



PICKENS COUNTY ENVIRONMENTAL HEALTH
 North Georgia Health District 1-2
 Georgia Department of Public Health
 1266 East Church St
 Jasper, Georgia 30143
 Website: www.nghd.org



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SUBDIVISION APPLICATION FOR DEVELOPMENTS USING OSSMS

Date of Submittal to EH Office: _____

INSTRUCTIONS: If certain questions do not apply, simply write “N/A”. It is very important that you complete this form in its entirety. **Please allow 2-4 weeks for preliminary plat reviews. Please allow 4-6 weeks for final plat reviews. Final plat review may take longer depending on any adverse conditions observed at time of final evaluation. Reviews are not started until all requested information is provided.**
Please initial here: _____

GENERAL INFORMATION:

Name of Subdivision: _____

If Subdivision divided into phases, please indicate how many total phases are proposed. _____ **Phases**

For Phased Subdivision, a Master Plan is required at time of ‘Phase 1’.
Please initial here: _____

Directions to Subdivision:



NORTH GEORGIA HEALTH DISTRICT 1-2

Cherokee: Canton (770) 345-7371 / Woodstock (770) 928-0133 Gilmer (706) 635-4363 Pickens (706) 253-2821
 Fannin (706) 632-3023 Murray (706) 695-4585 Whitfield (706) 279-9600

Developer/Owner: _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Surveyor Name, Phone Number, and Email Address: _____

Number of Lots on Plat Submitted: _____ Minimum Lot Size: _____
Total Acreage of Submitted Plat: _____

Authorized Agent: (Name, Phone Number, and Email) _____

WATER SUPPLY:

Will Lots be served by (*circle selection*):

-Individual Water Supplies (Wells or Springs)

-DNR-EPD water system

*For Preliminary Plats, a letter from DNR/EPD must be provided stating that the construction plans and source approvals have been submitted and found acceptable. _____ **initials**

*For Final Plats, the water system’s DNR/EPD “Operational Permit with WSID” must be provided. (see ‘REQUIRED INFORMATION’) _____ **initials**

***Owner/Operator of Water System:** _____

* **Mailing Address:** _____

* **Phone Number and Email:** _____

-Municipal Public Water

*For Preliminary Plats, a letter must be provided by the Water Authority stating that water *is or is not* available within 1000’ of the closest portion of the proposed subdivision in its entirety. The letter should also state that the Water Authority agrees to provide water. _____ **initials**

*For Final Plats, a letter must be provided by the Water Authority stating that water has been provided to the subdivision lots. _____initials

SEWAGE DISPOSAL:

Is public/municipal sewer available within 500’ of any portion of the proposed subdivision in its entirety? Circle One: *Yes or No*

**A letter from the Sewer Authority must be provided stating that sewer *is or is not* available within 500’ of the closet portion of the proposed subdivision in its entirety. _____initials

**Mixed sewage disposal developments are prohibited.

**We do not permit non-domestic waste or any wastewater >10,000 gallons per day.

Will there be any commercial or business development as part of proposed subdivision? _____ If yes, please explain and state type of commercial operations are proposed: _____

Are there any plans to extend public sewers to serve the area of this subdivision? (future availability): _____

BUILDING INFORMATION:

House: _____ Minimum Square Footage
_____ Minimum # of Bedrooms

House Composition: (*Circle All that Apply*)

Manufactured Home

Stick Built

Vacation Rentals

Other: _____

PROPERTY SALES:

I, _____, understand that DPH-OSSMS Regulations-Chapter 511-3-1-.14-1 states that “No person may sell, offer for sale, lease, rent, or begin construction or otherwise begin the physical development of a lot in a subdivision or mobile home park until written approval of plans for water supply and sewage disposal in the subdivision or park has been issued from the County Board of Health. This approval constitutes general acceptance of all lots for development with on-site sewage management systems.”

_____ Print Name
_____ Signature
_____ Date

REQUIRED INFORMATION:

Preliminary Plat Review:

_____ One Set of the Preliminary Plat

_____ Original Certified Level III soils analysis overlaid on preliminary plat with topographical map depicting in two foot (2’ contours). Indicate slopes on map in 5-10% increments.

** Topographical map required for 5 or more lots. For subdivisions where ALL lots are over 3 acres, the topographical map can be depicted in a one (1) acre homesite (chosen by developer).

_____ Proposed Wells with buffers, if applicable, water systems, water courses, flood plains, roads, driveways, proposed house locations, easements, springs, and any other appurtenances that may influence the suitability and/or useable septic installation areas must be provided on the certified Level III soils and topo map. Include all water buffers on map as well as ‘shading out’ all drainage swales or ditches.

_____ Soil Test Legend

_____ Soil Test Boring Logs

_____ ‘Useable Septic Area (square footage) Log’ for each lot per ‘Pickens County Minimum Lot Sizes’

_____ If DNR/EPD water system is proposed, letter from EPD approving the plans to construct the public water system and approving the source of the water supply of said subdivision.

_____ Letter(s) from Water Authority regarding availability of public water and/or public sewer as stated in pages 2-3.

_____ Applicable Fees (see attachment)

Final Plat Review:

_____ One set of Final Plat

_____ Original Final Certified Level III soils analysis overlaid on final plat with topographical map depicting in two foot (2' contours). Indicate slopes on map in 5-10% increments.

** Topographical map required for 5 or more lots. For subdivisions where ALL lots are over 3 acres, the topographical map can be depicted in a one (1) acre homesite (chosen by developer).

_____ Final Proposed Wells with buffers, if applicable, water systems, water courses, flood plains, roads, driveways, proposed house locations, easements, springs, and any other appurtenances that may influence the suitability and/or useable septic installation areas must be provided on the certified Level III soils and topo map. Include all water buffers on map as well as 'shading out' all drainage swales or ditches.

_____ Final Soil Test Legend

_____ Final Test Boring Log

_____ Site Plans, Site Modification Plans, Test Pit Information

_____ Final 'Useable Septic Area (square footage) Log' for each lot per 'Pickens County Minimum Lot Sizes'

_____ For Final, if DNR/EPD water system is proposed, a current letter from EPD approving the plans to construct the public water system and approving the source of the water supply of said subdivision. WSID with Operational Permit must be provided unless the Health Authority states otherwise.

_____ If public municipal water, a final letter must be provided from the Water Authority stating that final plans are approved, and water will be provided to each lot.

_____ Land Disturbance letter

STATEMENT OF APPLICATION AND RECEIPT OF MATERIALS

I am the owner/developer of this proposed subdivision or authorized representative of same. I, _____, make application for development of this subdivision in accordance with the “*Rules of the Department of Public Health’s Rules and Regulations for Onsite Sewage Management Systems (OSSMS), Chapter 511-3-1 and minimum lot size or land area requirements for OSSMS as adopted the 6th day of March, 2001*”. I understand that that the Guidelines of Subdivision Development, Rules and Regulations, and OSSMS Manual may be found at www.georgiaeh.us . I confirm that this application along with required documents submitted to Pickens County Environmental Health (EH) are true and correct. I also understand that additional requirements may be requested by the EH upon preliminary and/or final plat review. I understand that preliminary plat review can take 2-4 weeks. I also understand that final plat review can take 4-6 weeks. Final plat review may take longer depending on any adverse conditions or additional information is observed/noted at time of final evaluation. *Reviews will not begin until all requested information is provided.

_____ Signature
 _____ Printed Name
 _____ Date

Office Use Only:

Plan Review Fee Paid? Y or N
 Per Lot Fee Paid? Y or N
 Balance Owed? _____
 Receipt Number: _____
 Date Submitted: _____
 Entered in DHD? Y or N

EHS/ADMIN Notes:

Fee Schedule:

1-7 lots: \$300 Application and review fee, plus \$150 per lot

8-20 lots: \$400 Application and review fee, plus \$200 per lot

21 + lots: \$500 Application and review fee, plus \$200 per lot

We accept cash, checks, and credit cards

Checks should be made payable to **Pickens County Environmental Health**