

Summit County Public Health Operation Permit Frequently Asked Questions

1. Why do I need an Operation Permit?

a. Operation Permits are required by the new 2015 Ohio Administrative Code Chapter 3701-29. One of the main driving forces behind issuing Operation Permits is to provide more homeowner education regarding maintenance of septic systems. The Operation Permits will also ensure that proper maintenance is being performed and may increase the life of the septic system. Through the Operation Permit, homeowners can learn more about their septic system and SCPH will be able to offer more educational opportunities for the public. Additionally, resources can be found on the SCPH website at: www.scph.org.

2. When did this program start?

a. This a new program starting in 2015.

3. What are the requirements for my septic system?

a. The maintenance requirements for your septic system should be printed on your Operation Permit. They are also available at our website www.scph.org.

4. How do I find out what type of septic system I have and what fees will be assessed to me?

a. A copy of your septic system records can be requested at wqrecords@schd.org or by calling 330-926-5600. Your fee will be based on the system type and year of installation. The fees range from \$20 to \$30 every two years or \$30 annually for an overall cost of \$10 to \$30 annually.

5. How can I pay for the Operation Permit?

a. Summit County Public Health accepts payments of cash, check and money order. The payment can be mailed with the invoice you receive in the mail, or dropped off in person at our office.

6. What happens if I do not pay the fee?

a. Fees average \$10.00 to \$30.00 a year. Summit County Public Health will provide notice by mail of any permit fees that are due. SCPH will send out 2 notices regular mail and the final by certified mail. Each time an owner will be given adequate time to pay the fee. If the fee is not paid following the 3rd notice, SCPH will place the fee on the tax bill as a lien plus a 25% late penalty. The County Ohio law allows the fiscal office to charge a fee to cover their cost of placing the fee on the taxes. That lien will then be required to be paid in

the next tax year. The 3rd notice will also include information on how a resident may appeal the action to place the lien.

7. What is SCPH planning to do with the monies collected through Operation Permit fees?

a. Fees received from the Operation Permit program will pay for the materials used for mailings, postage for mailings (including certified mail when needed), personnel cost of completing mailings, personnel cost of receiving operation permits and posting payments to each account, maintaining a database for the program, personnel time in reviewing service reports from each system, personnel time of following up on issues with septic systems, and personnel time of conducting quality control to ensure service providers are conducting adequate and accurate service of septic systems.

8. Who can perform the required maintenance?

a. Any registered service provider that services your type of septic system can perform the required maintenance.

9. Who submits the proof of required maintenance?

a. All maintenance must be submitted by a registered service provider.

10. I have questions about my septic system. Who can I call?

a. You can call a registered service provider or Summit County Public Health at 330 926-5600. You can also email wqcomments@schd.org.

11. What happens if I don't do the required maintenance?

a. If you do not do the required maintenance it will shorten the life expectancy of your septic system. An inspection will be done by SCPH staff on a pass/fail basis. An additional fee will be charged for this inspection, and orders to repair/replace your septic system may be issued.

12. Is there any help for homeowners who cannot afford to replace their septic system?

a. Since 2009, our department has been actively seeking grants/loans to replace failing septic systems for low income families. In 2014, 27 septic systems were replaced with minimal fees paid by the owners for replacement septic systems using these grants/loans. The Summit County Executive has earmarked some of the County's allocation of community development block grant funds to also assist in septic system replacement and sewer connections. For more information please contact the Department of Community and Economic Development at 330-643-8013 or via email at hmiller@summitoh.net.



SUMMIT COUNTY PUBLIC HEALTH

1867 West Market St. • Akron, Ohio 44313 • 330-926-5600 • Fax 330-923-6436

Septic System Operation/Maintenance Report Sewage Treatment System (STS)

Address:			PSD:
Mailing Address (If different from above):			
City: Owner:			
Phone Number: Current Service Contract (SC): Tyes Tho			
Phone Number: Current Service Contract (SC): Yes No If Yes, Date SC Expires: / / and SC covers all system components: Yes No Tout (SC):			
Tank(s): Tank 1 Tank 2 Appear to be structurally sound: □Yes □No □Yes □No Inlet(s) and outlets have risers to grade: □Yes □No □Yes □No			
Outlet "T" is present: \[Supplies The Distriction of the Distr			
After testing sludge level, tank appears to need pumped: \(\sum_{Yes} \sum_{No} \) \(\sum_{Yes} \sum_{No} \)			
Tank is overfull, or above normal operating level? ☐Yes ☐No ☐Yes ☐No			
Aeration Unit:			
Motor on and functioning: Yes No Air intake is open and free of obstructions: Yes No UV light functioning: Yes No List services performed on aeration unit:			
Einel Devices (check eveter top)			
Final Device: (check system type) □ Leaching trenches			
☐ Low pressure piping leaching trenches:			
System head pressure ft. Lines need backflushed: Tyes No			
☐ Leach/Dry well(s):Tank has riser: ☐ Yes ☐ No Depth of effluent to top of tank:			
☐ Mound: System head pressure:ft. Mound needs backflushed: ☐ Yes ☐ No			
☐ Drip Distribution: Drip assurance company:			
☐ Spray Irrigation			
☐ Evapotranpiration (ET's)			
Surfacing/ponding on the surface of the ground: Yes No			
Set to alternate fields: Yes No If yes, which line/field is now being rested:			
Are distribution boxes to grade: ☐Yes ☐No Distribution boxes overfull: ☐Yes ☐No			
Discharging STS: NPDES Sample taken Yes No (If sample was taken results must be attach to this form) Non-NPDES: Aeration Unit Filter Bed			
Inspection Port Present: Yes No Quality of Final Effluent: Good Fair Poor Not Visible			
At time of inspection overall condition of septic system was: Good Fair Poor			
Comments/Explanation of Maintenance Performed on STS:			
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Service Company Name:		Serv	vice Provider Number:
	nspector Signatur		Date of Inspection: / /
SCPH Use Only: Follow-up required: Tyes No			
SCPH Representative Name: Employee Number: Date: / /			