



## SEPTIC PERMIT APPLICATION (*Effective January 1, 2026*) INFORMATION REQUIRED TO APPLY FOR A SEPTIC PERMIT

- **APPLICATIONS WILL NOT BE ACCEPTED WITHOUT THE FOLLOWING:**
  - Completed, signed, and dated application
  - Plot plan drawn to scale (see Plot Plan Checklist)
  - Copy of Warranty Deed or current Tax Notice
    - Permit issued to the name listed
  - Correct fee payment
- **FEES**
  - **\$300 - Speculative On-Site Evaluation**
    - If the Full Septic Permit is applied for and issued within **12 months** of payment of the \$300 Speculative On-Site Evaluation fee, the \$300 will be **credited toward the total permit fee**.
  - **\$925 - Full Septic Permit** (Site Evaluation & Permit Fee Total)
- **SPECULATIVE ON-SITE EVALUATION**
  - Property owner/applicant must provide test hole(s)
  - Test hole(s) must be **8-10 feet deep**, depending on soil type
  - Test hole(s) must be within **50 feet of the proposed drain field and replacement area**
  - Septic permits are valid for **two (2) years** from the date of issuance.
  - Permits may be renewed **for an additional two (2) years** for a **\$40 renewal fee**, provided the renewal is completed **before the permit expires**.

**For additional information contact your local Environmental Health Specialist:**

County	Contact Number	EHS	Email
Bannock	208-221-3421	Kathleen Price	<a href="mailto:kprice@siph.idaho.gov">kprice@siph.idaho.gov</a>
Bingham	208-479-3081	Elisha Mabey	<a href="mailto:emabey@siph.idaho.gov">emabey@siph.idaho.gov</a>
Bear Lake and Franklin	208-221-3419	Kailey Kunz	<a href="mailto:kkunz@siph.idaho.gov">kkunz@siph.idaho.gov</a>
Butte and Power	208-221-3424	Mike Reas	<a href="mailto:mreas@siph.idaho.gov">mreas@siph.idaho.gov</a>
Caribou	208-251-3485	Tammi Crosbie	<a href="mailto:tcrosbie@siph.idaho.gov">tcrosbie@siph.idaho.gov</a>
Oneida	208-223-2848	Alyssa Gardner	<a href="mailto:agardner@siph.idaho.gov">agardner@siph.idaho.gov</a>

# APPLICATION-Subsurface Sewage Disposal, Page 1



**Idaho Public Health Districts**

**Southeastern Idaho Public Health**

Fee's:	/	Date:
Receipt # :	Permit #:	
Receipt # :	(Official Use Only)	
Parcel # :	Acres:	

Property Address (If available): \_\_\_\_\_ City \_\_\_\_\_

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

Subdivision: \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_

Directions (nearest crossroad): \_\_\_\_\_

Applicants Name: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone # : \_\_\_\_\_

City : \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Applicant is :  Landowner  Contractor  Installer  Other \_\_\_\_\_

Owners Name : \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address : \_\_\_\_\_ Phone # : \_\_\_\_\_

City : \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Type of Septic Installation :  New  Expansion  Repair  Tank Only

Proposed Usage :  Residential  Non-Residential  Other (i.e. barn, shop, etc.)  
 Central (more than two dwellings)  Large Soil Absorption (2,500 gal/day or ten or more dwellings) # of Units: \_\_\_\_\_

Is there an existing structure on this parcel?  Yes  No Year Built: \_\_\_\_\_

Number of Bedrooms: (residential only) \_\_\_\_\_ Number of bathrooms: \_\_\_\_\_

Number of People: \_\_\_\_\_ Square Footage: \_\_\_\_\_ Garbage Disposal?  Yes  No

Non-Residential Flow Design: \_\_\_\_\_ Average: (gallons per day (gpd)) \_\_\_\_\_ Peak: (gpd) \_\_\_\_\_

Foundation Type :  Basement  Crawl Space  Split Level  Slab

Property is located :  Inside City  Inside County

Zoning certificate or other county documentation submitted?  Yes  No  N/A

City sewer or central wastewater collection system 1000 feet or less to structure?  Yes  No

Water Supply :  Private Well  Shared Well  Public Water System, Number: \_\_\_\_\_  
 (Non-Public)

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

By my signature above, I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that should evaluation disclose untruthful or misleading answers, my application may be rejected or my permit canceled. I accept the responsibility to notify the Health District of any changes to the above information if performed prior to completion of the permitted system. I hereby authorize the Health District to have access to this property for the purpose of conducting a site-evaluation. I understand that this application and the subsequent permit is non-transferable between property owners and/or project sites. I understand that the application will expire two (2) years from date of purchase. The permit, when issued, may be renewed if the renewal is applied for on or before the expiration date



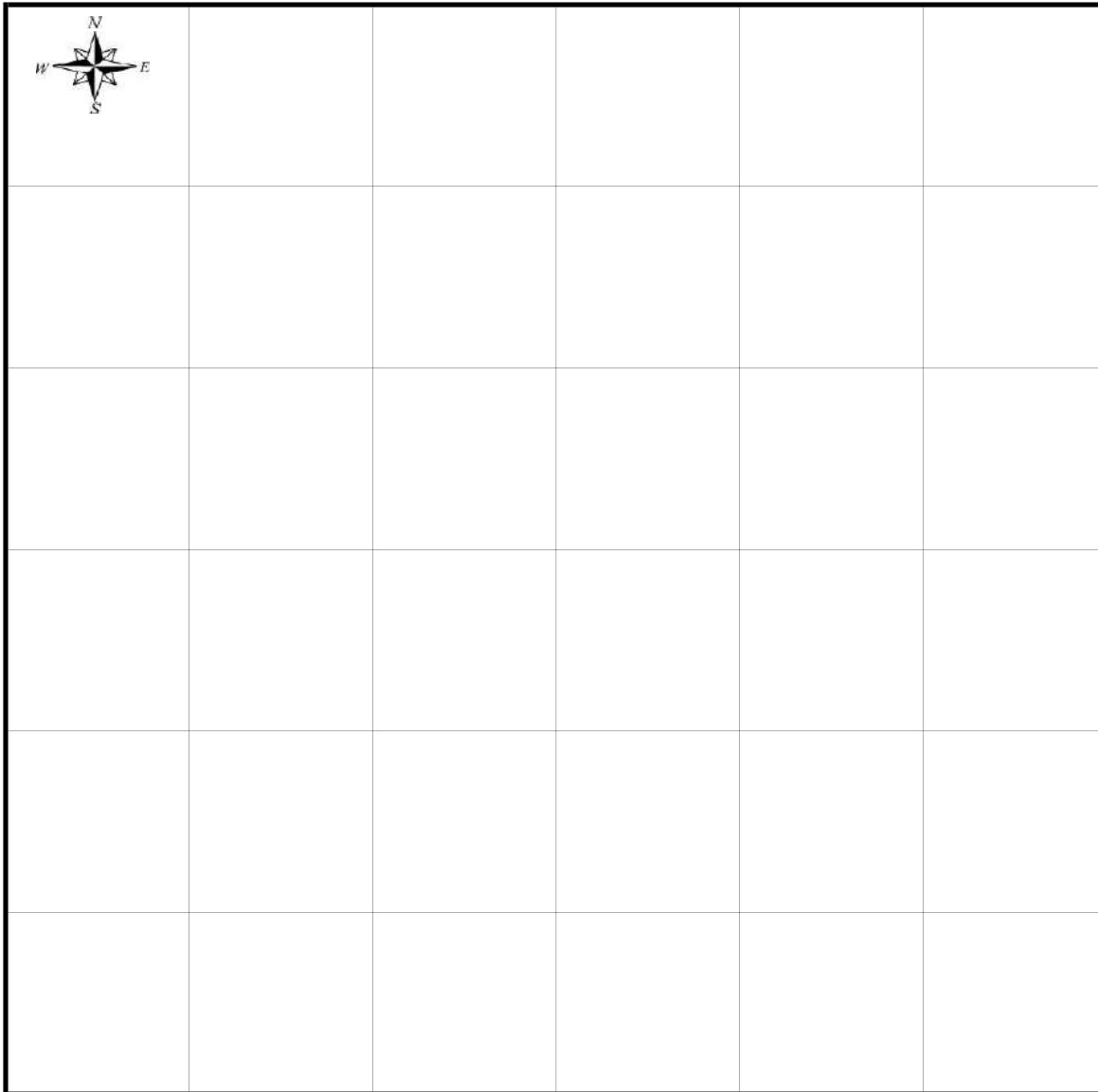
**Public Health**  
Prevent. Promote. Protect.

## **Idaho Public Health Districts**

Please draw an aerial view of the property showing the outline of buildings, property lines, well location(s), water lines, location of septic tank and drainfields, location of drainfield replacement area, ditches and streams, easements and right of ways, driveway and parking area, cut banks, and location of street or road. Indicate dimensions and separation distances of each from septic tank and drainfield.

### **PLOT PLAN**

SCALE: 1" = \_\_\_\_\_'



**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

By my signature above, I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that should evaluation disclose untruthful or misleading answers, my application may be rejected or my permit canceled. I understand that any deviation from the plans, conditions, and specifications, is prohibited unless it is approved in advance by the Director or his designee. I hereby authorize the Health District to have access to this property for the purpose of conducting a site-evaluation.

**(OFFICIAL USE ONLY)**

Plot Plan Approval Date: \_\_\_\_\_ EHS Name: \_\_\_\_\_ EHS #: \_\_\_\_\_



# Southeastern Idaho Public Health

## Plot Plan Checklist

Please **show and label** all proposed distances, making sure to obtain these **MINIMUM** distances:

### **SEPTIC TANK:**

- 50' between any well and septic tank (including those on neighboring properties)
- 10' between private water distribution line and septic tank
- 5' between dwelling foundation/building and septic tank

### **DRAINFIELD:**

- 100' between any well (including those on neighboring properties) and drain field/replacement area
- 25' between private water distribution lines and drain field
- 10' between crawlspace/slab and drain field and/or 20' between basement and drain field
- 50' from any ditches/canals to drain field (including those on neighboring properties)

### **OTHER:**

- 5' between property lines and septic tank/drain field/replacement area
- Indicate areas that are flood irrigated.
- Show the location of all existing and/or proposed buildings and structures
- Indicate slopes greater than 20%
- Show location of all scarp (slopes greater than 45%), cuts, and rock outcrops
- Indicate all gullies and run off areas
- Show location of all surface waters (rivers, lakes, streams, springs, seeps, marshy areas, etc.) within 300' of property lines.
- Show location and size of all existing and proposed wastewater systems including replacement areas
- Indicate all existing and/or proposed water system features, including water lines and standpipes
- Show and label a North directional arrow
- Label the dwelling, driveway, property lines, and street(s)
- Sign and date the plot plan

\*\*SEE PLOT PLAN EXAMPLE ON BACK

## PLOT PLAN EXAMPLE

## Dimensional Requirements for a Standard Drainfield

