



# Summit County Public Health

1867 West Market Street ♦ Akron, Ohio 44313-6901  
 Phone: (330) 926-5600 ♦ Toll-free: 1 (877) 687-0002 ♦ Fax: (330) 923-6436  
 www.scph.org

## BUILDING AND ZONING EVALUATION APPLICATION

### Parcel Information:

Property Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Parcel ID: \_\_\_\_\_

### Applicant's Information:

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

Address (if different): \_\_\_\_\_  
City State ZipCode

### Property Information and Project Details:

#### Sewage Disposal

- Sanitary Sewer
- Septic System

#### Water Source

- Municipal Water
- Private Water (well, cistern, etc.)

Please select the reason for submitting the application:

Proposed Project Type	Fee
<input type="checkbox"/> <b>Home Addition/Remodel</b> Addition to existing house that increases square footage, but not the number of potential bedrooms	<b>\$125</b>
<input type="checkbox"/> <b>Additional Property Features</b> Garage, shed, accessory buildings, pond, swimming pool, deck, etc.	
<input type="checkbox"/> <b>One Bedroom Addition</b> This is defined as the addition of habitable space which includes, but is not limited to: a bedroom, office, den, etc.	

### **Brief Project Description**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- The attached drawing includes the location of all septic system components and private water systems and distances, in feet, to the proposed project.

*I understand that any approval or disapproval is based on the information I have provided and any change in this information may result in a voided approval. This evaluation may not be used as an assessment of the septic or private water system.*

\_\_\_\_\_  
 Signature of Applicant

\_\_\_\_\_  
 Date

Received by: \_\_\_\_\_  
 Amount: \$ \_\_\_\_\_ .00  
 Cash  
 Credit card  
 Check #: \_\_\_\_\_  
 Invoice No: \_\_\_\_\_



## Instructions for the Building and Zoning (BZ) Application

### General Information

Be advised that certain sewage treatment systems (STS) cannot receive BZ approval. Please contact our office at (330) 926-5600 with any questions before applying. If an application is received for one of the following systems, it will be automatically disapproved:

#### 1) Unknown Septic System

- a) An STS is classified as “Unknown” if Summit County Public Health (SCPH) does not have a final installation report on file. The septic system will need to be identified by a registered sewage contractor before the application can be approved.

#### 2) Septic System that does not have an active service contract

- a) An active service contract is required for: NPDES, Spray Irrigation, Peat Biofilter, and Drip Distribution systems. If the property has one of these types of systems, an active service contract must be on file with SCPH prior to BZ approval.

#### 3) Illicit Discharging Systems (bedroom additions only)

- a) An illicit discharge is an STS that discharges wastewater off the property and does not have a NPDES permit through the Ohio EPA. This would include aerators and filterbeds installed prior to 2007. These systems are not permitted to be altered. No bedroom additions or additions that may increase the home’s current occupancy will be permitted on this type of system. Other proposals for remodeling/additional structures may be approved.

### Building and Zoning Application Process

1. A Building and Zoning application is required for any property that has a STS or private water system (PWS) and is proposing to do one of the following:
  - a. Structures are being added (shed, garage, pool, etc)
  - b. Changing the footprint of an existing structure
  - c. Adding bedrooms
2. Submit the application with a “bird’s eye” drawing of the property and the application fee. The drawing must include:
  - a. The location of all STS and PWS components
  - b. Location of the proposed project
  - c. Distances from the proposed project to septic, well, and other notable structures
3. SCPH will review the application and contact the applicant to schedule a site visit. The site visit will include:
  - a. Verifying that the proposed project will not affect the current STS/PWS
  - b. Verifying that the proposed project will not affect the future STS/PWS
  - c. Verifying that the current STS is not causing a public health nuisance
4. Once the inspector has completed the review and site visit, a report will be sent to the applicant.