

**NIAGARA COUNTY DEPARTMENT of HEALTH  
5467 UPPER MOUNTAIN ROAD  
LOCKPORT, NY 14094-1899**

**TELEPHONE: 439-7444**

**REQUIREMENTS FOR APPROVAL TO CONSTRUCT AN ONSITE  
SEWAGE DISPOSAL SYSTEM FOR AN EXISTING PRIVATE RESIDENCE  
WITH AN UNSATISFACTORY SEPTIC SYSTEM**

The Niagara County Health Department is prepared to assist you in the provision of satisfactory onsite sanitary facilities for your **existing** home. This department will, upon request, conduct a site investigation and soil percolation test on your property. Upon completion of the above, the department will furnish you with a design and sketch of a typical satisfactory subsurface sewage disposal system, based upon the estimated sewage flow from your dwelling and the absorptive capacity of the soil on your property, provided of course, the percolation test is satisfactory.

If it is found that the soil on the property is too impervious for the disposal of sewage through conventional subsurface leaching methods, a subsurface sand filter wastewater treatment system will be designed to service your home. Final approval will be issued, which is subject to a final inspection made during the installation of the facilities.

To determine the ability of the soil to absorb the wastewater's generated within your home; it will be necessary to conduct a soil percolation test. To perform this test it will be necessary for you to dig at least **two holes 12 inches in diameter and 30 inches in depth**. These holes must be located on diagonal corners of the area in which the leach lines will be installed. This area will be no closer than 20 feet to the house foundation, no closer than 10 feet from any lot line and no closer than 100 feet to any well, or watercourse. The maximum length of any leach line is normally 60 feet.

After these holes have been dug, it is advisable to loosen the earth in the sidewalls of the holes with a knife blade or some other sharp instrument. This is to relieve the compaction of the soil, which occurs during the digging process. Approximately 2 inches of washed gravel or crushed stone should be placed in the bottom of the holes to reduce the scouring and silting action when water is poured in the holes. These holes should be thoroughly pre-soaked just prior to the day on which the percolation test will be conducted.

At least 20 gallons of clean water must be provided at each hole at the time of the test. A garden hose and bucket will be sufficient. The water used for pre-soaking and the 20 gallons left at each hole must be clean water containing no oil, rust, or other material which could possibly seal the soil and give an unsatisfactory soil test.

Any attempt to change the test holes in order to affect the percolation test would be a disservice to the owner of the home and would immediately negate any design based on such falsified data.

The placement of the leach lines in an area other than that in which the soil tests were conducted or the removal of the top soil from this area will also negate the design standards. The trenches in which the leach lines are to be installed must be dug in the original soil with a minimal amount of compaction to the soil adjoining the trenches.

When the completed application is returned, and upon notification that the holes have been dug, saturated and water is available, this department will arrange to conduct the test as soon as scheduling permits.

A site investigation will be conducted at the time of the percolation test to try to determine if there are any factors such as surface drainage or private wells used as the water supply, which might have to be given special consideration.

This department will then provide you with a sketch and all the required information to provide an adequate sewage disposal system to serve this property.

This department must also be notified when construction of the septic system begins. Investigations will be scheduled to see that construction conforms to design requirements.

A two-hundred-eighty dollar (\$295.00) fee in U. S. funds must accompany all percolation test applications. All checks must be U.S. funds drawn on an U. S. bank and be made payable to the **NIAGARA COUNTY DEPARTMENT of HEALTH**.

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**NIAGARA COUNTY DEPARTMENT of HEALTH  
5467 UPPER MOUNTAIN ROAD, SUITE 100  
LOCKPORT, NY 14094-1894  
TELEPHONE: 439-7444**

**APPLICATION TO CONDUCT SOIL PERCOLATION TEST**

*PLEASE PRINT ALL INFORMATION*

NAME OF APPLICANT \_\_\_\_\_

MAILING ADDRESS OF APPLICANT \_\_\_\_\_

\_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

OWNER OF PROPERTY, IF DIFFERENT \_\_\_\_\_

MAILING ADDRESS OF OWNER, IF DIFFERENT \_\_\_\_\_

\_\_\_\_\_ ZIP \_\_\_\_\_

ADDRESS OF PROPERTY TO BE TESTED \_\_\_\_\_

TOWN \_\_\_\_\_

SIZE OF LOT \_\_\_\_\_

NUMBER OF BEDROOMS \_\_\_\_\_

SIZE OF HOME: LENGTH \_\_\_\_\_ (FT.) WIDTH \_\_\_\_\_ (FT.)

DRINKING WATER SUPPLY: PUBLIC \_\_\_\_ (YES/NO) PRIVATE WELL \_\_\_\_ (YES/NO)

HOW LONG HAS THE PROPERTY BEEN OWNED BY THE PRESENT OWNER \_\_\_\_ (YRS.)

ANY LOW/WET AREAS THAT REQUIRE FILL OR DRAINAGE?

\_\_\_\_\_

ANY WATERCOURSE, DITCHES, RAVINES WHICH WILL BE FILLED IN? \_\_\_\_\_

HOW WILL SURFACE DRAINAGE BE PROVIDED? \_\_\_\_\_

DID YOU ATTACH SEPTIC SYSTEM DESIGN FEE (\$295.00)? \_\_\_\_ (Y/N)

SIGNATURE OF APPLICANT: \_\_\_\_\_

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

SKETCH LOT ON REVERSE AND INDICATE LOT SIZE, LOCATION OF BATHROOM AND SIZE, LOCATE DRINKING WATER SUPPLY, SETBACK FROM ROAD AND ANY WATERCOURSE (POND, STREAM, LAKE, ETC.). ATTACH PHOTOCOPY OF PLOT PLAN IF AVAILABLE.