Pulaski County Health Department

Health Officer: Dr. Timothy R. Day

STEPS TO OBTAIN AN ON – SITE SEWAGE SYSTEM PERMIT

1. CHECK WITH THE PULASKI COUNTY BUILDING DEPARTMENT TO DETERMINE IF A LAND IMPROVEMENT PERMIT IS REQUIRED. *NOTE: THIS STEP MAY NOT BE NECESSARY FOR REPAIR OR REPLACEMENT OF ON - SITE SEWAGE SYSTEM PERMITS.*

2. AN INDIANA REGISTERED SOIL SCIENTIST MUST CONDUCT AND SUBMIT A SOIL/SITE EVALUATION TO THE PULASKI COUNTY HEALTH DEPARTMENT. *NOTE: THIS REPORT WILL BE SENT TO THE PULASKI COUNTY HEALTH DEPARTMENT AND THE APPLICANT WHO ORDERED THE REPORT.*

3. THE APPLICANT MUST CONTACT THE PULASKI COUNTY HEALTH DEPARTMENT TO REVIEW AND ANALYZE THE SOIL/SITE EVALUATION REPORT TO DETERMINE THE MINIMUM ON – SITE SEWAGE SYSTEM REQUIREMENTS.

4. A PRELIMINARY ON – SITE SEWAGE SYSTEM APPROVAL LETTER, DETAILING THE MINIMUM SYSTEM REQUIREMENTS FOR THE PROPERTY, WILL BE SENT TO THE APPLICANT.

5. IF THE REQUIREMENTS IN THE PRELIMINARY APPROVAL LETTER CAN BE MET, DESIGN PLANS FOR THE ON – SITE SEWAGE SYSTEM MUST BE SUBMITTED TO THE PULASKI COUNTY HEALTH DEPARTMENT.

6. THE PULASKI COUNTY HEALTH DEPARTMENT WILL REVIEW THE SUBMITTED DESIGN PLANS TO VERIFY THAT THE REQUIREMENTS IN THE PRELIMINARY APPROVAL LETTER AND RULE 410 IAC 6-8.3 HAVE BEEN MET. THE TIME REQUIRED FOR REVIEWING DESIGN PLANS MAY VARY.

7. IF THE SUBMITTED DESIGN PLANS MEET THE MINIMUM REQUIREMENTS SET FORTH IN RULE 410 IAC 6-8.3 AND THE COUNTY ORDINANCE PASSED ON 2.7.1994, THE PULASKI COUNTY HEALTH DEPARTMENT WILL ISSUE AN ON – SITE SEWAGE SYSTEM PERMIT.

8. PERMIT FEES ARE DUE WHEN THE ON – SITE SEWAGE SYSTEM PERMIT IS ISSUED:
   - $150 FOR GRAVITY FLOW SUBSURFACE AND FLOOD DOSE SYSTEMS
   - $200 FOR ELEVATED SAND MOUND, DRIP, CLUSTER, OR SAND-LINED SYSTEMS

9. ANY CHANGES TO THE ON – SITE SEWAGE SYSTEM DESIGN PLANS AFTER PERMIT ISSUANCE MUST BE APPROVED IN WRITING BY THE PULASKI COUNTY HEALTH DEPARTMENT AND SUBMITTED PRIOR TO THE START OF CONSTRUCTION.

10. CONSTRUCTION OF THE ON – SITE SEWAGE SYSTEM CANNOT OCCUR IF THE SITE IS DISTURBED OR ALTERED. IF THE SITE IS DISTURBED OR ALTERED, THE ON – SITE SEWAGE SYSTEM PERMIT MAY BE REVOKED.

BE ADVISED SITE APPROVAL BY THE LOCAL PLAN COMMISSION OR COUNTY RECORDER <u>DOES NOT</u> CONSTITUTE APPROVAL BY THE PULASKI COUNTY HEALTH DEPARTMENT.

(574) 946 – 6080
125 S Riverside Drive – Winamac, IN 46996

(219) 567 – 2175
101 Constitution Drive – Francesville, IN 47946

www.in.gov/localhealth/pulaskicounty/

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SOIL SCIENTISTS OF PULASKI COUNTY

ANY INDIANA REGISTERED SOIL SCIENTIST MAY PERFORM YOUR ON-SITE SOIL SURVEY.
THIS LIST REFLECTS THOSE THAT HAVE EXPRESSED INTEREST IN WORKING IN PULASKI COUNTY.
A COMPLETE LIST OF INDIANA REGISTERED SOIL SCIENTISTS IS AVAILABLE AT: HTTPS://OISC.PURDUE.EDU/IRSS/ROSTER.HTML

NAME	COMPANY	CITY	PHONE NUMBER
JOANNE MOSHER	MOSHER SOIL CONSULTING	MONON	219 253 8491
JOHN MCQUESTION	JOHN MCQUESTION SOIL SOLUTIONS, INC	VALPARAISO	800 947 2444
GARY HUDSON	GSH INC	MACY	574 382 5707
RON WAMSLEY	WAMSLEY SOIL SERVICES, LLC	RENSSELAER	219 859 5837
THOMAS ZIEGLER	ZIEGLER SOIL CONSULTING, INC	LAFAYETTE	765 474 3041
TIFFANI GIBSON	EXPANDED HORIZONS	MOROCCO	812 691 5031

OSS PUMPERS OF PULASKI COUNTY

THIS LIST REFLECTS THOSE THAT ARE REGISTERED TO WORK IN PULASKI COUNTY.
OSS PUMPERS WHO WISH TO HAVE THEIR NAME ADDED OR REMOVED SHOULD CONTACT THE PULASKI CO HEALTH DEPT.

NAME	COMPANY	CITY	PHONE NUMBER
DAVE COLLINS	COLLINS SEPTIC SERVICE	NORTH JUDSON	574 896 3672
ROGER PELSEY	PELSEYS SEPTIC SERVICE	FRANCESVILLE	219 954 1001

OSS INSTALLERS OF PULASKI COUNTY

THIS LIST REFLECTS THOSE THAT ARE REGISTERED TO WORK IN PULASKI COUNTY.
OSS INSTALLER WHO WISHES TO HAVE THEIR NAME ADDED OR REMOVED SHOULD CONTACT THE PULASKI CO HEALTH DEPT.

NAME	COMPANY	CITY	PHONE NUMBER
DAVE COLLINS	COLLINS SEPTIC SERVICE	NORTH JUDSON	574 896 3672
BEN DESABATINE	DESABATINE BROTHERS	WINAMAC	574 946 4260
TYLER MILLER	MC EXCAVATION & DEMOLITION	DELPHI	765 427 0784
MELVIN WIREMAN	MELS EXCAVATING / M&M BUILDERS	MEDARYVILLE	219 204 1635
SAM WIREMAN	VON EXCAVATING, INC	WHEATFIELD	219 956 3832
JACK COMPAGNA	COMPAGNA & SON EXCAVATING	KNOX	574 306 3170
TIM WEAVER	WEAVER FOX EXCAVATING	STAR CITY	574 595 0283

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APPLICATION OF REGISTRATION

INSTALLATION, CONSTRUCTION, AND REPAIR OF ON – SITE SEPTIC SYSTEMS AND EQUIPMENT

ALL CONTRACTORS MUST BE INSURED AND BONDED

NAME OF BUSINESS:

ADDRESS:

PHONE: **E – MAIL:**

NAME OF BUSINESS APPLICANT:

PHONE: **E – MAIL:**

EMPLOYEES:

NAME	PHONE NUMBER

EQUIPMENT:

TYPE	MAKE	MODEL	YEAR

I, UNDERSIGNED, HEARBY SWEAR THAT, TO THE BEST OF MY KOWLEDGE, ABOVE INFORMATION IS TRUE AND CORRECT. I FUTHER UNDERSTAND AND AGREE TO ABIDE BY THE PULASKI COUNTY HEALTH DEPARTMENT ORDIANCE AS AMENDED AND ALL RULES AND REGULATIONS RELATING TO PRIVATE SEWAGE AS ESTABLISHED BY THE INDIANA STATE DEPARTMENT RULE 410-IAC 6-8.3

PRINTED NAME SIGNATURE DATE

SANITARIAN DATE

CONTRACTOR FEE OF $100.00. PAYABLE BY CASH, CHECK/MONEY ORDER, OR CREDIT/DEBIT CARD

☐CASH ☐CHECK / MO ☐CREDIT/DEBIT CARD

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