Any water service line under pressure (i.e. public water supply main, household service line, well to household service line) located within ten feet of any absorption field, seepage pit or sanitary privy shall be installed inside a large diameter water main to protect the potable water supply.
- (e) Any water service line under pressure (i.e. public water supply main, household service line, well to household service line) crossing a sewer shall be installed with one full length of water main centered above the sewer so both water connecting joints are as far as possible from the sewer. Section 8.6 of the GLUMRB Recommended Standards for Water Works, shall be followed for separation of water mains, sanitary sewers and storm sewers.
- (f) The minimum separation distance between a septic tank and a community type public water supply well should be 100 feet. Distribution boxes and absorption facilities (e.g., absorption trenches / beds, seepage pits, raised systems, mound systems, etc.) should be located at least 200 feet from community type public water supply wells.
- (g) Recommended separation distances.

OTHER SEPARATIONS

Section 75-A.4 (b) Accepted as Orange County Health Department policy and standard with the following additions:

- 1) Separation: well to swale, stream or watercourse – 25’.
- 2) Separation: absorption field to open drainage, culvert or storm sewer (non-gasketed pipe), or catch basin – 50’.
- 3) Separation: absorption field to culvert or storm sewer (gasketed, tight pipe) – 35’.
- 4) Separation: absorption field to curtain drain – 15’.
- 5) Separation: absorption field, pits, expansion area, to top of embankment or steep (1 on 3) slope – 25’.
- 6) Drainage pipes within 25’ of any well must be watertight.
- 7) Separation: well to cemetery property line – 100’.

Swimming Pools: (NYDEC Handbook)

- ◆ Above Ground Swimming Pools cannot be constructed over any portion of the septic system.
- ◆ In-Ground Swimming Pools
 - Septic Tank – 20 Feet
 - Absorption Fields – 35 Feet
 - Seepage Pits – 50 Feet

From the: Individual Residential Wastewater Treatment Systems Design Handbook
By the: New York State Department of Health

TABLE 3

MINIMUM SEPTIC TANK CAPACITIES

Number of Bedrooms	Minimum Tank Capacity (Gallons)	Minimum Liquid Surface Area (sq. ft.)
1, 2, or 3	1,000	27
4	1,250	34
5	1,500	40
6	1,750	47

Note: Tank size requirements for more than six bedrooms shall be calculated by adding 250 gallons and seven square feet of surface area for each additional bedroom. A garbage grinder shall be considered equivalent to an additional bedroom for determining tank size. A hot tub / spa should be considered equivalent to an additional bedroom for determining tank size.

LICENSED PROFESSIONAL CERTIFICATION NOTES FOR ON-SITE WASTEWATER TREATMENT SYSTEMS

DESIGN

“I hereby certify to the Town of Newburgh that the sewerage system depicted on this plat has been designed in accordance with the New York State Public Health Law and all law promulgated thereunder.”

AFTER INSTALLATION

“I hereby certify to the Town of Newburgh that the sewerage system depicted on this plat has been designed and installed in accordance with the New York State Public Health Law and all law promulgated thereunder.”