

# **IRWIN COUNTY SEPTIC TANK/WELL PERMIT APPLICATION PROCESS**

Steps 1 & 2 **MUST** be completed prior to submitting an application. Please **DO NOT** return an application without completing these steps. **\*\*Skip to step 5 if you want a preliminary site evaluation only for future development. Skip to step 6 if you are repairing an existing septic system.\*\***

1. Obtain an address for the property from Irwin County 911:

**Irwin County 911  
400 South Irwin Avenue  
Ocilla, GA 31774  
229-468-7459**

2. Obtain zoning approval from the building and zoning office:

**Irwin County Building and Zoning  
202 South Irwin Avenue  
Ocilla, GA 31774  
229-468-5514**

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3. Submit a completed application with the following information:
    - a. Plat or other legal description of the property
    - b. Floor plan of the home
    - c. Site plan showing location of the house, driveways, pools, wells and out buildings
  4. Property lines must be marked and the location of the home must be staked off if applicant will not be meeting health official at site.
  5. Along with the application, proper fees must be submitted to the Irwin County Health Department. Fees are as follows:
    - a. Property evaluation & septic tank permit: \$180
      - i. If you do not wish to obtain a permit, but would like to have land checked for suitability, submit a completed application with a plat of the property and the \$90 property evaluation fee. Note on the application that you want a site evaluation only
    - b. Well permit only: \$60
      - i. If well permit is applied for at same time as septic tank permit there will be no additional charge for the well permit. Note on the septic tank application that you would like a well permit.
  6. If you need to repair the drain field/septic system, submit an application along with the \$90 fee. Note on the application that you need a repair of the drain field.
  7. Please give good directions to the site. **ALL** documentation must be submitted to the health department. Incomplete applications **WILL NOT** be accepted.
  8. If you wish to meet the health official at the site, please indicate on the application and the health official will contact you to set up a time.



**Irwin County Health Department**  
 407 West Fourth Street • PO Box 2 • Ocilla, Georgia 31774  
 Phone: (229) 238-9540 • Fax: (229) 238-9542  
 www.southhealthdistrict.com/irwin

**IRWIN COUNTY SITE EVALUATION REQUEST**

I hereby authorize the County Board of Health to conduct a site evaluation on this property for the purpose of determining the suitability for:  WELL ONLY  SEPTIC SYSTEM ONLY  A WELL AND A SEPTIC SYSTEM

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Property Owner Name	Phone Number(s)
Address of Property Owner	
CITY	STATE
ZIP	
Applicant's Name	Phone Number(s)
Applicant's Address	
CITY	STATE
ZIP	
Location of Property: i.e. Subdivision (Block & Lot Number): _____	
Street Address: _____	
CITY	STATE
ZIP	
Directions to Property:	
Lot Size: _____ Acre(s) _____ Square Feet <input type="checkbox"/> Mobile Home <input type="checkbox"/> House <input type="checkbox"/> Other _____	
<b>Complete the Following if applying for a septic system:</b> <input type="checkbox"/> New System <input type="checkbox"/> Repair	
Number of Bedrooms: _____	
Average Weekly Loads of Laundry: _____	
Garbage Grinder/Disposal Unit:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Swimming Pools:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Oversized Tubs (i.e. Hot Tub on Porch/Patio):	<input type="checkbox"/> YES <input type="checkbox"/> NO
Sprinkler System:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Plumbing Stub Out Location:	<input type="checkbox"/> Slab <input type="checkbox"/> Crawl Space <input type="checkbox"/> Basement <input type="checkbox"/> Split Level
<b>WATER SUPPLY:</b> <input type="checkbox"/> Public <input type="checkbox"/> Existing Individual Well <input type="checkbox"/> I need to drill a well	
Type of Septic System:	
<input type="checkbox"/> Conventional Gravel System	
<input type="checkbox"/> Alternative System:( <i>system requested:</i> _____)	
<input type="checkbox"/> Contractor's Choice	
Signature (Owner or Applicant)	Date

**COMPLETE SITE PLAN ON BACK**

The following information must be provided: 1) lot sketch showing lot dimensions, proposed building location/dimensions, proposed building line and side line distances; 2) street or road names; 3) well location if applicable and well locations on adjacent property; 4) driveway, patio or other impervious/paved surfaces; 5) underground utilities; 6) plumbing sub out and proposed drain field location; 7) location of easements, wetlands, and flood plains.

**SKETCH**

The above information as furnished is true and correct to the best of my knowledge. The applicant and/or owners *are* responsible for adverse soil conditions, such as rock or water tables, encountered. Sites with poor percolation, redoximorphic features or impervious soil horizons within 24 inches of the planned absorptions trench bottom, a seasonal high-water table within 30 inches of the original ground surface or any other questionable soil features will be referred to a certified soil classifier, registered engineer or registered geologist for evaluation. Visit <http://health.state.ga.us/programs/envservices/landuse.asp> for rules, product information, certified professionals, home owner's guides, etc.

<b>FOR STAFF USE ONLY:</b>			
Boring #	Est. Perc Rate	Depth to Water Table	NOTES / SPECIAL CONDITION: