

PROCEDURES FOR OBTAINING A PERMIT

Instructions:

Please fill out and submit this Notice of Intent to Discharge (NOI) form, and supplemental required information identified on page 2 of the form, to obtain permission to construct and discharge from a new wastewater system comprised of a composting toilet, gray water irrigation system and conventional septic system. For further information, see the Residential Gray Water Permitting in Coconino County brochure and the Gray Water Informational Packet.

Submit this completed packet with supplemental submission requirements to:
plansubmittals@coconino.az.gov:

The submittal of the NOI form and supplemental documents will begin the following permitting process:

- 1) Upon receipt of the submittal, a permit tech will send the applicant an access code for online fee payment.
- 2) Once the fee is paid, plans are reviewed and if there are deficiencies, a Request for Additional Information is sent.
- 3) Applicant or designer addresses identified deficiencies and submits updated plans and documents to plansubmittals@coconino.az.gov.
- 4) If a submittal is denied, resubmittal will require a fee.
- 5) If changes occur with the plans, the County must be notified.
- 6) When all deficiencies are addressed, a **Construction Authorization** (permit to construct) will be issued and mailed to the owner.
- 7) The permit will expire in two years, if not renewed.
- 8) Upon completion of construction, submit a Request for Discharge Authorization and all required information (see inspection schedule) to the CCEQ-CD to initiate the agency's post-construction review and inspection;
- 9) Satisfy any deficiency request arising from the agency's post-construction review of the facility;
- 10) Receive a **Discharge Authorization** (authorization to operate your system) from CCEQ-CD the agency authorizing operation and discharge from the facility in accordance with terms of the general permit and applicable requirements of statute and rule.

Permit# EQ- -

SITE INFORMATION			
SUBDIVISION: _____	UNIT # _____	LOT # _____	
ASSESSOR'S PARCEL # _____	SIZE IN ACRES: _____		
PROPERTY ADDRESS: _____			
TOWNSHIP: _____	RANGE: _____	SECTION: _____	, _____ 1/4 _____ 1/4 _____ 1/4
LATITUDE: _____ ° _____ ' _____ " N	LONGITUDE: _____ ° _____ ' _____ " W		

APPLICANT (person responsible for operation and overall compliance):	
NAME/COMPANY: _____	PHONE/FAX # _____
ADDRESS: _____	CITY/STATE/ZIP: _____
E-MAIL: _____	

DESIGNER/ENGINEER:	
NAME/COMPANY: _____	PHONE/FAX # _____
ADDRESS: _____	CITY/STATE/ZIP: _____
E-MAIL: _____	

CONTRACTOR INFORMATION:	
NAME/COMPANY: _____	PHONE/FAX # _____
ADDRESS: _____	CITY/STATE/ZIP: _____
LICENSE # _____	LICENSE CLASSIFICATION: _____
E-MAIL: _____	

DISPOSAL SYSTEM INTENDED TO SERVE (check category & give requested figures)			
<input type="checkbox"/> NEW RESIDENCE	<input type="checkbox"/> EXISTING RESIDENCE		
_____ # OF BEDROOMS	_____ # OF EXISTING BEDROOMS	_____ # OF DENS/OFFICES	
_____ # OF DENS/OFFICES	_____ # OF PROPOSED BEDROOMS		
TOTAL # OF PLUMBING FIXTURE _____	DESIGN FLOW (see following worksheet): _____		

Information Submission Requirements for General Permits 4.02 and 4.03 and Type 1 General Permit for Gray Water: Please check appropriate boxes to indicate that the required information has been submitted with this NOI.

- A. Design Report
- Site Investigation Report
 - System Sizing Worksheet
 - Disposal Field Worksheet- Trenches OR Chambers OR Leach Bed section completed
 - Composting Toilet Worksheet
 - List of materials, components, and equipment
- B. Plans
- Construction quality drawings
 - Site Plan per Site Plan Checklist
 - Floor Plan with diverter valve and composting toilet location identified
 - Trench OR Chamber OR Leach Bed Detail
- C. Operation and Maintenance Manual
- D. Additional Documents, if needed
- Barrel Composting Toilet System drawings from ADEQ Proprietary Treatment Product List, if using this method.
 - R-18-9-312 (G) Justification, if requesting an Alternative Design, Setback, Installation or Operational Feature.
 - Waiver for Setback/well if needed.
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DESCRIBE PROPOSED TREATMENT AND DISPOSAL TRAIN AND INDICATE ALL APPLICABLE GENERAL PERMIT NUMBERS; INDICATE DESIGN FLOW AND EXPECTED DATE OF OPERATION; DESCRIBE SEWAGE SOURCES AND CHARACTERISTICS:

TREATMENT & DISPOSAL:

Permit Numbers: 4.02, 4.03

Design Flow (see table below):

Expected date of operation:

Sewage source/characteristics:

ALTERNATIVE DESIGN, INSTALLATION, OR OPERATION FEATURES (A312G); INCLUDE RULE REFERNECE FOR WHICH RULE CHANGE IS REQUESTED AND A SHORT DESCRIPTION. IF THERE ARE NONE PROPOSED WRITE "NONE" IN THE FIRST ROW:

No :	Rule Reference:	Description:
1.		
2.		
3.		
4.		

EXISTING ENVIRONMENTAL PERMITS:

List any state or federal environmental permits already held by the applicant or owner at this location or that are

New installation of an on-site wastewater treatment facility. No other environmental permits exist or are needed.

Other environmental permits exist or are needed (describe):

CERTIFICATION OF COMPLIANCE: To be completed by the homeowner.

I _____, on this date of, _____ certify that this **Notice of Intent To Discharge** and attachments were prepared under my direction or authorization and all information is, to the best of my knowledge, true, accurate, and complete. I also certify that the treatment and disposal system described in this form is or will be designed, constructed, and operated in accordance with the terms and conditions of Arizona Administrative Code, Title 18, Chapter 9, Article 3 regarding aquifer protection permits and applicable requirements of Arizona Revised Statutes Title 45, Chapter 2.

I am aware that there are significant penalties for submitting false information including permit revocation as well the possibility of fine and imprisonment for knowing violations.

SIGNATURE **DATE**

DESIGN REPORT

Composting Toilet, Gray Water and Conventional Septic System

DRAFT

SYSTEM SIZING WORKSHEET

FIXTURE COUNT CALCULATION CHART				
FIXTURE TYPE	FIXTURE UNIT	X	# OF FIXTURES	TOTAL UNITS
Bath tub	2	X	=	
Bidet	2	X	=	
Clothes Washer	2	X	=	
Dishwasher (additional)	2	X	=	
Lavatory, single	1	X	=	
Lavatory, double in master bedroom	1	X	=	
Shower, single stall	2	X	=	
Sink, bar	1	X	=	
Sink, kitchen inc. dishwasher	2	X	=	
Sink, service	3	X	=	
Utility tub or sink	2	X	=	
TOTAL FIXTURE UNITS				

SYSTEM DESIGN FLOW AND INTERCEPTOR (SEPTIC TANK) SIZE* (circle bedrooms & appropriate design flow)			
# OF BED-ROOMS	FIXTURE COUNT	MINIMUM TANK SIZE (gal)	SYSTEM DESIGN FLOW (gpd)
1	7 or less	200	90
	more than 7	400	180
2	14 or less	400	180
	More than 14	600	270
3	21 or less	600	270
	More than 21	700	330
4	28 or less	700	330
	More than 28	800	380
5	35 or less	800	380
	More than 35	900	420
6	42 or less	900	420
	More than 42	1000	460

*Note: Required interceptor size is reduced if the gray water diverter is located such that when gray water is diverted to wastewater system, it enters following the tank. See Gray Water Informational Packet for more information.

SYSTEM SIZING WORKSHEET CONTINUED

Bedroom” means, for the purposes of determining design flow for an on-site wastewater treatment facility for a dwelling, any room has:

- A) A floor space of at least 70 square feet in area, excluding closets:
 - F) A ceiling height of at least 7 feet;
 - F) Electrical service and ventilation;
- D) A closet or area where a closet could be constructed;
- E) At least one window capable of being opened and used for emergency egress; and
- F) A method of entry and exit into the room which allows it to be considered distinct from other rooms in the dwelling to afford a level of privacy customarily expected for such a room.

Bedroom / Equivalent Worksheet	
Room Type	Number of Rooms
Bedroom	
Den	
Office	
Other:	
Other:	
Total:	

DISPOSAL FIELD WORKSHEET

TRENCHES

TRENCHES HAVE MAXIMUM OVERALL DEPTH OF 4 TO 5 FEET ABOVE DEPTH OF TEST HOLE		Proposed Number of Trenches	<input style="width: 40px; height: 25px;" type="text"/>
Fill in the INTERCEPTOR SIZE from the System Design Flow table	TANK SIZE= _____	Proposed Length of each Trench	<input style="width: 40px; height: 25px;" type="text"/>
Fill in the DESIGN FLOW from the System Design Flow table	DESIGN FLOW= _____		
Divide DESIGN FLOW by the SAR from the soils report	SAR= _____	Proposed Width of each Trench	<input style="width: 40px; height: 25px;" type="text"/>
This equals the total square footage of disposal area required.	TOTAL SQUARE FOOTAGE OF DISPOSAL AREA REQUIRED= _____		
For trench credit- (sidewall effective depth x2 + trench width) (Max effective depth = 4' ;max trench width = 3') (Max credit=11)	TRENCH CREDIT= _____	Proposed Effective Depth of Trench	<input style="width: 40px; height: 25px;" type="text"/>
Divide the total square footage by the trench credit, this will equal the total linear length of trench required.	TOTAL LINEAR LENGTH OF TRENCH= _____		
The separation between the trench walls is 5' or twice the effective depth, whichever is greater. The maximum length for any disposal field is 100'.		Separation Between Trench Edges	<input style="width: 40px; height: 25px;" type="text"/>

CHAMBERS

TYPE OF CHAMBER: <input type="checkbox"/> QUICK 4 STANDARD <input type="checkbox"/> QUICK 4 HC <input type="checkbox"/> ACR 36 <input type="checkbox"/> ARC 36 HC		Proposed Number of Trenches	<input style="width: 40px; height: 25px;" type="text"/>
Fill in the TANK SIZE from the System Design Flow Chart	TANK SIZE= _____	Proposed Length of each Trench	<input style="width: 40px; height: 25px;" type="text"/>
Fill in the DESIGN FLOW from the System Design Flow Chart	DESIGN FLOW= _____		
Divide DESIGN FLOW by the SAR from the soils report	SAR= _____	Proposed Width of each Trench	<input style="width: 40px; height: 25px;" type="text"/>
This equals the total square footage of disposal area required.	TOTAL SQUARE FOOTAGE OF DISPOSAL AREA REQUIRED= _____		
QUICK 4 STANDARD Divisor is 6.42 QUICK 4 HIGH CAPACITY Divisor is 7.10 BIODIFFUSER ARC 36 Divisor is 6.36 BIODIFFUSER ARC 36 HC Divisor is 6.97	DIVISOR USED= _____	Proposed Number of Chambers per Trench	<input style="width: 40px; height: 25px;" type="text"/>
Divide the total square footage by the divisor, this will equal the total linear length of trench required.	TOTAL LINEAR LENGTH OF TRENCH= _____		
The length of the Quick 4 (standard & High Capacity) is 4 feet . The length of the Biodiffuser chamber (ARC 36 & ARC 36HC) is 5 feet . Divide the total length of trench by the applicable chamber length to determine number of chambers.		Proposed Overall Depth of Trench	<input style="width: 40px; height: 25px;" type="text"/>
	TOTAL NUMBER OF CHAMBERS= _____	Separation Between Trench Excavations	<input style="width: 40px; height: 25px;" type="text"/>

LEACH BED

A LEACH BED HAS A MAXIMUM OVERALL DEPTH OF FIVE FEET.		Effective Length of Bed	<input style="width: 40px; height: 25px;" type="text"/>
Fill in the TANK SIZE from the System Design Flow Chart	TANK SIZE= _____	Effective Bed Width	<input style="width: 40px; height: 25px;" type="text"/>
Fill in the DESIGN FLOW from the System Design Flow Chart	DESIGN FLOW= _____		
Divide DESIGN FLOW by the SAR from the soils report	SAR= _____	Number of Lines per Bed	<input style="width: 40px; height: 25px;" type="text"/>
This equals the total square footage of disposal area required.	TOTAL SQUARE FOOTAGE OF DISPOSAL AREA REQUIRED= _____		
For trench credit- (sidewall effective depth x2 + bed width) (Max effective depth = 3' ;max bed width = 12') (Max credit=18)	LEACH BED CREDIT= _____	Proposed Overall Depth of Bed	<input style="width: 40px; height: 25px;" type="text"/>

COMPOST TOILET GENERAL PERMIT INFORMATION

Compost Toilet Manufacturer:

Product Number:

Or Barrel/Masonry Chamber Composting Toilet Reference Design:

(If selecting this option, include plans from the ADEQ Notice of Proprietary Treatment Product Listing with the submittal. This Listing also provides information necessary to answer the following questions.)

Rate of composting and capacity calculations:

What is the method of vector control?

Calculation of waste volume and planned method for disposing of the composted human excrement residue.

Attach documentation of listing by a national listing organization, or ADEQ proprietary listing, indicating that the composting toilet meets the stated manufacturer's specifications for loading, treatment, performance and operation.

MATERIALS LIST FOR ON-SITE WASTEWATER TREATMENT FACILITY

OWNER: _____
PARCEL: _____

COMPOST TOILET MANUFACTURER AND MODEL: _____
OR: _____

REFERENCE DESIGN: _____
 BARREL Attach materials list from Barrel Compost Toilet Construction Manual with correct # of barrels, etc.

MASONRY CHAMBER: _____

SEPTIC TANK MANUFACTURER: _____

SEPTIC TANK SIZE: _____ Gallons.

- CONCRETE
- FIBERGLASS
- POLYETHYLENE

D-BOX: 4 HOLE 6 HOLE OTHER: _____

MATERIAL: CONCRETE POLYETHYLENE

TYPE OF AGGREGATE TO BE USED: _____ . _____ tons

TYPE OF AGGREGATE TO BE USED: _____ . _____ tons

LENGTH OF PIPE: SOLID: _____ ft.

PERFORATED: _____ ft.

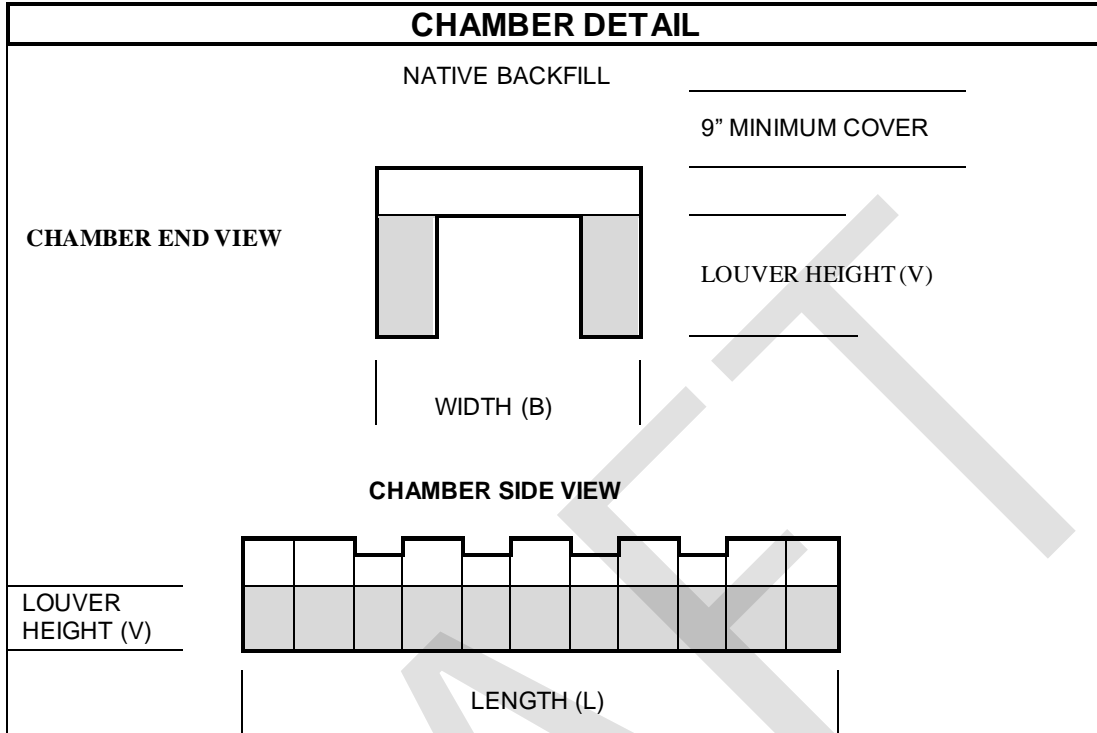
SDR: YES NO

CHAMBERS: TYPE: _____

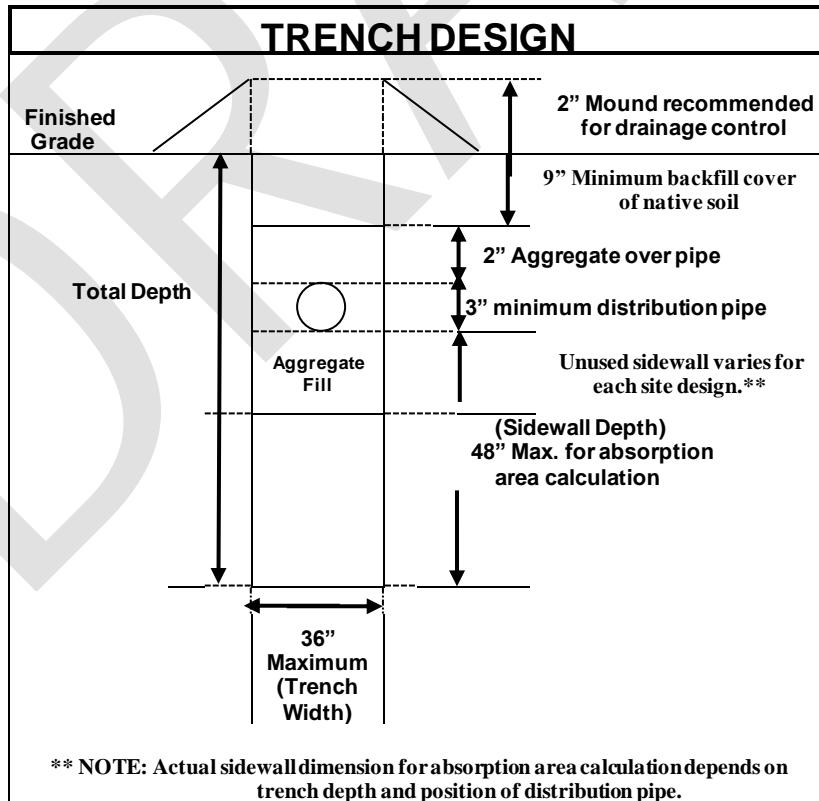
NUMBER: _____

OTHER COMPONENTS: GEOTEXTILE FABRIC: _____ ft.

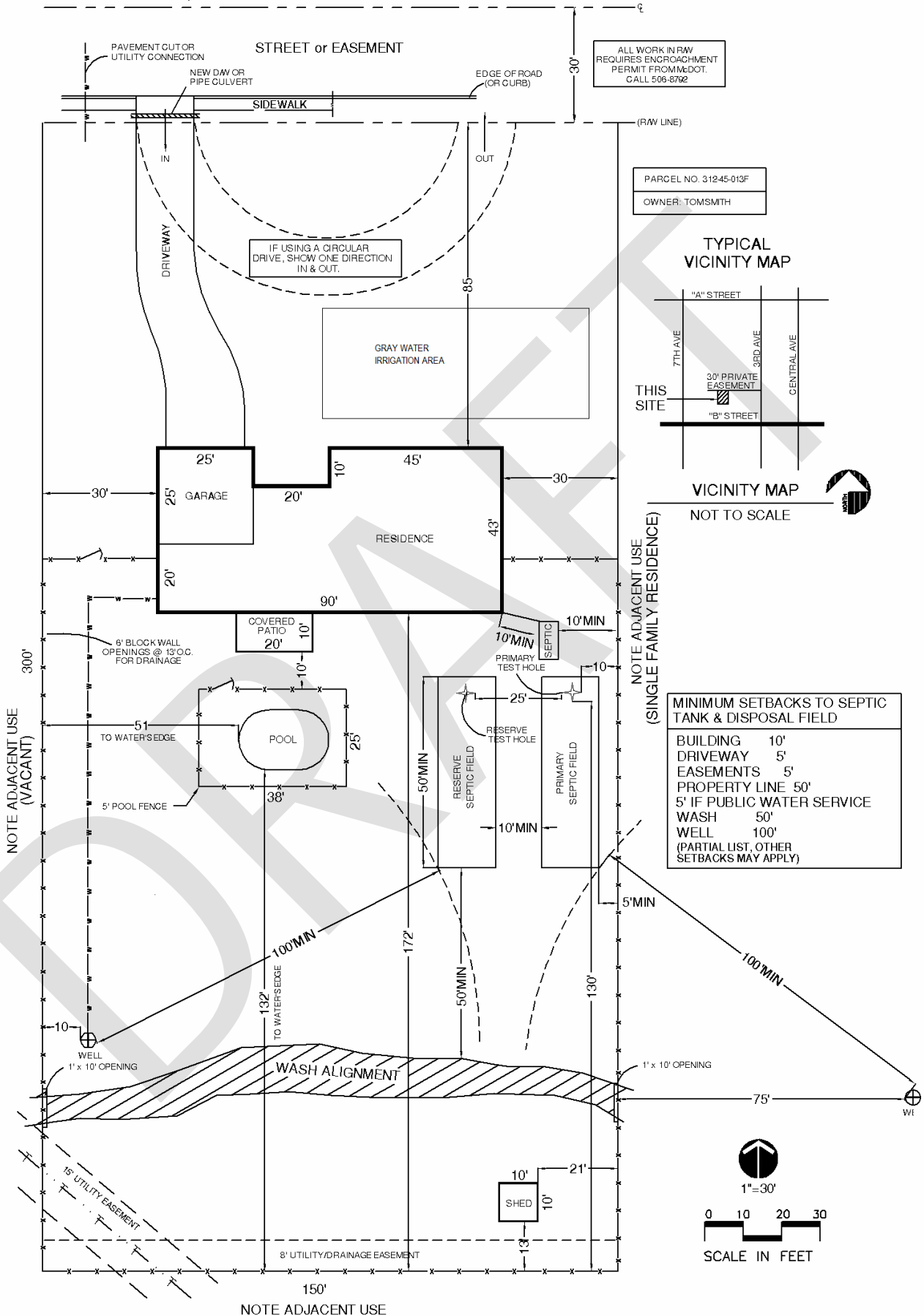
INSPECTION PORTS: _____



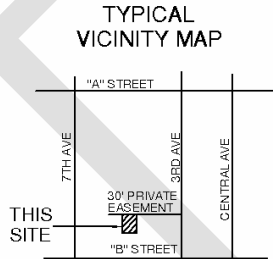
333



EXAMPLE SITE PLAN



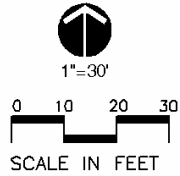
PARCEL NO. 31245-013F
OWNER: TOMSMITH



VICINITY MAP NOT TO SCALE

MINIMUM SETBACKS TO SEPTIC TANK & DISPOSAL FIELD

BUILDING	10'
DRIVEWAY	5'
EASEMENTS	5'
PROPERTY LINE	50'
5' IF PUBLIC WATER SERVICE	
WASH	50'
WELL	100'
(PARTIAL LIST, OTHER SETBACKS MAY APPLY)	



SITE PLAN CHECKLIST

DIRECTIONS: The following checklist includes all the items necessary for properly completing the plot plan. Please include all of the items to your plot plan that apply. If your plot plan submittal does not comply with the requirements of the general permit or other applicable requirements of Article 3 (Aquifer Protection Permits), you will receive a written request for additional information. If your plot plan is on paper larger than 8 1/2" X 11" you must provide one reduced copy (does not have to be to scale) on 8 1/2" X 11" paper for scanning purposes. See the Plot Plan Example for guidance

GENERAL INFORMATION	
All property dimensions, names of streets, roadways, easements and setback lines for appropriate zoning.	
Scale needs to be either 1" = 10' for 1 acre or less, 1" = 20' or 1" = 30' for more than 1 acre to 2 1/2 acres, 1" = 40' or 1" = 50' for parcels 10 acres or more. For parcels that exceed 10 acres or of irregular shape a scale of 1" = 100' is required along with an inset plan of the structures and wastewater system at one of the scales identified above.	
Direction of North, property size in acres, owners name, designer's name, assessor's parcel #, subdivision, and lot #.	
Location & dimensions of all proposed & existing structures (including decks, patios, & drive ways).	
Distance to cut banks, slopes, dry washes & drainage easements on the property.	
Topography, showing elevation in contour intervals, with original and post installation grades.	
SYSTEM DIMENSIONS:	
Building sewer line type, length & slope (3-4" ABS, min. length is 10' & max. length is 100', installed per UPC).	
Two-way clean-out (s) location in the building sewer line. (1 @ dwelling, 1 every 50', 1 @ any bend greater than 45 degrees).	
Septic tank size, material, and tank manufacturer (must be ADEQ approved).	
Septic tank effluent filter (assure that it prevents passage of solids > 1/8", corrosion & erosion resistant)	
Outlet line type, length, & slope, (3-4" PVC, min. length 6', minimum slope is 4" in first 10', then 1/4" per ft. from then on).	
Distribution method: Distribution Box (D-box), required for 3 lines or more or 2 lines or more where there is significant slope in primary disposal area. Level Manifold Line, two lines required. Indicate stabilization method.	
Leach field must be located in area of at least three of the test holes performed at the site. All test holes must be identified and numbered.	
Leach pipe/chamber lengths and number of lines.	
Distance between distribution pipes. (2x the sidewall depth, or 5 feet, whichever is greater).	
Location of reserve area. Reserve area must be equal in size to the disposal field in area of one test hole.	
Provide a cross-section of your proposed leach trench, or chamber showing the inspection pipe, sidewall depth, trench width, and total-trench depth.	
Identify any feature less than 200 feet from the on-site wastewater treatment facility excavation and reserve area that constrains the location of the on-site wastewater treatment facility because of setback limitation specified in R-18-9-A312 (c).	
Identify area to be irrigated with gray water.	
Other utilities (not to cross over septic tank or disposal area)	Structures (10 feet)
Waterways (100-200 feet)	Property lines with community water (5 feet)
Wells (including those on adjoining properties) (100 feet)	Water service lines (5 feet)
Washes and drainage easements greater than 20 acres (50 feet)	Easements (5 feet)
Property lines with well (50 feet)	Driveways (5 feet)
Road cuts, ditches, and culverts (15 feet)	Other paved areas (5 feet)
Water mains (10 feet)	Swimming pools (5 feet)