



MIAMI COUNTY
Public Health

510 W Water St., Suite 130, Troy, Ohio 45373
Ph: 937-573-3534 Fx: 937-573-3502

Prevent. Promote. Protect.

www.miamicountyhealth.net

AS-BUILT RECORD MOUNDS

Read this carefully, the health department will not approve an installation until all the following information is received

OAC 3701-29-09 (E),(F)

(E) The board of health may require advance notification from the installer to accommodate inspections. The construction drawing, any applicable system start-up information, or other required or necessary documentation shall be available at the time of inspection.

(F) A drawing(s) of the completed system installation shall be provided by the registered installer for a completed STS installation or alteration. The drawing(s) shall be legible and signed by the installer indicating that the STS was installed in accordance with these rules and shall include a record on eight and a half inch by eleven inch or larger pages with copies provided to the owner and the board of health for inclusion in the permit file. Use of the STS design with construction notes and measurements may be acceptable. The drawing(s) shall also include the following items, as applicable:

(1) Any changes to the approved STS design including, but not limited to, distances from installed STS components to any items having applicable horizontal isolation distances. A change in location of a STS from that designated on the STS design shall not be made without prior approval by the board of health and shall not violate horizontal isolation distances required by this chapter.

(2) A designated vertical reference point or benchmark with its location marked at the site.

(3) Plan view drawing for installed STS components per the STS design, including identification of specific products that were installed as part of the STS.

(4) Any additional information components and materials may be required by the board of health.....

Elevations for the system to include the sewer lateral (from the clean out to tank), lateral from the tank to the pump chamber, if applicable.

AS-BUILT RECORD MOUNDS

ADDRESS OF SYSTEM _____

OWNER NAME _____ DATE _____

THIS STS WAS INSTALLED IN ACCORDANCE WITH OHIO ADMINISTRATIVE CODE 3701-29

INSTALLER SIGNATURE _____

INSTALLER PHONE _____

USE THE BACK OF THIS PAGE OR ATTACH SHEETS AS NEEDED

**A SYSTEM WILL NOT BE APPROVED UNTIL THE AS-BUILT DRAWING IS
RECEIVED BY THIS DEPARTMENT**

Approval Check List Mounds

Property Address _____ Owner _____ Sewage ID#: _____

Township _____

Designer _____ Email _____ Phone _____

Tank

Tank Mfg _____ Size _____ gallons

Effluent Filter Mfg_____Model_____ANSI 46_____

Lateral ASTM _____ SCH 40 _____ Pipe from tank to pump chamber ASTM _____

Pump Chamber

Pump Chamber Mfg _____ Size _____ gallons

Pump Mfg _____ Pump Specifications _____

Main Pipe diameter _____ inches, Length _____ ft, ASTM _____ Depth in ground _____ inches

Does it drain back to the pump chamber _____

Control Panel/Alarm System

Mfg _____, Meets UL or CSA standards _____

Means of measuring total flow	elapsed time meter	event counter	flow meter
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Location _____, Height above grade _____ ft

Written instructions for operations and alarm events provided _____

Mound

Mound length _____ ft, Mound width _____ ft,

Absorption trench length _____ ft, Absorption trench width _____ ft, Absorption trench depth _____ inches

Coarse Aggregate specifications_____Mfg_____

Sand Depth _____ inches, Sand specifications _____ Mfg _____

Depth of fill over bed _____ inches, Depth of fill over side/end slopes _____ inches

Alternative Distribution Media _____ Mfg _____

Lateral pipe diameter _____ inches, Spraying, UP or DOWN, Manifold diameter _____ inches

Orifice diameter _____ inches, Spacing _____ Inches, Orifice shielding description _____

Initial distal/head operating pressure/height_____,

Distal/head operating pressure valve mfg _____ model _____

Means of measuring operating head pressure

Means of scouring or flushing distribution laterals

APPROVED DISAPPROVED REINSPECTION REQUIRED \$50.00 FEE

ANY SYSTEM WITH A PUMP AND ALARM/COUNTER ON IT WILL NOT BE APPROVED UNTIL THOSE HAVE BEEN INSTALLED, ARE OPERATIONAL, AND HAS HAD ALL REQUIRED ELECTRICAL INSPECTIONS COMPLETED AND APPROVED BY THE MIAMI COUNTY BUILDING DEPARTMENT.

MOUNDS REQUIRE A COVER/FILL MATERIAL OVER THEM WILL REQUIRE MORE THAN ONE INSPECTION AND WILL NOT BE APPROVED UNTIL THE COVER AND SEEDING OF THE SYSTEM ARE COMPLETED.

Reason for Disapproval:

Additional Information:

Revised 5/2016