

TIPS ON COMPLETING THIS APPLICATION

- YOUR EMAIL ADDRESS MUST BE LEGIBLE
- ALL residential and commercial applications require information on the septic to be provided.
- ANY applications that do not show the location of septic and well in relation to the proposed project will not be accepted.
- A copy of the approved septic design/plan MUST be attached.
- Please provide accurate placement of the proposed project component (deck, stairs, pool... etc) on the drawing, in relation to the well, and all septic components.
- Provide distances in feet.

I M P O R T A N T

- IF applying for: Addition expansion and/or Addition renovation ...
And... your system is older than 10 years old; we require an Engineer's evaluation or satisfactory home septic evaluation report.
If no records exist; we may require an Engineer to provide a septic location drawing.
- IF applying for: Accessory Structure...
And... no records exist; we may require an Engineer to provide a septic location drawing.

DO NOT GO TO THE SUSSEX COUNTY HEALTH DEPARTMENT UNLESS YOU ARE TOLD TO GO THERE – BRING YOUR APPLICATION TO THE VERNON MUNICIPAL BUILDING.

Activity Code: _____

Sussex County Department of Health and Human Services
 Division of Health - Office of Environmental Health
 201 Wheatsworth Road, Hamburg NJ 07419
 973-579-0370 – 973-579-0399 (fax)
Health@sussex.nj.us
www.sussex.nj.us/health

SYSTEM REVIEW OF INDIVIDUAL SUBSURFACE SEWAGE DISPOSAL

1. Municipality: _____	Block: _____	Lot: _____
Physical Street Address: _____		

2. Name of Applicant: _____		
Applicants Address: _____		
City: _____	State: _____	Zip: _____
Email: _____	Phone: _____	

3. System Review Type Needed: _____	Review Fee: \$25.00
☐ System Review for Local Construction/Building/Zoning	
☐ System Review for Lending Institution (skip #4A/4B)	

4A. ☐ I Residential	
☐ i. Addition Expansion – Adding Bedrooms	☐ Yes or ☐ No ☐ NA
☐ ii. Addition Renovation- Relocating existing rooms	☐ Yes or ☐ No ☐ NA
☐ iii. Accessory Structure – Garage, Shed, Pool, other	☐ Yes or ☐ No ☐ NA
Attach three (3) copies of the existing and proposed Residential floor plans. Floor plan maybe professional architectural drawings or a legible sketch on graph paper. All rooms need to be labeled with dimensions and description (i.e. bedroom, kitchen, closet).	

4B. ☐ I Commercial/Institutional		Type of Facility: _____
☐ i. Change of Use – Retail to Food, other	☐ Yes or ☐ No ☐ NA	
☐ ii. Expansion – Increasing Staff/Square-footage	☐ Yes or ☐ No ☐ NA	
☐ iii. Accessory Structure – Garage, Shed, Pool, other	☐ Yes or ☐ No ☐ NA	
Attach three (3) copies of the existing and proposed Commercial floor plans which are professional architectural drawings. All rooms need to be labeled with dimensions and description (i.e. office, kitchen, storage).		

5. Individual Subsurface Sewage Disposal System Information	
How old is the Sewage Disposal System? Provide Year Installed: _____	
Have you provided a copy of the Approved Design? Design Attached: ☐ Yes or ☐ No	
Is the Approved Design on File with County? ☐ Yes or ☐ No ☐ UKN	
Check Public Records Search at www.sussex.nj.us/health	

☐ Approved	Date: _____	For Agency Use Only:
☐ Hold	Date: _____	
☐ Denied	Date: _____	

6. Application Checklist:

- ☐ This Form – System Review of Individual Subsurface Sewage Disposal.
- ☐ Review Fee - \$25.00 payable to "County of Sussex".
- ☐ 3 Copies of Existing and Proposed Floor Plans (County/Municipality/Applicants).
- ☐ Sewage information attached, on file with Division of Health or unavailable.
- ☐ Residential Addition – Engineers evaluation attached for systems installed greater than 10 years ago. (4ai or ii)
- ☐ Residential Accessory – Engineers location drawing attached if no records on exist. (4aill)
- ☐ Commercial – Engineers evaluation attached.

7. Description of proposed project:

5. I hereby certify that the information furnished on Form 1 of this application is true.

I am aware that false swearing is a crime in this State and subject to prosecution.

Signature of Applicant:

Date:

NJAC 7:9A-4.3 – Minimum Required Separation Distances (feet)

Component	Well	Waterline	Water Course	Occupied Building	Property Line	Disposal Field	Seepage Pit	Swimming Pool
Sewer line	25	1	-	-	-	-	-	-
Tank	50	10	25	10	5	-	-	10
D-Box	50	10	25	10	5	-	-	10
Field	100	10	50	25	10	50	50	20
Pit	150	25	100	50	20	50	50	30
Dry Well	50	-	-	-	-	50	50	-

Tips on Public Records Search at www.sussex.nj.us/health

Click on Magnifying Glass Icon or choose Septic Records Search. Click I Agree. Choose Public Access – Septic and Well. Skip Dates. Enter Municipality Name. Skip Municipal Code. Enter Block. Enter Lot. Click Search.
Call for Assistance if you would like help 973-579-0370.

Please Note: For Residential Properties where no records exist: A location drawing and evaluation by N.J. Professional Engineer for size and function to accommodate the proposed improvement will be required.

Please Note: For Residential Properties where the system is more than 10 years old, evaluation by N.J. Professional Engineer will be required to verify the is no malfunction.

Please Note: All Commercial Properties will require evaluation by N.J. Professional Engineer for size and function to accommodate the proposed improvement.

Lending Institution/FHA Approvals: