



Public Health
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Tuscarawas County Health Department

Tuscarawas County Health Department Point-of-Sale Evaluation Application

The Tuscarawas County Health Department (TCHD) requires Household Sewage Treatment System (HSTS) and Private Water Systems (well) inspections to be completed by registered environmental health specialists / environmental health specialists in training of the TCHD or an independent evaluator prior to the transfer of ownership of any parcel with an HSTS or private water system.

THE FOLLOWING IS MANDATORY PRIOR TO INSPECTION:

1. Completed application and applicable fee(s) must be turned into TCHD before an appointment can be scheduled. *
2. A waiver and hold harmless agreement may be submitted if the home has been vacant for more than 30 days. If the home has been vacant then the buyer and seller may agree to submit the waiver application and appropriate fee(s) for the HSTS or PWS evaluation to the TCHD prior to the transfer of property. It will then be the buyer's responsibility to contact the TCHD to schedule the inspection within 120 days of occupancy. Any deficiencies in the HSTS or plumbing shall be corrected in accordance with all applicable regulations and is the responsibility of the buyer. If not submitted or denied by TCHD for any reason, the point of sale inspection must take place. It will be the responsibility of the buyer and seller to make necessary arrangements in order to properly complete the inspection.
3. Request must be made to the TCHD office by phone, email, or in person to schedule an appointment.
4. Once all required information and fees have been received, an Environmental Health Specialist will contact the listed party to schedule the appointment. There is no guarantee on the time frame an appointment will be scheduled, availability of appointment time varies during busy seasons and staff availability. Please plan accordingly. The TCHD strongly encourages any real estate agent or seller to make contact with our office as soon as a buyer is recognized. **
5. One or more of the representatives who signs the application must be present at the property throughout the entire inspection.
6. All HSTS components with lids must be located and exposed, and have easily accessible and removable lids. This includes the following, but is not limited to, septic tanks, pump tanks, dry wells, drop boxes and distribution/diversion boxes. If you need additional information regarding the HSTS our office can provide a copy of any records on file, upon request. Please be advised, not all Tuscarawas County properties have records on file. If assistance is needed, TCHD recommends contacting a registered service provider or installer to locate components. A list of Tuscarawas County Registered Service Providers and Installers will be given upon request.
7. TCHD's staff will not enter crawlspaces or confined spaces under any circumstances. If this will be an issue, please call the office to discuss options.
8. All excessive brush, weeds, bushes, and trees near the sewage treatment system must be cut down or removed prior to appointment, please call the office for

guidance if necessary.

9. If the HSTS components are not accessible due to reasons stated above and/or not up to operating level, the evaluation will be cancelled.
10. Sufficient running water must be provided for the inspection. i.e., approximately 4 or more gallons per minute at the bathtub faucet. If there is not a bathtub or faucet capable of providing a sufficient flow rate in the dwelling, a water hose will need to be provided of sufficient length to reach the HSTS septic tank. If water is not available the evaluation will be cancelled.
11. If the HSTS contains mechanical working components, such as an aerator motor that is routed to leach lines, a water hose of enough length will need to be provided to reach the pump tank, distribution/diversion, or drop box for the soil absorption component of the HSTS. If not made available, the evaluation will be cancelled.
12. Access to the house and any other structure connected to the HSTS must be provided for the inspection. An inspection of the plumbing routed to the HSTS will be conducted. If access is not provided to the house and/or other structures the evaluation will be cancelled.
13. Septic tanks and other HSTS components shall not be pumped prior to inspection, unless determined necessary by a TCHD environmental health specialist at the evaluation or prior to appointment. The inspection will not be able to be completed if this occurs. The inspection will be cancelled.
14. If a water sample is scheduled to be taken for bacteriological analysis, and chlorine is present within the water due to recent chlorination, the sample will not be taken. Unless the applicant(s) states where the water sample is requested to be taken, the environmental health specialist will take the water sample from a point of human consumption where the screen and/or aerator can be removed from the faucet. ****

Once written request has been made for this service, the fee is NON-REFUNDABLE.

**TCHD will make every effort to accommodate closing deadlines;
however, same week appointments are highly unlikely.

***A septic tank is at operating level when the effluent is exiting the outlet of the tank and going into the soil absorption component and/or discharge location depending on the system design.

****If the PWS has recently been chlorinated, the sample cannot be taken until 48 hours after the chlorine solution has been flushed from the system.
Please plan accordingly.

AFTER THE INSPECTION:

1. A completed inspection report will expire after two (2) calendar years from the date of inspection.
2. The completed report will be delivered only to the individual(s) indicated on the application within five business days of completion of all inspections and after all test results have been received.
3. If the HSTS is creating a public health nuisance per Ohio Revised Code (ORC) 3718.011 or Ohio Administrative Code (OAC) 3701-29 that can be repaired without replacement, orders will be issued to make necessary corrections within a six-months. If the HSTS is found to be failing beyond repair per ORC 3718.011 and/or OAC 3701-29, orders will be issued to take necessary steps to replace the HSTS in accordance with OAC 3701-29.
4. If the Private Water System (PWS) is sampled and exceeds the maximum contaminant levels per OAC 3701-28-04, the PWS shall be disinfected and resampled if it is a water well. If it is another type of PWS, i.e., springs, cisterns, additional requirements may be necessary. If the PWS is found to be posing a potential health risk, TCHD may issue orders to make necessary corrections within a six-months.



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Tuscarawas County Health Department Application for Point-of-Sale Evaluation

Evaluation Requested:

_____ Home Sewage Treatment System (Septic) _____ Private Water System (Well)

Location to be Evaluated:

Owner Name		
Address		
City	State	Zip
Township		Parcel ID

Results to be Communicated and Mailed to:

Name		
Address		
City	State	Zip
Phone #		
Fax #		
Email		

Property Information:

Access to the home during inspection will be granted by:	
Phone #	
Number of bedrooms	Number of occupants in home
Date septic was last pumped	Pumper
Is the home currently occupied?	
Year the home was built	Age of septic system
Is all plumbing tied into septic system?	
Any known problems with the septic system (wet spots, back-ups, discharge)? If yes, describe.	

Septic system type:
Has the private water system (well) recently been chlorinated? If yes, when.

***** PLEASE READ THE FOLLOWING SECTION CAREFULLY BEFORE SIGNING *****

Once a written request has been made for this service, the fee is non-refundable.

I, the undersigned, acknowledge that the conclusions in this evaluation are opinions based on written documentation available in the Health District archives, a visual inspection of accessible components of the sewage system, and/or in the case of off-lot systems; sample test results utilizing standard methods of wastewater analysis. I also understand that the conclusions and/or results of this evaluation are with respect to the effectiveness of the system at the time of the inspection and in no way guarantees the future performance of the system.

I understand that any of the following MAY HINDER a full evaluation of the system:

- All components (septic/aeration tanks, lift station, distribution boxes) of the system are not uncovered and clearly visible to the Environmental Health Specialist, as is the responsibility of the homeowner or person requesting the evaluation.
- No access to the property and house.
- Excessive brush, grass, or ground cover.
- For water tests, **DO NOT CHLORINATE** the well two (2) weeks prior to water sample.

In addition, it is understood that if either the well or septic system is determined to be failing, the owner will be **REQUIRED** to make necessary repairs to the sewage system.

Signature of Property Owner or Authorized Agent

Date

Signature of Buyer(s)

Date

Office Use Only

Received by: _____ Date: _____

Fee Paid: _____ Receipt #: _____

Inspection Completed By: _____ on _____

Results sent By: _____ on _____