



Prevent. Promote. Protect.

Decatur County Health Department
315 S Ireland St, Greensburg, IN 47240
Ph: (812) 663-8301 | Fax: (812) 663-4174 | Office Hours: Mon-Fri 8am-4pm

ON-SITE SEWAGE SYSTEM (OSS) CONSTRUCTION

The following steps must be completed before a permit is issued:

1. A soil test needs to be completed by a soil scientist, as septic approval is based on the existing soil conditions when the test is taken. Addition or removal of soils, compaction, scraping or being driven over excessively will require a new soil test to be done. A "Minimum Design Specifications" sheet will be printed off after the evaluation of a soil report.
2. The attached application must be turned in to the Decatur County Health Department (DCHD). Please include (at least) an 8x11 floor plan of the proposed dwelling/residential outbuilding for new or expanded systems.
3. On-Site Sewage System (OSS) Permit Fees (1 Year): New - \$600; Repair/Replacement/Expansion: \$300
4. When building a new system, the site should be staked off where the soil evaluation was completed to avoid any damage done to the location.
5. If any part of your OSS is planned to be on another lot [even if you own the adjoining lot(s)], you must obtain a legal easement for such and it must be recorded at the Recorder's office. A copy must be submitted to DCHD before the OSS permit is issued.
6. By Indiana Code, the inspector at DCHD must perform an inspection on the installed OSS before it is covered by the installer.

Installer List

Bradley Koors
(812) 614-3926

Brian Laker
(812) 212-2084

Cayden Cathey
(812) 593-1715

Bob Hardebeck
(812) 614-2646

Environmental Grid Solutions
(765) 716-1566

K&B Dirtworx LLC
(812) 593-7149

Schneider Plumbing & Excavating LLC
(812) 614-5535

Schwering Excavating LLC
(812) 593-1308

Tim Herbert
(812) 525-6771

Trenkamp Excavating, Inc.
(812) 593-0707

Wesseler Excavating LLC
(812) 593-5810

Notes:



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RESIDENTIAL ON-SITE SEWAGE SYSTEM APPLICATION

APPLICANT NAME: _____

AGENT NAME (IF APPLICABLE): _____

ADDRESS: _____

PHONE #: _____ ALT #: _____

EMAIL: _____

SITE INFORMATION

STATE PARCEL #: _____
(18-DIGIT # FOUND ON PROPERTY TAX PAPERWORK, STARTING WITH 16)

ADDRESS: _____

OSS TYPE: NEW _____ REPAIR/REPLACE/EXPANSION _____ HOLDING TANK _____

BUILDING TYPE: SINGLE-FAMILY _____ MODULAR _____ MOBILE _____ OTHER _____

BEDROOM # _____ BEDROOM EQUIVALENT # (I.E. JETTED TUB(s) >125 GAL) _____

WATER SUPPLY: WELL _____ CITY _____ RURAL _____ SPRING _____ CISTERN _____

OSS INSTALLER NAME: _____ PHONE: _____

The applicant certifies that to the best of their knowledge that all the information provided is correct and the On-Site Sewage System (OSS) will be installed within Decatur County by a Certified Septic Installer through IOWPA or in a county of Indiana, or as approved, and in accordance with 410 IAC 6-8.3. If the OSS cannot be installed in the area specified by the soil test, the applicant will ensure that his/her installer will contact the DCHD inspector prior to commencing work.

APPLICANT PRINTED NAME: _____ CO-APPLICANT: _____

APPLICANT SIGNATURE: _____ CO-APPLICANT: _____

DATE: _____



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LANDSCAPING AND SEEDING AGREEMENT

Proper soil cover is important after On-Site System (OSS) installation. Additional topsoil may be required on shallow systems to provide twelve (12) inches of soil cover over the entire absorption area. The applicant and installer must understand and agree to who is responsible for applying any additional soil over the system after installation is complete. This cover must be GOOD TOPSOIL (have a texture other than sand or loamy sand and be capable of sustaining plant growth), which will serve to cap the system and protect it from exposure and possible failure. Failure to provide this cover may cause effluent bleedout and system failure.

After installation, many installers only provide a rough grade over the system. If the homeowner conducts the finished grading, please be careful not to remove any of the cover during this process. Any damage done to the cover of the system after the registered installer completes the job is the homeowner's responsibility.

_____ will provide the rough grading.

_____ will provide the finish grading.

_____ will seed the septic system.

APPLICANT SIGNATURE: _____ CO-APPLICANT _____

DATE: _____