

## Subdivision Evaluation Procedures and Checklist (Served by Subsurface Sewage Disposal)

**Instructions for subdivisions with subsurface sewage disposal systems:** It is the owner/applicant's responsibility to furnish Eastern Idaho Public Health (EIPH) with **ALL** the necessary information to satisfy the intent of Idaho Code Title 50 Chapter 13 for the lifting of sanitary restrictions. **(This may include ground and/or surface water monitoring through a complete spring and summer season.)**

Before any on-site work will be done by EIPH, an application, fee, and preliminary plat created by an Idaho Licensed Surveyor must be submitted to EIPH. If any soils, ground water (GW) monitoring, wetland, or floodplain work has been done on the property by an engineer, please submit those reports with the application.

Failure to provide all information as requested, or if the environmental evaluation shows the Subsurface Sewage Disposal Rules (IDAPA 58.01.03) can't be met, EIPH may deny the lifting of sanitary restrictions. Also contact the county or city jurisdiction where the proposed subdivision is located and begin working on their requirements simultaneously with EIPH's requirements.

### Steps for developing property:

1. **Schedule a meeting with EIPH to present your proposal, and bring the following:**
  - a. The completed EIPH application form.
  - b. The appropriate Land Development fee as required on the EIPH fee schedule (currently \$150 per lot). Half the fee will be required up front and then the other half when the plat is signed.
  - c. A full size scaled preliminary plat of the proposed subdivision showing additional information requested under "**Preliminary Plat Map**" (#4 - #17) on the checklist.

#### **At the proposal meeting, EIPH will:**

- a. Review the subdivision process.
  - b. Discuss timelines and onsite evaluation and monitoring.
  - c. Discuss other items as needed or requested. (i.e., accessibility to central sewer, wetlands. Etc.)
2. **Schedule a time to dig test holes when EIPH can be present for inspections.** EIPH will evaluate test holes to determine soil type and depth to any limiting layers.
3. **Evaluation by EIPH.** After the initial onsite, EIPH will determine if more test holes, ground/surface water monitoring or other information will be needed. **If GW is encountered or expected within 10 feet of surface, or if temporary or intermittent surface water is suspected on property, ground and/or surface water monitoring must be completed through a complete spring and summer season.**
4. **Finalization and signature of plat.** After all required information has been submitted, and EIPH has determined that the Subsurface Sewage Disposal Rules (IDAPA 58.01.03) can be met, the applicant will be given the correct sanitary restriction language to be placed on the plat. The applicant will pay any remaining fees at the time EIPH signs the plat.

County	EHS	Email Address	Phone Number
Bonneville	Nathan Taylor Chris Ellis	NTaylor@EIPH.Idaho.gov CEllis@EIPH.Idaho.gov	(208) 523-5382 (208) 533-3172
Clark	Nathan Taylor	NTaylor@EIPH.Idaho.gov	(208) 523-5382
Custer	Amy Shaw	AShaw@EIPH.Idaho.gov	(208) 533-3175
Fremont	Chris Ellis	CEllis@EIPH.Idaho.gov	(208) 533-3172
Jefferson	Vincent McHenry	VMcHenry@EIPH.Idaho.gov	(208) 533-3170
Lemhi	Melinda Fuentes-Mobo	MFuentes-Mobo@EIPH.Idaho.gov	(208) 533-3176
Madison	Chris Ellis	CEllis@EIPH.Idaho.gov	(208) 533-3172
Teton	Shane Christian	SChristian@EIPH.Idaho.gov	(208) 533-3174

Subdivision Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Checklist:** The checklist serves as a guide for the items needed for approval. As items are completed, check them on this list. If an item does not apply, check the NA box and attach a short note as to why it does not apply in your submission, referencing the number on the checklist.

	Item	Yes	NA	EIPH Use
1	Application – Complete	<input type="checkbox"/>	<input type="checkbox"/>	
2	Fees Paid (Half due upon submittal and the other half at signature)	<input type="checkbox"/>	<input type="checkbox"/>	
3	Preliminary Plat Map	<input type="checkbox"/>	<input type="checkbox"/>	
	<b>Preliminary Plat Map (the following must be included)</b>	<input type="checkbox"/>	<input type="checkbox"/>	
4	Plat must be scaled and show 5-foot topographical contour lines	<input type="checkbox"/>	<input type="checkbox"/>	
5	Color code all areas exceeding 20% and 45%	<input type="checkbox"/>	<input type="checkbox"/>	
6	Proposed lot lines	<input type="checkbox"/>	<input type="checkbox"/>	
7	All easements and any encroachments (Approx.)	<input type="checkbox"/>	<input type="checkbox"/>	
8	All existing underground pipelines, power lines, irrigation lines or other utilities	<input type="checkbox"/>	<input type="checkbox"/>	
9	Existing facilities or structures	<input type="checkbox"/>	<input type="checkbox"/>	
10	Show/document proximity to Municipal sewer or water	<input type="checkbox"/>	<input type="checkbox"/>	
11	Existing wells on and within 100 feet of the development	<input type="checkbox"/>	<input type="checkbox"/>	
12	Existing drainfields on and within 100 feet of the development	<input type="checkbox"/>	<input type="checkbox"/>	
13	Surface water: streams, lakes, ponds, springs, wetlands on or within 300 feet of development shown	<input type="checkbox"/>	<input type="checkbox"/>	
14	Proposed locations of any new or existing man-made water features	<input type="checkbox"/>	<input type="checkbox"/>	
15	Ditches and canals on and within 50 feet of development	<input type="checkbox"/>	<input type="checkbox"/>	
16	Drainage or run-off areas, flood ways/plain or problem drainage areas	<input type="checkbox"/>	<input type="checkbox"/>	
17	Rock outcrops and scarps	<input type="checkbox"/>	<input type="checkbox"/>	
	<b>Additional information that may be required by EIPH</b>	<b>EIPH USE</b>		
18	Test hole locations (show on revised/updated plat after onsite evaluation)			
19	Depth logs and soil profiles			
20	Determine the level and duration of the normal and seasonal high ground water			
21	Any jurisdictional wetlands located on property delineated			
22	Proposed location of wells and septic systems (including replacement areas)			
23	Shared well water system checklist (2-14 lots served by one well)			
24	Provide the DEQ letter of approval of LSAS/Central system engineered design			
25	Provide the DEQ letter of approval of the PWS engineered design			
26	Provide "Will Serve" letter from PWS serving subdivision			
27	Place any applicable plat notes on the plat			

**Health Certificates** – Idaho Code Section 50-1326 states in part: **“All plats to bear a sanitary restriction...** Any plat of a subdivision filed in accordance with Chapter 13, Title 50, Idaho code... shall be subject to the sanitary restriction.”



**Public Health**  
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Districts

## Application for Subdivision/Land Development Review

FEES:  
Central Water Sewer  
Plats: \_\_\_\_\_

On-Site Sewage Plats or  
Parcel Splits: \_\_\_\_\_

Developer/Applicant Name: \_\_\_\_\_ Phone # \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street/P.O. Box City State Zip

E-mail address: \_\_\_\_\_

Name of Subdivision: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_

Location of Subdivision: \_\_\_\_\_

Legal Description: Township \_\_\_\_\_ Range \_\_\_\_\_ Section \_\_\_\_\_ ¼ Section \_\_\_\_\_

Parent Parcel Number of Site: \_\_\_\_\_

Property Owner (if different): \_\_\_\_\_ Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street/P.O. Box City State Zip

E-mail address: \_\_\_\_\_

Engineer: \_\_\_\_\_  
Name Phone License #

Mailing Address: \_\_\_\_\_  
Street/P.O. Box City State Zip

E-mail address: \_\_\_\_\_

Surveyor: \_\_\_\_\_  
Name Phone License #

### *Project Description*

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

**Land**

Acres \_\_\_\_\_ Total # Lots \_\_\_\_\_ Buildable \_\_\_\_\_ Non-buildable \_\_\_\_\_  
Minimum Lot Size in Acres \_\_\_\_\_ Average Lot Size in Acres \_\_\_\_\_

**Water**

Type of Water:  Private Water  Shared Well (Non-Public)  Public Water System (Will serve letter required)  
Water Supply:  Surface Water  Ground Water  
If Public Water System, services provided by: \_\_\_\_\_

**Sewer**

Type of sewage disposal system (required):  
 Individual Septic (Will not serve letter required if project is within 2,000 feet of municipal sewer)  
 Municipal Sewer (Will serve letter required)  
 Central Septic &/or LSAS Septic (>2 dwellings or 2500 gpd)  
If municipal sewer, services provided by: \_\_\_\_\_

**Plat**

Type of Plat:  Residential  Commercial  Industrial  
Location:  City  County  Impact Zone  
Directions: \_\_\_\_\_

**Stormwater**

Type of Disposal:  Shallow Injection Wells (drywells)  Grassy Swale  N/A  
Service for:  Street Only  Street and Lots  Other  N/A

**Chemical/Hazardous Materials**

(Commercial or Industrial Subdivisions Only)

Are chemicals or petroleum products likely to be stored/handled/used at these sites?  Yes  No  N/A  
If yes, please explain: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**This Section for Official Use only**

If on-site sewage disposal systems used; date predevelopment meeting held with District (if required):  
Date of Meeting: \_\_\_\_\_

Application Date _____	Fee \$ _____	Receipt # _____
Final Plat Approval Date _____	Fee \$ _____	Receipt # _____

Sanitary Restrictions:  In-Force  Satisfied  See Attached Letter

EHS Signature: \_\_\_\_\_ EHS #: \_\_\_\_\_ Date: \_\_\_\_\_